

# Report of the Child Welfare System Task Force to the 2019 Kansas Legislature

**CHAIRPERSON:** Senator Vicki Schmidt

**VICE-CHAIRPERSON:** Representative Steve Alford [until 1/9/2018]; Representative Erin Davis [from 1/9/2018]

**LEGISLATIVE MEMBERS:** Senators Barbara Bollier [until 7/18/2018], Laura Kelly, and Ty Masterson [from 7/26/2018]; and Representatives Linda Gallagher and Jarrod Ousley

**NON-LEGISLATIVE MEMBERS:** Gina Meier-Hummel, Secretary for Children and Families (non-voting); Patricia Long, Director of Prevention and Protection Services (PPS), Department for Children and Families (DCF) (non-voting); Rachel Marsh, Saint Francis Community Services (non-voting); Lindsey Stephenson, KVC Kansas (non-voting); Hon. Daniel Cahill, district court judge, appointed by the Chief Justice of the Supreme Court (Chief Justice) [until 4/4/2018]; Hon. Jeffrey Larson, district court judge, appointed by the Chief Justice [from 4/4/2018]; Mickey Edwards, state director, Kansas Court Appointed Special Advocates, appointed by the Chief Justice; Alicia Johnson-Turner, citizen review board member, appointed by the Chief Justice; Mary Tye, foster parent organization representative, appointed by the Judicial Council; Serena Hawkins, guardian *ad litem*, appointed by the Judicial Council; Ashlyn Yarnell, family law attorney, appointed by the Judicial Council; Gail Cozadd, licensed social worker, appointed by the Judicial Council; Dr. Katherine Melhorn, Child Death Review Board representative; Sandra Lessor, Sedgwick County District Attorney's Office, appointed by the Kansas County and District Attorneys Association; and Sgt. David Ohlde, Marysville Police Department, appointed by the Kansas Association of Chiefs of Police.

## CHARGE

House Sub. for SB 126 (2017) directs the Secretary for Children and Families to establish a Child Welfare System Task Force to study the child welfare system. The bill directs the Task Force to convene working groups to study the general administration of child welfare by the Kansas Department for Children and Families (DCF), protective services, family preservation, reintegration, foster care, and permanency placement. Additionally, the Task Force and each working group are directed to study the following topics:

- The level of oversight and supervision by DCF over each entity that contracts with DCF to provide reintegration, foster care, and adoption services;
- The duties, responsibilities, and contributions of state agencies, nongovernmental entities, and service providers that provide child welfare services in the State of Kansas;
- The level of access to child welfare services, including, but not limited to, health and mental health services and community based services in the State of Kansas;
- The increasing number of children in the child welfare system and contributing factors;

- The licensing standards for case managers working in the child welfare system; and
- Any other topic the Child Welfare System Task Force or a working group deems necessary or appropriate.

December 2018

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# Child Welfare System Task Force

## FINAL REPORT

### Conclusions and Recommendations

The Task Force adopted the following 24 recommendations, organized by priority into three tiers. More information regarding the references to the report of the Mental Health Task Force may be found in the crosswalk attached to this report as Appendix B. (*Note: The numbering of recommendations is for ease of reference only and does not reflect priority order.*)

### Tier One Recommendations

The Task Force adopted the following four recommendations as its highest priority recommendations:

1. *Workforce.* The State of Kansas should invest in the child welfare system workforce by increasing funding for recruitment, retention, and support to effectively attract and retain high-quality staff;
2. *Data Infrastructure.* The State of Kansas should create a single, cross-system, web-based, integrated case management and data reporting system that can be used by the Kansas Department for Children and Families (DCF) and all relevant agencies and stakeholders to efficiently and effectively share information (*e.g.*, education, dental, medial, behavioral, etc.);
3. *Families First Act.* The State of Kansas should fund and institute the federal Families First Prevention Services Act in Kansas and follow the federal guidelines; and
4. *Access to Care.* The State of Kansas should require access to high-quality and consistent medical and behavioral health care for high-risk youth through the Medicaid state plan and other appropriate sources of funding.

### Tier Two Recommendations

The Task Force adopted the following nine recommendations as high priority recommendations:

5. *Foster Care Re-entry and Transitional Services.* The State of Kansas should provide young adults age 18-21 with the option to seamlessly re-enter the child welfare system, and ensure continuity in medical, behavioral health and support services for youth who have exited the custody of the Kansas Department for Children and Families;
6. *Service Setting.* The State of Kansas should prioritize delivering services for children and youth in natural settings, such as, but not limited to, homes, schools, and primary care offices, in the child's community when possible. The needs of the child and family should be the most important factor when determining the settings where services are delivered;

7. *Reintegration Support.* The State of Kansas should provide consistent, individualized, evidence-based support throughout reintegration for children in need of care and caregivers, including, but not limited to, parents and foster parents;
8. *Foster Homes.* The State of Kansas should invest in foster home recruitment and retention by increasing funding for supplemental training and providing additional financial incentives that support older youth, high-needs children, and birth families, as well as modifying licensing requirements;
9. *Analysis of Service Delivery.* The State of Kansas should establish a work group or task force to conduct an analysis to: 1) determine what it costs to adequately fund high-quality child welfare services; 2) by 2021, evaluate the benefits of privatizing child welfare services; and 3) determine the best public/private collaboration to deliver child welfare services. DCF shall determine appropriate outcome measures and periodic evaluations shall be conducted to ensure contractors are achieving set outcomes and provide opportunities for ongoing collaboration and review. Summary reports should be provided to the Legislature semi-annually;
10. *Safety Net, Early Childhood Programs, and Early Intervention.* The State of Kansas should fully fund, strengthen, and expand safety net and early childhood programs through public services (DCF, mental health, substance abuse, and education) and community-based partner programs, and reduce barriers for families needing to access government-funded, concrete supports. The State of Kansas should ensure availability and adequate access to early childhood behavioral health services statewide. The Task Force recommends consideration of related Mental Health Task Force recommendations 1.2 (Medicaid Expansion Models), 1.3 (Housing), 3.1 (Regional Model), and 6.4 (Early Intervention);
11. *Information Sharing.* The State of Kansas should establish a multi-disciplinary approach and share information across and among stakeholders, in accordance with federal and state laws regarding confidentiality;
12. *Non-Abuse Neglect.* The State of Kansas should not remove children solely for non-abuse neglect (NAN), and it should provide differential responses for high-risk newborns and NAN reports and refer them to fully funded, evidence-based services. The Task Force recommends consideration of related Mental Health Task Force recommendations 6.1 (Expand Service Options), 4.2 (Regional Model), and 6.4 (Early Intervention); and
13. *Adoption Process.* The State of Kansas should ensure that diligent search for relatives for possible placement begins immediately when a child is removed from the home. DCF should establish benchmarks for relative identification and shall monitor related outcomes, such as number of relatives identified within the first 30 days, number of children in relative placements and length of time for the child to reach that placement, and number of relatives contacted. DCF should regularly report on these benchmarks and outcomes to the Legislature.

### **Tier Three Recommendations**

The Task Force adopted the following 11 recommendations as important recommendations:

14. *Immediate Response.* The State of Kansas should provide immediate response 24/7 to

- hotline calls and dedicated immediate response investigators to be dispatched, when warranted;
15. *Front-End Staffing*. DCF should employ only highly skilled and experienced front-end child welfare staff;
  16. *Case Plans*. The State of Kansas should restructure the case plan process to improve coordination of services among all stakeholders to strengthen collaboration in the case and provide reimbursement to required participants;
  17. *Post-adoptive Support*. The State of Kansas should ensure both federal and state subsidies to adoptive families and implement best practices for post-adoptive support services;
  18. *Maximizing Federal Funding*. The State of Kansas should conduct an audit of potential funding streams by program area to ensure the State is maximizing federal benefit;
  19. *Resources and Accountability*. The State of Kansas and DCF should provide services that are in the best interest of children in their care by supporting a system that is accountable and resourced well enough to provide the needed services;
  20. *Serious Injury Review*. The State of Kansas, in accordance with federal and state confidentiality laws, should formalize a Serious Injury Review Team to establish and conduct a review process both internally and externally for an immediate and necessary response when a child dies or suffers serious bodily injury after having previous contacts with DCF Protection and Prevention Services concerning prior abuse and neglect;
  21. *Court Appointed Special Advocates*. The Legislature shall fund Court Appointed Special Advocates (CASAs) to ensure the availability of CASA volunteers in all jurisdictions, without disrupting the current funding CASAs receive from the State of Kansas;
  22. *Physical Access*. The Legislature should fund increased physical access between children in need of care and their families, as well as ensure that families are supported in accessing services as required by the case plan;
  23. *Child Advocate*. The Legislature should evaluate the need for the establishment of an Office of the Child Advocate for Children's Protection and Services within the Kansas Department of Administration to identify challenges across the child welfare system, provide oversight, and propose solutions; and
  24. *Modifications to Code for Care of Children*. The Legislature should request the Judicial Council study modifications to the Kansas Revised Code for Care of Children to meet the child's ongoing best interests for permanency.

