House Children and Seniors Committee

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Updates on Family First Services and Foster Care Changes

Presented by:

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Testimony of:
Laura Howard
Secretary
Kansas Department for Children and Families

Chair Concannon, Vice-Chair Humphries, and Ranking Member Ousley, thank you for allowing me the opportunity to address the committee. I’m excited to share with you the work being undertaken at DCF to enhance Kansas’ child welfare system to better serve our children and families.

Family First

The Family First Prevention Services Act (FFPSA) provides new federal funding for prevention activities. Thanks in part to this committee’s approval of House Bill 2103 last session, Kansas has been able to take full advantage of the dollar for dollar federal match to provide prevention services to families across the state.

The state’s FY 2020 approved budget included $6.5 Million State General Funds for Family First Prevention Services Act (FFPSA) programs. FFPSA programs are designed to prevent the need for foster care and funding is available only for children at imminent risk of placement in foster care.

Family First money must be expended for evidence-based programs approved by the federal Administration for Children and Families within the Department of Health and Humans Services. The ACF established a formal Title IV-E Clearinghouse to evaluate evidence-based programs and services and rate them as either promising, supported, or well-supported. Current instruction to states is that 50% of FFPSA program expenditures must be for programs rated as well-supported.

Kansas was one of the first states in the nation to implement Family First services. As required by the Family First Prevention Services Act, the Five-Year Title IV-E Prevention Plan was initially submitted to the Department of Health and Human Services (HHS) on September 30th, 2019. Kansas is in conversations with HHS and is awaiting approval on that plan.

DCF implemented the foster care prevention opportunities set forth in FFPSA on October 1, 2019, by awarding grants for specific evidence-based programs in substance use, mental health, parent skill building and kinship navigation. DCF received 55 distinct proposals and awarded 17 grants. The grants term awarded is October 1, 2019, through June 30, 2020, with an option for up to four (4) one-year renewals.
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<thead>
<tr>
<th>Service Category</th>
<th>Grantee (Counties Served)</th>
<th>Program</th>
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<tbody>
<tr>
<td>Substance Use Disorder</td>
<td>DCCCCA (CR)</td>
<td>Adolescent-Community Reinforcement Approach</td>
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<tr>
<td>Substance Use Disorder</td>
<td>Kansas Children’s Service League (SN)</td>
<td>Parent-Child Assistance Program</td>
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<tr>
<td>Substance Use Disorder</td>
<td>Saint Francis Ministries (FI, SG, SW, TH, SA, BT)</td>
<td>Seeking Safety</td>
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<tr>
<td>Mental Health Services</td>
<td>Community Solutions, Inc. (AL, AT, BT, BU, CL, CR, EW, HV, LB, LV, MG, MP, NO, RN, SA, SG, SN, WY)</td>
<td>Multisystemic therapy</td>
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<td>Mental Health Services</td>
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<td>Mental Health Services</td>
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<tr>
<td>Mental Health Services</td>
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<td>Mental Health Services</td>
<td>TFI (AL, AN, BB, BU, CQ, CK, CF, CR, EK, FI, FR, GW, LB, LN, MI, MG, NO, OS, RL, SN, WL, WO)</td>
<td>Parent Child Interaction Therapy</td>
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<td>Kinship Navigation</td>
<td>KS Legal Services (statewide)</td>
<td>KIN-Tech</td>
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<td>Parent Skill Building</td>
<td>Child Advocacy and Parenting Services (OT, SA)</td>
<td>Family Mentoring</td>
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<td>Parent Skill Building</td>
<td>FosterAdopt Connect Inc. (JO, WY)</td>
<td>Fostering Prevention</td>
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<td>Parent Skill Building</td>
<td>Great Circle (AN, AT, BR, CF, CQ, DG, DP, FR, JA, LN, MS, NM, OS, PT, WB, WO)</td>
<td>Health Families America</td>
</tr>
<tr>
<td>Parent Skill Building</td>
<td>Kansas Children’s Service League (AL, NO, SG, WL)</td>
<td>Healthy Families America</td>
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<tr>
<td>Parent Skill Building</td>
<td>Kansas Parents as Teachers Association (statewide)</td>
<td>Parents as Teachers</td>
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<tr>
<td>Parent Skill Building</td>
<td>Success by 6 Coalition of Douglas County (DG)</td>
<td>Healthy Families America</td>
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<tr>
<td>Parent Skill Building</td>
<td>University of Kansas Medical Center Research Institute, Inc. (CN, DC, DG, EL, GH, GO, LG, LV, NT, OB, PL, RA, RO, RS, SD, SH, SM, TH, TR, WA, WY)</td>
<td>Project Eagle</td>
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DCF also awarded the FFPSA grant evaluation to the University of Kansas Center for Research, Inc. The agency is required to engage in an evaluation of our Family First implementation and programs. In its role as Grant Evaluator, KU’s Center for Research will work with DCF prevention grantees to evaluate program data and information regarding outcomes in communities where the new programs are implemented.

