

Child Welfare Oversight Panel Working Groups
December 3rd, 2016

Group #1 CHILD SAFETY

1. **Co-Chairs:** Greg Moore and Stacy Thompson
2. **Top issues related to CHILD SAFETY**
 1. Child fatalities
 - a. Use data, including from the new Child Death and Near Fatality Multi-disciplinary Review Committee, to prevent/reduce fatalities
 2. Timeliness and quality of child maltreatment investigations
 - a. Making initial contact with and assessing all children timely
 - b. Interviewing reporters and collateral sources
 - c. Sufficiently documenting all findings and closing investigations timely
 - d. Qualitative review needed to ensure accuracy, thoroughness of both CACD and DCFS investigations
 3. Frequency and quality of risk and safety assessments
 - a. Thorough formal assessments at onset of and throughout involvement with family
 - b. Ongoing informal assessments at every contact with children
 - i. Talking to children privately, outside presence of caregivers
 4. Prevention
 - a. The system needs to be more proactive in addressing problems within families before it rises to the level of maltreatment
 - i. More primary prevention services and supports can assist and strengthen families before they come to the attention of the child welfare system
 - b. The system needs to do a better job of strengthening families while children remain in the family home
 - i. Children should only be removed from their parents when their protection requires it
 - ii. Increased secondary prevention services (e.g., Intensive Family Services, in-home nursing, etc.) and supports are needed to protect children in their homes and prevent their entry into foster care once they're involved with the system
 5. Post-adoptive services
 - a. Increased services and supports are needed when families struggle or need assistance post-permanency
3. **Summary of DCFS action items related to CHILD SAFETY (re: Vincent Recommendation #8)**

Recommendation #8: Strengthen DCFS Practice in Assessing Safety and in Engagement

 - Review effectiveness of safety assessments

- Identify changes needed to increase effectiveness in current assessment process
- Enhance training and practice guides
- Develop method to assess quality of safety assessments
- Family engagement skills development
 - Enhance new worker curriculum
 - Develop practice guides to assist staff with engagement skills

4. Identify measureable outcomes indicating success in CHILD SAFETY

- Decrease in child fatalities
- Decrease in recurrence of maltreatment
- Increase in preventive services and supports
- Decrease in Hotline delays and incomplete reports
- Timely initiation of maltreatment investigations
- Timely completion of maltreatment investigations
- Timely, quality risk and safety assessments
- Increased, improved protection planning
- Frequent, substantive caseworker visitation in both in-home and foster care cases
- Increase in post-adoptive services and supports

5. Note other Groups, organizations, councils, task forces, commissions addressing CHILD SAFETY

- Multidisciplinary teams (MDTs)
- Child Advocacy Centers (CACs)
- Arkansas Commission on Child Abuse, Rape and Domestic Violence
- Arkansas Safe Babies Court Team
- *Attorney General's State Task Force for the Prevention of Human Trafficking*
- *Arkansas Infant and Child Death Review Program*
- *Child Death Review Teams (local)*
- Arkansas Legislative Task Force on Child Abuse Prevention
- Arkansas Building Effective Strategies for Trauma (ARBEST)
- Child Death and Near Fatality Multidisciplinary Review Committee
- Court Appointed Special Advocates (CASA)
- Arkansas Prevention Board

Group #2 – PERMANENCY/PLACEMENTS

1. Co-Chairs: Lauri Currier and Beki Dunigan

2. Top issues related to Permanency/Placements

1. Increase the number of available Relative/Fictive Kin caregivers by evaluating the process
2. Determining how the process can be expedited.
3. Reduce the length of the Medicaid approval process children returning home or to the care of relatives.
4. Reduce the length of time for the Foster/Adopt Family certification and re-evaluation processes to improve efficiency and effectiveness
5. Increase the retention of Foster and Adoptive families by increasing and improving training and ongoing support to reduce the number of disruptions
6. Increase the number of respite and emergency homes by strengthen policy and practice
7. Explore a stipend for Provisional Foster Homes and Fictive Kin
8. Decrease the length of time between children coming into care and reunification or permanency
9. Revise timelines of current training – consider allowing placement after completion of 5 weeks of training as "provisionally" licensed home, with specific timeline for remaining training.
 - a. If process is expedited, must build additional support for foster family/home (in-person, "warm line", Facebook group)
10. Identify specific ways to increase appropriateness of placements on the front end
 - a. Examples: ages of children in home, parenting styles, child needs, and dynamics of home. This can prevent moving children as much.

