



**Kansas**  
Department for Children  
and Families  
**TITLE IV-B CHILD AND FAMILY  
SERVICES PLAN**

Submitted To:  
U.S. Department of Health and Human Services  
June 28, 2019

This Child and Family Services Plan (CFSP) is the report for the five-year time period Fiscal Year (FY) 2020-2024. The CFSP details the goals, objectives, services, service delivery strategies, statewide assessment and plan for improvement.

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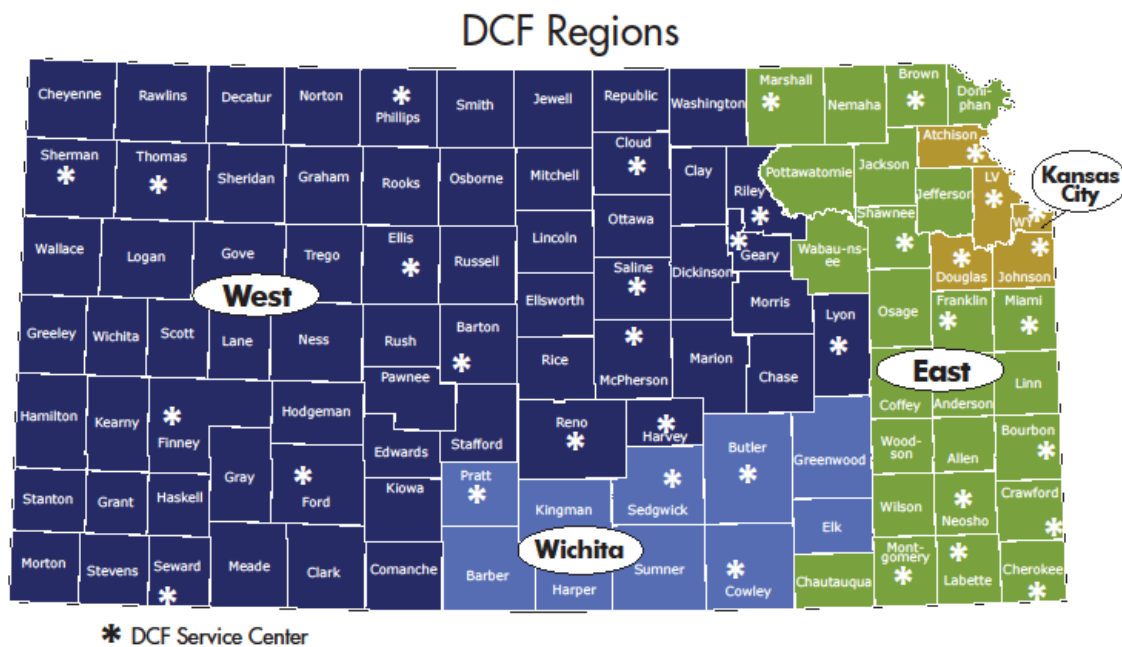
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## I. Introduction

The Kansas Department for Children and Families (DCF) serves children and families by providing services in offices located throughout the state. Kansas DCF is comprised of Economic and Employment Services (EES), Prevention and Protection Services (PPS), Rehabilitation Services (RS), Child Support Services (CSS), and Foster Care and Residential Facility Licensing. Services are provided directly by the agency or through contracted providers and/or community partnerships. Work encompasses services to children, families with children, and vulnerable adults or adults who have special needs, and pregnant women using substances. The overarching emphasis is to secure a safe and stable environment for the individuals and families who are clients of the agency.

Services from DCF are managed statewide from the DCF Administration office, located in the state capitol of Topeka. DCF is divided into four regions, Kansas City, East, Wichita and West, each led by a regional director, an assistant director for programs and an administrator for each program area: assessment and prevention, foster care, and support services. See Attachment 1 for Kansas DCF PPS Organizational Chart.

## Kansas Regional Map



### A. Kansas Department for Children and Families Prevention and Protection Services

Kansas Department for Children and Families (DCF) Prevention and Protection Services (PPS) is responsible for administering the State’s child welfare programs as follows:

The State administers child welfare services through the Kansas Protection Report Center, regional offices, and contracts. Kansas Protection Report Center staff receive and assess maltreatment reports to determine if they meet criteria for assignment. DCF Child Protective Services (CPS) Specialists complete child abuse and/or neglect investigations, family in need of assessment situations, and may provide or refer family services, family preservation services, reintegration services, foster care services and

adoption services. These referred services are currently provided through contracts with Saint Francis Ministries (SFM) in the West and Wichita regions, and KVC Behavioral Health Services (KVC) in the East and Kansas City regions. In SFY 2020-2024, new grantees will be established to provide family preservation services, reintegration services, foster care services, and adoption services.

The provisions of the following Acts are incorporated into and implemented through the Kansas Child in Need of Care (CINC) process:

- Title IV-B, subpart 1, Stephanie Tubbs Jones Child Welfare Program;
- Title IV-B, subpart 2, Promoting Safe and Stable Families;
- The Adoption and Safe Families Act, P.L. 105-89;
- Title IV-E, Federal Payment for Foster Care and Adoption Assistance, P L. 96-272;
- The John H. Chafee Foster Care Independence Program (CFCIP), and
- The Child Abuse Prevention and Treatment Act (CAPTA).

The Child and Family Services Plan (CFSP) 2020-2024 will be posted on the PPS webpage at: <http://www.dcf.ks.gov/services/PPS/Pages/PPSservices.aspx>

The current Revised Kansas Code for Care of Children [KSA 38-2201et seq.] may be found at: [http://kslegislature.org/li/b2013\\_14/statute/038\\_000\\_0000\\_chapter/038\\_022\\_0000\\_article/](http://kslegislature.org/li/b2013_14/statute/038_000_0000_chapter/038_022_0000_article/)

The current DCF PPS Policy and Procedure Manual (PPM) may be found at: <http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>

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## B. Mission and Vision

**Agency Mission: To protect children, promote healthy families and encourage personal responsibility.**

The Kansas Department for Children and Families (DCF) initiatives strive to connect children, youth and adults to evidence-based prevention strategies to include safety, permanency and well-being. Such strategies are focused on the family as a whole, by providing services at all levels to meet the needs of individual families. Collaboration occurs between Prevention and Protection Services (PPS) and a wide range of community service providers to ensure timely and effective interventions. Families are included as partners and are at the center of planning efforts, policy development, program implementation and practices. The agency seeks meaningful ways to keep children safe, promote healthy development of children and ensure youth emancipated from care receive services needed to promote self-sufficiency.

The agency's efforts focus on factors targeting service delivery to effectively address issues to help families and children solve the problems which compromise their functioning and well-being. The agency strives to provide trauma informed-services

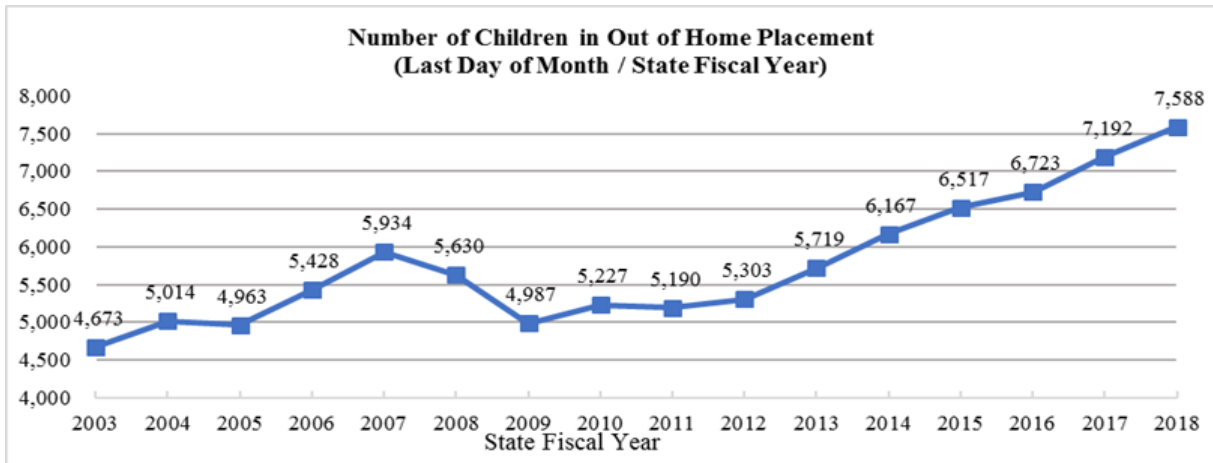
The DCF mission drives the agency's policies and procedures. The agency's charge includes promoting the well-being of individuals and families and assisting them to achieve success in their lives. The broad, overarching outcomes DCF seeks to achieve include:

- Ensure safety, permanency and well-being of children;
- Families and individuals achieve maximum self-sufficiency;
- Families and individuals live in safe, stable and supportive environments; and
- Families and individuals assisted are satisfied with services.

The Secretary of DCF and the Kansas Department of Aging and Disability Services presented her strategic vision to staff in March of 2019. "This is an agency full of great people who are doing important work on behalf of children and families in Kansas," Secretary Howard said. "As an agency we must operate in a collaborative and open environment that values the work of employees and constantly looks for opportunities to improve." Key points of Secretary Howard's strategic vision include:

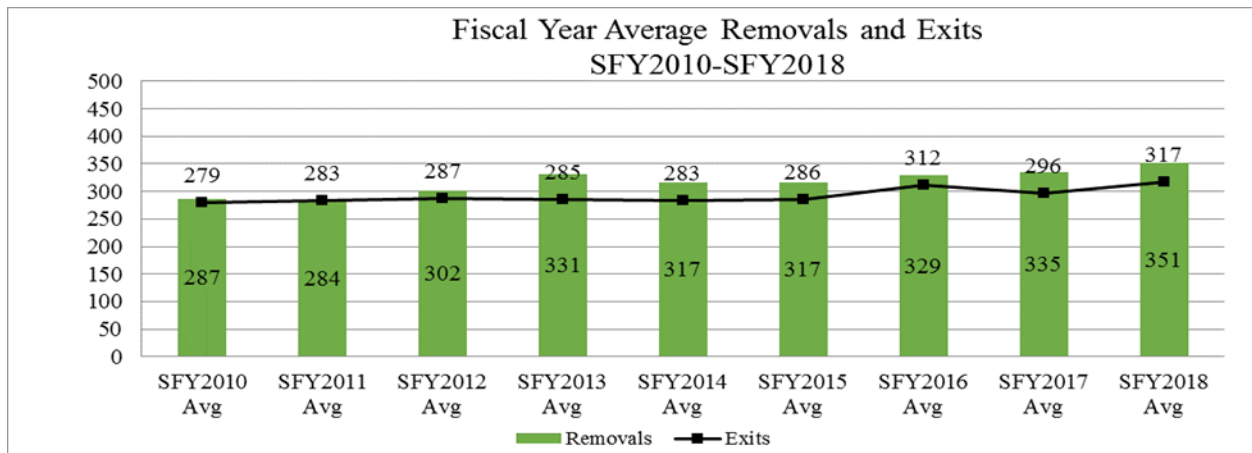
- Transparency
- Valuing staff
- A culture of continuous improvement
- Collaboration
- Focusing on data, outcomes and accountability
- Ethics
- Celebrating success
- Breaking through the roadblocks.