Implementation efforts began immediately after grants were awarded. To start a conversation between the front-line practitioners and the grantees serving Kansas families, DCF hosted eight meet and greet events across the state during the months of October and November.

Additionally, grantees have been connecting with staff during unit meetings and identifying other avenues to continue to build relationships and educate the nuances of their evidence-based programs. Many grantees are already accepting referrals at limited capacity. Agencies continue to hire and train staff with the goal of providing all services at full capacity by Spring 2020.
In addition to allowing federal IV-E funding to be used for evidence-based prevention services, the Family First Act also created additional requirements for any placement of foster youth in congregate care facilities. According to the FFPSA, when children can’t reside with a relative or a family foster placement due to behavioral disorders or disturbances, their group or congregate care placement experience should meet the quality attributes of a Qualified Residential Treatment Facility (QRTP). Every QRTP must have a trauma-informed treatment model and 24-hour access to a licensed nursing staff, must involve the family in the child’s treatment program, and must provide discharge planning and family-based aftercare support. While QRTPs do not provide prevention services themselves, states must implement QRTP standards for congregate care placements for youth in state custody to draw down the prevention match funds.
Based on a QRTP Needs Assessment conducted last summer, it was estimated that a capacity of 120 QRTP beds would be needed to fully serve Kansas. There are currently 141 accredited QRTP beds across the state.

DCF has established a QRTP daily placement rate of $250 (plus Medicaid funds billed by the facility for eligible services provided) and a daily placement rate of $200 for facilities seeking QRTP status to cover costs associated with initiating an accreditation process. The funding for these placements will be covered in the consensus caseload process and will not come from the $13 million in FFPSA prevention program funding. DCF uses KDADS contractor HealthSource Integrated Solutions to complete the required QRTP screens.

On Friday, December 20, 2019, the President signed a year end spending package which included the Family First Transition Act (FFTA). The effective date of this law was October 1, 2019, when states began implementing prevention programs under Family First. The provisions of the Act include one-time transitional payments for states
implementing Family First and delaying for two years the 50% requirement for well-supported programs.

Kansas is now waiting for guidance on how any additional one-time transition funds will be released and details on what those funds may be used for. Early estimates indicate the allotment for Kansas may be $4.7 million.

Along with Family First, DCF has implemented a number of other changes in child welfare including new Family Preservation grants, new Foster Care Case Management grants, new practice models, and a special response team.

**Family Preservation**

Family Preservation, along with the Family First Prevention Services grants, adds additional options to build upon each family’s resiliency network.

In September, Kansas awarded Family Preservation contracts to three different child welfare agencies. DCCCA was awarded the counties in the DCF Kansas City and Wichita regions. Cornerstones of Care was awarded the counties in the DCF East region, and TFI Family Services in the DCF West region. Each of these agencies selected evidence-based models to provide families with trauma-informed services.

