Working toward better outcomes for kids and families

Hennepin County Children and Family Services
Annual Report • August 2019
Hennepin County residents hold us responsible to protect the most vulnerable members of society – our children and youth.

In 2018, the number of maltreatment reports forwarded to investigation decreased 14 percent—10,313 reports in 2017 compared to 8,873 reports in 2018. During that time, the number of children and youth experiencing out-of-home care decreased by 3 percent—3,338 youth in 2017 compared to 3,247 youth in 2018.

Hennepin County has embarked on a long-term effort to transform our child protection system and adjust its focus from child protection (reactive) to child well-being (preventive). With significant support and investments by the County Board, we are transforming our work. We are working to include and encourage community-based solutions to prevent maltreatment and promote healthy families.

We are seeing positive changes in our cases and our work. It is too soon to connect any advances to our many investments, but we are cautiously hopeful that they are related.

This annual report outlines our efforts and highlights the data that show improvement in several critical areas.

By working to change the system to child well-being, we hope to prevent the crisis—and trauma—of child maltreatment from occurring. In the process, we are strengthening and supporting families and our communities.

We hope you will join in our work.
Annual report

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This report reflects outcomes and data from 2018

Hennepin County by the numbers, 2018

1.25 million residents
274,000 children

533,000 households
42,836 single-parent families with children

Child Protection by the numbers, 2018

18,005 child protection reports
8,873 child protection reports went to investigation

1,218 children entered out-of-home placement
62% of children in placement were reunified with a caregiver
Understanding child well-being

Prevention
Hennepin County’s transformation work in Children and Family Services is all about preventing maltreatment and trauma from occurring in the first place. Families often have many touchpoints with the county before they enter the child protection system. With help from our partners, we aim to provide connections to basic needs and stability. We do that by identifying and treating mental, physical and chemical health needs early on and by providing resources and support to help families find their best paths.

Understanding child protection
We aren’t there yet. When child maltreatment occurs, we also are working to make our response more timely, more sensitive and more fair to families from every community.

Intake
Social workers at a 24-7 call center gather information as reports come in. State laws define the strict legal criteria that guide screeners as they decide whether allegations warrant investigation.
About half of reports are forwarded for investigation.

Assessment
Social workers continue to gather facts to evaluate children’s safety, assess allegations of maltreatment, and determine whether the family needs protective services.
Investigators work to assess the risk of future maltreatment.
The county is legally obligated to investigate credible reports of child endangerment.

Case management
A social worker engages each family and assesses its strengths and needs.
A case management work group, which could include parents, grandparents, school staff, siblings or other children in the home, develops a plan to ensure children’s safety.

Out-of-home placement
In all cases, the primary goal is to keep families together, safely. However, in a percentage of cases, it is not safe to keep children and youth with their parents. When that is the case, children may be placed elsewhere.
Out-of-home placement options include staying with family or friends—the preferred, least traumatic option—or go to shelter care or foster care.
Putting our money where our values are

State and federal funding have not kept pace with the increasing need for resources to prevent and respond to child maltreatment. Hennepin County's investment in Child and Family Services has increased by 106 percent since 2015, to the nearly $94 million request expected for 2019.

Where the money comes from 2015 versus 2019

- **Hennepin County**: 5% (2015), 12% (2019)
- **Federal**: 45% (2015), 61% (2019)
- **State**: 14% (2015), 14% (2019)
- **Other**: 19% (2015), 1% (2019)
- **Fund Balance Use**: 17% (2015), 6% (2019)
Keeping kids safe

Poverty, instability often at root of abuse

A growing body of evidence* links housing instability to maltreatment and child protection involvement. Families experiencing housing instability are more likely to experience additional problems—poverty, domestic violence, and parental depression—that require earlier, targeted intervention to prevent harm to children and youth. The struggle to feed, clothe and shelter their children can lead parents to feel anxiety, depression, fear and feelings of being overwhelmed.† Assistance and guidance for parents can reduce stress, increase stability and build a safer, more stable life for children.


Percentage of families in emergency shelter who also had a report to child protection
Nearly half (44.8%), January 2017-June 2018

Parent Support Outreach Program (PSOP)

“PSOP is a voluntary, short-term program that partners with families to increase child well-being and decrease risk factors that could lead to involvement in the child protection system. When families partner with PSOP, they are able to get connected to longer-term community resources that will help maintain safety and stability. With PSOP, families get the support they need during a stressful time.”