3. Summary of DCFS action items re: PERMANENCY (re: Vincent Recommendation #3)

Recommendation #3: Address the Placement Challenge

- Respite Home Recruitment
- Training and requirements to be a foster and/or adoptive family
 - Review current requirements and identify where changes can be made
 - Expedite/prioritize background checks for foster and adoptive applicants
 - Develop trauma and diagnostic specific training for foster parents
 - Develop a hybrid home study
 - To work with university partnerships and the call on scheduling of trainings
 - Strengthen agreements signed by foster parents to increase accountability
- Review and enhance ARCCC recruitment strategies
- Retention of current foster and adoptive parents
- Increase use of relative placements/guardianships
 - Expedite/prioritize background checks

- Review and streamline training requirements
- Identify barriers and system improvements
 - DCFS Advocacy Council, ALC, field staff and OCC
- Develop plan to increase use of relative placements
- Strengthen post adoptive services
- Monthly forum meetings to address foster recruitment and retention
- Review and address HZA adoption recommendations

4. Identify measurable outcomes indicating success in PERMANENCY/PLACEMENTS

- Number of youth placed in home county
- Increase number of foster family homes
- Increase number of children in foster family settings
- Improve timeliness of foster home recruitment, approval
- Improve retention of family foster homes
- Increase timely response to foster home inquiries and applications
- Increase respite home availability
- Increase number of children placed with relatives
- Increase # of reunifications within 12 months
- Reduce number of placement disruptions
- Increase child visits with parents and siblings
- Increase number of foster/TFC homes
- Stabilized placements - decrease number of children with multiple placements
- Decrease % of acute placements that do not result in return to original placement
- Decrease # of placements that disrupt in 1st three months of placement

Group #3 ADMINISTRATIVE FLEXIBILITY/WORKER SUPPORT

1. Co-Chairs: Tabitha McNulty and Miranda Raines

2. Top issues related to ADMINISTRATIVE FLEXIBILITY/WORKER SUPPORT

1. High caseloads
 - a. Current caseloads prevent caseworkers from maintaining sufficient contact with families, which prevents them from assessing/addressing safety concerns
2. Workforce
 - a. Recruitment and retention of qualified staff critical to protecting children
 - i. Current pay/benefits insufficient
 - ii. Staff need more supports/resources and opportunities for advancement
 - iii. High levels of turnover impact child safety
 - b. Caseworkers/supervisors must possess critical thinking skills and sound judgment
 - c. Staff must receive quality training and professional development opportunities
 - i. Larger counties with sufficient staffing should specialize staff as much as possible by creating units to work exclusively with certain case types / areas of practice, e.g., investigations, in-home, foster care, etc.
 - d. Casework and investigative supervision are linchpins of child protection
 - i. Current staff-to-supervisor ratios sometimes inhibit meaningful supervision
 - ii. Supervisors must support their staff and hold them accountable for their work
 - iii. Only qualified staff should be hired as supervisors, and they too must be supported and held accountable
3. Increase Clerical Support to assist caseworkers
4. Contracting with a transcription service to assist with completing reports like CACD)
5. More Staff resources during a crisis or transition (including caseworkers, program administrators, on-call workers, floaters to fill in during a crisis or to transition when a worker leaves or is temporarily unavailable, etc.)
6. Technological support for workers (printers, scanners, laptops, tablets, etc.)
7. Number and size of State Cars available to workers (more cars and larger cars)
8. Legislative Changes (changes to the maltreatment act, changes to overly and unduly burdensome legislation that is not furthering the goal of the child welfare system, additional legislation to possibly permit placement prior to entering foster care but with court oversight.)
9. Reorganization of the type of workers and the work day (look at hiring additional staff to work on specific matters (like a visitation specialist, etc.) and altering the work day to allow for work (including visits) outside of the typical work day)

10. Policy changes to permit more flexibility and local/county autonomy (policy changes include the daily care of foster children – i.e., temporary placements by foster parents during vacation and other temporary leaves as well as more local decision about opening/reopening a foster home and also look county by county and assess the strengths and weakness and address the issues at a lower level rather than high level state policy).
11. Increase the level of engagement with families by increasing the number of program assistants available to work directly with the families
12. Reduce the Family Service Workers caseloads.
13. Caseloads must be decreased to allow workers to do effective case management.
14. Training for foster families that builds support and promotes engagement in therapy. Consider a “mentoring” program for foster families to increase support and sharing of ideas by successful homes, as well as, helping them implement the information obtained during training into “real world” situations.
15. Streamline compliance monitoring and multiple layers of review

3. **Summary of DCFS action items related to ADMINISTRATIVE FLEXIBILITY (Recommendations #4, 6):** Research is being done on what other states do surrounding their on call protocol. On call is a very stressful part of the DCFS job and leads to low morale. The committee would like to know how other states handle this part of the child welfare system. Research is also being done on how other states handle relative placements.

Recommendation #4: Create a County-Central Office Task Force to Address Administrative Flexibility

- Create a county-central office task force
- Develop a plan to address opportunities for administrative flexibility

Recommendation #6: Expedite the Process for Filling DCFS Vacancies

- Identify barriers and challenges to processing DCFS vacancies
- Develop a plan including innovative approaches to expediting filling vacancies

Recommendation #10

- Work with legislative group to develop a 3 year plan for reducing DCFS caseloads
 - Identify and address highest need counties
 - Include all relevant positions in caseload consideration (FSWs, supervisors, program assistants and attorneys)
 - Review current staffing patterns and consider innovative approaches

4. **Identify measureable outcomes indicating success in ADMINISTRATIVE FLEXIBILITY/WORKER SUPPORT:**

- Increase retention of workers
- Increase local/county autonomy, decision making
- Improve worker morale
- Reduce worker responsibility for compliance monitoring
- Reduce worker and staff attorney caseloads
- Decrease in turnover amongst staff and attorneys
- Reduced caseloads

