

Prevention in Kansas



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DCF.FamilyFirst@ks.gov

Introducing DCF Family First case managers

Family First has positioned DCF to become a leader in providing innovative approaches to foster care prevention. The [Kansas Title IV-E Prevention Plan](#) states “with the growing number of children in foster care, it is evident there is a need for partnerships alongside families in communities with local organizations, private providers, and other stakeholders working together.”

One of the ways the agency envisioned this collaboration with communities was by allocating specific positions to take on the role of working together with partners and families.

The new FFPSA case managers will work directly with the CPS who assesses families who’ve identified Family First services as an appropriate option. Further, the FFPSA case managers will coordinate with the family and providers around the initial and ongoing engagement of services.

“My hope for these positions is they will be a true champion for the programs and the families utilizing them,” Northeast regional director Chrisy Khatib said.

Elizabeth Gregg, CPS supervisor for the Wichita region is looking forward to having regional leads to provide frontline staff with greater knowledge

around the Family First programs. “It’s exciting to have an internal expert on these evidence-based programs, knowing the successes they can deliver, and can provide valuable follow through to the family.”

Denise Voss, Northwest administrative regional director, said she is looking forward to how these new case managers will assist the CPS.

“Adding these new positions to the PPS team will allow for additional staff to work with families and support them towards the goal of children being able to remain safely in their homes.”

Prevention Provider Spotlight

Horizons Mental Health Center



On July 1, 1968, Kingman and Reno Counties officially merged their resources and opened the Kingman-Reno Mental Health Institute in Hutchinson, Kansas. The institute opened its doors with 200 people on the waiting list. Over the next seven years, Pratt, Harper and Barber Counties joined the Mental Health Institute to create its present service area. Horizons currently operates offices in each of the five counties. In 1978, The Mental

Health Institute merged with what is now known as Hutchinson Regional Medical Center and became a member of the Hutchinson Regional Healthcare Family. The Mental Health Institute then became Horizons Mental Health Center in 1985.

The staff of Horizons works to fulfill the mission of Horizons through providing services that support the treatment of individuals and families in their communities. Today Horizons offers a full range of behavioral and mental health services to over 6,000 individuals and their families annually. Services include individual and family therapy, psychological testing, child and adolescent services and community services for adults with mental illness and children with severe emotional disturbances.

Horizons Mental Health Center is licensed by the Kansas Department of Aging and Disability Services to provide comprehensive mental health services. Services are offered to everyone, and denied to no one due to inability to pay.



Left photo courtesy of HMHC Facebook: "The many faces of Horizons... We offer a wide range of mental health services to individuals and families in Barber, Harper, Kingman, Pratt, Reno and other surrounding counties." Top & bottom photos: Katie Kirmer, PCIT therapist, in the play therapy room and the area where the therapist observes and provides feedback to the parent during coaching.



Family First Selected Program: Parent-Child Interaction Therapy

The Family First grantee, Horizons Mental Health Center (HMHC), provides the evidence-based mental health program, Parent-Child Interaction Therapy (PCIT), to Reno, Barber, Kingman, Pratt, and Harper counties.

PCIT is designed to help young children ages 2-7 years, who are experiencing behavioral or emotional problems, and seeks to improve the parent-child attachment. Parents are taught skills by a therapist via an earpiece, while they observe the interaction through a one-way mirror. The short-term, specialized behavior management program typically lasts about 14 weeks.

"We were really excited to be able to initiate this specialized program within the services we already offer," said Beth Akins, director of training and education at HMHC. "our therapists are already showing that the interventions are working

and making a difference."

Horizons also has an accredited Child Advocacy Center, Crisis House for youth who are at risk of hospitalization and a specialized program for preschool aged children who are exhibiting signs of emotional or behavioral problems (Learn & Play Therapeutic Center).

New PCIT referrals involve a family with a child struggling with behaviors. Families are typically strained at the beginning and toward the end of the PCIT program, many experience improvements and say they understand their children more once they've taken part in the program.

Kylee Gross, director of the Learn and Play Therapeutic Center, and a PCIT trained therapist says she sees how PCIT positively affects families.

"One parent told me how much more bonded to their child they felt and how the

child's negative behaviors had decreased. Our PCIT therapists are seeing some very positive outcomes and the families are beginning to understand how their children need connection before they can comply." Gross believes that PCIT is working with the family holistically. "PCIT truly empowers the parents to learn appropriate parenting skills in managing difficult behaviors, but ultimately, our goal is not only to help just the challenging child in the family, but the whole family system."



HORIZONS
MENTAL HEALTH CENTER

DCF progresses to statewide delivery of Team Decision Making



"Thank you for helping me set goals for myself and my family so I can be the best for my child."