Jessica Little, PSOP senior social worker
Engaging noncustodial caregivers

Creating resources to help staff engage noncustodial caregivers to play a larger role in raising children, to see fewer kids coming into care and to broaden family participation.

Meeting basic needs

The Parent Support Outreach Program helps at-risk families with job and parenting support, mental health services, domestic abuse resources, transportation and basic needs. Increased state aid has enabled this popular program to expand. In 2018, PSOP served 3,527 clients.

Building trust

Parent Connectors, a partnership between Hennepin County Public Health and the University of Minnesota, helps racially and culturally diverse families feel less anxiety about receiving services from the school district or county. The program launched in January 2019.

Partnering to better serve families

The Corporation for Supportive Housing (CSH), the Pohlad Foundation and Hennepin County began the OneRoof initiative in November 2018 to prevent homelessness among child welfare-involved families by better understanding gaps related to housing. The coalition will work to build the capacity of Minneapolis Public Housing Authority to increase rent voucher use and stable housing placements.

Removing barriers to reunification

Through the Family Unification Program, the Minneapolis Housing Authority helped the county house families whose lack of stable shelter was a barrier to reunification. This can be a major step toward closing their child protection cases. In 2018, the program helped more than 1,000 families at risk and in child protection find housing.

Empowering families

Engaging noncustodial caregivers

Creating resources to help staff engage noncustodial caregivers to play a larger role in raising children, to see fewer kids coming into care and to broaden family participation.

Community connections

Partnering to better serve families

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Changing our approach to families’ needs

Child maltreatment does not happen in a vacuum.

While continuing to respond appropriately to reports of abuse and neglect, Hennepin County also is investing in ideas and innovations to help families more holistically because healthy families are safer.

That means connecting families to stable housing, consistent income, and physical and behavioral health care with support all along the way.

Building trust

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Preventing addiction, responding to crisis and offering paths to treatment

*Children are the youngest victims of the opioid crisis*

Hennepin County investigated fewer maltreatment reports related to chronic and severe use of controlled substances and alcohol. However, substance abuse remains the most common primary reason children are removed from their homes.

Child protection responds when substance abuse impairs parents’ abilities to care for their children, but the work of preventing and treating addiction goes on across county departments.

*Primary removal condition for youth entering out-of-home placement*

![Graph showing primary removal conditions for youth entering out-of-home placement from 2015 to 2018.](image)

- **Parental drug use**
- **Alleged neglect**
- **Other**
- **Alleged physical abuse**
- **Child’s behavior problem**

*Project CHILD, helping moms deliver drug-free babies*

“Our focus is to build the connection between mom and baby by educating them and giving them access to resources to prepare them for having a baby. Our moms just want to be the best moms they can be.”

Rebekah Butz, Senior Chemical Health Counselor-Project CHILD
Empowering families

Nurturing healthy moms, healthy babies

In most cases, mothers who engage in prenatal substance abuse use lose custody of their children at birth. Project CHILD works with pregnant women who have tested positive for drugs and alcohol, to provide treatment and help them achieve stability. In 2018, the program worked with 219 women, and 96 percent of those who completed the program gave birth to chemical-free babies.

Since 2007, Project CHILD has served more than 1,700 mothers; 92 percent have delivered healthy, chemical-free babies.

Community connections

Counting on outreach partners

Organizations with active outreach teams such as American Indian Community Development Corporation, Native American Community Clinic, People Incorporated, St. Stephens Human Services, Streetworks and YouthLink fill a vital role when a family’s issues don’t fit into the county’s standard matrices for problem solving. We rely on these partners in the community to consistently implement creative workarounds to find alternative ways to support families along the path to treatment and recovery.

Systems change

Responding to the opioid crisis

Nearly every Hennepin County department has a role to play in our response to the opioid crisis. Human Services connects people to treatment services. Public Health leads efforts to prevent drug abuse and increase safety. Public Safety works on enforcement and treatment, providing life-saving therapy to people in correctional facilities. Public Works’ Environment and Energy division educates people about safe disposal of dangerous medications. Security guards in Hennepin County buildings are trained to identify and help people experiencing overdoses while on county property.

Hennepin County departments are responding to the opioid crisis

hennepin.us/your-government/projects-initiatives/opioid-response

Primary prevention

The Energy and Environment department collects more than 20,000 pounds of unneeded medication each year, via more than 39 secured medicine drop boxes.

Response

The Sheriff’s Office received a grant to provide life-saving Naloxone that they will give to people when they leave jail.