**Proposed Legislation:** None

## BACKGROUND

The 2017 Legislature passed House Sub. for SB 126 (SB 126), directing the Secretary for Children and Families to establish a Child Welfare

System Task Force (Task Force) to study the child welfare system in the State of Kansas. Previously, the 2015 and 2016 Special Committees on Foster Care Adequacy, the House Committee on Children and Seniors, and the Senate Committee on Public

Health and Welfare had examined various topics related to the child welfare system. (*Note:* Reports, minutes, and testimony of these committees may be found under each committee's page at [www.kslegislature.org](http://www.kslegislature.org).)

SB 126 directed the Task Force to convene working groups to study the following topics: the general administration of child welfare by the Kansas Department for Children and Families (DCF); protective services; family preservation; reintegration; foster care; and permanency placement. Additionally, the Task Force and each working group were directed to study the following topics:

- The level of oversight and supervision by DCF over each entity that contracts with DCF to provide reintegration, foster care, and adoption services;
- The duties, responsibilities, and contributions of state agencies, nongovernmental entities, and service providers that provide child welfare services in the State of Kansas;
- The level of access to child welfare services, including, but not limited to, health and mental health services and community-based services, in the State of Kansas;
- The increasing number of children in the child welfare system and contributing factors;
- The licensing standards for case managers working in the child welfare system; and
- Any other topic the Child Welfare System Task Force or working group deems necessary or appropriate.

The bill requires the Task Force to submit a preliminary report to the 2018 Legislature and a final report to the 2019 Legislature.

## ORGANIZATION

SB 126 established the following members and appointing authorities for the Task Force:

- The Chairperson of the Senate standing Committee on Public Health and Welfare;
- The Vice-chairperson of the Senate standing Committee on Public Health and Welfare;
- The Ranking Minority Member of the Senate standing Committee on Public Health and Welfare;
- The Chairperson of the House standing Committee on Children and Seniors;
- The Vice-chairperson of the House standing Committee on Children and Seniors;
- The Ranking Minority Member of the House standing Committee on Children and Seniors;
- The Secretary for Children and Families, or the Secretary's designee, who shall be a non-voting member;
- The Director of Prevention and Protection Services for DCF, who shall be a non-voting member;
- One representative from each entity that contracts with DCF to provide foster care, family preservation, reintegration, and permanency placement services, appointed by each such entity, each of whom shall be a non-voting member;
- One member appointed by the Chief Justice of the Supreme Court;
- One representative of Kansas Court Appointed Special Advocates, appointed by the Chief Justice of the Supreme Court;

- One member of a citizen review board established pursuant to the Revised Kansas Code for Care of Children, appointed by the Chief Justice of the Supreme Court;
- One member representing a foster parent organization, appointed by the Judicial Council;
- One guardian *ad litem* with experience representing children in child in need of care cases, appointed by the Judicial Council;
- One family law attorney with experience providing legal services to parents and grandparents in child in need of care cases, appointed by the Judicial Council;
- One social worker licensed by the Behavioral Sciences Regulatory Board (BSRB), appointed by the Judicial Council;
- One member of the State Child Death Review Board established by KSA 22a-243, and amendments thereto, appointed by the Board;
- One county or district attorney with experience in child in need of care cases, appointed by the Kansas County and District Attorneys Association; and
- One law enforcement officer, appointed by the Kansas Association of Chiefs of Police.

The appointments to the Task Force were completed by mid-July 2017. Subsequent changes to the Task Force membership occurring in 2017 can be found in the “Report of the Child Welfare System Task Force to the 2018 Legislature” (Preliminary Report).

In January 2018, Representative Alford resigned as chair of the House Committee on Children and Seniors and from the corresponding

position on the Task Force; Representative Davis was appointed to replace him in these positions. In April 2018, Hon. Daniel Cahill resigned from the Task Force and the Chief Justice appointed Hon. Jeffry Larson to replace him. In July 2018, Senator Masterson was appointed to replace Senator Bollier as vice-chairperson of the Senate Committee on Public Health and Welfare and in the corresponding position on the Task Force.

Pursuant to SB 126, staff and meeting support for the Task Force was provided by the Office of Revisor of Statutes, the Kansas Legislative Research Department (KLRD), and the Division of Legislative Administrative Services.

## WORKING GROUPS

At its August 4, 2017, meeting, the Task Force voted to establish three working groups and directed each working group to study two of the topics assigned by SB 126. The working groups established were:

- General Administration of Child Welfare and Foster Care (Working Group A);
- Protective Services and Family Preservation (Working Group B); and
- Reintegration and Permanency Placement (Working Group C).

SB 126 directed the Task Force chairperson, vice-chairperson, and ranking minority members to appoint a chairperson and vice-chairperson for each working group. Each chairperson and vice-chairperson was then responsible for appointing members of their respective working groups, which SB 126 required consist of not more than seven non-Task Force members and not fewer than two Task Force members. Each non-Task Force member appointed to a working group was required by the bill to possess specific expertise related to the working group’s assigned topic of study. Appointments of working group members were completed in September 2017. A list of working group members is attached to this report as a part of Appendix A.

SB 126 required DCF to “provide assistance to working groups to prepare and publish meeting agendas, public notices, meeting minutes and any research, data, or information requested by a working group.” With Task Force approval, DCF contracted with the Kansas Health Institute (KHI) to provide much of this staff support.

The Legislative Coordinating Council (LCC) approved three meeting days for each working group for 2017. Each working group met three times. Copies of the 2017 reports submitted by the working groups to the Task Force are attached to the Task Force’s 2017 Preliminary Report as Appendix B.

The LCC approved four meeting days for each working group for 2018. Working Group A met seven times in 2018, Working Group B met eight times in 2018, and Working Group C met nine times in 2018. Under the structure established by the Task Force to allow for public testimony, the working groups invited interested members of the public to submit testimony regarding the topics identified by SB 126 and the Task Force. A total of 51 testimony submissions were received; 49 of those were approved for distribution to the working groups (pursuant to confidentiality requirements, testimony including any confidential information or containing details of an individual case, after review by the chairperson of a working group, was rejected and destroyed). From these submissions, the working groups selected persons to invite to present oral testimony, along with subject matter experts from various organizations. Each working group heard verbal testimony at several of its 2018 meetings.

After reviewing and hearing the testimony submissions, including recommendations provided in the testimony, each working group consolidated and ranked a list of recommendations by consensus. The working groups finalized a total of 25 recommendations, including 12 designated as high priority, which were provided to the Task Force in August and September 2018 through the working groups’ “Child Welfare System Working Groups: Report to the Child Welfare System Task Force” (Working Groups Report) (attached to this report as Appendix A).

For each recommendation, the working groups identified actions that would be required to implement the recommendation, supporting strategies to be considered in implementing the recommendation, highlighted testimony related to the recommendation, and highlighted evidence from any other states’ programs that informed or could be instructive in implementing the recommendation. For high-priority recommendations, the working groups also identified action required to implement the recommendation and certain standard characteristics of each recommendation.

In addition to the recommendations, the Working Groups Report also contains additional detail regarding the working groups’ process, meetings, and testimony received.

At the August and September 2018 Task Force meetings, working group members presented the Task Force with an overview of each recommendation and the associated supporting strategies and state spotlights, and conferees identified by the working groups were contacted and given the opportunity to present their testimony to the Task Force regarding relevant recommendations. Summaries of these presentations are provided later in this report.

## TASK FORCE MEETINGS

The LCC approved six meeting days for the Task Force in 2017. The Task Force met five times in 2017: August 4, September 19, October 10, November 14, and December 12. A teleconference meeting scheduled for August 22 was canceled.

Summaries of the 2017 meetings of the Task Force can be found in the 2017 Preliminary Report, which also contains the preliminary conclusions and ten preliminary recommendations adopted by the Task Force.

The Chairperson of the LCC, Speaker Ryckman, Jr., approved the February 2, 2018, meeting of the Task Force pursuant to LCC Policy 20. The LCC subsequently approved five additional meeting days for the Task Force in 2018. The Task Force met six times in 2018:



February 2, July 16, August 27, September 28, October 22, and December 4.

Additional detail regarding each of the Task Force meetings, minutes, audio recordings, Task Force handouts, and written testimony submitted by conferees may be accessed on the Legislature's website on the Task Force webpage: [www.kslegislature.org](http://www.kslegislature.org).

## **February 2, 2018, Meeting**

### ***Perspectives of Youth Leaders and Independent Advocacy Organizations***

The Chairperson recognized Benet Magnuson, Kansas Appleeed, who provided the Task Force with an overview of the Strengthen Families Rebuild Hope coalition, which is composed of organizations and individuals dedicated to reforming Kansas' foster care system. He noted three priorities identified from the coalition's work: 1) the need to reduce the number of children in foster care; 2) the need for additional resources for high-acuity youth; and 3) the fact that Kansans are encouraged by the work of the Task Force and attention being paid by DCF and are looking to the Task Force and DCF for leadership. Mr. Magnuson introduced the following Coalition members, who each briefly addressed the Task Force:

- Young leaders Carl Burris, Zachary Brown, Natalie Zarate, and Stormy Lukasavage, who related their experiences as youth in foster care;
- Tara Wallace, Kansas African American Foster Care and Adoption Coalition, who related her experience in the foster care system, cited statistics showing that African American children are removed from their homes at a significantly higher rate than white children, and urged the Task Force to take steps to increase case worker retention rates;
- Becky Fast, Kansas Chapter of the National Association of Social Workers, who discussed the challenges in recruiting and retaining social workers and the successes of family preservation services;

- Lori Burns-Bucklew, FosterAdopt Connect, who provided an overview of her organization and its work;
- Teresa Sowell, foster parent and social worker, who identified a number of priorities based upon her experiences, including the use of licensed social workers, relative and kinship placements, removal of barriers to licensing of kinship families, financial support of kinship families, foster family recruitment, and support of birth parents;
- Scott Anglemeyer, Kansas Association of Community Action Programs, who provided an overview of his network and its programs and noted the impact of poverty issues on the child welfare system, and he encouraged the Task Force to further examine these issues; and
- Sister Therese Bangert, Sisters of Charity of Leavenworth, who related her experience working at a residential children's home and noted the importance of experienced social workers, resources for family preservation, and finding family members to provide homes.

