

Sedgwick County Community Taskforce February 14, 2022, Meeting

Statement of DCCCA

Presented by Mary Ann Smith, Child Welfare Director

DCCCA commends this taskforce for its work to understand how this tragedy happened, and to recommend reforms that keep Kansas children safe, healthy, and alive. We are committed to supporting your inquiry.

As noted during your last meeting, Kansas law protects the confidentiality of children in foster care. These confidentiality requirements prevent DCCCA and any Department for Children and Families contractor from commenting on, sharing documents about, or even confirming that a child has been taken into the State's custody.

The law imposes these restrictions for good reason. Children in foster care have experienced trauma. Public scrutiny can add to that trauma, undermining a child's health and wellbeing.

The law also provides for exceptions, allowing a court or DCF to balance privacy considerations against the community's interest in understanding a child's experience. We requested DCF to grant a limited waiver that would allow us to participate more fully in your inquiry, but that request was not granted due to confidentiality statutes.

There are, however, a couple of ways we feel we can support your inquiry without violating our obligations under Kansas law:

1. We can help you understand the roles different kinds of grantees play within Kansas' child welfare system
2. We can comment on the reference to DCCCA in the District Attorney's report.

Let's focus first on the roles of child welfare contractors in Kansas. As you heard from DCF's Kristin Peterman, grantees play two distinct but related roles in Kansas' child welfare system. In summary, one type of grantees focuses on foster parents, and the other type focuses on children and their families in foster care.

DCCCA is a licensed Child Placing Agency – a "CPA." A CPA's role is to recruit, train, and support foster parents. Kansas has extensive training requirements for foster parents, which includes an 86-page manual, and a big part of our role is to help foster parents understand their responsibilities. Our caseworkers – DCCCA calls them Family Support Specialists, but you may also hear "case manager" or just "worker" – are assigned to a home, not a specific child.

CPAs like DCCCA are responsible for supporting foster parents and helping foster parents navigate numerous challenges within the system. These challenges range from routine issues – like parent-teacher conferences – to emergencies – like helping a child living with unmet health or mental health needs.

DCF requires that CPAs like DCCCA visit each foster family at least once a month. Specialists complete a walkthrough of the home to ensure compliance with DCF licensing regulations and talk with the foster parents in the home. The Specialist also completes a child monthly report.

This report helps to monitor a child's progress and identify needs of children in the home. CPAs like DCCCA email these reports to the Case Management Provider – or "CMP" – serving each child in the home. Monthly reports are one important way grantees coordinate.

That brings us to the other kind of contractor: CMPs. Where CPAs like DCCCA work with foster parents, CMPs' work focuses on children in foster care & permanency. CMPs are the first agency a child interacts with after being removed from their birth home, and CMPs are responsible for working with the birth family and ensuring the needs of each individual child are met in foster care. This includes but isn't limited to education, relationship with the birth family and friends, physical and mental health, and other needs. They are also required to meet with each child once a month.

Turning to the DA's report, we feel it is important to mention to the Task Force that the DA's office did not contact DCCCA in preparation for its report. DCCCA staff were not interviewed, and our records were not requested.

In an effort to support your efforts, we have also prepared a background packet that has been shared with the taskforce facilitators for distribution. The packet includes:

1. CPA and Family Preservation Rack Card that provide a brief overview of the service
2. A map of DCF's foster care regions and a map of family preservation regions.
3. A map illustrating the foster homes in Kansas by county
4. A document recommending steps prospective foster parents take to prepare for a foster home survey – a key step toward licensure
5. An overview of the foster parent licensing process
6. Responsibilities when a child is missing from placement. This DCF policy was asked for during an earlier meeting.

Again, thank you for your work to reform policies to ensure children are safe, healthy and alive.

Questions received during February 14, 2022 Meeting

What is MAPP? MAPP - the Model Approach to Partnerships in Parenting - is an internationally-used training approach that ensures kinship and foster parents experience an effective, integrated learning experience linking not only trauma-informed training content, but professional assessment, skills-based learning and peer support. <https://www.childally.org/mapp>

What is Deciding Together (DT)? – Deciding Together provides a one-to-one professional and family meeting series, covering important MAPP concepts with agency sponsors in a more flexible schedule setting over 7 weeks. DT is a MAPP training.