Treatment and recovery

Sharon Rogers has fostered five children over her six years as a licensed foster parent. Two of the children were already members of her family.

“I wanted to supply love and a warm, stable and comfortable home that they could call their own,” said Rogers, who lives in Crystal. “Some kids know their family member and it’ll be easier for them to adjust. They settle in quickly—it’s harder for kids who don’t know anyone.”

Increasingly, Hennepin County Children and Family Services is turning to family members to provide “kinship” care, when kids and youth can’t stay with their parents. From 2014 to 2018, the number of days children have spent in out-of-home care with a family member increased from 41.4 percent to more than 60 percent. The goal is to continue to grow that number and to reduce the trauma that children experience.

Though Rogers knows that taking in her cousins was the right thing to do, she wants others to know it hasn’t been easy.

“It is very hard because the family doesn’t understand that you have an obligation to what is right and to that kid,” she said. “They don’t understand that they are still in the system and the obligation is to follow the rules. I’ve learned to block it out and know that one day they’ll understand.”

Still, the best moments are seeing kids reunited with their parents—and when she’s reminded how important her contributions were to a child’s life.

“They can look back and say, ‘I was at this foster home and they treated me like I was family. It makes me feel real important that I was able to do that.’

Families supporting families

Number of days in out-of-home care with a family member, 2014-2018

- 2014: 41.4%
- 2015: 43.7%
- 2016: 52.8%
- 2017: 59.2%
- 2018: 61.4%
Two Hennepin County community engagement managers are fostering relationships, trust and understanding with African American and American Indian stakeholders.

As part of a goal to engage community members to participate in our child well-being work, Hennepin County’s Children and Family Services department held four community forums in 2018. They were intended to include community members who have responsibility for children and youth, including parents, school staff, health care providers, child care workers, foster parents, relatives, and community agency providers.

Gatherings tailored to West African, African America, Hmong, and Native American communities drew more than 125 people.

We have used feedback from the community forums to make system adjustments and recommendations to leadership. Our experience also will inform future efforts to engage the community.

Building relationships with the Native American community

When Hennepin County Community Engagement Manager Terri Yellowhammer began conversations with members of local tribes, she realized we needed to do a better job of showing mutual respect.

There are many players in the child welfare system, including the courts.

Thanks to her efforts, flags from the Mille Lacs Band of Ojibwe, Red Lake Nation, White Earth Nation, and Leech Lake Band of Ojibwe now fly in the Juvenile Justice Center and the family courtroom at the Family Justice Center.

“This is an important step forward because tribal flags are a declaration of who we are as citizens of our tribal nations,” Yellowhammer said. “To have those flags alongside our state and U.S. flags is really an acknowledgement of the sovereignty of American Indian tribes.”
Separating families causes trauma, too

Children love their parents. That is true even in cases of abuse, neglect, mental illness and instability. Separating them is one of the most wrenching aspects of child welfare work, for children, parents and workers. All of those who influence the decision must balance the potential trauma of separation with the potential harm of not separating.

Though each child is different, removal from home can result in shock or confusion, feelings of betrayal or loss of trust and a sense of helplessness. In addition, children and youth can feel worry about parents and siblings, or be burdened by guilt or a sense of responsibility for the family disruption.

For very young children removed from their primary caregivers, it may be difficult to maintain attachment during a separation, even with visitation.

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**Children and Family Services Out-of-home Placement Trends, 2015-2018**

<table>
<thead>
<tr>
<th>Year</th>
<th>Placement entries</th>
<th>Placement exits</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>1,409</td>
<td>1,076</td>
</tr>
<tr>
<td>2016</td>
<td>1,429</td>
<td>1,197</td>
</tr>
<tr>
<td>2017</td>
<td>1,514</td>
<td>1,309</td>
</tr>
<tr>
<td>2018</td>
<td>1,360</td>
<td>1,218</td>
</tr>
</tbody>
</table>

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**Treating families with dignity**

“My philosophy always is, how would I like to be treated if for some reason my child would need to be removed from me? What would I expect from the person who was taking care of my child or taking charge of my child?”

Fintan Moore, Child Protection social work unit supervisor, ICWA
Empowering families

Guiding families to make their own decisions

Family groups and their support circles join with Hennepin County workers to create and implement plans to safeguard children and youth. Family Group Decision Making has helped us match children and youth to relative foster care providers, helped families understand and support the needs of the child, and helped the agency better understand what the child and the family needs. During 2018 there were 350 family and youth meetings held to make important decisions about how to keep kids safe and healthy while their parents work through a case plan.