Conferees provided additional information in response to questions from the Task Force, as follows:

- Ms. Sowell discussed barriers to licensure for kinship families, including diversions and expungements that occurred early in a parent's life, and ways to encourage foster parents and birth parents to work together, including a new program being implemented by DCF;
- Ms. Burns-Bucklew provided additional information regarding FosterAdopt Connect, which provides services in both Missouri and Kansas. On the Kansas side, their services are funded through Johnson County Mental Health. The organization provides behavioral intervention services and also works to recruit and retain foster parents; and

- The young leaders discussed their ability to make and maintain connections with important figures in their life while in the foster care system.

### ***Update: DCF Review and Plans for Improvement***

Gina Meier-Hummel, Secretary for Children and Families, and Task Force member, provided the Task Force with responses to follow-up questions, including:

- Update on missing children (as of January 31, there were a total of 68 missing children, 61 of whom are verified to have run away, including 33 repeat runaways);
- Data back to 2010 regarding the number of youth in foster care with a concurrent receipt of Temporary Assistance for Needy Families (TANF) assistance;
- Additional information regarding DCF's voluntary Family Services programs;
- Information regarding the availability of additional federal Title IV-E funds; and
- Further detail regarding new employment data provided at the December 12, 2017, meeting.

In response to a question, the Secretary stated DCF is meeting with subcontractors to explore ways to rework licensing procedures for kinship placements to try to increase access to federal funding.

### ***Requested Responses from Department of Health and Environment and Department for Aging and Disability Services***

Susan Fout, Commissioner of Behavioral Health Services, Kansas Department for Aging and Disability Services (KDADS), provided the Task Force with information requested at the December 12, 2017, meeting, including possible reasons for discrepancies in reporting lengths of stays in psychiatric residential treatment facilities

(PRTFs); the number of out-of-state placements by Kansas managed care organizations (MCOs) occurring in Kansas PRTFs over the past three to four years (none identified); and the number of PRTF days and renewal days authorized, per MCO, for CY 2013 and CY 2016.

Ms. Fout stated KDADS had met with KVC Kansas, St. Francis Community Services (St. Francis), and the MCOs to discuss the PRTF issues raised by the Task Force. In response to a question regarding differences in average length of stay between MCOs, Ms. Fout stated the cause was unknown, but KDADS would be reviewing the information to try to identify an explanation.

In response to questions, Jon Hamdorf, Interim Medicaid Director, Kansas Department of Health and Environment (KDHE), explained that originally, children were assigned evenly between MCOs, based upon number and acuity of patients. There is now an opportunity for more choice between MCOs. Task Force members requested more information regarding who has the authority to exercise that choice.

In response to further questions, Mr. Hamdorf stated KDHE and KDADS had recently rebuilt a clinical team to review prior authorization and claims data. Ms. Fout stated she believed there were currently 8 Kansas PRTFs, with about 272 total beds. One PRTF has requested a capacity increase and two others have indicated a desire to increase. Ms. Fout noted implementation of a pilot program intended to provide children on the PRTF wait list with increased community services. Ms. Fout stated community mental health centers previously conducted the screenings for PRTF authorization, but due to parity issues, the screenings were moved to the MCOs, where they are currently conducted.

### ***Other Business***

#### ***Working Group Updates***

Hina Shah, KHI, reported the working groups did not meet in January, but had issued requests for submission of testimony regarding critical issues identified by the working groups. The working groups meet in February to begin reviewing and hearing testimony.

Representative Gallagher noted testimony deadlines might be shorter than expected and the former chairperson, Representative Alford, had expressed to her his concern that rural parts of the state receive the word about the opportunities to present testimony.

### *Facilitator Status Update*

Representative Gallagher announced Casey Family Programs (CFP) had agreed to serve as facilitator for the Task Force. She will be providing CFP with information regarding the Task Force. CFP has information regarding the national picture and peer states' child welfare systems, as well as various data they can provide. CFP should be able to provide representatives to attend the remaining Task Force meetings in person, as well as some working group meetings. There will be no cost for CFP's facilitation.

### **July 16, 2018, Meeting**

The Chairperson announced that Steven Greene, Director of Policy and Legislative Affairs, would be representing DCF at the meeting because Secretary Meier-Hummel and Patricia Long were out of state.

### ***Overview: The Family First Prevention Services Act***

Anne Heiligenstein, Casey Family Programs, provided the Task Force with an overview of the Family First Prevention Services Act (FFPSA), enacted as part of the Bipartisan Budget Act in February 2018.

The major provisions of the FFPSA include new funding for prevention activities through Title IV-E funds, new policy ensuring appropriate placements for children in foster care, and new funding and reauthorization of existing funding for child welfare programs.

The Title IV-E funding for prevention activities will be available for children at imminent risk of placement in foster care or youth in foster care who are pregnant or parenting, as well as available for parents or kinship caregivers. The funding may be received for evidence-based services that include mental health prevention and treatment services, substance abuse prevention and

treatment services, and in-home parent skills-based programs. Each of these services may be provided for up to 12 months, but there is no limit on how many times a child and family can receive prevention services. Qualifying programs must be "promising," "supported," or "well-supported," pursuant to guidance that will be issued by the Secretary of Health and Human Services. States must submit a prevention and services program plan as part of the state's Title IV-E plan. Reimbursement for eligible prevention services will begin October 1, 2019.

Ms. Heiligenstein next discussed the provisions ensuring appropriate placements in foster care, including availability of Title IV-E foster care maintenance payments for a child in foster care who is placed with their parent in a licensed residential family-based treatment facility or for an eligible youth placed in a qualified residential treatment program (after two weeks in care).

Finally, Ms. Heiligenstein highlighted several other provisions of the FFPSA, including:

- Additional items promoting safety, permanency, and well-being;
- Provisions promoting timely permanency for children across state lines;
- Reauthorization of adoption assistance and legal guardianship incentives; and
- Continuation of child welfare funding through reauthorization of Title IV-B programs and services and the John H. Chafee Foster Care Independence Program, both until FY 2021.

In response to questions from the Task Force, Ms. Heiligenstein provided the following information:

- Medicaid expansion is a state-by-state decision, but the new funding available through FFPSA is critical in states without expansion;

- The U.S. Congress may be scaling back TANF programs to target poverty programs;
- Each state is responsible for defining “imminent risk” to qualify children for the prevention services;
- The Legislature must appropriate the money required to access the new federal funding, but the Secretary for Children and Families and Governor will create the state plan;
- Many or most Kansas providers are already accredited to be a qualified congregate care provider; and
- The federal government must release the clearinghouse for prevention programs by October 1, 2018, and states must inform the federal government by November 8 whether they want to launch in 2019 or 2021.
- Efforts regarding accountability and changing culture; and
- Staff changes (23 key personnel changes in past 8 months) and regional trips to meet with staff and community partners.

The Secretary also noted DCF is working toward increased funding for prevention services and has issued a request for information regarding the juvenile crisis intervention center beds authorized during the 2018 Legislative Session.

Responding to questions, the Secretary stated the new unlicensed specialist position has about a \$2,000 lower starting salary than its licensed counterparts; the new grants and the new monitoring system will be funded through consensus caseloads; and one of the goals of implementation of the FFPSA in Kansas will be services for homes where children could potentially be removed due to parental drug abuse.

In response to questions regarding contracting with child placing agencies (CPAs) under the new grants and contracts and the potential impact of the Adoption Protection Act (2018 SB 284, see below), the Secretary stated CPAs have been subcontractors under KVC Kansas or St. Francis, but moving forward they will be directly managed by DCF. The religious belief component of SB 284 will only affect those contractors asserting such belief, but CPAs providing foster care case management services cannot make this assertion and will have to serve all individuals.

The Secretary also provided the Task Force with responses to requests received at the February 2, 2018, Task Force meeting, including:

### **DCF Update**

Secretary Meier-Hummel provided the Task Force with a DCF update *via* telephone, including information regarding:

- Efforts regarding child safety, prevention, and permanency;
- Transparency initiatives, including 2018 legislation (House Sub. for SB 336);
- Development of and process for new child welfare grants and contracts;
- Latest numbers and efforts regarding missing or runaway youth (73 verified runaways, 6 unserved *ex parte*, 1 relative abduction, and 2 unknown absent without leave as of July 12, 2018) and children sleeping in offices;
- Staff recruitment and retention efforts, including a new classification of unlicensed child protection specialists;
- Total children in DCF custody as of February 1, 2017 (7,798), and February 1, 2018 (8,281);
- Number of children in foster care in a PRTF as of February 1, for 2017 and 2018, broken down by contractors and MCOs;
- PRTF wait list and screening information for children in foster care; and

- Information regarding the uniformity or consistency of PRTF authorizations among MCOs.