As part of the focus on outcomes and accountability, Kansas places a heavy emphasis on data and program evaluation. The vision for the 2020-2024 Child and Family Services Plan is based on this analysis. Kansas tracks the number of children in out of home placement on the last day of each month. This graph below provides a snapshot of the out of home population. The number of children in out of home placement in Kansas on the last day of the State Fiscal Year has been increasing since SFY 2011. On June 30, 2011, there were 5,199 children in out of home placement and on June 30, 2018, there were 7,588 children, a 32% increase, in out of home placement.



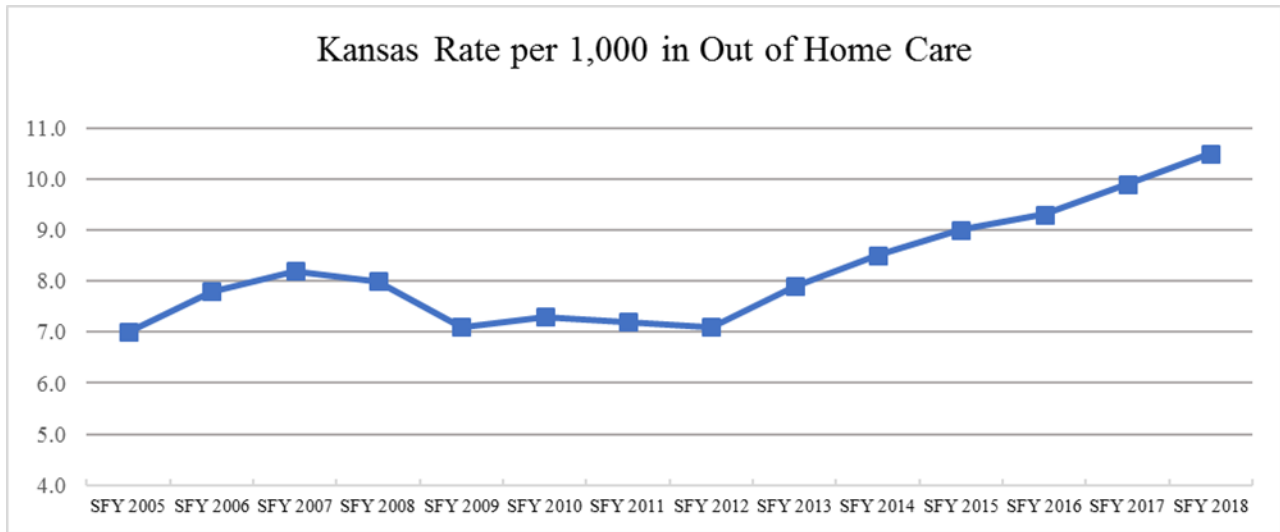
Two different decision points contribute to the number of children in out of home placement. Removals into out of home placement and discharges from out of home placement both impact the total number of children in care. If discharges increase and removals decrease, the out of home population will decrease. If removals increase and discharges decrease or do not change, the out of home population will increase.

The graph below provides a visual representation of removals (the green bars) and discharges (the black line) in Kansas for the past nine State Fiscal Years. It is clear an increase in the number of children removed into out of home placement over the past four years was not matched by a corresponding increase in discharges, leading to an increase in the out of home population.

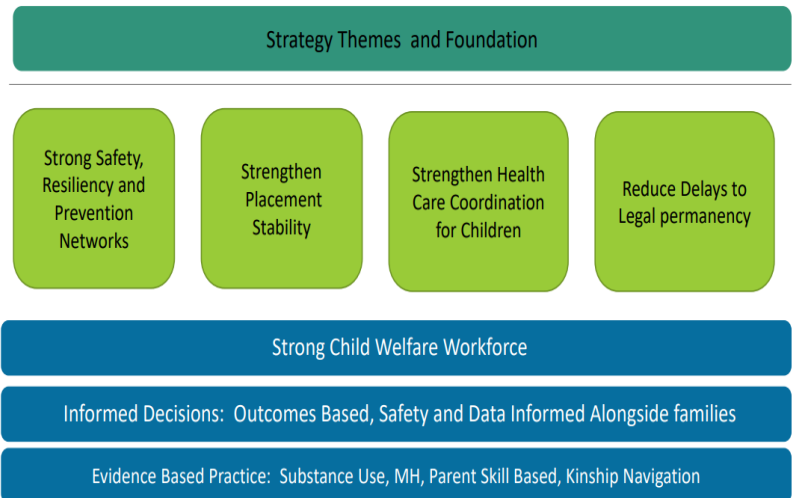


Another way to assess the fluctuations of the number of children in out of home care is to compare the number of children in out of home care to the state's child population. As shown below, in Kansas, the rate of children in out of home care per every 1,000 children in the state's population has remained between 7 per 1,000 and 11 per 1,000 for the past fourteen years, with significant increase from SFY 2012 to SFY 2018.





With the department’s mission and the above data in mind, Kansas’ vision for the next five years is to implement primary prevention strategies to safely reduce the number of children in foster care by strengthening families, preventing child maltreatment and the unnecessary removal of children from their homes. This requires laying a foundation of evidence-based treatments and trauma-informed decisions, which will bolster the state’s strong child welfare workforce. The vision of Kansas, illustrated here, is to build on this groundwork and strengthen prevention networks, placement stability, health care coordination, and reduce delays to legal permanency. Ultimately, Kansas is committed to re-invest in prevention, place an emphasis on family-based placements, and pursue systematic partnerships throughout communities, counties, and state.



## II. Collaboration and Coordination

Kansas child welfare systems are engaged in substantial, ongoing and meaningful collaboration to accomplish the goals of protecting children, promoting healthy families, and encouraging personal responsibility. Collaboration between DCF and key stakeholders, such as other DCF divisions, state agencies, Child Welfare Case Management Providers (CWCMP), tribes, law enforcement, courts, community and faith-based organizations, as well as, Kansas’ citizens ensure Kansas children and families live in safe, stable and supportive environments in order to achieve maximum self-sufficiency. Collaboration was a major theme which drove the objectives and strategies of the previous CFSP and a focus on collaboration will continue to drive the Kansas strategic plan for the next five years.

This section outlines several established and ongoing venues which provide the opportunity for stakeholder feedback and coordinated approaches in the efforts to improve the entire spectrum of child and family services. During the next five years, Kansas will continue to communicate progress towards reaching the goals and objectives of the CFSP to stakeholders and solicit feedback and discussion on the development of any new goals and objectives that may be necessary for incorporation into the strategic plan.

## A. Kansas Department for Children and Families

Prevention and Protection Services (PPS), a division of the Kansas Department for Children and Families (DCF), coordinates consistently with other divisions within the agency whose services directly impact the families served. The Deputy Secretary meets every other week with leaders of the following programs which make up Family Services: PPS, Economic and Employment Services, Rehabilitation Services, Child Support Services, and Foster Care and Residential Facility Licensing. These programs work together on a continual basis to ensure families are connected to all services for which they are eligible, thus bringing stability to the family environment.

In addition to the areas outlined below, Kansas has ongoing collaboration with Kansas Tribal leaders to foster open communication and good-working relationships. Collaboration occurs between PPS and Kansas Tribes with PPS extending invitations to participate in policy and procedure venues, workgroups and committees. See Section VII. Consultation and Coordination Between States and Tribes for additional information.

All workgroups/committees serve as an opportunity to solicit input, to address case review results, review Child and Family Services (CFSR) outcomes, development of Program Improvement Plan (PIP) goals and activities, and to review policy. Standing PPS workgroups/committees consist of both internal and external stakeholders, including:

***Prevention and Protection Services Administration and Regional Administration meetings*** are held every other month. These meetings give the department an opportunity to review outcomes as they relate to safety, permanency, and well-being, as well as the seven systemic factors. Information is shared regarding the Program Improvement Plan, policy changes, upcoming initiatives, and legislative topics.

***Comprehensive Addiction and Recovery Act Workgroup*** meets a minimum of four times a year to review and discuss opportunities and ideas to improve policy and procedure for Prevention and Protection Services, Assessment and Prevention, specific to the Comprehensive Addiction and Recovery Act (CARA). The workgroup addresses performance improvement with respect to meeting requirements of CARA, training and community collaboration efforts.

***Family Preservation Services Advisory Workgroup*** PPS FPS Administration staff, including regional Program Improvement staff from PPS and front-line staff and supervisors from PPS and both CWCMPs. Workgroup meetings are held quarterly and facilitated by PPS FPS Administration staff. The purpose of this workgroup is to serve as a forum for data review and analysis, identifying trends, monitoring outcomes, understanding root causes of identified issues, and collaborating on policy development and revisions.

***The Interstate Compact on the Placement of Children Workgroup*** meets quarterly and is facilitated by Kansas Interstate Compact of Children (ICPC) staff. This workgroup consists of Kansas ICPC staff, CWCMP, and DCF regional ICPC staff and supervisors. The goal of the workgroup is to review, clarify, and revise policies and procedures related to ICPC issues and to discuss best practices to ensure ICPC cases are being handled uniformly across the state of Kansas.

***Permanency Advisory Committee*** is facilitated by PPS and meets approximately six times a year to promote coordination between PPS and child welfare stakeholders. Membership in the Permanency Advisory Committee includes: the PPS Deputy Director of Permanency, PPS Permanency Program Administrator, PPS Foster Care Program Manager, PPS Adoption Program Manager, PPS Independent Living Program Manager, regional PPS and Performance Improvement staff, CWCMP staff, Tribal representatives, Kansas Family Advisory Network (KFAN), Kansas Foster and Adoptive Parent Association (KFAPA) and Wichita State University (WSU) Caregivers Support Association and foster and adoptive parents. This membership allows for policy and program input from caseworkers, supervisors, birth parents, foster parents and relative caregivers. The CWCMPs also continue to ensure family involvement at a policy-making level by holding stakeholder-feedback meetings and foster parent advisory board meetings to solicit input from youth and families about agency policy and practice.

***Adoption Policy and Adoption Assistance Advisory Workgroup*** meets quarterly to review, discuss and develop adoption and adoption assistance policies to reflect best practice. The goal of the workgroup is to improve the effectiveness, efficiency and permanency outcomes for children with a goal of adoption. Statewide standardization and adherence to determining initial and ongoing IV-E and State eligibility, and negotiations and renegotiations of adoption assistance, will result from this workgroup. Members of the workgroup include PPS Administration, regional administrators, supervisors, adoption assistance specialists, eligibility staff and CWCMPs.