Community connections

Caring for kids within the family

We know that children and youth who must leave their parents fare better when they are placed with people they already know. In Hennepin County, we are successfully placing more children and youth with family or friends. This practice, which we call kinship care, reduces trauma and improves mental health and educational outcomes. Over the past few years, the majority of out-of-home placements has shifted from nonrelative placements to placements with friends and family.

Systems change

Responding to crises

Social workers on the Rapid Response Team join local police who are responding to public safety calls that involve children. Though social workers do not make the decision whether or not to separate children from their parents, they can help assess the situation and explore options. In this way, they help to prevent the trauma of an emergency hold by immediately engaging with parents to find a safe option for their children in their own circles of support.
Building an equitable system

Children and youth of African American and Native American descent have long been overrepresented in child welfare systems. Hennepin County Child Protection is committed to reducing this imbalance by making long-term, sustainable change in our organization, including work to understand racial bias and systemic disproportionality in the reporting system.

In Hennepin County African American and American Indian children are disproportionately represented compared to Caucasian kids in the Child Protection system.

Higher frequency of reports:
- African American kids: 4.2 times more
- American Indian kids: 9 times more

Higher numbers of removals:
- African American kids: 5.9 times more
- American Indian kids: 34.6 times more

Racial breakdown of children in Hennepin County

<table>
<thead>
<tr>
<th>Race</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>57%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>21%</td>
</tr>
<tr>
<td>American Indian</td>
<td>8%</td>
</tr>
<tr>
<td>Asian / Pacific Islander</td>
<td>1%</td>
</tr>
<tr>
<td>Unknown / other</td>
<td>12%</td>
</tr>
</tbody>
</table>

Racial breakdown of children in the Hennepin County child protection system

<table>
<thead>
<tr>
<th>Intake / Out-of-home placement</th>
<th>African American</th>
<th>Caucasian</th>
<th>Asian / Pacific Islander</th>
<th>Unknown / other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intake</td>
<td>23%</td>
<td>19%</td>
<td>13%</td>
<td>12%</td>
</tr>
<tr>
<td>Out-of-home placement</td>
<td>18%</td>
<td>24%</td>
<td>13%</td>
<td>13%</td>
</tr>
</tbody>
</table>

Our hopes moving forward

“Our goal is that every family has the same experience within our system, regardless of race. We partner with families, respect families and use the knowledge they bring to the table to make appropriate decisions for their well-being. We seek out service providers that share the values of partnership, respect and kindness, in order to support people’s diverse backgrounds with competence and sensitivity.”

Staci Brean, program manager for child protection ongoing and extended foster care
Empowering families
Listening to youth
A group of advocates for transition-age youth, community providers and county staff met in 2018 to work toward engaging youth and elevating their voices. In 2019, they will focus on increasing access to services and sharing common language across systems.

Community connections
Keeping kids in their communities
The African American Coalition on Child Protection was formed in North Minneapolis to address disparities in the child protection system. The coalition is launching pilot projects, such as the Karegiver Families Project, which will work to increase the number of stable relative and kinship homes in that community.

Training mandated reporters
NAACP Minneapolis joined with Hennepin County to launch a new mandated reporter training with tools to help our intake staff and mandated reporters be aware of and mitigate their unconscious bias as it relates to reporting decisions.

Systems change
Supporting decisionmakers
We adopted KVC Health Systems’ Safe & Connected™ framework, which provides a structured way to make decisions with and for children, youth and families. The model promotes critical thinking and collaboration to ensure a balanced assessment of risk with the outcomes of improved child safety, well-being and permanency. We are building collaboration and teamwork to help share the burden when difficult decisions are necessary. The framework now guides the daily practice of 702 Hennepin County child and family services staff.

83% of allegations come from mandated reporters such as educators and doctors
1,800 mandated reporters participated in the NAACP and Hennepin County’s partnership program on bias training in 2018
Keeping staff healthy

A competent and caring social worker can make the difference between success and failure for a family in crisis. We are taking many steps to help our staff bring their best selves to their work.

More staff, lower caseloads

Since 2015, Hennepin County has doubled staff in Children and Family Services. The result is an improvement in the overall distribution of cases. Our ongoing efforts aim to reduce caseload size to 10-12 cases for child protection, and we hit the goal in some divisions in October 2018.