### ***2018 Legislative Session Update***

KLRD staff provided the Task Force with a memorandum and overview of legislation enacted during the 2018 Legislative Session involving the child welfare system. Enacted bills included:

- HB 2639, regarding fingerprinting of persons involved with child care facilities and prohibited crimes for such persons;
- House Sub. for SB 179, establishing a framework for juvenile crisis intervention centers and updating the Child in Need of Care (CINC) Code and Newborn Infant Protection Act;
- SB 284, making substantial amendments to the Kansas Adoption and Relinquishment Act and enacting the Adoption Protection Act;
- House Sub. for SB 336, amending law related to public records, including when information may be disclosed under the CINC Code; and
- SB 428, regarding licensure requirements for child care facilities.

KLRD staff noted the memorandum also contained a list of relevant bills introduced but not enacted during the 2018 Session. One of these bills, HB 2751, which would establish the Office of the Child Advocate, was submitted to the Judicial Council with a request for study during the interim, and the Judicial Council has accepted this request.

In response to a question regarding application of the language of the Adoption Protection Act in SB 284 to state contractors, an assistant revisor stated the language would prevent case management contractors from withholding services due to a sincerely held religious belief, but would not apply to child placement

contractors. The assistant revisor stated the grantees under the new contracts being developed could be considered “contractors” for purposes of the bill.

### ***Other Business***

#### ***Working Group Updates***

Ms. Shah provided the Task Force with working group updates. Each working group met five or six times since February 2018 to receive testimony and discuss and prioritize recommendations to submit to the Task Force in their final reports.

In response to a question from Ms. Shah regarding plans for presentation of the reports, the Chairperson stated she tentatively anticipated hearing a working group report and associated testimony at each meeting starting in August 2018, leaving the final meeting in early December 2018 to finalize the Task Force’s recommendations and report.

The Chairperson welcomed Hon. Jeffrey Larson as a new member of the Task Force, replacing Hon. Daniel Cahill following Judge Cahill’s resignation.

#### ***August 27, 2018, Meeting***

#### ***Presentation of Working Group A Report and Recommendations***

Sandra Lessor, chairperson of Working Group A (General Administration by DCF and Foster Care), thanked the working groups for their faithful service summarized the report’s recommendations.

#### ***Recommendation A1: Workforce***

Susan Prochaska, Executive Board President, Kansas School Counselor Association, and representative of Working Group A, introduced Goal 1: Improve Morale and Tenure of Workforce and recommendation A1, regarding workforce (Working Groups Report, p. 11-14). Ms. Heiligenstein noted Kansas’ caseworker salaries are not competitive with other professions and cited a study in Texas showing salary increases for caseworkers had an immediate effect on turnover

and recruitment. Ms. Fast provided written testimony in support of recommendation A1.

### *Recommendation A2: Data Infrastructure*

Sarah Oberndorfer, attorney, foster parent, and representative of Working Group A, introduced Goal 2: Streamline and Improve Technology and Communication across the child welfare system and recommendation A2, regarding data infrastructure (Working Groups Report, p. 15-17). She said it is crucial to be able to track a child from entrance into the system, throughout receipt of services, until he or she exits the program. She noted pertinent and reliable information exists in silos and therefore has limited use. To fulfill Goal 2, she noted supporting strategy A2.4, requiring data sharing among all agencies involved in foster care child placement, with DCF responsible for monitoring the data sharing in collaboration with the Executive Branch Chief Information Technology Officer (CITO) and the Joint Committee on Information Technology (JCIT).

Lee Allen, Executive Branch CITO, Office of Information Technology Services, provided written-only testimony on the recommendation.

Secretary Meier-Hummel agreed with the recommendation and noted child welfare touches many different programs and services that receiving and sharing information is challenging, often caused by information silos, privacy restrictions, and other factors. In response to a comment about DCF's antiquated system, Secretary Meier-Hummel stated DCF is preparing to build a new system, and a feasibility study has been authorized. The Secretary said the new system will include interaction with local and state law enforcement entities.

### *Recommendation A5: Analysis of Service Delivery*

Ms. Prochaska presented recommendation A5, regarding analysis of service delivery, which recommended a work group or task force be established to conduct an analysis to determine the cost to adequately fund high-quality child welfare services; evaluate the benefits of privatization of child welfare services; and determine the best public/private collaboration to deliver child welfare services (Working Groups Report, p. 23-

25). She reported all stakeholders are involved in evaluation of the system and its costs. Ms. Shah described the Nebraska hybrid system in which the City of Omaha relies on a solely private child welfare system and the remainder of the state provides service through a private/public partnership.

Dona Booe, President and Chief Executive Officer, Kansas Children's Service League, commented on the value of private not-for-profit organizations in providing more effective services for children, the deleterious effects of "adverse childhood experiences," and the value of early start programs. She recommended more extensive use of evidence-based services, establishing a data review board, and including child care services in order to support parental involvement; the latter service provides a \$7 return for every dollar invested.

In response to Task Force members' questions, Ms. Booe noted tying TANF to community supports will eliminate gaps in service; the Home and Community Based Services waivers initiative is effective and could be a model for providing community-based services for families in need of community supports; and the delivery of child welfare services has improved recently.

Ms. Heiligenstein stated only Kansas and Florida have completely outsourced child welfare, and both states have more children under state care than any other state. However, Kansas is better than the national average regarding repeated maltreatment of a child. Among the issues she presented for consideration were the creation of clear policies for leaving the system and providing financial incentives for keeping a child out of foster care. She cited Tennessee's and Texas' approaches to child welfare as examples.

### *Recommendation A3: Access to Care*

Ms. Oberndorfer presented recommendation A3, regarding access to care, a subset of Goal 3: Strengthen Contractor Oversight and Supervision by DCF (Working Groups Report, p. 17-19). The recommendation would require youth in foster care be provided with access to high-quality and consistent medical and behavioral health care through Medicaid by MCO performance measures and oversight. She noted Texas was the first state

(2008) to establish a Medicaid managed care program focusing on children in foster care.

Ms. Heiligenstein, commenting on the Texas system, said all the medical societies collaborated to provide statewide guidelines and to integrate all medical services for children in foster care in one statewide network, which resulted in a significant drop in the use of psychotropic drugs and eliminated duplicative services.

#### *Recommendations A6: Outcomes Measures and A4: Child Advocate*

Ms. Prochaska introduced recommendation A4, regarding the creation of and funding for an independent Office of the Child Advocate for Children's Protection and Services, and recommendation A6, regarding outcome measures (Working Groups Report, p. 19-22 and 25-26).

With regard to recommendation A4, Ms. Prochaska and Ms. Oberndorfer responded to Task Force members' questions that the Working Group decided an independent audit would be better than utilizing the services of the Legislative Division of Post Audit, and a need exists for both the Office of the Child Advocate and the DCF Ombudsman. Secretary Meier-Hummel commented she is developing a DCF advisory council that will provide feedback for her, obviating the need for an independent Office of the Child Advocate.

Recommendation A6 would require clear expectations and accountability for a set of desired outcomes, with required periodic evaluations to ensure contractors are achieving set outcomes and provide opportunities for ongoing collaboration and review, and require summary reports be provided to the Office of the Child Advocate quarterly and to the Legislature annually.

#### ***Presentation of Working Group B Report and Recommendations***

##### *Recommendation B1: Families First Act*

Sarah Coats, social worker and representative of Working Group B, discussed a new federal funding source, the Family First Prevention Services Act (FFPSA), which allows states to receive open-ended entitlement funding for evidence-based prevention services. She

introduced recommendation B1, to fund and institute FFPSA in Kansas and follow the federal guidelines (Working Groups Report, p. 31-32).

Ms. Heiligenstein further stated the FFPSA's purpose is to provide options for those at risk of going into foster care by addressing mental health issues, substance abuse, and parenting skills. She stated Kansas is eligible to receive these funds for foster care beginning October 1, 2018, and on October 1, 2019, Kansas will be eligible for a 50.0 percent match for the three prevention services. Secretary Meier-Hummel stated DCF is in a position to take advantage of these new funds.

##### *Recommendation B2: Information Sharing*

Ms. Coats commented on Goal 4: Strengthen Assessment of Risk and Safety and Eliminate Fatalities by Abuse and Neglect and presented recommendation B2, regarding a multi-disciplinary approach to information sharing across agencies and between stakeholders (Working Groups Report, p. 34-35).

Dr. James Anderst, child abuse pediatrician, stated, in 2016, there were 2,400 substantiated victims of child abuse and 10 child abuse fatalities. He commented reducing these numbers is challenging because of the limited knowledge of some medical professionals and county attorneys, and because not all children have access to Children's Advocacy Centers (CACs), the latter of which is the anchor for a functioning multi-disciplinary team. He offered several recommendations: expand the availability of CACs, require DCF investigators to receive forensic medical training, employ telemedicine, and establish a network of trained medical providers.

Don Hymer, Jr., Assistant District Attorney, Johnson County, and Juvenile Section Head, Kansas County and District Attorneys Association, recommended the word "serious" be removed from the state statute that addresses determining child abuse because it can have wide interpretation. He also noted some law enforcement responsible for handling reports of abuse or neglect after 5:00 p.m. or on weekends are not trained to ascertain abuse or neglect. He recommended an amendment to the statute so investigators know whether the individual, family,

or home complaint they are investigating has any prior occurrences; and a central clearinghouse so all principals of a complaint have sufficient information.