***The Independent Living Policy Workgroup*** guides the changes in strengthening the Independent Living (IL) Program. The workgroup improves policy and best practice as related to older youth in care and youth who have aged out of care and are eligible to be served by the IL Program. Membership consists of PPS Administration IL staff and PPS regional IL Supervisors. PPS Regional Foster Care Administrators, CWCMP IL Program Managers, and CWCMP, Tribal, and Kansas Department of Corrections – Juvenile Service (KDOC-JS) leadership staff participate as needed.

***The Statewide Independent Living Coordinators Group*** meets quarterly and includes PPS Regional IL staff, CWCMP representatives, and members of the community and other agencies. IL staff meet for the purpose of updating and informing staff about policies, providing technical and professional support, and keeping IL staff informed about resources for the youth they serve.

***Every Student Succeeds Act Workgroup*** was originally formed to bring together representatives from DCF, CWCMPs, Kansas Department of Education (KSDE), Kansas Association of School Boards (KASB) and local school districts, to ensure compliance with the Every Student Succeeds Act of 2015 within child welfare. While the Every Student Succeeds Act (ESSA) has continued as a primary focus, the coalition evolved to also become the de facto workgroup to discuss and work through all of the educational issues facing youth in care.

***Psychotropic Medication Workgroup*** was initiated in 2012, to decrease the prevalence of psychotropic medication prescriptions among children in out-of-home placement within the Kansas foster care system.

The workgroup convened specifically to address Centers for Medicare and Medicaid Services (CMS) Information Bulletin dated August 24, 2012, regarding the foster care population. The workgroup is comprised of members from DCF, KDADS, KDHE, KDOC, CWCMPs, MCOs, physicians, pharmacists and psychiatrists. For additional information on the work of this group, see Section XV Targeted Plans B. Health Care Oversight and Coordination Plan.

***Family First Prevention Services Act (FFPSA) Regional and Statewide Advisory Workgroups*** are currently being formed and will meet regularly starting SFY 2020. Regional and statewide workgroups are a cross-system interagency advisory groups. FFPSA Advisory Workgroups will aid the state by maintaining the new Family First Prevention Services Act, identifying service needs, and assisting in process changes. They will be key advisors to DCF.

## B. Governor's Behavioral Health Services Planning Council

The Kansas Department for Children and Families Prevention and Protection Services (PPS) will continue to collaborate with the Governor's Behavioral Health Services Planning Council (GBHSPC) in SFY 2020-2024 by sending representatives to serve on subcommittees. The Deputy Director of Permanency is the standing representative for these bi-monthly meetings. The annual recommendations from the Subcommittee on Children's Mental Health are presented to the Secretary of Kansas Department for Aging and Disability Services (KDADS) and other state department secretaries are invited to attend.

The Subcommittee on Children's Mental Health was initiated in 2004 and established a membership to bring voices of parents, client youth, caregivers, educators, service providers, state agencies including Kansas Department of Corrections- Juvenile Services, Kansas Department for Aging and Disabilities, and Kansas Department for Children and Families, and representatives of the state school system, as well as other entities involved and interested in the quality, accessibility, consistency and effectiveness of mental health services for children and their families. The subcommittee researches, evaluates and makes recommendations to the GBHSPC annually, to improve the array of behavioral health services offered to children and their families through Kansas Community Mental Health Centers (CMHC), the education system, and other children's service systems, and to improve collaboration between systems of care. Activities are directed toward collaboration, education and advocacy for children and their families. Draft areas of focus for SFY 2020 include: Parental substance use and its effects on their children, transition age youth, parent engagement models, and prevention exploration models.

## C. Systems Collaboration

In Kansas, the programs and services impacting children in the custody of the Secretary of the Kansas Department for Children and Families (DCF) are provided by DCF, the Kansas Department for Aging and Disability Services (KDADS), the Kansas Department of Health and Environment (KDHE) and the Kansas Department of Corrections-Juvenile Services (KDOC-JS). These programs and services include: Medicaid (KanCare), Home and Community Based Services (HCBS) waiver services, community mental health centers, intellectual developmental disability services, psychiatric residential treatment facilities (PRTF), State hospitals, and juvenile corrections. As a result, the ongoing collaboration of all State agencies is essential to ensure the health and well-being of children in the custody of DCF.

Collaboration with other state agencies and community organizations has occurred individually and in various workgroups with each of these agencies and DCF for many years. In 2015, an increased need for systems coordination and collaboration was identified to improve health care oversight and coordination for children in DCF custody. There are two key system collaboration workgroups, both facilitated by KDHE: the first workgroup is the Foster Care in KanCare workgroup, which addresses KanCare issues specific to children in DCF custody. This monthly workgroup is comprised of representatives from DCF, KDHE, KDADS, KDOC-JS, Child Welfare Case Management Providers (CWCMPs), and the three Medicaid Managed Care Organizations (MCOs). The second workgroup, the State Agency Foster Care in KanCare, only includes the state agency representatives from the first workgroup. This meeting is held at least monthly, and at times twice monthly, to address KanCare issues and barriers, and State agency coordination specific to children in DCF custody. These multi-state/community agency workgroups are necessary to support ongoing collaboration to ensure children in foster care receive appropriate services. A third workgroup began in SFY 2019, to discuss issues pertinent to children in foster care who are receiving treatment in a PRTF. The Psychiatric Residential Treatment Facility (PRTF) stakeholder group is coordinated and facilitated by the PRTF providers and meets quarterly. Participants include the PRTFs, KDADS, DCF, KDOC-JS, KDHE, CWCMPs, and the three managed care organizations.

The CWCMP is responsible for referring youth in foster care for a PRTF evaluation when deemed necessary. The assigned MCO is responsible for requesting the Pre-Authorization Review (PAR) and the Community Based Service Team (CBST) to be completed by the Community Mental Health Center (CMHC) serving the area the youth resides. The CMHC returns findings from the PAR and CBST to the MCO for a determination of approval for PRTF or a diversion from the PRTF.

When a youth is approved for a PRTF, the CWCMP determines which PRTFs the youth should be referred to. In Kansas the CWCMP usually selects all PRTFs unless a PRTF does not have a program to meet a child's needs. If the PRTFs do not have an available bed based on gender, age, and need, the youth will be placed on the PRTF waitlist until an appropriate bed becomes available. DCF is partnering with KDADS and the MCOs to reduce the number of children on the Psychiatric Rehabilitation Treatment Facility (PRTF) waitlist by reviewing the status and services provided to each youth. This group meets with each MCO and reviews the foster care youth on the waitlist. The youth are reviewed regarding the amount of time on the waitlist, current placement, available services, and current services being offered. If a youth is not participating in services which may be of benefit the group reaches out to the case management agency to determine if a referral is needed. Meetings to review the waitlist occur approximately every two weeks. Timeframes for each child are determined on a case by case basis based on the child's age and mental health needs. The Managed Care Organization provides the names of the foster care children to be reviewed to the KDADS representative who, in turn, sends the list to the PPS Medicaid Liaison. The PPS Medicaid Liaison receives updates from the Case Management Agency regarding the status of each child on the PRTF wait list.

When a foster care youth is ready for discharge from a PRTF, DCF and the MCO are included in the discharge planning meeting. The MCO may convene a Complex Case Staffing at any time during this process when deemed necessary with PPS administration and the region, CWCMPs, birth or adoptive parents of the child, KDADS and the MCOs for children in PRTF treatment settings. These requests can originate with any of the stakeholders mentioned above. Discussion often revolves around strategies for discharge, treatment and/or appropriate placement options for youth with high needs. Youth who are diverted from PRTF admission are referred for community services.

KDHE is in the process of implementing community service coordination which will be available for children in foster care who have complex conditions. Community service coordination will be utilized by foster care youth to divert from PRTF admission or after discharge from the PRTF.

Kansas Department for Aging and Disability Services (KDADS) released a Request for Proposals (RFP) for Crisis Stabilization Services in May 2018. The RFP included a 24/7 crisis behavioral health hotline, psychiatric hospitalization screens, and mobile response and stabilization services. Contract negotiations are underway; additional information will be made available once the contract is fully executed. Per the RFP: “Mobile Response and Stabilization Services (MRSS) is an intervention service that offers short-term, flexible service coordination to assist in stabilizing an individual in their community setting. Interventions are designed to maintain the individual in their current living arrangement, to prevent repeated hospitalizations, to stabilize behavioral health needs and to improve functioning in life domains. Individuals, based upon need, can receive MRSS following the completion of the Mobile Response Crisis Assessment Tool (CAT) and Individualized Crisis Plan (ICP), for children and families. Plans are to be developed by the mobile response unit during the first 72 hours. Mobile response staff shall ensure the services identified in the plans should be made available as a transition option from crisis response services to stabilization services, also known as ‘MRSS.’ MRSS will be considered when an individual continues to exhibit patterns of behavioral and emotional needs, which require continued intervention and coordination to maintain typical functioning and prevent continued emotional and/or behavioral escalation. Interventions at this level of care include the delivery of a flexible array of services through the development of a comprehensive and coordinated ICP. Care planning is individualized, collaborative and flexible based on need.

MRSS is strengths-based, consumer-driven, community based, trauma sensitive, and culturally and linguistically mindful. Interventions may include, but are not limited to, crisis intervention, counseling, behavioral assistance, intensive community-based services, skills building, peer support, medication management, and/or caregiver stabilization interventions, when working with a youth and their family. Coordination of specialized services to address the individual’s needs with co-occurring disorders and/or across systems will also be made available through this service. MRSS interventions can be delivered for up to eight weeks. Use of this intervention will vary by setting, intensity, duration, and identified needs. The objective of MRSS is to stabilize the current crisis and help facilitate the individual’s transition into identified supports, resources, and services which are consistent with their treatment needs and support a sustainable plan. This may involve referrals to outpatient services, evidence-based services, community-based supports, and informal and natural resources. The individual seeking MRSS determines the physical location of each of their meetings with the mobile response unit; potential meeting locations could include, but is not limited to, their home, school, community center or building.

KDADS is also in the process of implementing new policy in SFY 2020 entitled HCBS Access for Individuals in the Custody of DCF. The policy will provide clarification on the HCBS waiver service criteria exception process for eligible children in DCF custody. The policy will establish processes and procedures for submitting, managing and determining exception requests for children in foster care and will ensure access to the waiver program services which best meet the assessed needs of the child.

In addition to the recommendations above, Senate Bill 179 created a statutory framework for Juvenile Crisis Intervention Centers (JCIC) for children and youth in need of short-term (defined as up to 30 days) behavioral health crisis treatment. The Secretary of Health and Environment shall submit to the United

States Centers for Medicare and Medicaid services any approval request necessary to implement provisions of the bill. Further, the Secretary of Department for Children and Families, in consultation with the attorney general, shall promulgate rules and regulations to implement certain provisions of the bill. Youth living at home could receive treatment services at a crisis intervention center, as long as admissions criteria is met.

#### D. Kansas Department of Corrections – Juvenile Services (KDOC-JS)

DCF Prevention and Protection Services (PPS) collaborates with Kansas Department of Corrections- Juvenile Services (KDOC-JS) on issues affecting populations in the custody of and/or served by both DCF and KDOC-JS.