Constructive review

We are building a Collaborative Safety organization. This quality improvement process teaches us to look at decision points and figure out how the system could have worked better. This reflection process takes the burden of blame from individuals when something goes wrong and builds a culture of safety and learning.

Improving staff self-care

Staff and leaders recognize the need for self-care. Wellness committees are sponsoring events, such as a visit from therapy animals to help employees reduce stress. They continue to find ways for staff to debrief tough experiences, and provide resources and additional supports.

Good results

Social workers reached a goal of meeting monthly with more than 90 percent of children and youth in out-of-home placement. We are engaging with families and spending the time to make sure children and youth are getting what they need. Our work resulted in an additional $500,000 from the state, a kind of “bonus” awarded to counties that meet the threshold. That funding gives us more resources to serve families.

Supporting staff creates better outcomes for kids

“It’s a priority for me to support workers and address secondary trauma exposure in child protection. When I take time to improve my own wellness, whether it be a short walk in between tasks or talking to a colleague about a difficult situation, I can better support staff in doing the same and that improves outcomes for everyone including the families we serve.”

Erika Jensen, Child Protection intake supervisor
Data plays a key role in keeping the department running. Hennepin County’s Children and Family Services Continuous Quality Improvement and Data Team, formed as the result of a recommendation from the Child Protection Oversight Committee in 2016, helps staff and leadership with data tools to watch trends in child welfare and track work. The reports and dashboards in Microsoft Power BI offers data that staff and leadership can use to watch and dissect trends in child protection operations and child well-being. If something unusual comes up, the team can dive deeper into the data to find patterns that might help to direct future child welfare work.

The QA Tool, which the team created with input from staff, helps workers track cases and stay on top of each family’s status. The tool was one factor that helped staff reach their goal to increase face-to-face visits with kids in placement, by helping them document their work better and identifying barriers, said Stacy Rudnick, data team supervisor. “But it’s not about the number,” she said. “It’s about the well-being.”

Averages and composite numbers often don’t tell the whole story, though. Thanks to the CQI team’s efforts, we can dive deep to determine whether we are meeting our goals in each disparate community.

“The CQI Team seems to be able to extract any data I can think of… There are many narratives about how our work is being done but the data provided by the CQI team may tell a very different story.”

Helen Martin, investigations program manager

Knowing the numbers

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Tracking our progress

Improving outcomes with stronger quality measures

Hennepin County created an innovative performance management tool that helps staff, supervisors and managers monitor state and federal measures of success, in real time. By using the most current data, we are better able to respond quickly when performance measures dip. In 2018, Hennepin County improved its performance in overall timeliness and 120-hour responses in both family investigations and assessment. The rate of maltreatment in foster care also improved drastically in 2018—dropping nearly 50 percent from 2017.

Federal and state measures help the county monitor outcomes

### Federal measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>Performance standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maltreatment recurrence</td>
<td>8.4%</td>
<td>15.4%</td>
<td>13.7%</td>
<td>13.4%</td>
<td>9.1% or less</td>
</tr>
<tr>
<td>Maltreatment in foster care*</td>
<td>11.6%</td>
<td>18.9%</td>
<td>19.1%</td>
<td>10.5%</td>
<td></td>
</tr>
<tr>
<td>Foster care reentry</td>
<td>15.1%</td>
<td>17.5%</td>
<td>15.5%</td>
<td>15.1%</td>
<td>8.3% or less</td>
</tr>
<tr>
<td>Permanency: 12 months</td>
<td>47.3%</td>
<td>42.0%</td>
<td>42.7%</td>
<td>41.9%</td>
<td>40.5% or greater</td>
</tr>
<tr>
<td>Permanency: 12-23 months</td>
<td>47.3%</td>
<td>42.0%</td>
<td>46.2%</td>
<td>54.0%</td>
<td>43.6% or greater</td>
</tr>
<tr>
<td>Permanency: 24 months</td>
<td>16.4%</td>
<td>18.8%</td>
<td>35.2%</td>
<td>35.0%</td>
<td>30.3% or greater</td>
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<tr>
<td>Placement stability</td>
<td>4.90</td>
<td>4.70</td>
<td>4.50</td>
<td>3.90</td>
<td>4.12 moves or less per 1,000 days in care</td>
</tr>
</tbody>
</table>

