

**Report For Joint Legislative Committees on Aging, Children and Youth  
Child Welfare Oversight Panel Updates  
June 14, 2016**

**Oversight Panel Updates – Betty Guhman, Courtney Massey**

**Timelines**

March 2015	Governor commissions review of Arkansas Child Welfare System
April-June	Paul Vincent Leads Review (reviews data, policies/procedures, and interviews over 200 stakeholders)
July 2015	Report presented to Governor Hutchinson
Aug 2015	Governor appoints Child Welfare Advisor
Sept 2015	Implementation Planning, Governor Appoints Oversight Panel
Oct 2015	Governor requests Legislative support (caseload reductions and impact statements) (Hester, Irvin, Meeks, Fite, Douglas)
Nov 2015	Oversight Panel meets; Appoints working Groups
Dec 2015	Working Groups meet
Jan 2016	Oversight Panel meets
Feb 2016	Working Groups meet
Mar 2016	Oversight Panel Report
April-May	Working Groups meet

**Proposed Timelines:**

<i>June 2016</i>	<i>Update Joint Children and Youth Committee 6/14/16 DCFS and Legislative Group - develops 3 year plan for caseload reductions Legislative Working Group – meet to plan legislative and budget review for 2017 session; notifies groups of plans, schedules</i>
<i>July 2016</i>	<i>Final Reports from Working Groups Oversight Meeting to review final Group Reports Legislative Working Group – support budget request for worker caseload reduction; collects draft child welfare-related legislation</i>
<i>Sept 2016</i>	<i>Final Oversight Panel Meeting with Governor, Final Report to Joint Children and Youth committees</i>
<i>Oct-Dec</i>	<i>Legislative Group continues to support and facilitate proposed legislation;</i>

**Working Groups Co-chairs – (see attached Current Priorities/Recommendations)**

**Group 1: Child Safety;**

Stacy Thompson, Arkansas Child Advocacy Centers and Greg Moore, DCFS

**Group 2: Placements/Permanency:**

Lauri Currier, The CALL and Beki Dunagan, DCFS

**Group 3: Administrative Flexibility/Worker Support:**

Tabitha McNulty, Public Defender Commission and Miranda Raines, DCFS

**Group 4: Stakeholder Partnerships/Practice Model:**

Christin Harper, DCFS and Nicole Potts, Christians 4 Kids

**Group 5: Resource Availability/In-home Services:**

Lori Poston, Arkansas Mental Health Council and Anne Wells, DCFS

## **Legislative Working Group**

See recommendations below, i.e. budget for caseload reduction and workload related review of recent and future legislation

Sen. Missy Irvin

Sen. Bart Hester

Rep. David Meeks

Rep. Charlene Fite

Rep. Charlotte Douglas

- Rep. George McGill, Co-chair, Joint Children and Youth
- Sen. Stephanie Flowers, Co-chair, Joint Children and Youth

Legislative Working Group will convene representatives from DHS, DCFS, AOC, ASP/CACD and other stakeholders to discuss possible legislative changes which will support reform initiatives.

DCFS Budget: Work with DCFS to develop budget requests for reducing DCFS caseloads to 1/20 over three year period

DCFS related legislation: Review of non-budget proposals that would help reduce DCFS workloads without impacting child safety or support for families.

## **Sample (not comprehensive) Policy issues for consideration**

- Diversion of children from state custody/foster care;
- Guidelines for closing hotline cases with no merit
- Encouraging placements with vetted relatives;
- Relative priority consideration throughout the case
- Age limits currently set for those allegation types qualifying for DR
- Scope of cases considered appropriate for maltreatment investigations
- Notary for Central and Criminal checks

## **Vincent Report Recommendations July 2015**

1. Designate a Staff Member in the Governor's Office to Coordinate Interagency Planning and System Collaboration for children, Youth and Family Services
2. Build DCFS Capacity to Partner with Stakeholders
3. Address the Placement Challenge
4. Create a County-Central Office Task Force to Address Administrative Flexibility
5. Improve the DCFS – Administrative office of the Courts (AOC) Working Relationship
6. Expedite the Processing for Filling DCFS Vacancies
7. Develop and Implement a Principle-Based Operational DCFS Model of Practice
8. Strengthen DCFS Practice in Safety Assessment and Engagement Skills
9. Expand the Availability of Intensive Home and Community-Based Mental Health Service
10. Develop a Three-Year Plan to Reduce DCFS Caseloads to an Average of 20
11. Determine Responsibility for Implementing Recommendations:

### **Governor's Office**

1. Appoint staff to coordinate interagency planning and system collaboration
2. Ensure administrative steps taken to expedite hiring process in DCFS

### **Legislature**

1. Request DCFS provide estimates of costs for reducing DCFS caseloads to 1/20 over three year period
2. Request DCFS provide a fiscal/workload note for child welfare related bills passed in most recent and in all future sessions

### **Department of Human Services**

1. Direct that senior staff from Division of Behavioral Health, Division of medical Services and DCFS contact the suggested model mental health programs and request an opportunity to observe operations
2. Assess the content of the State's Medicaid plan to determine if intensive home and community based services such as those recommended in the plan would be reimbursable. If plan amendments needed, propose revision to the plan and identify possible implementation costs to the legislature.

## **Child Welfare Reform Working Groups Legislative and Policy PRIORITIES**

**March 2016** *(will update for final report)*

### **Group 1: Child Safety**

- 1) Improving investigation training and assessment for workers
- 2) Improving timeliness and quality of child maltreatment investigations
- 3) Recommendations for reduction in child fatalities and child maltreatment prevention
- 4) Improving frequency and quality of risk and safety assessments;
- 5) Increased post-adoptive service provision.

### **Group 2: Placements/Permanency**

- 1) Collaborate with recruitment partners on the recruitment of new foster homes including a review of processes, procedures, and timelines
- 2) Study the issue of retention of foster homes and develop strategies to retain open homes that includes a specified method for foster and adoptive families who need to reach out for support and assistance
- 3) Review placement policy, protocol and practice and make recommendations for improvement
- 4) Host an annual Adoption Conference for DCFS Adoption Staff and expand the use of matching events for approved families and waiting children statewide.
- 5) Study the issue of DCFS Staff retention and determine how to improve staff retention.
- 6) Increasing focus on Kinship/relative care
- 7) Placement of foster children in home county

### **Group 3: Administrative Flexibility and Worker Support**

- 1) Technology concerns: remote access, additional iPhone and tablets
- 2) Staffing: worker retention; expediting filling vacancies
- 3) DCFS revisiting RFPs to be more family friendly in the implementation of services –i.e., offer services at night and on weekends to accommodate working families.
- 4) Ways to permit foster families to submit more documents electronically and streamline the forms by combining the foster and adoptive family evaluations rather than home doing both.
- 5) Addition of sufficient information in the initial email assigning the case (CHRIS )
- 6) Integration of multiple DCFS databases
- 7) Adding electronic signature option for referral approvals
- 8) Improving process for travel reimbursement for staff and foster parents
- 9) Pilot program to test the reorganization of types of workers and workday.
- 10) Continue to look at ways for volunteers to provide assistance and support for workers
- 11) Work with the AOC to designate liaisons between DCFS and the Juvenile Judges to work with the court on specific issues facing child welfare and issues with the court.

#### **Group 4: Stakeholder Partnerships, Model of Practice**

- 1) Message role of new statewide Volunteer Coordinator more widely
- 2) Ensure field staff have sufficient knowledge of volunteer application process, volunteer opportunities, and customer service skills
- 3) Increase awareness of volunteer needs by county
- 4) Update/establish Memoranda of Understanding with various community groups
- 5) Explore additional contract with Paul Vincent via Casey Family Programs to discuss practice model recommendation at greater length (Casey Family Programs following up on this piece)
- 6) Explore DHS IT/security issues with new DHS CIO

#### **Group 5: Resource Availability: Priorities for Next 6 months**

- 1) Medicaid Barriers to treatment:
  - a. Value Options denials on foster children for outpatient, inpatient and residential treatment must be addressed and strategies developed to increase communication and cooperation.
  - b. Challenges in obtaining Primary Care Physician referrals often delays or prevents provision of mental health services for foster children. When children are placed in foster care, they must be evaluated by a physician, and Medicaid must assign the new PCP. They must then obtain a referral for mental health services. This process, at times can take weeks, and sometimes the child changes placement before services can begin.
- 2) Improved awareness of appropriate agencies for referral, improved monitoring of service utilization.
- 3) Treatment that includes home-based, specialized services with consistent staff.
- 4) Training in EBP's that address child welfare involved youth (trauma focused, identification/prevention of secondary trauma)
- 5) Substance abuse  
Increase access to treatment  
Need is a priority due to increasing numbers of families' involvement with the system is due directly or indirectly to substance abuse issues  
Current substance abuse assessment and treatment services are insufficient to address the scope of the problem

Develop communication platform to message more widely ways to support children in foster care without becoming a foster parent ( Group 2?)

## Child Welfare Oversight Panel Members

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