**Table 2: Family Preservation Grants**

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<th>Family Preservation</th>
<th>Evidence-Based Model</th>
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<tr>
<td>TFI Family Services</td>
<td>Tier 1 – Trauma Focused Cognitive Behavioral Therapy</td>
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<tr>
<td>TFI Family Services</td>
<td>Tier 2 – Alternatives for Families</td>
</tr>
<tr>
<td>Cornerstones of Care</td>
<td>Both tiers – Solutions-Based Casework</td>
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<tr>
<td>DCCCA</td>
<td>Tier 1 and Tier 2 – Family Centered Treatment</td>
</tr>
<tr>
<td>DCCCA</td>
<td>Tier 2 with Substance Use Concerns – Sobriety Treatment and Recovery Teams</td>
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Family Preservation is a voluntary service. Through the program, families develop a service plan designed to resolve their specific safety concerns using their resources and networks. Service providers work alongside families to help build on their strengths and reduce the risk of children being placed in foster care.
Family Preservation can assist in many areas, including: therapy needs, community resource connection, drug and alcohol treatment assessment, parent support, and concrete goods and services. Family Preservation services may also be offered to pregnant women using substances to help connect the family with treatment and prenatal services.

The new Family Preservation model is designed to more specifically meet an individual family's needs by providing two tiers of services for families to choose from. Tier 1 is a 4-6-week intensive program model. In Tier 1, services are provided by a master’s level clinician who meets with the family multiple times in a week.

Tier 2 is designed as a 3-6-month case management program model. Services are provided by a case manager and a family support worker.

Families choose the tier of services they believe will best meet their needs, with guidance from the referring DCF Prevention and Protection Services (PPS) practitioner. The Family Preservation agencies are educating PPS practitioners about the selected evidence-based practice ongoing.

The current Family Preservation grants are funded by a combination of state general funds, federal Title IV-E, IV-B and Temporary Assistance for Needy Families (TANF) funding, and the Kansas Children’s Cabinet and Trust Fund’s Children’s Initiative Fund. Kansas invests a total of $12 million per year into the Family Preservation program.
A report is made to Kansas Protection Report Center (KPRC). An intake protection specialist uses Structured Decision Making (SDM) to determine the assignment of the report.

Report is dispatched to DCF Regional Service Center if it meets all criteria of abuse/neglect or family in need of assistance (FINA).

The report is assigned to a Child Protection Specialist (CPS) to visit and assess family.

CPS and family work together to choose service track to prevent child from entering foster care.

**SERVICE TRACK**

**FAMILY SERVICES**
- Non-crisis, FINA
  - Concrete goods and services based on the needs of the family. DCF or contractor provides case management for family.

  Services alleviate specific situations and may be offered by DCF staff or through referrals to other community agencies. Services provided without regard to income and may be voluntary or court ordered.

**FAMILY FIRST PREVENTION SERVICES**
- Child is at risk of removal. Evidence-based services are unique to counties and can be selected to best suit a family's individual needs in mental health, substance use disorder, parent skill building and kinship navigator programs. DCF CPS must fill out a Prevention Plan and make referral to the Family First provider.

**FAMILY PRESERVATION**
- Child is at risk of removal. Services provided to protect child and strengthen family. 24/7 access to staff. Family Preservation providers perform case management for families. Available statewide.

Starting January 2020

- **Mental Health**
  - West Region - 4 providers
  - Wichita Region - 4 providers
  - East Region - 2 providers
  - Kansas City Region - 2 providers

- **Substance Use Disorder**
  - West Region - 1 provider
  - Wichita Region - 1 provider
  - East Region - 2 providers
  - Kansas City Region - X

- **Kinship Navigator**
  - West Region - 1 provider
  - Wichita Region - 1 provider
  - East Region - 1 provider
  - Kansas City Region - 1 provider

- **Parent Skill Building**
  - West Region - 4 providers
  - Wichita Region - 2 providers
  - East Region - 3 providers
  - Kansas City Region - 5 providers

- **Tier 1**
  - Intensive services provided by master's level practitioners to mitigate immediate child safety concerns and stabilize family crisis. Services up to 6 weeks. 1 additional referral may occur.

- **Tier 2**
  - Case Manager and Family Support Worker provide case management and will assess family.
  - A Tier 1 family may transition up to Tier 2. Services are 3-6 months.

Rev: 9-16-19
**Foster Care Case Management Grants**

On October 1, 2019, DCF transitioned to new foster care case management grants.

There are now four foster care case management grantees across the state: KVC Health Systems Inc., Saint Francis Ministries, TFI Family Services, and Cornerstones of Care.