Ms. Heiligenstein noted two-thirds of occurrences of child abuse are a result of neglect, not physical or sexual abuse. She offered models of collaboration and suggested policy be established for DCF to share all intakes with law enforcement, standards of evidence be used to assess risks, and Child Protective Services make staff available 24/7 to address calls from law enforcement and hospitals, as well as complaint calls. She stressed the importance of balancing protection and prosecution. Secretary Meier-Hummel stated DCF has a 24/7 hotline.

Lori Ross, FosterAdopt Connect, offered written testimony, which was later supplemented with verbal testimony.

#### *Recommendation B7: Safety Net*

Ms. Coats introduced Goal 6: Strengthen the Safety Net and Early Childhood Education and recommendation B7, regarding fully funding, strengthening, and expanding safety net and early childhood programs and reducing barriers for families needing to access government-funded, concrete supports (Working Groups Report, p. 46-49). She said when parents do not receive the appropriate services, child poverty increases.

Dr. Linda Bass, Vice President, KVC Kansas, stated half the families involved in child welfare services lack the resources to meet their basic needs, and living in poverty places children at greater risk for entering the child welfare system. If public and private agencies had more funding directed toward lowering the poverty rate, rather than relying on grant funding, agencies could offer a wider array of services, expand prevention services, and provide options for child care and housing.

Ms. Booe offered written testimony on this recommendation and referenced her earlier verbal testimony.

#### *Recommendation B6: Non-Abuse Neglect*

Ms. Wallace, a representative of Working Group B, introduced recommendation B6, regarding prohibiting removal of children for solely non-abuse neglect (NAN) and instead making referrals to fully funded, evidence-based services (Working Groups Report, p. 42-45).

Christie Appelhanz, Children's Alliance of Kansas, stated too many children are coming into the child welfare system for NAN when other options could be viable. She recommended additional funding from the Juvenile Justice lockbox, expanding service to mitigate children and parents from health-related risk factors, increasing funding for Kansas PRTFs, and using the FFPSA to address family poverty.

Mr. Hymer expressed concern regarding inclusion of the word "solely" in recommendation B6; he urged NAN cases differentiate between drug abuse that affects the child and a family's history. He noted the parents may have a significant history of drug abuse, which should impinge on risk assessment. He praised DCF's Family Preservation Services for efforts to keep a child in the home. He also expressed concern regarding juveniles whose repeat offenses are ignored with the present risk-scoring system and whose "criminogenic attitude" is not presently addressed with DCF services. He commented moving the jurisdiction of juvenile offenders from the Kansas Department of Corrections to DCF has been problematic for offering appropriate services. Mr. Hymer stated there are limited options in addressing repeat juvenile offenders, and Child in Need of Care services are not designed for such individuals. He suggested, for the short term, perhaps detention centers might help.

Sandra Dixon, Director of Behavioral Health Services, DCCCA, testified NAN cases require a differential response, depending on the circumstances. She presented information on one facet—substance abuse by parents. She stated treatment options should be broad enough to encompass multiple drugs and current treatment funding is insufficient, especially Medicaid reimbursement rates. Ms. Dixon cited two treatment approaches, both of which are currently prohibitively expensive. A member commented all



treatment option choices should be evidence-based.

Ms. Heiligenstein stated NAN is a complex issue that is difficult to define. She noted Kansas children are removed from the home at twice the national average. She listed ancillary factors that impinge on service to neglected children: juvenile offenders in the child welfare system are draining resources that could be used elsewhere, emotionally disturbed children require special treatment, and domestic abuse of a spouse affects children negatively. She recommended DCF develop clear policy definitions for NAN and align assignment and removal reasons.

Ms. Booe's previously offered written testimony also addressed these recommendations.

### *Recommendation B3: Immediate Response*

Ms. Wallace introduced recommendation B3, regarding immediate response 24/7 to hotline calls and dedicated immediate response investigators available for dispatch when warranted (Working Groups Report, p. 36-37). She stated the current protection response line is not effective; the hotline requires 24/7 monitoring with the capacity to respond appropriately.

Brian Dempsey, Special Counsel to the Secretary for Children and Families, stated the Kansas Protection Reporting Center does well in responding to calls, but is not always available. The agency has 450 law enforcement contacts statewide, which provide backup when DCF is not available. He expressed concern about the waiting time in the calling queue and agreed expanding the hours of availability would better serve children and families. Secretary Meier-Hummel stated the evidence-based structured decision-making tool is on schedule to be implemented.

Ms. Ross reported on the response policies of the Missouri Task Force on Children's Justice; she related follow up on incidents includes both an internal review and, for critical cases, an external review. She recommended a similar follow up for Kansas. Regarding the hotline, she said law enforcement officers are not trained to deal with child abuse cases. She recommended Kansas institute a 24/7 hotline using skilled staff trained in evidence-based risk assessment. She added

thoroughly trained investigators are also critical to assure child safety.

Ms. Heiligenstein addressed the hotline issue by outlining the principles for hiring, training, and retaining hotline intake screeners. She noted the importance of hotline calls by citing statistics to show hotline calls dealing with a child younger than three are predictive of death for that child. She expressed concern for a long wait time in a queue (recommendation of no more than three minutes) and stressed the importance of highly trained intake workers, preferably case workers, to handle hotline calls. Responding to a question, she replied that a triage system is crucial for handling intake calls and an electronic distribution system is needed for timely response. Responding to another question, Secretary Meier-Hummel replied the hotline is answered 24/7, but staff are not always available for an immediate response.

### *Recommendation B5: Front-End Staffing*

Ms. Wallace introduced recommendation B5, regarding the need for highly skilled and experienced front-end child welfare staff (Working Groups Report, p. 39-40).

Ms. Ross said, referencing her previous testimony, for effective service delivery, it is imperative to have experienced, well-trained, and adequately compensated staff.

Ms. Heiligenstein recommended using appropriate tools for triage and other decision-making procedures so staff are freed up for more face-time with clients.

### ***DCF Responses to Working Group A and Working Group B Recommendations***

Secretary Meier-Hummel reviewed the 2018 client services for DCF. She responded to the working groups' recommendations and provided a Protection and Prevention Services Contract Outcomes report. She stated many issues are being addressed or are in process. She noted the starting salary for social workers (\$38,000) has limited recruitment; there are not enough social workers to do what needs to be done. However, DCF is reducing vacancies and focusing on making the agency a more friendly place to work. Secretary Meier-Hummel said an updated information

system is an urgent need. Regarding the Child Advocate recommendation (A4), she stated, although she wants accountability, creating a new entity under the Department of Administration is unnecessarily duplicative; she noted the federal Inspector General's Office is available for DCF. She also noted the first ever federal Family First legislation will address prevention services. Regarding information sharing, she noted several initiatives across the state, and she has established a new position—Anti-Human Trafficking Coordinator—to interact with law enforcement. Responding to a question about long wait times on the hotline, she replied wait time in the queue has been reduced.

### **September 28, 2018, Meeting**

The Chairperson announced Dr. Bass would be substituting for Lindsey Stephenson as the representative for KVC Kansas at this meeting.

#### ***Working Group Updates***

Ms Shah provided working group updates. Working Group A plans to meet once the child welfare compliance unit audit report is available to review the audit report and the 2018 Annie E. Casey Foundation Front End Assessment.

Working Group B met in September 2018 to discuss recommendation B6, regarding non-abuse neglect, and possible effects of 2016 SB 367, a juvenile justice reform bill, on the child welfare system. The working group created an additional supporting strategy, B6.7, to address these issues, which has been added to its portion of the Working Groups Report.

Ms. Shah stated the complete Working Groups Report, with the addition of the new Working Group B supporting strategy and Working Group C's recommendations and associated materials, is now available on the DCF website's Child Welfare System Task Force page. (The complete Working Groups Report is attached to this report as Appendix A.)

#### ***Presentation of Working Group C Report and Recommendations***

Alicia Johnson-Turner, chairperson of Working Group C (Reintegration and Permanency

Placement), thanked Ms. Shah and the working group members for their work on the report and recommendations to be presented.

#### ***Recommendation C5: Reintegration Support***

Tim Gay, founder and Executive Director of Youthrive and a member of Working Group C, presented an overview of Goal 9: Increase Reunification Rates and Improve Times to Reintegration, and recommendation C5, regarding reintegration support (Working Groups Report, p. 66-69). He noted the working group heard testimony on this topic from individuals who stated reintegration did not always seem to be prioritized even though it was the stated goal. There was also testimony regarding logistical challenges and lack of support or communication, as well as foster parents not always being aligned with the goal of reunification. He also reviewed the state spotlights and supporting strategies identified by the working group for this recommendation.

#### ***Recommendations C6: Case Plans and C7: Physical Access***

Mr. Gay next presented recommendation C6, regarding case plans, and its supporting strategies and state spotlight (Working Groups Report, p. 69-70). In response to a question, Mr. Gay stated the working group had not specifically reviewed the case planning form, but in his personal experience, the form was rarely looked at. In response to a question regarding the state spotlight, the Signs of Safety program, Dr. Bass stated KVC Kansas had used the program in the past but switched to a similar evidence-based approach called Safe and Connected. DCF uses a similar program from Casey Family Programs.