Juvenile justice reform legislation in Kansas legislation passed in 2016, statutorily requires a multi-agency/entity Juvenile Justice Oversight Committee appointed by the Governor. The committee oversees the implementation of statutes related to the passage of Senate Bill 367 and as amended, legislation related to reform of the Kansas juvenile justice system. A portion of any cost saving from reforms or averted expenditures is to be reinvested in strategies and programs successful in reducing recidivism, hold juvenile offenders accountable and promote public safety

Legislation for the reform of the Juvenile Justice system in Kansas, Senate Bill (S.B.) 367, and amendments thereto, was implemented over a time period from July 1, 2016 through July 1, 2019, as there were multiple effective dates set out in the relevant statutory provisions. Revisions were made to the Kansas Code for Care of Children as a part of the Juvenile Justice system reform. As described above, Kansas Senate Bill 367 included a requirement to establish a Juvenile Justice Oversight Committee (JJOC) and prescribed the structure and membership. The committee was established in the Fall of 2016 and is ongoing. Pursuant to Kansas Statute, a representative from DCF Secretary's designee is a member of the Juvenile Justice Oversight Committee. Other members include: the Governor or designee, member of the Kansas House of Representatives appointed by speaker of the house, member of the House of Representatives appointed by the house minority leader, member of the Kansas Senate appointed by president of the Senate, member of the Senate appointed by the Senate minority leader, Secretary of Kansas Department of Corrections or designee, Commissioner of Education or designee, the Deputy Secretary of Juvenile Services at the Department of Corrections or designee, the Director of Community-Based Services at department of corrections or designee, two district court judges, one chief court services officer, a member of the Office of Judicial Administration, a juvenile defense attorney, a juvenile crime victim advocate, a law enforcement agency representative, a prosecuting attorney and a member of a Community Corrections agency. The committee is charged with overseeing the implementation of the juvenile justice reform legislation as well as determining any further recommendations.

A data sub-committee of JJOC exists which continues to address impact of Kansas Senate Bill 367. DCF participates on said sub-committee. The goal is to improve the quality of data to determine and indicate impact of the legislation, both to the Juvenile Offender system and to the Child Welfare system. Impact to the Child Welfare system continues to be assessed by PPS, and issues that arise will be addressed on a case-by-case basis. The work group plans to continue looking at strategies and implementation to address needs of youth with offender behaviors coming into the CINC population to ensure they are served and to equip the CINC system with tools and resources to serve them. Two strategies being developed to date are:

1. DCF collaborating with KDOC and accessing their current grantees for serving CINC children through the Functional Family Therapy model. This practice already exists and is being used in serving needs of youth with offender behaviors.
2. DCF has and will continue to work with existing providers throughout communities for contracts to secure appropriate housing for youth with offender behaviors. Additionally, a Reinvestment Fund sub-committee exists to address options for usage of the monies in the Reinvestment Fund and make recommendations to the JJOC.

DCF and KDOC-JS program administrative staff meet on an ongoing basis to address issues related to the juvenile justice system reform including, but not limited to, appropriate services and number of placements for children and issues regarding “crossover youth”-youth who come into contact with both the child in need of care and juvenile offender systems.

The Kansas Judicial Council has multiple subcommittees focused on various areas. One of the subcommittees is the Judicial Council Juvenile Offender/Child In Need of Care Advisory Committee. This Committee meets throughout the year and membership is comprised of members from a variety of different judicial, legislative and executive branch entities/agencies. DCF has a representative on this committee. Topics reviewed and discussed include issues related to both the Juvenile Offender and Child in Need of Care systems, review of and sometimes drafting of certain proposed legislation, review/revision and approval of Judicial Council forms used by judges in juvenile offender and child in need of care actions.

Each of the above referenced collaborations provides ongoing opportunities to engage in discussion of concerns/initiatives/programs relevant to the child welfare system and processes/systems/procedures can be incorporated into the State’s five-year plan.

## E. Kansas Early Head Start

**Kansas Early Head Start (KEHS)** is a social service and child development program. This initiative provides grants to local Head Start programs to serve pregnant women, infants and toddlers. In 1998, the Kansas Legislature approved funding to provide a State-administered Early Head Start (EHS) initiative. Kansas was the first state in the nation to fund an EHS modeled after the federal program. This initiative created a joint federal partnership with the federal Administration for Children and Families, the U.S. Department of Health and Human Services and its Region VII Kansas City Office.

The Department for Children and Families awards grants to 11 KEHS programs in 39 counties, with 955 enrollment slots. KEHS grantees and families have two options and/or models of service delivery, through the KEHS Home Visitation (KEHS-HV) and the KEHS Child Care Partnership (KEHS-CCP) models.

The KEHS-Home Visitation service model is:

- Modeled after the federal EHS home visitation program created by the U.S. Congress;
- Primarily serves pregnant women and families with infants and toddlers who meet the federal poverty guidelines;



- Offers children and families comprehensive services through weekly 90-minute home visits;
- Provides comprehensive health and mental health services, including services to women before, during and after pregnancy; and is
- Funded through the Temporary Assistance for Needy Families (TANF) program.

The KEHS-Child Care Partnership service model is:

- A quality initiative which requires KEHS grantees to partner with community child care providers;
- Primarily serves families with infants and toddlers who meet the federal poverty guidelines;
- May also be provided in a center-based infant/toddler classroom operated by the KEHS grantee;
- Seeks to increase the availability of child care for infants and toddlers and to increase the quality of child care for all Kansas children;
- Allows KEHS programs to provide quality training to child care providers who partner with them;
- Provides child care through DCF subsidy for parents who are employed, attending school or are in a job training program;
- Supports child care partners in meeting federal Head Start Program Performance Standards; and is Funded through Child Care Development Fund (CCDF) program.

Both KEHS service models, HV and CCP:

- Follow Head Start Performance Standards, which provide specific quality standards for the provision of services;
- Require at least 10 percent of total enrollment slots be made available to children with disabilities;
- Support children's growth in many areas such as language, literacy, and social and emotional development;
- Emphasize the role of parents as their child's first and most important teacher;
- Provide opportunities for parents to improve their parenting skills, knowledge and understanding of the educational and developmental needs of their children;
- Offer parents opportunities for their own growth and support in identifying and meeting goals;
- Provide a comprehensive program designed to meet the individual needs of each child and family, including early education, parent education, nutrition education and family support services;
- Provide opportunities for parents to improve their parenting skills, knowledge and understanding of the educational and developmental needs of their children;
- Are voluntary;
- Collaborate with various community partners to provide the highest level of services to children and families and maximize available resources; and
- Partner with local health departments, Part C-Infant Toddler service providers, Parents as Teachers, and higher education institutions.

KEHS is an evidenced-based prevention program. All KEHS programs have met or exceeded the expected outcomes. Outcomes for all KEHS programs include:

- Pregnant women and newborns thrive
- Infants and children thrive
- Children live in stable and supported families
- Children enter school ready to learn

KEHS is an exceptional preventive measure for families working with PPS to prevent recurrent maltreatment and to prevent out-of-home placement. The child care and home visiting models provide not only daycare services for young children, which provide socialization and educational services, but it also provides an in-home parent skill training component. Additionally, this service provides an ongoing outside interaction for these children who may be otherwise isolated. Children and families who are part of other PPS services are not precluded from participating in KEHS services. Families who are engaged in Family Services, Family Preservation and Foster Care, to include out of home placement remain eligible for KEHS services if the other program eligibility requirements are met. All children under the age of three, who are affirmed or substantiated as victims of abuse or neglect are referred to Kansas Infant-Toddler Services for early intervention assessment. See PPM 2543 Affirmed or Substantiated Case Findings on Children Under the Age of Three.

[http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/PPS\\_Policies/2000\\_Investigation\\_and\\_Assessment/2543\\_Substantiated\\_Case\\_Findings\\_on\\_Children\\_Under\\_the\\_Age\\_of\\_Three.htm](http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/PPS_Policies/2000_Investigation_and_Assessment/2543_Substantiated_Case_Findings_on_Children_Under_the_Age_of_Three.htm).

## F. Jobs for America's Graduates – Kansas

Prevention and Protection Services (PPS) facilitates ongoing collaboration with the Jobs for America's Graduates – Kansas (JAG-K) program. JAG-K's primary focuses are high school graduation and delivering the competencies of the JAG model. The JAG-K program has been added to the transition planning process for older youth in care to ensure consideration in the youth's secondary educational attainment. The collaboration between PPS and JAG-K encourages both programs to continuously look for better methods to meet the needs of older foster youth.

## G. Community-Based Child Abuse Prevention

The lead agency responsible for the administration of Community-based Child Abuse Prevention (CBCAP) funds is the Kansas Children's Cabinet and Trust Fund. The 1999 Kansas Legislature created both the Kansas Children's Cabinet and Trust Fund (KCCTF) to manage the Children's Initiatives Fund (CIF) with a goal of supporting programs promoting the health and welfare of Kansas children. Money from a settlement with the nation's largest tobacco companies known as the Tobacco Master Settlement Agreement funds the CIF. The Legislature established the Kansas Endowment for Youth (KEY) fund to manage settlement money to ensure ongoing funding to children's programs. The legislature specified annual transfers would be made from the KEY fund to the CIF. The Children's Cabinet is a 15-member committee consisting of appointees of the Governor and Legislature and ex officio members. The cabinet advises the Governor and Legislature regarding use of money credited to the CIF and assesses programs receiving CIF money. In 2006, the cabinet partnered with the Institute for Educational Research and Public Service at the University of Kansas (now known as the Center for Public Partnerships and Research) to create an accountability framework to assess CIF programs. The framework encompasses a multi-phase process of information gathering, assessment of programs and recommendations.

The two agencies, KCCTF and DCF, collaborate and work cooperatively together through an inter-agency agreement, establishing the working relationship, duties and responsibilities between them. The DCF Secretary is an ex-officio member of the board for KCCTF and is represented by the DCF Director of Policy and Economic and Employment Services.

Through the CBCAP grant, Kansas is expanding its role in exploring methods for supporting and encouraging collaborative planning efforts in the area of early childhood development, prevention and child welfare. Innovation is being fostered in the CBCAP by more closely integrating prevention of child abuse and neglect with the State's Early Childhood Block Grant program, the child welfare system, and Kansas Strengthening Families. Adverse Childhood Experiences research is being used by CBCAP to inform prevention activities.

One of the prevention programs partially funded by CIF funds is the Family Preservation Program. This program solely serves families referred by PPS. Families participating Family Preservation are at risk for having a child placed in out of home care. Other CBCAP and CIF-funded programs are available to children and families receiving PPS services if they otherwise meet eligibility requirements. DCF is working to improve communication by sharing information with CBCAP, to better serve and provide preventative services for the families in Kansas.