**Map 3: Foster Care Case Management Grantee Service Area**

For the first time since privatization, case management work has been separated from the foster care placement work; DCF now has direct payment agreements with all of the child placing agencies (CPAs) in our state that serve foster children. The intention is to bring local providers to the table and recognize the unique work that takes place between case management and child placement. Many of these CPAs have decades of experience in Kansas child welfare and having the direct relationship is a way to both
give them more voice in improving the child welfare system and allow case management grantees to focus on working directly with families.

Carematch, the Kansas Placement Management (Matching) System, also was implemented on October 1 to identify and track foster care placements across the state. The system provides the ability to determine foster care openings that match with children based on their needs, location, school district as well as other attributes. It is a comprehensive software application, customized for Kansas, that allows agencies to manage the appropriate placement of children in foster care within the network of foster care providers, when relatives and/or kinship placements are not available or appropriate.

Another change implemented October 1 was the standardization of payments for foster care placements based on the level of care. Previously Case Management Providers negotiated rates with each placement provider individually, creating a wide range and variety of rates for the same level of service. During the rate-setting process, DCF determined that the rates should be standardized for each level of care for children in DCF custody. Additional rate levels were added for therapeutic and specialized foster homes to account for the increased needs of these placements.

The amounts paid to foster parents for each level of care is now the same across all sponsoring agencies. Relative placement rates were also standardized based on level of care. A standardized payment allows foster parents to choose a sponsoring agency based on the support provided without consideration of amount paid to foster parent. These new rates will be reviewed again in April 2020 after six months of financial information have been collected from each placement provider.

**Practice Model**

DCF’s service delivery is grounded in the strategies we employ. Strategies are supported by a practice model with principles and approaches linked to better outcomes, engagement, equity and inclusivity alongside families in communities. As such, DCF has been working to implement a new practice model to guide front line practitioners as they engage families and create lifetime support networks.

The principles and approaches supported through the Kansas Child Welfare Practice Model all have a common focus of engagement with the family from the start of the relationship. The three approaches of the model are depicted below and described in the following paragraphs:
Background

Kansas Department for Children and Families (DCF) strategies create a foundation of resiliency and prevention networks, timely exits to permanency, and health care and wellbeing coordination. Strategies are supported by a practice model with principles and approaches linked to better outcomes, engagement, equity and inclusivity alongside families in communities.

Principles and Approach

Family Finding
- Family and youth engagement
- Healing and Development
- Sustained Placement Stability
- Create Lifetime Networks

Team Decision Making™
- Facilitated meeting model
- Families alongside support network and DCF
- Inclusivity
- Decision transparency

Child Protection Framework
- Caregiver and safety network engagement in assessments
- KPRC Intake Structured Decision Making®
- Safety and Risk Structured Decision Making®
- Signs of Safety®
- Reliability, Equity
Family Finding: DCF, Grantees, CASA and Juvenile Srvs.
- Engagement and family meeting (model) when there is a barrier to stability or legal permanency for a child.
- Includes youth and family in tracing/search and planning.
- Statement of need, concerns & goals are co created.
- Creates lifetime networks for sustained stability.

Team Decision Making™: DCF Statewide in 2020
- Facilitated family meeting (model) before a child is moved to determine if a child needs to be separated from their parent(s)/primary caregiver due to the parent(s)/primary caregiver behavior threatening a child’s safety.
- Families invite their support network.
- Decision creates and results in strongest plan for safety.
- Now in CK, CR, JO, WY. South central counties Spring 2020

Signs of Safety® Southcentral implemented. Statewide in 2020
- Set of tools for response to assigned reports alleging Abuse, Neglect or Family In Need of Assessment.
- Alongside families and safety network create a balanced assessment of strengths and existing safety.
- Asks what are we worried about, what’s going well and what needs to happen?
- Children’s tools gain child and youth’s voice.
- Includes system of meaningful measures, supervisor coaching and QA.