Mr. Gay presented recommendation C7, regarding physical access, and reviewed the supporting strategies and state spotlight for this recommendation (Working Groups Report, p. 70-71).

#### ***Recommendation C2: Service Setting***

Ms. Ross, member of Working Group C, presented an overview of Goal 8: Expand the Level of Access to Child Welfare Services to Support Reintegration and Permanency, and

recommendation C2, regarding service setting (Working Groups Report, p. 62-63). Ms. Ross summarized the working group's discussion regarding barriers that exist in the community, including transportation adequacy, access to in-home therapy, lack of available foster home placements, sibling separation, and reimbursement for services. She reviewed the supporting strategies and state spotlight for this recommendation.

Zachary Lawrence, Assistant Director of Special Education for USD 353 (Wellington), provided testimony via Internet video conferencing and telephone, describing his experiences as a child removed at a young age and as a Kansas educator with 15 years experience working with students with disabilities, high levels of need, and challenging or uncertain home lives. For the issues he identified from his experiences, Mr. Lawrence proposed the following solutions: 1) DCF contractors need to greatly increase stable interim placement options for youth in the State's custody awaiting placement; 2) contractors need to work to ensure that children are placed in a stable educational program while awaiting placement; 3) DCF and contractors should investigate alternative educational programs, such as virtual schools and specialized community-based programs, that allow students to maintain flexible yet consistent educational placement; and 4) DCF and contractors should consider partnering with other community agencies to provide space and staff for educational programs designed to meet the unique needs of children in foster care without an adequate and stable placement.

#### *Recommendations C3: Early Intervention and C4: Court Appointed Special Advocates*

Ms. Ross presented recommendation C3, regarding early intervention (Working Groups Report, p. 64-65), and C4, regarding Court Appointed Special Advocates (CASAs) (Working Groups Report, p. 65), as well as a summary of the testimony heard by the working group and the working group discussion regarding these topics. She reviewed the working group's supporting strategies and state spotlight for the early intervention topic. Mary Tye, foster parent organization representative and Task Force member, noted the high importance of early

intervention programs and the difference therapists can make through these programs.

#### *Recommendation C11: Adoption Process*

Ms. Ross presented an overview of Goal 10: Increase the Rate of and Support for Adoptions to Improve Time to Permanency, and recommendation C11, regarding the adoption process, and summarized the testimony and discussion that occurred in the working group regarding this recommendation (*Working Groups Report*, p. 76-78). She also reviewed the supporting strategies and state spotlight.

Secretary Meier-Hummel stated under her administration, DCF has reviewed the adoption process internally and identified a number of issues. DCF eliminated or revised policies and practices that were causing some of these issues.

Representative Gallagher noted Representative Alford had also suggested an industrial or process engineer be obtained to review the entire child welfare system.

Vernon Helverson, a Kansas foster and adoptive parent, testified to the Task Force regarding his family's experience in the foster system and the adoption process. He identified several issues encountered by his family during the adoption process, including:

- Foster case management agency requirements that any adoption services be provided through that agency;
- Delays caused by numerous form changes and administrative lapses in process completion by DCF and the case management agency; and
- Case management agency and DCF claiming not to be interested parties in the adoption and thus not obligated to provide counsel for the adoption process.

Mr. Helverson recommended the structure for paperwork and case management stay consistent during an adoption case to avoid time lost due to form changes in the middle of the process. He noted the frustrations arising from poor case

management led his family to stop working in the foster system.

### *Recommendation C12: Modifications to Code for Care of Children*

Ms. Ross presented recommendation C12, regarding modifications to the CINC Code, and reviewed the supporting strategies and state spotlight identified by the working group for this recommendation (Working Groups Report, p. 79-80). She noted testimony received by the working group from attorneys regarding changes to the CINC Code to address issues regarding adoptive placements for children in state custody.

### *Recommendation C13: Post-Adoptive Support*

Ms. Ross presented recommendation C13, regarding post-adoptive support, and reviewed the data, supporting strategies, and state spotlight identified by the working group for this recommendation (Working Groups Report, p. 81-83).

Gail Cozadd, Director for Children and Family Services at the Kansas Children's Service League (KCSL) and Task Force member, provided testimony to the Task Force regarding the components of a model post-adoption service program and the current preventative supports Kansas Children's Service League provides for adoptive families through the Kansas Post Adoption Resource Center (K-PARC). These supports include peer-to-peer support, resource and referral, and ongoing training and education. Ms. Cozadd identified three opportunities for improvement in this area: therapeutic counseling, respite care, and crisis intervention and case management.

### *Recommendations C8: Foster Homes and C9: Maximizing Federal Funding*

Mr. Gay presented recommendation C8, regarding foster home recruitment and retention, and reviewed the supporting strategies and state spotlight for this recommendation (Working Groups Report, p. 72-73).

Secretary Meier-Hummel stated foster home recruitment and retention is an issue DCF has heard much about. Through the new placement

matching system, DCF will be drastically changing reimbursement rates and the support available through child placing agencies.

In response to a question concerning supporting strategy C8.5, regarding reimbursement to foster parents following behavior stabilization, Ms. Johnson-Turner stated when children come back into the home after behavior issues, their foster families need increased reimbursement due to critical issues and needs during the first few weeks following the child's return. Secretary Meier-Hummel noted the State will set all rates under the new grants and contracts, with options to increase based upon the needs of the child.

Mr. Gay presented recommendation C9, regarding maximizing federal funding, and reviewed the supporting strategies for this recommendation (Working Groups Report, p. 74).

### *Recommendation C10: Resources and Accountability*

Mr. Gay presented recommendation C10, regarding resources and accountability, and reviewed the supporting strategies for this recommendation (Working Groups Report, p. 75).

Ms. Booe provided testimony to the Task Force regarding Kansas' public/private partnership in the child welfare system. She noted such partnerships work and Kansas' partnership over the past two decades has achieved outcomes that surpass many federal standards for a quality program. However, the partnership also faces challenges and success requires identifying the best intersections for using the public/private partnership strategy. She encouraged the Task Force and the Secretary for Children and Families to assess, identify, and strengthen the most successful intersections for such partnerships in the child welfare system while retaining the case management and decision-making functions for foster care and adoption within the statutorily mandated realm of government-delivered services.

In response to a question regarding whether there were any steps in the privatization process to make the system work better, Ms. Booe stated she believed the decisions made at the time were well-intentioned and based upon the information available at the time, including the necessity of

responding to the lawsuit. Some of the assumptions made in implementing the system, such as expected re-investment in community-based services and employee transfer from the public to the private sector, did not occur as anticipated, leading to some of the issues that were later encountered.

### *Recommendation C1: Foster Care Re-Entry and Transitional Services*

Mr. Gay presented an overview of Goal 7: Improve Child Well-Being and Outcomes for Youth Aging Out of Care, and recommendation C1, regarding foster care re-entry and transitional services. He also summarized the testimony and discussion within the working group meetings on this topic, as well as the supporting strategies and state spotlights identified by the working group (Working Groups Report, p. 57-60).

In response to a question regarding relationships with community colleges, Secretary Meier-Hummel stated plans begin to be individualized at the age of 14, and DCF and the contractors will work with the children if they want to go to college. However, the majority want to leave the system at age 18. DCF and the contractors will help connect the older youth to job services and work programs. There are a number of funding streams at the state and federal levels for tuition assistance for foster youth. The Secretary and Ms. Lessor clarified, under statute, a child can be released immediately at the age of 18 if they so desire, although the courts generally try to keep children in the system until they graduate from high school.

Catriese Johnson, formerly in foster care, testified to the Task Force *via* telephone regarding her experiences in foster placement as a youth beginning at three days old. Based on her experiences, she noted a significant lack of access to and awareness of tools available to youth aging out of care under unsuccessful reunification circumstances. In response to a question regarding what the system could have provided to make the transition to adulthood easier, Ms. Johnson stated that key elements include:

- Sympathy and understanding for the different challenges and situations faced by each person;

- Different tiers of care needed for different situations and understanding how to access this care;
- Deficits caught earlier so they can be addressed;
- Vigilance to signs of abuse and the difficulty children face in speaking to abuse with parents present; and
- Awareness of the behavioral issues that come from displacement.

### ***KDADS Update***

Ms. Fout provided the Task Force with an update on PRTF issues, which include medical necessity, readmission, out-of-state children, wait lists, and treatment versus placement.

Ms. Fout stated KDADS and KDHE staff are completing audits on medical necessity determinations and denials for PRTFs by the MCOs. She discussed a pilot program that ended in April that was intended to add more intensive outpatient services by community mental health centers to children on the PRTF wait list. She noted the pilot program had not achieved the expected results, so KDADS is evaluating whether changes can be made to achieve the desired results. She reported a national study on PRTFs is underway that will include a data and trend analysis on PRTF bed utilization and waiting lists and a review of policies and procedures related to the admission and placement process. Ms. Fout also provided information regarding a system of care grant that will feature mobile response and stabilization services.

In response to questions from the Task Force, Ms. Fout stated the clinical team conducting the PRTF audit are all registered nurses with PRTF experience and the issues around increasing PRTF beds are not limited to the physical space, but also include staffing issues.