#### H. Citizen Review Panels / Children's Justice Act

The **Kansas Citizen Review Panel – Children Justice Act (CJA) Task Force and Intake to Petition** is one of three Citizen Review Panels in the State of Kansas. The CJA Task Force/Intake Petition Panel places emphasis on gathering citizen input and making recommendations to modify and/or improve the child protective services system from intake to petition. The second panel, the **Kansas Citizen Review Panel – Custody to Transition (KCRP-CT)**, ensures key stakeholder and community voices can provide guidance on building successes and improvement in the child welfare system from custody to transition. The **Child Death Review Board** is charged with reviewing all deaths of children ages birth through 17 years old who die within Kansas and Kansas residents in that age group who die outside of the state. The Board works to identify patterns, trends and risk factors with the goal of reducing the number of child fatalities in the state.

Child Abuse Prevention and Treatment Act (CAPTA) funds are utilized by DCF to contract with Kansas State University to facilitate the Intake to Petition/CJA Task Force panel and Custody to Transition. A representative from Kansas State University facilitates the Intake to Petition Panel, Children's Justice Act Task force, and the Custody to Transition Panel. A representative from the Office of Attorney General, facilitates the Child Death Review Board.

#### I. Kansas Court Improvement Program

Collaboration continues between the Kansas Department for Children and Families (DCF) and the judicial branch through participation in the Supreme Court's Task Force on Permanency Planning (SCTFPP) as well as active participation by court personnel on DCF advisory panels. There is court/legal system participation on all three citizen review panels: The Citizen Review Panel: Intake to Petition, the Citizen Review Board: Custody to Transition and the Kansas State Child Death Review Board. The

Collaboration has been further supported with the implementation of the Strengthening Child Welfare Systems to Achieve Expected Child and Families Outcomes Grant, Kansas Strong for Children and Families.

Coordination between the three branches of government is facilitated by the ongoing involvement of a Judicial Council subcommittee, the Judicial Council Juvenile Offender/Child In Need of Care Advisory Committee (JO/CINC Advisory Committee). The subcommittee includes representatives from the judicial, legislative and executive branches of government. DCF has a representative member on the Judicial JO/CINC Advisory Committee. The committee addresses multiple issues related to the juvenile offender system and the child welfare system and “crossover youth” issues related to both systems. The Committee continues to assist with any needed updates to specific Kansas Judicial Council forms related to either or both the Juvenile Offender Code and the Code for Care of Children. The committee provides input and guidance during the legislative process to ensure the Codes and amendments thereto continue to support compliance with federal law and best practice.

The implementation of the Family First Prevention Services Act (FFPSA) is reliant upon collaboration between the judicial, legislative and executive branches of government. Prior to the 2019 Legislative session, representatives from each branch met and developed legislation to implement the requirements of FFPSA which necessitated statutory changes, specifically what are described in FFPSA as the Qualified Residential Treatment Programs. The legislation was successfully passed during the Legislative session of 2019 and the Kansas Judicial Council JO/CINC Advisory Committee and SCTFPP have begun work on developing the needed court notices and journal entry forms.

OJA conducts two Best Practices in Child Welfare Law Trainings per year in collaboration with DCF as well as a six-hour legal institute/ workshops at the annual Governor’s Conference for the Prevention of Child Abuse and Neglect. Participants include judges, county/district attorneys, agency attorneys, parents’ attorneys, guardian’s ad litem (GALs), Court Appointed Special Advocate (CASA) program staff and members of the Citizen Review Panels.

#### 1. CIP - Joint Project-Judicial Branch with DCF: Permanency

Kansas completed the Child and Family Services Review (CFSR) in 2015. The Case Review Section of the CFSR addressed permanency. Kansas received a designation of “Strength” for Item 22. Permanency Hearings. The statewide assessment indicated “the majority of children have permanency hearings in the first year and subsequently within the next 12 months. Stakeholders agreed permanency hearings occur timely, with most occurring every 6 months.” However, under the Permanency Statewide Data Indicator Performance, Kansas did not meet the national standard in two areas:

- 1) Permanency in 12 months for children entering foster care. The indicator is defined as “of all the children who enter foster care in a 12-month period, what percent discharged to permanency within 12 months of entering foster care?” Kansas did not meet the national standard of 40.5%. The state’s performance was 38.2%.
- 2) Permanency in 12 months for children in foster care 24 months or longer. The indicator is defined as “of all the children who enter foster care on the first day of a 12-month period who had been in foster care (in that episode) for 24 months or more, what percent discharged to permanency within 12 months of the first day of the 12-month

period?” Kansas did not meet the national standard of 30.3%. The state’s performance was 26.3%.

CIP and DCF staff met and agreed the number of days to permanency for children in care in Kansas must be reduced. The data reports created by both the judicial branch and DCF show the number of days, but they do not indicate the reason for the increased number of days to permanency.

Initially, the CIP and DCF agreed to evaluate permanency data prior to the implementation of an intervention. However, several judicial districts and DCF identified a large number of children legally free for adoption with no identifiable issues preventing permanency. DCF and CIP decided to work jointly with Casey Family to identify strengths and weaknesses in the adoption process and then address them through the cadence of accountability with a project Rapid Permanency Review (RPR). The RPR would decrease the number of children in care (increase permanency) and identify areas of needed improvement within the Kansas child welfare system to decrease the time to permanency for all children with adoption as a permanency goal.

The RPR’s target population were children in stable pre-adoptive homes and were free for adoption. RPR was piloted in Shawnee, Sedgwick, Wyandotte, Finney, Ford and Saline counties. The pilot occurred during the week of February 19, 2018. The review process proceeded smoothly with Casey Family staff leading. However, the review tool needed multiple revisions prior to implementation in other additional counties. The CIP Training Grant included the RPR in the summer 2018 Best Practices in Child Welfare Law Training to inform child welfare stakeholders about the process and expansion of the program.

DCF concluded the project was successful and commenced implementation statewide. However, a two day workshop was held in May of 2019 with assistance from the Capacity Building Center for Courts (CBCC) and a new joint project was developed to further reduce the number of days to permanency for children with the permanency goal of adoption.

CIP and DCF will work to create a feedback loop as a part of what is termed the cadence of accountability. The SCTFPP will assist DCF in review of any identified statutes, policies or procedures preventing timely finalization of adoption and permanency for children.

The CBCC assisted in the development of the newly developed joint project. The CIP will continue to provide the CBCC with updates on the project’s progress, but no further assistance is needed at this time.

Kansas completed the Child and Family Services Review (CFSR) in 2015. The Case Review Section of the CFSR addressed termination of parental rights. Kansas received a designation of “Area Needing Improvement” for Item 23: Termination of Parental Rights. The findings were established with completion of the statewide assessment and stakeholder interviews. During the statewide assessment, the state could not provide data on the filing of termination of parental rights. When conducting stakeholder interviews, individuals suggested there was not a consistent process ensuring the timely filing of termination of parental rights.

The judicial branch, FullCourt Juvenile Compliance System, tracks filing of the motion for termination of parental rights and the DCF data system tracks the conclusion of termination of parental rights proceedings when the child is available for adoption. However, Kansas requires neither a separate motion for termination of parental rights to be filed when a parent voluntarily relinquishes parental rights or

documentation in the court file, by journal entry or report, when compelling reasons are cited as to why a motion will not be filed. Kansas statute requires “compelling interests” are to be documented in the agency records (case files).

Reviewing statutes and policies concerning termination of parental rights was identified as an intervention. Judicial review of compelling reason for not seeking termination of parental rights when a child has been out of the home for 15 of the last 22 months was the outcome. Kansas continued to move forward with the review and potential revisions. ACF requested data collection on termination of parental right. DCF and CIP worked together six months to complete data collection

CIP and DCF agree to share data to evaluate timeframes around termination of parental rights. Data collection of termination of parental rights consists of the following:

- DCF provided the CIP a list of all children that had their parental rights terminated in 2017. However, if a child was a part of a sibling group and had the same termination dates only one sibling was listed.
- CIP contacted each of the counties and gathered data concerning the motion to terminate parental rights, the date of the termination hearing or relinquishment by the parents, and if the termination was appealed.
- CIP then provided the data to DCF for review.

Data showed timeliness to termination of the parental rights and termination of parental rights hearings were within the statutory timeframes.

Collection of the 2018 termination of parental rights data began June of 2019.

## 2. CIP - Joint Project-Judicial Branch and DCF: Hearing Quality/Notice of Court Hearings to Foster Parents

Kansas completed the CFSR in 2015. Child Family Service Review, Item 24, Notice of Hearings and Reviews to Caregivers, received a rating of Area Needing Improvement, Stakeholders reported inconsistency existed in notification of court hearings and noted the ability of caregivers to be heard in court is inconsistent across the state. Findings were based on information obtained during the statewide assessment and stakeholder interviews. The CFSR Final Report noted there is no statewide data system for collecting information on type or receipt of court notice.

The SCTFPP, CIP staff and DCF staff met and reviewed the CFSR Final Report and K.S.A. 38-2265 which requires notice of permanency hearings be provided to the following individuals:

- the child’s foster parent or parents or permanent custodian providing care for the child;
- pre-adoptive parents for the child, if any;
- the child’s grandparents at their last known addresses or, if no grandparent is living or if no living grandparent’s address is known, to the closest relative of each of the child’s parents whose address is known;
- the person having custody of the child; and
- upon request, by any person having close emotional ties with the child and who is deemed by the court to be essential to the deliberations before the court.

The SCTFPP determined if the individuals listed under K.S.A. 38-2265 are not provided notice, the permanency hearing cannot proceed. The SCTFPP was hesitant to recommend revisions to statute or improvements due to the lack of data on notices and decided to establish a project between CIP and DCF to address the notice issue.

CIP and DCF developed a survey for foster parents. The SCTFPP requested the survey address all types of notices required under statute; whether the foster parents attended the hearing or not, if they were addressed during the hearings, and the use of the foster parent court report. The survey was issued through the child placing agencies to all foster care placements. The survey was sent out to 2,369 foster families. Kansas received 418 responses with a response rate of 18%.

Survey results were reviewed by SCTFPP and demonstrated a lack of awareness and understanding of K.S.A. 38-2265 which requires notice of hearing and opportunity to be heard to foster parents. The SCTFPP has identified the following as approved interventions:

- Prepare training for child welfare stakeholders concerning the requirement for foster parents to receive notice and be heard during permanency hearings.
- Edit Foster Parent Report to the Court (Policy and Procedure Manual, Appendix 3G)-Completed.
- Consider making Foster Parent Report to the Court (Policy and Procedure Manual, Appendix 3G) available on the DCF placement management system.
- Review notice statute and language requiring the notice to foster parents include the Foster Parent Report to the Court (Appendix 3G) to determine whether revision is needed.
- Review documents in the child's "red book" and consider placing information on the next hearing date and contact information for the guardian ad litem, so the information will be easily available to foster parents.

After implementation of the identified interventions, surveys will be reissued, and data presented to the SCTFPP. A Best Practices Training was held in August of 2018 which included presentation on the statutory requirements concerning foster parents' right to notice and to be heard during permanency hearings. OJA and DCF collaborated in planning, implementation and presentation of the training. The training was held for judges, prosecutors, parents' attorneys, guardians *ad litem*, social workers, CASA volunteers and CRB volunteers.