Structured Decision Making®
- Tools for response to reports alleging abuse or neglect.
- Focused on a sequence of key decision points to be intentional about decisions.
- Structured scoring for Abuse and Neglect indices.
- Initial implementation in Kansas Protection Report Center and counties of CR, CK, JO and WY.
- Evaluation with Team Decision Making planned by National Council on Crime and Delinquency.
Family Finding- An engagement and family meeting (model) which includes youth and family in tracing and planning to address barriers to stability or legal permanency for a child. This approach supports healing and development, sustained placement stability and creates lifetime networks. Kansas is working with model author and developer Kevin Campbell to implement statewide with teams in organizations of juvenile justice, CASA, child welfare, child placing agency and residential providers, community mental health.

This past fall there were introductory sessions for a statewide audience and a 4-day bootcamp training on the model principles and tools for 100 participants with support from sponsor Aetna Better Health of Kansas. Those whose attended the bootcamp use tools to support or create youth placement stability and meaningful connections to prevent run behaviors, transition from group care or treatment programs to live with a relative or have stability of a network to prevent a child or young person from entering care.

Looking forward, Kansas’ next bootcamp is in February for 250 front line practitioner participants. Helping with full implementation are roughly 20 catalysts across agencies to bring the curriculum and approach into their organization and help train others. Catalysts are across section of partners - The Shelter in Lawrence, Shawnee County CASA, Juvenile Services, Kansas Family Advisory Network and others. At the request of a few communities, DCF is working to bring a discussion session to Kansas City in August to introduce family finding to the legal community. Future implementation across Kansas will involve more bootcamps for front line team members, coaching and technical assistance to agencies and opportunities to engage youth in their own bootcamps to support them creating lifetime networks and safety networks.

Team Decision Making- A facilitated family meeting held before a child/youth is moved to determine if a child needs to be separated from their parent(s) or primary caregiver. A meeting is held if a parent’s or primary caregiver’s behavior threatens a child’s safety. Families invite their support networks to the facilitated meeting and the team decision creates and results in the strongest safety plan for a child.

Team Decision Making was implemented in Cherokee, Crawford, Johnson, and Wyandotte Counties in November of 2019. This facilitated team decision approach will be statewide in DCF in 2020.


Signs of Safety provides a set of tools for DCF response to assigned reports alleging Abuse, Neglect or Family in Need of Assessment. The work alongside families and with safety networks create a balanced assessment of strengths and existing safety. This
practice includes system of meaningful measures, supervisor coaching and quality assurance.

Signs of Safety practice was implemented in twelve south central counties in December and statewide implementation will occur throughout 2020.

The second approach, Structured Decision-Making practice, focuses on a sequence of key decision points and includes structured scoring for Abuse and Neglect indices. Initial implementation was completed with the Kansas Protection Reporting Center and in Cherokee, Crawford, Johnson, and Wyandotte Counties.

**Special Response Team**

Another new initiative underway at DCF is the Special Response Team. The team, created in May of 2019, assists with locating and recovering children who have run away from foster care or are absent from placement without permission, develops strategies for preventing run behaviors, and engages in system improvement.

The response team specialists are comprised of DCF and foster care grantee staff. These dedicated positions are non-case carrying with members located across the state.

The response team collaborates with vital community partners such as local law enforcement, the Kansas Bureau of Investigation (KBI), the Federal Bureau of Investigation (FBI), the Kansas Sheriffs’ Association, Kansas Association of Chiefs of Police, and Kansas Peace Officers Association. Recovery efforts have focused on utilizing multiple social media strategies, open source intelligence, effective partnerships with the law enforcement community, and strong fact-finding skills.

Run prevention efforts have concentrated on building supportive relationships with the youth and assisting with the development of a network of lifetime connections. Team members focus on authentic youth engagement and forming supportive partnerships with the youth.

Building relationships with these youth provides team members the opportunity to identify and address the underlying reasons behind youth running. The team also provides the opportunity for shared accountability between the grantees and DCF in addressing this critical issue.

**Child Welfare Governance, Goals, and Success Factors**

The above paragraphs discuss specific initiatives but it’s important to put in context the entire child welfare system including its governance, goals, and success factors.
Child Welfare Overview

G O V E R N A N C E

Federal Guidance
State Law and Policy
Best Practice Standards

Child welfare begins in the...

COMMUNITY

...with primary prevention.