### State measures

<table>
<thead>
<tr>
<th>Measure</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>Performance standard</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall timeliness*</td>
<td>59.8%</td>
<td>56.9%</td>
<td>66.3%</td>
<td>83.3%</td>
<td>100%</td>
</tr>
<tr>
<td>24-hour response timeliness</td>
<td>76.6%</td>
<td>79.9%</td>
<td>82.8%</td>
<td>85.1%</td>
<td>100%</td>
</tr>
<tr>
<td>120-hour response: family investigation*</td>
<td>78.1%</td>
<td>56.3%</td>
<td>65.8%</td>
<td>83.9%</td>
<td>100%</td>
</tr>
<tr>
<td>120-hour response: family assessment*</td>
<td>52.3%</td>
<td>46.6%</td>
<td>58.8%</td>
<td>82.4%</td>
<td>100%</td>
</tr>
<tr>
<td>Caseworker visits</td>
<td>75.7%</td>
<td>76.5%</td>
<td>81.9%</td>
<td>90.1%</td>
<td>95% or greater</td>
</tr>
<tr>
<td>Relative care</td>
<td>43.7%</td>
<td>52.8%</td>
<td>59.2%</td>
<td>61.4%</td>
<td>35.7% or greater</td>
</tr>
<tr>
<td>Physical health</td>
<td>74.7%</td>
<td>72.6%</td>
<td>73.8%</td>
<td>75.2%</td>
<td>70% or greater</td>
</tr>
<tr>
<td>Maltreatment rereporting</td>
<td>18.7%</td>
<td>24.6%</td>
<td>25.6%</td>
<td>23.1%</td>
<td>15.2% or less</td>
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<tr>
<td>Aging out of foster care</td>
<td>59.0%</td>
<td>55.8%</td>
<td>62.1%</td>
<td>65.5%</td>
<td>70% or less</td>
</tr>
</tbody>
</table>

Denotes where the county met or exceeded the performance standard in 2018

* These measures highlight the greatest improvement
With the help of our community

When families come into the child protection system, they are in pain and in need.

Government alone can’t resolve the complex factors that contribute to child abuse and neglect. The law creates a system designed to prevent further harm to children. Healing was not part of the equation.

But with continued support from people like you, our communities and our non-profit partners, we can sustain momentum toward positive change. We can continue to move from our current reactive, crisis-driven system to a proactive, strengths-based one that helps families avoid child protection in the first place.

Together, we can help Hennepin County’s child welfare reform succeed.

Jodi Wentland, Assistant County Administrator of Human Services
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Child Well-being Advisory Committee

A diverse group of experts representing law enforcement, the courts, public schools, government, foster parents, academics, evaluators, health care providers and Native American tribes advises staff and the County Board about child well-being services and strategies.

Child Well-being Advisory Committee 2017-2018

Mike Opat, Committee Chair
Hennepin County board member

Susan Dragsten, Hennepin County
Citizens Review panel co-chair

Craig Enevoldsen,
Brooklyn Park Police chief

Nikki Farago,
Minnesota Department of Human
Services assistant commissioner

Eric Fenner, Casey Family Programs
managing director

Anne Garity, University of Minnesota
Department of Psychiatry adjunct assistant professor

Debbie Goettel,
Hennepin County board member

Carlton Jenkins,
Robbinsdale Schools superintendent

Gail Korst-Meyer, Hennepin County licensed foster parent

Traci LaLiberte,
Center for Advanced Studies of Child Welfare executive director

Anne McKeig,
Minnesota Supreme Court justice

Laurie Ohmann, Catholic Charities of St. Paul and Minneapolis
senior vice president

David Piper,
Hennepin County 4th District judge

Dr. Alice Swenson, Children's Hospital and Clinics of Minnesota pediatrician

Darrell Thompson, Bolder Options president

Lolita Ulloa, deputy Hennepin County attorney

Stella Whitney-West,
Northpoint Health & Wellness Center CEO

Noya Woodrich,
Minneapolis Department of Health deputy commissioner

Hennepin County
Board of Commissioners

Mike Opat, District 1

Irene Fernando, District 2

Marion Greene, District 3

Angela Conley, District 4

Debbie Goettel, District 5

Jan Callison, District 6

Jeff Johnson, District 7

Hennepin County

David Hough, administrator

Jennifer DeCubellis, Health and Human Services, deputy county administrator

Jodi Wentland, Human Services, assistant county administrator

Child Well-being
Transformation leadership

Michelle Farr, child well-being transformation director

Ann Ahlistrom, senior attorney and manager, transformation team

Health and Human Services
hennepin.us/healthandhumanservices