An ongoing commitment to collaboration between DCF and the courts creates a climate where the shared values of safety, permanence and well-being for all Kansas children provides the framework for effective delivery of child welfare services.

## J. Human Trafficking

In 2013, the Kansas Legislature passed legislation which addressed many aspects of human trafficking. The Human Trafficking Advisory Board (HTAB) was established as the official board to oversee human trafficking issues. Statute defines the structure and membership of the board. Members of HTAB include, but are not limited to: law enforcement personnel, prosecutors, court personnel, advocates, legislators, victims of human trafficking, staff from the Kansas Department for Children and Families and other parties who have expertise related to issues of human trafficking. The DCF Prevention and Protection Services (PPS) Deputy Director of Assessment and Prevention Services and the Anti-Human Trafficking

Program Manager are members of HTAB. During each legislative session since 2013, legislation to further strengthen laws related to human trafficking have been passed.

DCF's ongoing role in addressing human trafficking includes the following:

- If a child is brought into police protective custody and believed to have been subjected to human trafficking, the agency is to complete an assessment to determine safety, appropriate and timely placement and appropriate services to meet the immediate needs of the child.
- Immediately after receiving information a child has been identified as a victim of human trafficking, aggravated human trafficking or commercial sexual exploitation of a child, and in no case later than 24 hours after receiving such information, the Secretary of DCF shall report such information to law enforcement agencies of jurisdiction.
- Immediately after receiving information a child in the custody of the Secretary of DCF is missing, and in no case later than 24 hours after receiving such information, the Secretary of DCF shall report such information to the National Center for Missing and Exploited Children and the law enforcement agency in the jurisdiction from which the child is missing.
- Tracking and taking necessary steps to ensure any children who run away are located and receive appropriate assessment and services upon their return.
- Engage in cross collaboration with other systems/agencies to combat human trafficking and ensure safety of children in care.

The Anti-Human Trafficking Program Manager is responsible to lead DCF's initiative to develop a comprehensive response and service system in Kansas for youth who are victims or are in DCF custody and at risk of becoming victims of human trafficking. This Program Manager participates in local human trafficking task force meetings statewide to gather information of efforts across the state to combat human trafficking and offering assistance and resources. The Program Manager has helped task force groups collaborate with other groups across the state.

## K. Stakeholder Meetings

In addition to utilizing the already established workgroups and/or venues outlined in this section, Kansas conducted a minimum of semi-annual meetings with internal DCF division staff, external stakeholders, and the community over the last four years to discuss CFSR results, Program Improvement Plan (PIP) development, PIP progress, and new improvement initiatives. In March through May 2019, Kansas held seven community convenings across the state to gather feedback from the powerful community voices. Additionally, DCF Secretary Laura Howard and several executive staff members held two DCF Spring Stakeholder Meetings June 18<sup>th</sup>, 2019 in Emporia and June 20<sup>th</sup>, 2019 in Garden City. Hiawatha, Kansas City and Pittsburg participated remotely for the first meeting. Hays and Wichita participated remotely for the second meeting. Attendees received updates on the agency budget, legislative successes and notable program milestones. Participants also learned more about the agency's progress in implementing the Child Welfare System Task Force recommendations and participated in World Café conversations to provide feedback to the agency. Stakeholders provided Kansas with valuable opinions, perspectives, perceptions and ideas which were utilized in drafting the objectives and strategies of the CFSP.

Moving forward in SFY 2020-2024, DCF and its Community Child Welfare Case Management Providers (CWCMP) will continue convening community meetings to obtain information and feedback on practices and processes. Stakeholder meetings provide opportunities to ensure family involvement at a policy-



making level and solicit input and feedback from families and other key stakeholders concerning agency practices.

### III. Assessment of Current Performance in Improving Outcomes

#### **Introduction to Data included in Assessment of Performance**

Kansas reports data using the State Fiscal Year (SFY) time frame on a monthly basis. Kansas also reports upon request by the Federal Fiscal Year (FFY) time frame. This approach allows Kansas to be more readily informed of performance as well as report on outcomes and measures based on the state time frame. Kansas utilizes data from the Child and Family Services Review Data Profile which is comprised of data submitted through biannual federal submission of Adoption and Foster Care Analysis Reporting System (AFCARS) and the annual federal submission of National Child Abuse and Neglect Data System (NCANDS).

NCANDS data represents Children Protective Services (CPS) reports for abuse and/or neglect allegations by Federal Fiscal Year. The 23,598 assigned reports filed in FFY 2014 represent 27,711 unique children. In FFY 2017, there were 23,705 assigned reports in the submission, representing 27,138 unique children.

Kansas has strong data quality as evidenced by consistently meeting the AFCARS standards. Kansas has had no required resubmission of AFCARS files since the FFY 2007 file. Kansas has submitted the annual NCANDS file since 1995, meeting all data quality validation standards required.

Kansas conducts case read reviews quarterly for In-Home and Out of Home Services. The case read sample for each program is derived from the respective case population based on a two-year (or eight quarter) sample of active cases meeting each program case review criteria. The samples are re-determined periodically, except during a Child and Family Service Review (CFSR) Program Improvement Plan (PIP) measurement quarter due to stipulations samples cannot change more than +/- 5% during that time. A Stratified Random Sample is utilized to establish the sample size. The statewide population is stratified by DCF Region. Cases are assigned a random ID number and randomly selected until the correct sample size for each region is achieved. Kansas reviews all samples for proportional representation by age group and recognizes an opportunity to confirm proportional representation of permanency goals in the Out of Home sample.

Kansas began conducting Case-Specific Stakeholder Interviews in SFY 2018 during PIP Measurement Reviews. Case Specific interviews are conducted individually with children, parents, foster parents, case managers, court representatives and/or other professionals who have knowledge about the case. Interviewers utilize the federal Child and Family Services Reviews Stakeholder Interview Guide plus a variety of clarifying and/or follow-up questions created by Continuous Performance Improvement (CPI) staff. Since beginning these reviews, Kansas has finalized 200 cases and interviewed a total of 1081 stakeholders.

Throughout this assessment Kansas identifies “Areas of Opportunity” for outcomes and systemic factors where data suggests a concern regarding not meeting a performance threshold and/or not having data to assess whether an outcome or systemic factor is considered strength or identified as a concern. For the purpose of this document, Kansas chooses to identify “concerns” as “Areas of Opportunity”.

## A. Safety Outcomes 1 and 2

- i. Safety Outcome 1: Children are first and foremost protected from abuse and neglect.

**Item 1: Timeliness of initiating investigations of reports of child maltreatment.** Were the agency's responses to all **accepted child maltreatment reports initiated**, and **face-to-face contact** with the child(ren) made, within time frames established by agency policies or state statutes?

All Child in Need of Care reports shall have an Initial Assessment made without delay. The maximum time allowed to make an Initial Assessment decision or request a Preliminary Inquiry is the end of the next half work day from the time the report is received per Prevention and Protection Services (PPS) Policy and Procedure Manual (PPM) 1330. Kansas Performance Standard for Initial Assessment decisions is 95%. Kansas has seen a significant decrease in timely initial assessments beginning in SFY 2017.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Timely Initial Assessment Decision Standard: 95%	97%	99%	91%	48%	43%	58%				

Although, Kansas is not at the performance standard in this area, it should be noted the number of timely initial assessments is trending upward in SFY 2019. Monthly data shows a significant increase in timely initial assessments beginning January 2019. This shift aligns with the improvements outlined in section iii and an increase in trained screeners. As of May 1<sup>st</sup>, 2019, KPRC had 72 screener positions and 90% are available to screen reports.

### Timely Initial Assessment SFY 2019 by month

Outcome	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	March	Apr
Timely Initial Assessment Decision Standard: 95%	57%	47%	45%	47%	53%	59%	77%	79%	78%	85%

Kansas data shows an increase in Child in Need of Care reports received by the agency between SFY 2014 and SFY 2018, from 65,152 to 72,683. This represents a 12% increase in reports during this time frame. Over the last five years Kansas assigns for further assessment 56% of all reports. The number of reports assigned for further assessment has increased by 14% between SFY 2014 and SFY 2018.

Per PPM 1521, reports assigned for abuse and/or neglect concerns shall be assigned with either a same day or 72-hour response time. Within the assigned response time the Child Protection Services Specialist shall determine safety of the child(ren) who is the subject of the assigned report. Kansas Performance Standard for Timely Contact is 95%. Kansas consistently meets this performance standard. Performance for SFY 2018, indicates 96% of all Child in Need of Care reports assigned the initial contact was made within the response time.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Timely Initial Assessment Decision Standard: 95%	97%	99%	91%	48%	43%	58%				
Timely Initial Contact Standard: 95%	97%	97%	97%	97%	96%	96%				

\*SFY 2019 reflects data from July 2018 to February 2019

### Federal Reviews

Kansas completed the Child and Family Services Review (CFSR) Round 3 in SFY 2015 between April 1<sup>st</sup>, 2015, and May 22<sup>nd</sup>, 2015. Kansas received an overall rating of Strength for Item 1 because 98% of the 40 applicable cases were initiated, and face to face contact with the child(ren) were made within the time frames established by agency policies and/or statutes.

Since completing the CFSR Kansas has finalized three Program Improvement Plan (PIP) measurement case reviews with case specific stakeholder interviews. These measurement reviews have yielded the same information as Kansas' outcomes identified above, this item is most often not met due to delay in timely initial assessment.

#### **Item 1: Timeliness of Initiating Investigations of reports of child maltreatment**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	98%
<b>PIP Review 1:</b>	July 2016 – September 2017	90%
<b>PIP Review 2:</b>	January 2017 – March 2018	61%
<b>PIP Review 3:</b>	July 2017 – September 2018	45%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

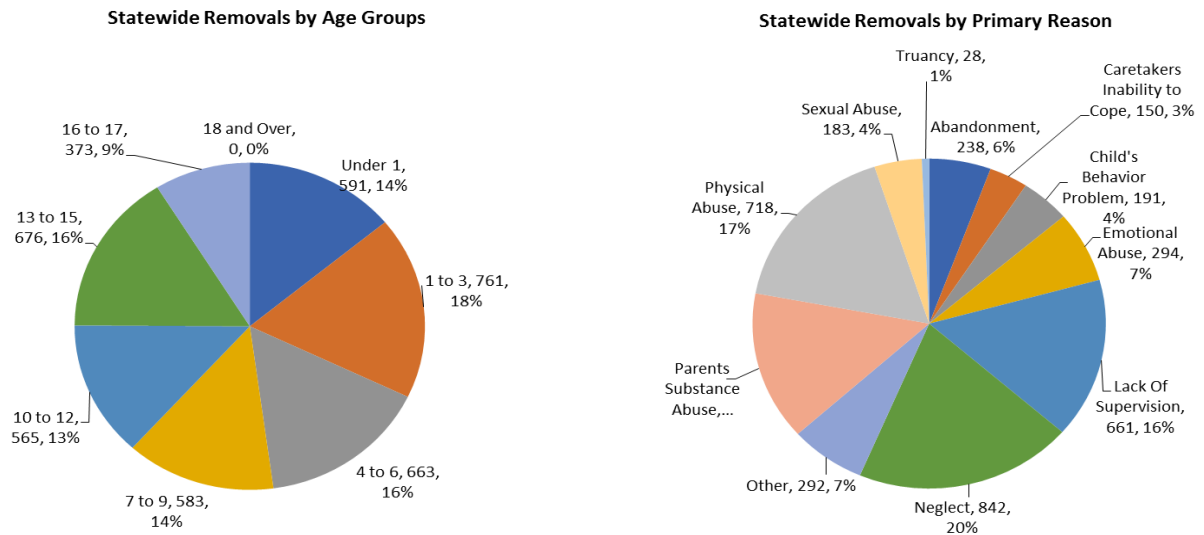
Data indicates Kansas is effective in making timely contact with the victim/family when a report is assigned. However, an Area of Opportunity for Kansas is completing timely initial assessments on all reports.