DCF PRIMARY FUNCTIONS

- Kansas Protection Report Center (KPRC) 1-800-922-5330
- Prevention Assessment and Investigation
- Prevention In-Home Supports
- Out-of-Home Placement

STRATEGIES FOR PROTECTING CHILDREN

Strong safety, resiliency and prevention networks

- Strong KPRC capacity
- Resources to prevent the need for foster care
- Evidence-based approaches for parent and relative engagement and work alongside crossover youth
- Increase timely permanency, placement stability and health care coordination for children in foster care

Child welfare efforts are made possible by our FOUNDATION.

Strong Workforce:
Recruit and develop child welfare workforce partnerships and practice implementation

Informed Decisions:
Outcomes-based, safety- and data-informed alongside families in communities

Evidence-Based Practice that Engages Families:
Mental Health, Substance Use, Parent Skill Building, Kinship Navigation
Our strategies for protecting children lead to our

GOALS AND SUCCESS FACTORS

- Timely and consistent report screening, safety assessment and planning alongside families
- Collaborate to implement evidence-based prevention and child welfare programs
- Support families, relatives and youth to navigate systems for access to meaningful resources
- Increase children placed with relatives
- Collaborate to remove barriers to legal permanency
- Amplify university partnership for practicums and increase recruiting and job advertisement media

FY19 SNAPSHOT

KPRC
- 73,407 child reports received (avg. 200 daily)
- Call sites include Kansas City, Topeka and Wichita

Child Protection Assessment & Investigation
- 325 frontline staff went out on 45,801 assigned reports
- 96% of reports have timely response with the family either the same day of report or within 72 hours

Prevention
- 2,689 families served in Family Preservation (FPS)
- 84% of those families’ children do not enter care

STATEWIDE CHILDREN IN CARE

Children in Care Over Time

Permanency Goal - November 30, 2019

Adoption, 29%
APPLA, 6%
Maintain in Family, 1%
Custodianship, 1%
Reunification, 64%
Not Yet Established, .01%

Placement Type - November 30, 2019

Relative, 34%
Group / Residential, 7%
Pre-Adoptive, 4%
Independent Living, 1%
Run Status, 1%
Family Foster Home, 54%
Maternity, 0.5%
On January 8, Governor Kelly announced that she will be submitting an Executive Reorganization Order to the 2020 Legislature creating the Kansas Department of Human Services on July 1, 2020. The new agency will include:

- The entirety of the existing Kansas Department of Aging and Disability Services (including oversight of the state hospitals);
- The entirety of the existing Kansas Department for Children and Families; and
- Juvenile services from the Kansas Department of Corrections (including oversight of the Kansas Juvenile Correctional Complex).

We look forward to providing full briefings after the formal Executive Reorganization Order has been submitted to the Legislature.

I have had a unique vantage point in overseeing two separate agencies – DCF and KDADS – over the last twelve months. Through this vantage point, I can see the benefits that a Department of Human Services brings to the citizens of Kansas and the individuals and families who look to the state for key services and supports.

The new agency provides the opportunity to support individuals and strengthen families through a stronger focus on:

- Prevention;
- Enhanced Access to Services; and
- Stronger Connections with our Communities and our Community Partners.

This reorganization means individuals and families have fewer systems to navigate to access the supports they need. This new agency provides us the opportunity to think differently about service delivery and to work more closely with communities to enhance access to services from economic supports to child welfare to mental health before the needs of an individual or family become a crisis.

With regard to juvenile services, juvenile justice reform has resulted in a reduced need for incarceration while at the same time enhancing county community corrections case management. Given the needs of families for inter-governmental and community collaboration, it makes sense to organize juvenile justice services and child welfare resources under one agency. One need only think about the focus on crossover youth and youth with high needs to recognize that a human services agency that comprises child welfare, juvenile justice, mental health and economic supports will provide a more seamless experience to children and their families who interact with multiple systems.

We are in the early stages in thinking about the organizational structure of a new agency, including how best to align programs and the related organizational supports to
meet the goals of prevention, enhanced service access and stronger community connections.

I would close by saying that my vision for the Kansas Department of Human Services is that it will strengthen families and support individuals by providing high-touch services that have a positive impact on the lives of Kansans.

Again, I thank you for the opportunity to appear and provide an update on the work being done at DCF. I am happy to answer any questions the committee may have.