

## **Recap of October 15, 2015 DR Summit in Reno NV**

- Program administration will move from the Department of Health and Human Services (DHHS) Director's Office (DO) Grants Management Unit (GMU) to the DHHS Division of Child and Family Services (DCFS) July 1, 2016. The transfer will include not only grant oversight but also the administrative functions that the DHHS-DO GMU has been handling for the past several years (e.g., funding, VPN accounts, UNITY access, training, Steering Committee, policy, staffing difficult cases with DR staff).
- Supervision of DR Case Managers when a DR supervisor is out for an extended period on vacation, medical leave, etc.
  - Washoe County: Children's Cabinet (funded by WCDSS) and WCSD FRC (funded by state FHN funds) indicated that they are able to provide back-up for one another on most occasions.
  - Clark County: Network of four FRCs that provide DR services in the five Clark County Service Areas indicated that supervision can be delegated to a sister agency during extended absences.
  - Rural Counties: Regional networks need to be established so that one FRC can step up for another during absences of DR supervisors.
  - UNITY: Administration will work with UNITY staff to give all DR supervisors permission to view and approve safety assessments, DR Ongoing, and DR Case Closure or pursue that same option but on a regional level instead of statewide.
- A Training plan should include all of the elements currently covered (e.g., DR-101, UNITY training, safety assessments, core training, etc.). Requirements should be placed in policy along with specifics about who is responsible for ensuring that training occurs. Ideas to pursue include making the training consistently available (e.g., through webinars) and utilizing an existing contract that DCFS has with the Nevada Partnership for Training.
- Funding for DR was primarily through the State General Fund until SFY13 when it was moved over to the Fund for a Healthy Nevada (FHN) Wellness category. The DHHS-DO GMU is a key player in the statewide community needs assessment process that is the basis for the FHN spending plan for each biennium. There are no program administration funds associated with DR. Approximately \$1.4 million per year is granted to the nine FRCs currently providing DR services. Any other program costs are absorbed by the DHHS-DO GMU (e.g., staff time, \$10 per person VPN connections, toll-free conference calls, travel).

### **Major Action Items**

- Representatives from DCFS and the DHHS-DO GMU will begin meeting November 9, 2015 to prepare for the successful transfer of the program. Information shared during the summit about the current functions, responsible parties and ideas for the future will be used to help guide the process. The target date for completion of the transfer is July 1, 2016.
- Per a request by Amber Howell, Director of WCDSS, Toby Hyman will prepare an activity report for Washoe County that provides information on the number of reports assigned, returned, and closed for both DR programs in Washoe County.