- ii. **Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.**

#### **Item 2: Services to families to protect children in the home and prevent removal and reentry into foster care. Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification?**

The graphs below provide additional information about children removed from home during SFY 2018. Of the children removed in SFY2018, 62% were age 9 or younger. When recommending removal from home, child protection specialists indicate one primary reason for removal and may indicate up to 15

secondary reasons for removal. The most frequent abuse and/or neglect reason for removal for SFY 2018 is neglect (20%) and the highest non-abuse neglect removal reason is parental substance abuse (15%).



**Family Services**

Family Services can be provided when a family needs services and the specific needs of the family do not require the higher level of intensity of Family Preservation. DCF staff may provide or contract with community-based programs to provide Family Services. For SFY 2019 during the period from July 2018 – February 2019, 97 referrals were made to Community Based Family Services. Referral capacity is determined by staffing levels within the grant agencies.

A set of outcome measures have been established to measure the performance of Family Services statewide, including measures maintaining children safely in the home during services and 365 days post services. This is an area where Kansas has consistently met or exceeded the performance standard.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	* SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Children will remain safely in their home for 365 days post conclusion of the Community Based Family Service provision. Standard: 80%	*	90%	91%	93%	92%	100%				
Children will remain safely in their home during the open Community Based Family Services case. Standard: 90%	94%	96%	99%	97%	97%	95%				

\* The Community Based Family Services program did not begin accepting referrals until SFY 2014.

\*\*Outcome reporting performance for 365 days post conclusion is not a valid outcome until the completion of SFY 2015.

\*\*\* SFY 2019 data reflects July 2018 - February 2019

Family Preservation

Family Preservation services are intensive in-home services offered to families who are at imminent risk of having a child come into custody and removed from their home unless the family can make the changes necessary to provide adequate care and safety. These services assist the family in identifying and understanding the needs within the family placing a child at risk of out-of-home placement and assist them in finding ways to change how the family unit functions. For SFY 2019 during the period from July 2018 – February 2019, there were 1,800 families who received services through Family Preservation. A set of outcome measures have been established to measure the performance of Family Preservation services statewide, maintaining children safely in the home. Since SFY 2015, Kansas has consistently met or exceeded the performance standard of families referred to Family Preservation who did not have a child placed into foster care within 365 days of referral.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Families referred for Family Preservation will not have a child placed outside the home into Foster Care during the 365-day referral period. Standard: 90%	83%	96%	95%	95%	93%	94%				

\*SFY 2019 data reflects July 2018 - February 2019

Services to prevent reentry into foster care

This may be an Area of Opportunity for Kansas. Since SFY 2016, the number of children who enter foster care and are discharged to a permanent home within 12 months and have not re-entered foster care in the following 12 months has increased. Performance to date for SFY 2019, indicates 9.1% of children discharged from foster care for reunification, living with a relative, or guardianship/custodianship reentered foster care within twelve months of being discharged, which negatively exceeds the Federal Standard of 8.3%.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SF Y 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Children who re-entered foster care within 12 months of discharge for reasons of reunification, living with relative, or guardianship/custodianship Standard: 8.3%	*	*	7.5%	8%	8.6%	9.1%				

\*Federal performance measurement for CFSR Round 2 ceased and new measurement for Round 3 began SFY 2016

\*\*SFY 2019 data reflects July 2018 - February 2019

Kansas recognized re-entry as an Area of Opportunity and beginning in SFY 2018 Kansas provided Kansas Post Adoption Resource Center (KPARC) information on all finalized permanent custodianships. A letter is sent to adoptive parents and now legal custodians with services offered. More families can take advantage of additional supports and services to strengthen relationships and decrease crisis and disruptions. Additionally, in SFY 2021 Kansas is implementing Team Decision Making (TDM) for children who are in foster care. A meeting will be held prior to reunification to ensure the transition home is appropriate and to create a plan by building upon formal and informal wraparound supports to assist in

a successful reunification. Please refer to Section IV - Plan for Enacting the States' Vision for more information on implementation of Team Decision Making.

Federal Reviews

Kansas completed the Child and Family Services Review (CFSR) Round 3 in SFY 2015 between April 1<sup>st</sup> 2015, and May 22<sup>nd</sup>, 2015. Kansas received an overall rating of Area Needing Improvement for Item 2 because 88% of the 26 applicable cases were rated as a Strength. Item 2 was rated as a Strength in 90% of the 10 applicable foster care cases, and 88% of the 16 applicable in-home services cases.

Since completing CFSR Round 3, Kansas has finalized three Program Improvement Plan (PIP) measurement case reviews with case specific stakeholder interviews. Kansas did decrease in performance since CFSR in PIP measurement period 1 and 2; however, there was significant improvement in measurement period 3. Kansas has exceeded the 95% CFSR threshold in PIP measurement review 3, however, this item is still considered an Area of Opportunity since the PIP measurement goal of 96.5% has not been met.

**Item 2:** Services to families to protect children in the home and prevent removal and reentry into foster care  
**PIP Measurement Goal:** 96.5%

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	88%
<b>PIP Review 1:</b>	July 2016 – September 2017	76.92%
<b>PIP Review 2:</b>	January 2017 – March 2018	75.76%
<b>PIP Review 3:</b>	July 2017 – September 2018	96%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 3: Risk assessment and Safety Management.** Did the agency make concerted efforts to **assess and address the risk and safety** concerns relating to child(ren) in their own homes or while in foster care?

Kansas makes concerted efforts to assess and address risk and safety concerns of children receiving services in their own homes and in foster care.

Family Services

Family Services is utilized when a family needs services and the specific needs of the family do not require the higher level of intensity of Family Preservation. Services are delivered to the family as a unit. DCF policy requires risk and safety assessments to be completed ongoing throughout the life of a Family Services case. Policy specifically states a risk and safety assessment shall be completed when there is a change in family condition causing concern for the child’s safety; a significant change in visitation structure; upon reunification; or case closure.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Children will remain safely in their home for during the open Community Based Family Services case. Standard: 90%	94%	96%	99%	96%	97%	96%				

\*SFY 2019 data reflects July 2018 - February 2019

### Family Preservation

A set of PPS outcome measures have been established to measure the performance of the Family Preservation services statewide, one of which measures safety of children in the home. In SFY 2018, 99% of families referred to Family Preservation did not have a substantiated finding within 90 days of referral. In SFY 2018, 93% of families referred to Family Preservation did not have a substantiated finding within 365 days of referral.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Families will not experience substantiated or affirmed abuse or neglect within the first 90 days of Family Preservation. Standard: 95%	99%	99%	99%	99%	99%	99%				
*Families will not experience substantiated or affirmed abuse or neglect within the first 365 days of Family Preservation. Standard: 95%	*	96%	95%	95%	93%	94%				

\*In SFY 2017 the level of evidence for maltreatment finding was modified from clear and convincing to preponderance and an additional finding type of affirmed was implemented

\*SFY 2019 data reflects July 2018 - February 2019

### Foster Care

DCF makes concerted efforts to assess and address the risk and safety concerns of children in Foster Care. DCF policy requires risk and safety assessments be completed ongoing throughout the life of a case. Policy specifically states a risk and safety assessment shall be completed when there is a change in family condition causing concern for the child's safety; a significant change in visitation structure; upon reunification; or case closure.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Children in foster care will not experience substantiated or affirmed abuse or neglect within a 12-month period. Standard: 8.5 (lower is better)	*	*	4	4.9	5.63	4.66				

\*SFY 2019 data reflects July 2018 - February 2019

### Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 3 because 78% of the 65 applicable cases were rated as a Strength. Item 3 was rated as a Strength in 85% of the 40 foster care cases, and 68% of the 25 in-home services cases. Since completing the CFSR, Kansas

developed a Program Improvement Plan (PIP) and has finalized three measurement periods. Data reflects risk and safety assessment and management continues as an Area of Opportunity for Kansas.

**Item 3: Risk and Safety Assessment and Management**

**PIP Measurement Goal: 85%**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	78%
<b>PIP Review 1:</b>	July 2016 – September 2017	62.86%
<b>PIP Review 2:</b>	January 2017 – March 2018	69.23%
<b>PIP Review 3:</b>	July 2017 – September 2018	70.77%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

iii. **Safety Outcome 1 and 2 Current and/or Planned Improvement Activities:**

Safety is of paramount importance, and Kansas is implementing significant improvement activities to become in Substantial Conformity with Safety Outcomes 1 and 2.

Kansas implemented the Child and Family Services Review Program Improvement Plan in April 2017 which addressed practice improvements over the last two years. Please refer to Attachments 19, 20, and 21, submitted with the final Annual Progress and Services Report for the 2015-2019 CFSP, for additional information on implemented improvement activities.

Kansas made significant enhancements which are reflected in SFY 2019’s increase of Kansas Protection Report Center’s timely assessments outlined earlier in this document. In SFY 2018, Kansas contracted with Annie E. Casey Foundation (AECF) to complete an assessment of the Kansas Protection Reporting Center. It was determined a high volume of reports and limited number of screeners were resulting in delays in the timeliness of screening. A staffing snapshot was reviewed and as of May 21<sup>st</sup>, 2018, KPRC had a total of 70 screener positions but only 56% were currently available to screen reports. As of May 1<sup>st</sup>, 2019, KPRC had 72 screener positions and 90% were available to screen reports.

Based on the AECF assessment, focus groups completed with staff, PIP Measurement reviews and outcome data, Kansas made the following modifications to the Kansas Protection Reporting Center (KPRC). The screening process was modified to have one person complete a report from start to finish. A third call center was added in Kansas City as an opportunity to fill eight previously vacant positions. A new structure was developed to maintain low call wait time and low numbers of reports needing processed. Staff are now assigned to specific tasks through a weekly action plan which divides staff into four teams: web, fax, phone or quality assurance. A data analyst position was added to KPRC to collect weekly data, analyze staff productivity, identify time periods to increase staffing, and assess overall performance. The analyst also meets with supervisors and provides weekly reports allowing supervisors to immediately address performance issues. A KPRC Advisory Workgroup was formed in the summer of SFY2018 and met weekly. This group consisted of KPRC Protection Specialists, KPRC Intake Protection



Specialists, KPRC Supervisors, Assessment and Prevention (AP) specialists, AP supervisors and AP administrators. The purpose of this workgroup was to identify barriers and inefficiencies at KPRC. Based on feedback from this workgroup and leadership within KPRC inefficiencies were addressed by eliminating duplication, removing unnecessary fields in the reporting system, and automating required notifications. A phone script for KPRC screeners was also identified as a need and has been implemented with easy to follow directions to allow for more efficient screens. Lastly, Kansas implemented a triage strategy which utilizes staff outside of KPRC to screen reports, as needed.