## ***DCF Update and Response to Recommendations***

Secretary Meier-Hummel provided the Task Force with a set of written responses to Working Group C's recommendations, as well as a set of written responses to all working group recommendations and supporting strategies. She noted there were a number of changes DCF was already implementing related to various recommendations, and DCF was in the process of assessing the fiscal impact of the recommendations to provide to the Task Force and the Legislature. She also reviewed a document containing her priorities related to the recommendations: 1) comprehensive child welfare system information; 2) Family First Prevention Services Act; and 3) funding for additional child welfare staff.

The Secretary then turned to her DCF update, beginning with an explanation regarding a May incident in a KVC Kansas office that had recently become public due to the September arrest and charging of the alleged perpetrator. She stated, because the alleged perpetrator was still in DCF custody at the time of the incident and for some time following, current law prohibited DCF from revealing information until the incident became public through other means. She noted current law does allow for such information to be shared with a limited number of legislative committees in a closed setting and suggested these provisions could be modified or expanded if the Legislature desires additional disclosure.

The Secretary also noted the availability of the Annie E. Casey Foundation Front End Assessment and the changes DCF is implementing to address concerns in the assessment.

In response to questions, the Secretary stated the Governor's staff was informed about the KVC Kansas incident as soon as the Secretary was informed. DCF and contractors are still working to address the issue of one-night placements. Chad Anderson, president of KVC Kansas, provided details regarding how the need for one-night placements and overnight office stays had arisen and become a systemic issue, and the efforts DCF and the contractors are making to address it. The Secretary reported the process for the new grants and contracts had moved to the contract

negotiation and financial conversation stage. She discussed some of the changes that will be made with the new grants and contracts. DCF will own the new placement matching system and the contractors will have access to it. Dan Lewien, Chief Financial Officer, DCF, and director of the Office of Financial Management, responded to questions regarding the financial structure of the new grants and contracts. He explained the grant structure is intended to bring the system into compliance with federal requirements.

The Chairperson announced copies of the Annie E. Casey Foundation Front End Assessment and the DCF response to the assessment would be distributed to the Task Force.

## ***Discussion and Prioritization of Task Force Recommendations: Framework and Initial Discussion***

The Chairperson recognized Ms. Heiligenstein to facilitate a preliminary discussion of Task Force recommendations. After reviewing some questions for the Task Force to keep in mind during its consideration (including the vision for the system, available resources, and action required to implement recommendations), Ms. Heiligenstein walked the Task Force through a summary of the working group recommendations and requested an initial consensus from the Task Force for each recommendation regarding whether it could be accepted as presented or might need further discussion and changes. The recommendations initially categorized as "accept" included:

- A1, workforce;
- A2, data infrastructure;
- B1, Families First Act;
- B3, immediate response;
- B5, front-end staffing;
- C1, foster care re-entry and transitional services;
- C2, service setting;

- C5, reintegration support;
- C6, case plans;
- C8, foster homes;
- C9, maximizing federal funding; and
- C13, post-adoptive support.
- B2, information sharing (may depend on implementation of new system, may need additional definitions);
- B6, non-abuse neglect (possible referral to Judicial Council, may need definition of “non-abuse neglect”);
- C11, adoption process (may not want to specify process engineer); and

The recommendations initially categorized as “accept with possible modifications” included:

- A3, access to care (remove MCO language and check Mental Health Task Force report for related language);
- A5, analysis of service delivery (remove or re-prioritize privatization evaluation);
- B4, serious injury review (consider state and federal confidentiality laws);
- B7, safety net (add early childhood programs);
- C3, early intervention (add to safety net recommendation and check Mental Health Task Force report for related language);
- C4, Court Appointed Special Advocates (consider alternatives to “shall” in this and other recommendations); and
- C7, physical access (consider adjusting language to “may” or “consider” due to parental responsibilities in reintegration).

The recommendations initially categorized as “pending or revisit” included:

- A4, child advocate (check status of related Judicial Council study);
- A6, outcome measures (may depend on child advocate recommendation);

- C12, modifications to CINC Code (possible referral to Judicial Council).

### **October 22, 2018, Meeting**

The Chairperson announced Dr. Bass would be substituting for Lindsey Stephenson as the representative of KVC Kansas for this meeting.

#### ***PRTF Update***

Sandra Hashman, Executive Director of Behavioral Health, UnitedHealthcare (UHC), provided the Task Force with data regarding UHC’s PRTF admissions, discharges, and average length of stay. She also provided information regarding UHC’s PRTF utilization management and waiting list and care coordination. As of October 15, 2018, there were 44 youth on UHC’s waiting list, including 7 children in foster care. Ms. Hashman described a pilot program with KVC Kansas, which is providing additional evidence-based therapeutic services, family and peer support models, and high-risk youth incentive payments to address difficulties in finding appropriate foster families for youth upon discharge from PRTFs or acute psychiatric hospitals. UHC also is using intensive outpatient services to divert children from the PRTF waiting lists, when possible.

Stephanie Rasmussen, Vice President of Long Term Care, Sunflower Health Plan (Sunflower), provided the Task Force with data regarding Sunflower’s members in a PRTF, PRTF waiting list, and average length of stay. She noted a billing exception for KVC Wheatland and other billing practices caused Sunflower’s overall average-length-of-stay numbers to look significantly shorter than the other MCOs, but when the billing

practices are accounted for, the numbers appear comparable.

In response to questions from the Task Force regarding the one-to-two month waiting list, Ms. Rasmussen stated Sunflower works with KidsTLC to provide intensive outpatient services. Sunflower also has a dedicated foster care team to provide outreach and resources across the state to try to provide community resources, as well as utilization management and discharge planning. Ms. Rasmussen stated the challenge in opening additional PRTF beds was not the additional beds themselves, but a struggle to hire caretakers, which has been a challenge across the continuum of care and not just with PRTFs.

Mark Sigmon, KidsTLC, provided additional information regarding the staffing difficulties. He stated salary levels affect the staffing difficulties, but they also arise due to the state of the economy and the acuity levels of the children being served. He noted his agency was out of space to add additional beds, but he believes other approaches should be attempted before additional PRTF beds are created.

Ms. Fout noted KDADS had provided requested information to the Task Force between the September and October 2018 meetings and had contracted with an outside entity, the Kansas Foundation for Medical Care (KFMC), to complete the PRTF audit.

### ***DCF Update***

Secretary Meier-Hummel provided the Task Force with a DCF update, including:

- Monthly data regarding children in one-night placements since April 2018;
- Steps taken to end the practice of children sleeping overnight in contractor offices;
- Data regarding the decrease in the child protection specialist vacancy rate over the past six months;
- Latest number of runaway youth (63 as of August 31, 2018) and youth in out-of-home care (7,530 in September 2018);

- Adoption finalization numbers since July 2017; and
- Updates regarding establishment of juvenile crisis intervention centers and the implementation of the new child welfare grants.

The Secretary also noted a number of attachments she and DCF had provided, including:

- An overview of the upcoming child welfare grants and contracts;
- A document detailing DCF opposition to certain recommendations and supporting strategies contained in the Working Groups Report;
- A document detailing DCF's concerns with mandatory language contained in the recommendations and supporting strategies contained in the Working Groups Report, with suggested remedied language; and
- A document containing DCF's complete responses to the recommendations and supporting strategies contained in the Working Groups Report, as well as information regarding the project fiscal impact, where applicable.

In response to a question regarding the status of the child welfare compliance unit audit report, the Secretary stated the report is currently with the contractors for their response and will be available to the public once the response period has ended.

In response to a question regarding whether the awarding of the new child welfare grants was done through a blind process, the Secretary stated this was the intent, although in the proposals, identities became clear due to the history of service.

### ***Discussion of Task Force Recommendations***

The Chairperson reviewed some "big picture" considerations for the Task Force in preparing its



final report and recommendations, including the intended audience, the communication plan for the report, and the focus of the report and high-priority recommendations. She noted that policy-oriented recommendation language would need to be finalized in time for staff to prepare a draft report for final approval at the December 4, 2018, meeting. The report will be prepared based upon the usual template for legislative interim committee reports. If the Task Force wants to include a narrative policy statement, it will need to give substantial guidance regarding the phrasing to staff. The tentative plan will be to include the Working Groups Report as an appendix to the Task Force report and to incorporate supporting strategies by reference, as much as possible, to avoid duplication. The Chairperson thanked Ms. Heiligenstein for her assistance in the process and recognized Ms. Heiligenstein to continue facilitating the Task Force's discussion.

Ms. Heiligenstein reviewed a grid she had prepared summarizing the Task Force's initial recommendation discussion at the September 28, 2018, meeting and suggested the Task Force consider working toward three prioritized tiers of recommendations. She noted the feedback DCF had provided regarding the working group recommendations and urged the Task Force to keep in mind which recommendations can be accomplished through agency policy, which can be accomplished through practice and procedure, and which will require statute or other legislative action to accomplish. She noted appropriations will also be a factor, but probably a factor that does not fall within the focus of the Task Force.

Ms. Heiligenstein reviewed the recommendations initially categorized as "accept" and asked if there were any further changes desired to those items. No changes were identified.

Ms. Heiligenstein next turned the Task Force's attention to further discussion regarding the recommendations initially categorized as "accept with possible modifications" (the result of the Task Force's discussion is noted with each recommendation):

- A3, access to care—accept proposed edits;

- A5, analysis of service delivery—possibly add date further out for privatization evaluation, to allow new contracts and changes to operate first; add language regarding outcome measures modified from A6 and require semi-annual reporting;
- B4, serious injury review—add language regarding state and federal confidentiality laws;
- B7, safety net—accept proposed edit and reference Mental Health Task Force recommendations;
- C3, early intervention—add to recommendation B7;
- C4, Court Appointed Special Advocates—due to concerns regarding potential reduction of funding, leave language as is and add language regarding not disrupting existing funding stream; and
- C7, physical access—due to similar concerns as previous recommendation, leave language as is.