What on-going training access does foster parents have? Each Child Placing Agency can offer agency specific and on-going trainings. DCCCA regularly offers de-escalation training by the Crisis Prevention Institute called Non-violent Intervention. Additionally, Children's Alliance of Kansas, offers statewide on-going trainings for foster, bio and kin parents. www.childally.org
Examples of this week on-going training options below:

Available	# Registered	Past Sessions	Filter			
Date Time	Instructor	Learning Path	Course	Module	Session	Actions
02/15/2022 06:00:00 PM - 02/15/2022 08:00:00 PM (Central Standard Time)	Multiple Instructors		Parenting: What I Wish Someone Would Have Told Me [2/15/22]	Parenting: What I Wish Someone Would Have Told Me [2/15/22]	● Parenting: What I Wish So...	Register
02/15/2022 07:00:00 PM - 02/15/2022 08:30:00 PM (Central Standard Time)	Multiple Instructors		LGBTQ Youth in Care [2/15/22]	LGBTQ Youth In Care [2/15/22]	● LGBTQ Youth In Care [2/15...	Register
02/16/2022 05:00:00 PM - 02/16/2022 06:30:00 PM (Central Standard Time)	Multiple Instructors		Substance Abuse in Adults [2/16/22]	Substance Abuse and Adolescents [2/16/22]	● Substance Abuse and Adole...	Register
02/16/2022 06:00:00 PM - 04/20/2022 09:00:00 PM (Central Standard Time)	Multiple Instructors		TIPS-MAPP 2/16/22-4/20/22	TIPS-MAPP 2/16/22-4/20/22 [Curley/Glanville-Newberry]	● TIPS-MAPP 2/16/22-4/20/22...	Registration Closed
02/17/2022 11:00:00 AM - 02/17/2022 12:00:00 PM (Central Standard Time)	Multiple Instructors		Parenting Children with Special Needs [2/17/22]	Parenting Children with Special Needs [2/17/22]	● Parenting Children with S...	Register

First Prev 1 2 3 4 5 Next Last

What are DCCCA caseloads? DCCCA CPA Family Support Specialist caseloads range from 11 to 19 active families with an average of 14 active families per worker.

What are DCCCA wages for staff? DCCCA CPA family support specialist positions start at 16.45 an hour. Licensed Family Support specialist positions start at 18.42 an hour.

What is DCCCA’s crisis response process? All DCCCA CPA staff are on call 24-7 for their assigned homes. DCCCA foster parents are provided cell phone numbers of all DCCCA CPA staff including their worker, worker’s supervisor, and all administration staff. All numbers are provided to ensure that foster families always have immediate access to support from someone that is already familiar with their home. It is important to note that not all CPA’s have the same types of crisis response and we are just speaking to DCCCA’s practices.

How do you track outcomes of crisis support? DCF requirements include regulations regarding the completion of incident reports. DCCCA and foster parents’ complete incident reports for many different types of occurrences. Incident reports could include a child misbehaving at school, testing positive for COVID-19, missing from placement, or an emergency room visit. DCCCA tracks incident types, numbers of incidents, and other data points in efforts to enhance any processes around supporting children and families.

We have included an example below of this past quarter data. Again, these incidents include a significant range of potential safety concerns from a child being scratched on the face at childcare, missing a dose of medication, to events such as hospitalization of a youth.

Child-Related Incident types by Month (Q2)

Type of Incident	October	November	December	Total
Critical Incident	0	0	1	1
Significant Incident	47	44	28	119
Unusual Incident	67	99	65	231
Other	11	5	2	18
Total	125	148	96	369

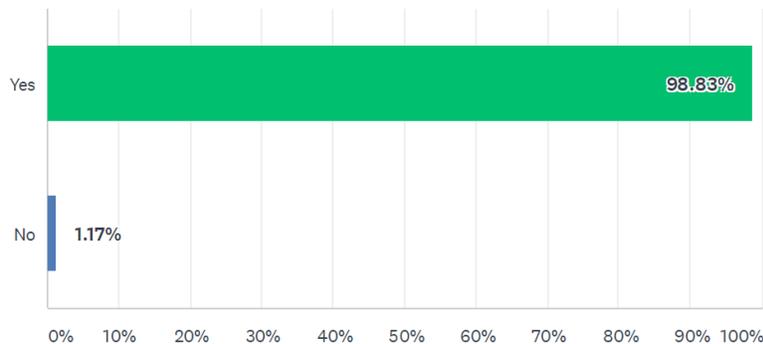
*Other represent child related incidents not categorized under any incident type.