— A parent after a Team Decision Making meeting

For the past year, DCF has been working on a three-part phase in of Team Decision Making, or TDM. With assistance from the Annie E. Casey Foundation, Phase 1 started in Johnson, Wyandotte, Cherokee and Crawford counties. Phase 2 has expanded to the Wichita Region, Northwest and Southwest Regions. Although Phase 2 implementation was to begin in April 2020, this was delayed until June due to COVID-19. The final Phase 3, is planned for late summer or early fall, will expand TDM to the remaining counties in the Northeast and Southeast, and Kansas City Region.

TDM is a facilitated family meeting held before a child or 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.

Unless an immediate and serious safety threat requires emergency decisions to be made, the TDM meeting is held before any child is removed from the home. The meetings are facilitated by a trained TDM facilitator and include the family, the child (when appropriate), the family's support system, service providers, community partners and agency CPS staff. Each TDM meeting is focused on the child's safety and well-being.

Many of the caregivers that find themselves in TDMs may have substance use disorders or mental health concerns, which often may lead to secondary concerns, such as neglect or lack of supervision for the children.

"I held a TDM very recently where a parent, who was substance addicted, was confronted by a family member during their TDM in a very respectful way. The parent agreed they needed to allow their child to reside with the family member who had offered support, which would allow them time to detox and go to treatment. It was very moving to hear the parent make the decision that the child's stability was more important than them holding on to the parenting role," said one DCF TDM facilitator.

This collaborative practice which include family members and kin in the conversation and decision making when critical decisions about a child's placement are made. This approach recognizes families as the experts of their lives and partners with them to develop resolutions which engage the family's strengths and resources. Team Decision Making involves a partnership between families, their support network, and the agency. This practice approach promotes inclusivity, partnership, and transparency by DCF.

Heather Owens, TDM facilitator and Foster Care Program Administrator for the Southeast region, said she's noticed how important it is for the agency to be transparent with the family. "The family feels empowered and a part of the process. They feel heard and although they may not agree with the final decision they know why and how that decision was made."

Kansas
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Community Provider Spotlight:

Kansas Coalition Against Sexual & Domestic Violence

The [Kansas Coalition Against Sexual and Domestic Violence](#) (KCSADV), founded in 1982, is Kansas' leading statewide voice for victims and survivors of sexual and domestic violence. KCSADV is a statewide nonprofit organization – and coalition – with the mission of being a state-level advocacy voice for survivors and a collaborative network of [programs](#) promoting safe homes, safe streets, and safe communities throughout Kansas. Based in Topeka, KCSADV is a collaborative network of 25 coalition member programs from across the state. KCSADV provides training and education, technical assistance, and public policy advocacy on issues related to domestic and sexual violence.



KCSADV Child Welfare Project

Implemented in 2016, the Empowered Families Kansas Project is a 4-year demonstration

project under the ACF's Family and Youth Services Bureau, Family Violence Prevention and Services discretionary grant, [Specialized Services to Abused Parents and Their Children](#) (SSAPC). KCSADV focuses on three strategies to build evidence-based practices that improve outcomes for children and youth exposed to domestic violence and their non-abusing parents or caregivers. One of the projects components aims to improve

the response by Kansas child welfare professionals to the needs of children and their non-abusing parents or caregivers when domestic violence and child abuse co-occur.

The importance of an ongoing needs assessment throughout the project lifecycle has led to the successful foundation of training and collaboration for child welfare professionals on domestic violence related to child welfare issues. To best inform the strategies to create collaborative methods between domestic violence programs and the child welfare system, a needs assessment survey led to the development of best practice responses through training and technical assistance needed to address the themes prevalent with child welfare. Further, listening sessions were completed with child welfare administrators, domestic violence advocates, and with non-abusing parents navigating the child welfare system.

These assessment findings informed the development and implementation of training curricula and resources for child welfare professionals on how to respond to families experiencing domestic violence. Project training began in the fall of 2017, in a variety of formats focused on topics including safety planning with survivors and their children, strategies and skills to address domestic violence in child welfare and building collaborative partnerships between child welfare professionals and domestic violence advocates.

Significant training and resources have been developed as a result of this project. As a response to COVID-19, in-person trainings have been adapted to be provided in an online format beginning in August 2020. This training provides child welfare professionals the strategies and skills necessary to effectively identify domestic violence in child welfare cases, as well as how to apply appropriate interventions for families experiencing domestic violence.

Over the four-year period of this project, over 1,650 child welfare and domestic violence professionals have been trained to date, and over 1,500 copies of the child welfare manual have been disseminated. Data has shown the positive impact of these project trainings. An additional success of the child welfare project is the implementation of training formats that address the demands of service provision. To meet these demands, trainings in a variety of formats and a child welfare project list-serv was created to further enhance collaborative opportunities across the state.