Group #4 –PARTNERSHIPS/PRACTICE MODELS

- 1. Co-Chairs:** Nicole Potts and Christin Harper
- 2. Top issues related to STAKEHOLDER PARTNERSHIPS/PRACTICE MODELS**
 1. Fully engage stakeholders in all aspects of strategy development and project planning
 2. Shared vision and shared strategies among DHS and stakeholders
 3. Partnerships with sister state agencies such as health department, education, Medicaid...
 4. Strengthening DCFS advocacy council
 5. Collaboration between key stakeholders
 - a. Improved working relationships are needed between DCFS and its partners, e.g. juvenile courts, school systems, child advocacy centers, etc.
 - b. The sharing of information between these entities is essential in the protection of children
 6. Create local community stakeholder task force to work on solving local issues related to child welfare
 7. Better and smoother partnerships with volunteer organizations that are willing to assist DCFS and families with transportation, visitation, clothing and other types of support like adopting workers to improve morale (possibly create a volunteer coordinator, a community directory)
 8. Look to encourage continuity and cooperation through possibly reorganizing DHS areas to match the judicial districts and increase communication with liaison to the judiciary on reoccurring issues and unintended consequences of orders for distribution to the juvenile judges
- 3. Summary of DCFS action items related to STAKEHOLDER PARTNERSHIPS/PRACTICE MODELS (re: Recommendation # 2 & 7)**
 - Recommendation #2 Build DCFS Capacity to Partner with Stakeholders
 - Volunteer development
 - Partnership development with other state agencies and DHS Divisions
 - DCNS, Medicaid, Interdivisional staffing
 - Residential program review
 - Community Partnership/Awareness
 - Concurrent stakeholder meetings with CFSR
 - Collaboration between schools and DCFS
 - Enhance collaboration with community programs
 - Project Zero, Arkansas Baptist, C4k, Channel 11, Cumulus Radio, Rotary and other civic groups, AETN, The Call
 - Expand and grow Arkansas Creating Connections for Children
 - Offer values training and CANS/FAST training to stakeholders
 - Recommendation #7: Develop and Implement a Principle-Based Operational DCFS Model of Practice

- Review current DCFS practice model
 - Review crosswalks from other states
- Workgroup with Central Office/Field Staff/Stakeholders to review practice model
- Provide recommendations to Oversight Panel Working Group

4. Identify measureable outcomes indicating success in STAKEHOLDER PARTNERSHIPS/PRACTICE MODELS

- Increase family engagement in planning and decision making
- Increase stakeholder involvement in all aspects
- Improve assessment of family needs
- Expand practice model to focus on family and kin resources
- CFSR Statewide assessment stakeholder meetings

Group #5 RESOURCE AVAILABILITY/IN-HOME, COMMUNITY SERVICES

1. Co-Chairs: Anne Wells and Lori Poston

2. Top issues related to RESOURCE AVAILABILITY

1. Need to revisit Behavioral Healthcare Transformation - could address many of the issues that have been identified.
2. Value Options denials on foster children for outpatient, inpatient and residential treatment must be addressed and strategies developed to increase communication and cooperation.
3. Improved awareness of appropriate agencies for referral, improved monitoring of service utilization.
4. Treatment that includes home-based, specialized services with consistent staff.
5. Training in EBP's that address child welfare involved youth (trauma focused, identification/prevention of secondary trauma)
6. Improved interagency coordination to prevent children slipping through cracks during transition between homes/settings. (communication between foster parents, MH agencies/clinicians, DCFS case workers)
7. Look at ways to align catchment areas/regions to make resource utilization more effective, and develop resource directories for each area that are relevant to foster families (SWOT analysis)
8. Substance abuse
 6. Increase access to treatment
 7. Increasing reason for families' involvement with the system
 8. Current substance abuse assessment and treatment services are insufficient to address the scope of the problem
9. Mental and behavioral health
 - a. Many children and parents involved with the child welfare system suffer from mental/behavioral health disorders. Dual-diagnosis clients, those w/ co-occurring substance abuse and mental illness, present particular challenges
 - b. Consistent, quality mental/behavioral health services needed across the state

3. Summary of DCFS action items related to RESOURCE AVAILABILITY (Re: Recommendation #9)

Recommendation #9: Expand the availability of Intensive Home and Community-Based Mental Health Services

- Complete a visual of availability/location of mental health services, substance abuse services and intensive family services
- Identify service gaps in mental health,
- Identify service gaps for substance abuse
- Identify service gaps for intensive family services
- Develop plan to address mental health
- Develop plan to address substance abuse
- Develop plan to address intensive family services

4. Identify measureable outcomes indicating success in RESOURCE AVAILABILITY

- Decrease hospitalizations
- Increase mental health availability to children and families in own Home /community
- Increase access to substance abuse treatment services
- Expedite Medicaid eligibility for foster children and when child returns home
- Increase wrap around services for children and families
- Increase trauma responsive and mobile crisis services
- Increase in substance abuse assessment and treatment services
- Increase in mental/behavioral health services