The Task Force turned its attention to those recommendations initially categorized as "pending or revisit":

- A4, child advocate—Judicial Council study is complete but its report is pending; reword recommendation to include "Legislature evaluate the need for" and hold for further consideration in December;
- A6, outcome measures—language modified and incorporated into A5, analysis of service delivery;
- B2, information sharing—add language regarding state and federal confidentiality laws;

- B6, non-abuse neglect—reference Mental Health Task Force recommendations;
- C11, adoption process—replace with language from supporting strategy regarding diligent search for possible relative placements, beginning immediately upon removal, rather than require 80 relatives identified within a month; have DCF establish an outcome and targets and maintain data to help evaluate and adjust appropriate benchmarks; and
- C12, modifications to CINC Code—recommend Legislature request Judicial Council study the topic.

Ms. Heiligenstein turned the Task Force’s attention to prioritization of recommendations. Following discussion, the Task Force consensus was to include the recommendations regarding workforce, data infrastructure, the Families First Act, and access to care in the top tier. Any other recommendations adopted from those identified by the working groups as high priority would be placed into the second tier, with the remaining recommendations making up the third tier.

The Chairperson announced staff would attempt to provide a draft report with recommendations based upon the Task Force’s discussion in advance of the December 4 meeting so members could review and come prepared to finalize the recommendations. An assistant revisor cautioned Task Force members to avoid any discussions of the draft report before the December 4 meeting to stay clear of potential Kansas Open Meetings Act violations.

The Chairperson requested staff replace “shall” with “should” throughout the draft report, except for specific recommendations as noted, for the Task Force to consider in adopting the recommendations.

### December 4 Meeting

[This meeting summary will be added following the meeting.]

## CONCLUSIONS AND RECOMMENDATIONS

Working from the recommendations made by the working groups, the Task Force discussed, modified, and in some cases combined recommendations before finalizing 24 recommendations to adopt. The recommendations are listed below, along with references to the working group recommendation(s) from which each recommendation was drawn.

The Task Force organized its recommendations by priority into three tiers. (*Note:* The numbering of individual recommendations is for ease of reference only and does not reflect priority order.)

More information regarding the references to the report of the Mental Health Task Force may be found in the crosswalk attached to this report as Appendix B. The Task Force urges consideration of the recommendations of the Mental Health Task Force identified in the crosswalk.

Supporting strategies provided by the working groups for each recommendation are not repeated in this report, but the Task Force urges consideration of which supporting strategies may be appropriate to use in implementing its recommendations.

### Tier One Recommendations

The Task Force adopted the following four recommendations as its highest priority recommendations:

1. *Workforce.* The State of Kansas should invest in the child welfare system workforce by increasing funding for recruitment, retention, and support to effectively attract and retain high-quality staff [Working Group (WG) Rec. A1];
2. *Data Infrastructure.* The State of Kansas should create a single, cross-system, web-based, integrated case management and data reporting system that can be used by the Kansas Department for Children and Families (DCF) and all relevant agencies and stakeholders to efficiently and effectively share information (*e.g.*,

- education, dental, medical, behavioral, etc.) [WG Rec. A2];
3. *Families First Act.* The State of Kansas should fund and institute the Families First Prevention Services Act in Kansas and follow the federal guidelines [WG Rec. B1]; and
  4. *Access to Care.* The State of Kansas should require access to high-quality and consistent medical and behavioral health care for high-risk youth through the Medicaid state plan and other appropriate sources of funding [WG Rec. A3].
  8. *Foster Homes.* The State of Kansas should invest in foster home recruitment and retention by increasing funding for supplemental training and providing additional financial incentives that support older youth, high-needs children, and birth families, as well as modifying licensing requirements [WG Rec. C8];
  9. *Analysis of Service Delivery.* The State of Kansas should establish a work group or task force to conduct an analysis to: 1) determine what it costs to adequately fund high-quality child welfare services; 2) by 2021, evaluate the benefits of privatizing child welfare services; and 3) determine the best public/private collaboration to deliver child welfare services. DCF shall determine appropriate outcome measures and periodic evaluations shall be conducted to ensure contractors are achieving set outcomes and provide opportunities for ongoing collaboration and review. Summary reports should be provided to the Legislature semi-annually [WG Recs. A5 and A6];

### Tier Two Recommendations

The Task Force adopted the following nine recommendations as high-priority recommendations:

5. *Foster Care Re-entry and Transitional Services.* The State of Kansas should provide young adults age 18-21 with the option to seamlessly re-enter the child welfare system, and ensure continuity in medical, behavioral health and support services for youth who have exited the custody of the Kansas Department for Children and Families [WG Rec. C1];
6. *Service Setting:* The State of Kansas should prioritize delivering services for children and youth in natural settings such as, but not limited to, homes, schools, and primary care offices in the child's community when possible. The needs of the child and family should be the most important factor when determining the settings where services are delivered [WG Rec. C2];
7. *Reintegration Support.* The State of Kansas should provide consistent, individualized, evidence-based support throughout reintegration for children in need of care and caregivers, including, but not limited to, parents and foster parents [WG Rec. C5];
10. *Safety Net, Early Childhood Programs, and Early Intervention.* The State of Kansas should fully fund, strengthen, and expand safety net and early childhood programs through public services (DCF, mental health, substance abuse, and education) and community-based partner programs, and reduce barriers for families needing to access government-funded, concrete supports. The State of Kansas should ensure availability and adequate access to early childhood behavioral health services statewide. The Task Force recommends consideration of related Mental Health Task Force recommendations 1.2 (Medicaid Expansion Models), 1.3 (Housing), 3.1 (Regional Model), and 6.4 (Early Intervention) [WG Recs. B7 and C3];
11. *Information Sharing.* The State of Kansas should establish a multi-disciplinary approach and share information across and among stakeholders, in accordance with federal and state laws regarding confidentiality [WG Rec. B2];

12. *Non-Abuse Neglect.* The State of Kansas should not remove children solely for non-abuse neglect (NAN), and it should provide differential responses for high-risk newborns and NAN reports and refer them to fully funded, evidence-based services. The Task Force recommends consideration of related Mental Health Task Force recommendations 6.1 (Expand Service Options), 4.2 (Regional Model), and 6.4 (Early Intervention) [WG Rec. B6]; and
13. *Adoption Process.* The State of Kansas should ensure that diligent search for relatives for possible placement begins immediately when a child is removed from the home. DCF should establish benchmarks for relative identification and shall monitor related outcomes, such as number of relatives identified within the first 30 days, number of children in relative placements and length of time for the child to reach that placement, and number of relatives contacted. DCF should regularly report on these benchmarks and outcomes to the Legislature [WG Rec. C11].
17. *Post-Adoptive Support.* The State of Kansas should ensure both federal and state subsidies to adoptive families and implement best practices for post-adoptive support services [WG Rec. C13];
18. *Maximizing Federal Funding.* The State of Kansas should conduct an audit of potential funding streams by program area, to ensure the State is maximizing federal benefit [WG Rec. C9];
19. *Resources and Accountability.* The State of Kansas and DCF should provide services that are in the best interest of children in their care by supporting a system that is accountable and resourced well enough to provide the needed services [WG Rec. C10];
20. *Serious Injury Review.* The State of Kansas, in accordance with federal and state confidentiality laws, should formalize a Serious Injury Review Team to establish and conduct a review process both internally and externally for an immediate and necessary response when a child dies or suffers serious bodily injury after having previous contacts with DCF Protection and Prevention Services concerning prior abuse and neglect [WG Rec. B4];

### **Tier Three Recommendations**

The Task Force adopted the following 11 recommendations as important recommendations:

14. *Immediate Response.* The State of Kansas should provide immediate response 24/7 to hotline calls and dedicated immediate response investigators to be dispatched, when warranted [WG Rec. B3];
15. *Front-End Staffing.* DCF should employ only highly skilled and experienced front-end child welfare staff [WG Rec. B5];
16. *Case Plans.* The State of Kansas should restructure the case plan process to improve coordination of services among all stakeholders to strengthen collaboration in the case and provide reimbursement to required participants [WG Rec. C6];
21. *Court Appointed Special Advocates.* The Legislature shall fund Court Appointed Special Advocates (CASAs) to ensure the availability of CASA volunteers in all jurisdictions, without disrupting the current funding CASAs receive from the State of Kansas [WG Rec. C4];
22. *Physical Access.* The Legislature should fund increased physical access between children in need of care and their families, as well as ensure that families are supported in accessing services as required by the case plan [WG Rec. C7];
23. *Child Advocate.* The Legislature should evaluate the need for the establishment of an Office of the Child Advocate for Children's Protection and Services within

the Kansas Department of Administration to identify challenges across the child welfare system, provide oversight, and propose solutions [WG Rec. A4]; and

24. *Modifications to Code for Care of Children.* The Legislature should request the Judicial Council study modifications to the Kansas Revised Code for Care of Children to meet the child's ongoing best interests for permanency [WG Rec. C12].

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