To further enhance collaboration and partnerships between child welfare professionals and domestic violence advocacy programs in the final year, a roundtable will be held consisting of these groups. The collaborative relationships developed as a result of this roundtable will enhance the safety and resiliency of families experiencing domestic violence in the child welfare system.

Advocacy Services and Resources

Kansas has 25 sexual and domestic violence advocacy programs serving all 105 counties in Kansas. Programs provide support & services 24/7, help adult and child victims and survivors. Services include 24-hour crisis hotlines, crisis intervention and support, personal advocacy, medical advocacy, court advocacy, law enforcement advocacy, emergency accommodations, safe shelter, supportive counseling, support groups, and child and youth advocacy. Services are free and confidential.



To access , call the free, confidential 24 hour Kansas Crisis Hotline at **1-888-363-2287**

More information is available at: <https://www.kcsdv.org/>

Meet the Empowered Families Kansas Project Team (left to right): Carolyn Allred, MA, Child and Youth Project Manager; Kristina A. Scott, LMSW, Child Welfare Project Coordinator; Bre Kirkhart, Child and Youth Services Coordinator.

For questions about the project, contact Kristina Scott, kscott@kcsdv.org

Communities Helping Families, a warm hand-off to supports



DCF recognizes how much stakeholders in the community do to support the health and wellbeing of families. Lending an ear and helping families access available supports can go a long way to keep families well, especially during these times

of COVID-19. Every community has unique resources and the ability to connect families directly, efficiently, and with a warm hand-off to these services.

Kristalle Hedrick, DCF interim director of safety and protection said it's important to normalize conversations around supporting families.

“We know through our own experiences many parents are struggling to balance work, child care, and self-care for both themselves and their children. It is such an important time for all of us to feel empowered to walk alongside families, connecting them to services and natural supports to ensure they know they're not in this alone.”

If a child raises a concern, consider if it's safe to follow-up with a parent or caregiver. The questions below may help you connect them to the resource they need .

Things you might ask the caregiver

- This is a tough time for everyone, how are you doing? Is there anything you need?
- What's been going well for your family?
- We all need support right now. Who are your supports and are you able to connect with them?
- Since COVID started, what has changed for your family and how have you been doing with those changes?
- Is there anything your family worries about right now?
- Do you need technology for virtual learning? Is your internet, computer, etc., reliable?

Things you might ask the child

- Tell me what your school day looks like?
- Who at home helps you get your school day going?
- How is virtual learning going? (if choosing virtual)

- What is the best part of your day?
- How are things going at home for you and your family?
- Who takes care of you and gets you what you need?
- Do you have someone you feel safe talking about your worries or things you need? Who is it?

Helpful statewide resources for families

Kansas Quality Network (KQN):

<http://ksqualitynetwork.org/> An invaluable tool for parents, child care providers and community members ensuring resource information is available to children and families.

United Way 211: Just dial 211 to find out information on services for food, clothing, and shelter, as well as for more complex needs like health care, mental health, education, housing and employment.

1-800-CHILDREN: Free, statewide, anonymous information and referral service. Trained person on the other end who will listen, empathize with your situation and offer support. Also available by email at: 1800children@kcs1.org

Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline:

1-800-662-HELP (4357) or visit the website at: <https://www.samhsa.gov/find-help/national-helpline>

To apply for **Employment & Economic Services** go to <http://www.dcf.ks.gov/services/ees/pages/application-for-benefits.aspx> or call 1-888-369-4777

For in-home senior services, locate your nearest Area on Aging office by consulting this website: <https://k4ad.org/area-agencies-on-aging>

A variety of **Covid-19 Resources for Kansans:** <https://covid.ks.gov/>

Contact your local DCF Service Center if you have questions about what is available in the surrounding area. Find your nearest Kansas DCF service center by calling 1-833-765-2003 or visiting <http://www.dcf.ks.gov/DCFContacts/Pages/default.aspx>



Kansas Children's Service League

Parent Helpline

1-800-CHILDREN

This free app is an easy way to locate community resources on parenting, education, counseling, employment and more.

Connect Kansas families and providers to helpful parenting resources in their local communities!

Download from the Apple store:

apple.co/3iWcuWc

or from the Google Play store:

bit.ly/2QdVKgJ

*The 1-800-CHILDREN app
is made possible with funding from
the Kansas Preschool Development Grant through
the Kansas Children's Cabinet and Trust Fund*

For parenting resources and support
without judgment, call

1-800-CHILDREN

and speak to one of our trained specialists.

Available 24/7 by phone and app, or email at

1800children@kcs.org

during normal business hours

1-800-CHILDREN is always there to help talk
through your parenting concerns.

*Please note this is NOT a crisis line or a suicide line.