DCCCA seeks feedback from foster parents consistently and sends annual surveys. This past year’s survey results indicated a 98.3% satisfaction with their foster family support specialist response to after hour emergencies.

Please see survey response below:

Q8 Does your assigned DCCCA Specialist respond to after hour emergencies?

Answered: 171 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	98.83%	169
No	1.17%	2
TOTAL		171

What changes do you think are needed? It is not unusual for children in foster care to have mental health needs. By definition, children in foster care have experienced trauma, and healing takes time, quality care, and real support. The three biggest changes DCCCA recommends to improve outcomes for children with mental health needs are:

1. Increase mental health resources for children in foster care and improve the system through which that care is delivered, specifically in-home services. No child should have to wait weeks or months for care. DCCCA has advocated for years to make these changes.
2. Invest in specialized training for foster parents who will provide care for children and teens with significant emotional, behavioral, or social issues or medical needs. Therapeutic Foster Care is one example to implement.
3. More focus on child welfare workers and family support workers. The men and women who work at DCCCA and other child welfare agencies, and those who work at DCF do incredibly difficult jobs. The fact that the work is incredibly demanding and that they are rarely recognized for their contributions contributes to a high burnout rate and a high turnover rate that undermines outcomes for children.

What is the need for increasing the number of staff (case workers, social worker) to care for foster care families and children in need of mental health services?

- a. See above: This work is difficult, high intensity and often 24/7 requirements. There must be an increased focus on providing the supports to child welfare staff that are needed.
- b. **Are there budget implications?** Yes.

How often are Child Placing Agency workers required to do a home visit? Child Placing Agency regulations require visits at minimum once a month. Additional visits are scheduled as needed.

Is there a link to the DCCCA Trauma Informed Training that can be shared with the Task Force?

Kansas preservice training can include MAPP, DT, or NTDC. DCCCA provides Deciding Together (DT) training to foster parents. As shared above DT, provides a one-to-one professional and family meeting series, covering important MAPP concepts with agency sponsors in a more flexible schedule setting over 7 weeks. DT is a MAPP training. DT can have up to 3 families at a time. <https://www.childally.org/mapp>

DCCCA also provides on-going trainings such as Together Facing the Challenge (TFTC). <https://sites.duke.edu/tftc/>. The training and consultation approach used by *TFTC* is to improve the skills of foster parents and agency staff. The model focuses specifically on the in-home intervention elements (and creating adequate skill levels to implement these strategies effectively) and on the important role of supervision and coaching in helping foster parents work effectively.

Additionally, DCCCA provides Trust Based Relational Intervention (TBRI) training. TBRI® is an attachment-based, trauma-informed intervention that is designed to meet the complex needs of vulnerable children. TBRI® uses Empowering Principles to address physical needs, Connecting Principles for attachment needs, and Correcting Principles to disarm fear-based behaviors. While the intervention is based on years of attachment, sensory processing, and neuroscience research, the heartbeat of TBRI® is connection.

What is the process for discharging a child when they are experiencing a mental health crisis? Child Placing agencies do not discharge children. Case Management Provider's can discharge a child from a

foster home or facility. Child Placing Agencies can submit a 14-day disruption request if a child is unable to maintain in a home. Our first goal in any mental health crisis would be to assist the child in obtaining necessary services. Only Case Management Providers or DCF have authorization to approve mental health services such as therapy or mental health hospitalizations. Foster parents and Child Placing Agencies do not have authority to obtain therapy or sign-in children for mental health hospitalization. Foster parents can seek crisis services without authorization.