In addition to those modifications identified above, Kansas is making program improvements for SFY 2020-2024. Kansas has contracted with a third-party consultant to review current KPRC processes and make tangible recommendations for improvement. The consultant has interviewed line staff, supervisors, trainers, and Human Resources and is currently reviewing all processes of receiving an intake, training of new and seasoned staff, recruitment, staffing levels, and computer systems. Recommendations are anticipated in SFY 2020.

Kansas began exploring safety and risk assessments with Casey Family Program in SFY 2017 (PIP Strategy 1.2) and reviewed the Structured Decision Making (SDM) model aimed at improving performance in Safety Outcome 2. Kansas selected the National Council on Crime and Delinquency (NCCD) Structured Decision Making (SDM) model for the Kansas Protection Report Center. The NCCD had a kickoff for implementation in June 2018. Focus groups with KPRC and Assessment and Prevention field staff occurred in June 2018. Kansas renegotiated PIP Strategy 1.2 which included implementation of PIP Activities related to SDM (PIP Activities 1.2.3, 1.2.4, 1.2.5 and 1.2.6) in the Child and Family Services Plan. Kansas is still actively working towards implementation of SDM at the point of the intake decision. Inter-Rater Reliability Testing for Intake was completed March 27, 2019. The Go live date for Intake is August 2019. In January and February 2019, the SDM Advisory Workgroup began meeting to customize the SDM risk and safety assessment. Inter-Rater Reliability testing for the risk and safety assessment began in May 2019. Implementation of SDM for the safety and risk assessment is currently being reviewed further.

With the growing number of children in care for Neglect and a Family in Need of Assessment (FINA) reasons, Kansas implemented Risk Removal Staffing Teams in September 2018. Prevention and Protection Services (PPS) practitioners referred cases when there was a potential for removal. Risk Removal Teams included staff from all DCF services (Economic and Employment Services, Child Support Services, Prevention and Protection Services, and Rehabilitation Services) to provide additional resources and services to ensure the safety of children and prevent removals when possible. There were 281 children staffed and upon completion of this initiative in February 2019, 45% of children were successfully diverted from foster care.

Similar to Risk Removal Staffings, in 2020-2024 Kansas will implement additional practice and program modifications statewide, aimed at protecting children by keeping families safe, healthy, and together whenever possible. In May 2019, Kansas held a kick-off meeting for implementation of Team Decision Making (TDM). This practice approach will bring families together, allow for development of strong safety plan decisions and give families a voice. These meetings are facilitated by a non-case carrying specialist and is held before the child is removed from their home. During interviews with parents through an assessment completed in collaboration with Annie E. Casey Foundation, parents stated:

*“My honest opinion is that they were not listening and hearing... We truly wanted to change and that our voices would be heard.”- Birth Parent*

*“When DCF goes out for the initial meeting with the parent, they should ask, ‘what is the number one thing you want to help with your situation?’ We know what we need.” – Birth Parent*

Kansas heard these parents loud and clear and recognize change is needed. Team Decision Making will provide an opportunity to work with families when they are most stressed and driven to make necessary changes to keep their children safe. Families will be active participants in the discussion of improvement, service referrals and identifying protective factors. They are active decision-makers in selecting service for themselves and their children.

Additionally, two rounds of Facilitated Guidance Discussions, with a focus on risk and safety were completed between October 2018 and March 2019 for Family Preservation and Foster Care Services. Each round consisted of targeted on-sites spanning each region of the state. Training was offered at each site on identifying and differentiating safety concerns and risk factors, ongoing safety and risk assessment, case file documentation and the Facilitated Guidance process. Facilitated Guidance teams were formed for each site consisting of DCF Administration staff, DCF Regional staff (Foster Care (FC) Program Administrators, FC Enhancement Administrators, FC Liaisons, Assessment & Prevention Administrators, Assessment & Prevention Specialists, and/or Family Preservation Liaisons) and Child Welfare Case Management Providers (CWCMP) staff (Directors, Supervisors and case teams). The Facilitated Guidance team reviewed three to six cases at each site and documented every case on a review tool designed to help facilitate structured conversations. The case team was provided a copy of the review tool and responsible for completing any Action Steps identified by the Facilitated Guidance team.

Feedback received from staff about Facilitated Guidance was overwhelmingly positive, and many sites requested the activity be held regularly. Case teams felt more support from administrators and administrators appreciated the collaboration between agencies and among CWCMP and assessment and prevention practitioners.

Although Facilitated Guidance Discussions will not be moving forward as previously structured, Kansas will be implementing future activities with the same goal of coaching supervisors and practitioners around risk and safety. The University of Kansas School of Social Welfare (KUSSW) and its partners, the Kansas Department for Children and Families (DCF) and the state’s network of privatized providers of adoption and foster care (KVC Kansas and Saint Francis Community Services, Inc.), in concert with the Court Improvement Program (CIP), was awarded the Strengthening Child Welfare Systems Grant, Kansas Strong for Children and Families (KS Strong). Based on CFSR and statewide data analyses, Kansas Strong will be targeting four populations, one of which is preventing entry in foster care among children receiving in-home services. One of Kansas Strong’s strategies is to implement a skills-based coaching program for public and private supervisors across all child welfare programs. This will be implemented to address basic social work practices related to risk and safety assessment.

The passage of Family First Prevention Services Act (FFPSA) is an opportunity which offers exciting possibilities for Kansas. Kansas is amplifying foster care prevention services through grant awards in SFY 2020 for emerging and evidenced-based prevention services, including specified mental health, substance abuse, parenting education programs and kinship navigator programs supported by the prevention clearinghouse. In Spring 2019, Kansas held seven community convenings in Olathe, Wichita,

Salina, Dodge City, Hays, Pittsburg and with supervisors from all programs. There was significant community participation, including but not limited to the following: law enforcement, judges/court personnel, mental health centers, child placing agencies, substance use disorder treatment facilities, school personnel, early childhood education, home visitors, congregate care facilities, foster parents, managed care organizations, and doctors/hospital personnel.

The number of children in out of home placement in Kansas on the last day of the State Fiscal Year has been increasing since SFY 2011. On June 30, 2011, there were 5,199 children in out of home placement and on June 30, 2018, there were 7,588 children, a 32% increase, in out of home placement. It is evident, there is a need for partnerships with families in communities with local organizations, private providers, and other stakeholders to generate innovations alongside families to reduce the need for entry into foster care, and the community shares this vision.

*“We envision a Kansas child welfare system that is highly coordinated, connected, and efficient. We believe in the power of people working together and in the strengths of all Kansans (children and adults).” – Participant*

*“I envision a healthy system that supports the work of supporting families to be the best parents they can be and to help keep children safe and in thriving environments.” – Participant*

Please refer to Section IV - Plan for Enacting the State’s Vision for more information on implementation of Structured Decision Making, Team Decision Making and Family First Prevention Services.

## B. Permanency Outcomes 1 and 2

- i. Permanency Outcome 1: Children have permanency and stability in their living situations.

**Item 4: Stability of foster care placement.** Is the child in foster care in a **stable placement** and were any changes in the child’s placement in the best interests of the child and consistent with achieving the child’s permanency goal(s)?

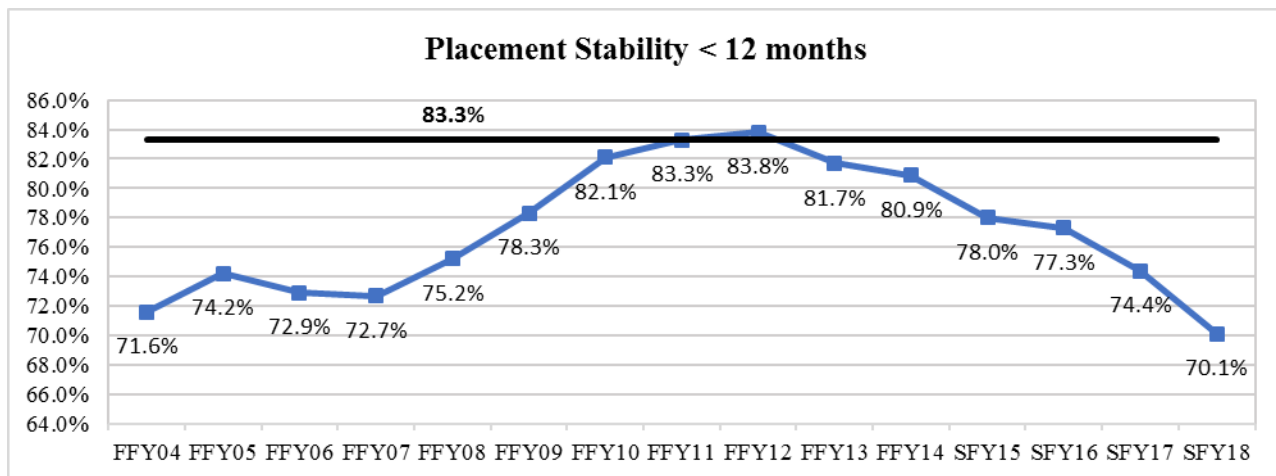
Kansas monitors placement stability outcomes from Child and Family Services Review (CFSR) Round 2 and Round 3. Placement stability continues to be an Area of Opportunity for Kansas.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Of all children served in foster care who were in foster care at least 8 days but less than 12 months, what percent had two or fewer placement settings? Standard: 83.3%	81%	78%	77%	74%	70%	69%				
Of Children who enter foster care in a 12-month period, the total number of days these children have been in foster care on the last day of the 12-month period. Rate of moves per 1,000 days in foster care Standard: 4.12% (lower is better)	*	*	6.6%	7.1%	8.9%	9.7%				

\*SFY 2019 data reflects July 2018 - February 2019

\*\*Second outcome was established in SFY 2016

Placement stability for children in care less than 12 months: Percentage of children in out of home placement who experienced no more than 2 placements. Federal Standard: 83.3%



### Federal Reviews

Kansas completed the Child and Family Services Review (CFSR) Round 3 in SFY 2015 between April 1<sup>st</sup>, 2015, and May 22<sup>nd</sup>, 2015 and received an overall rating of Area Needing Improvement for Item 4 because 70% of the 40 applicable cases were rated as a Strength. Since completion of CFSR, Kansas has finalized three measurement reviews.

**Item 4: Stability of Foster Care Placement**

**PIP Measurement Goal: 79.3%**

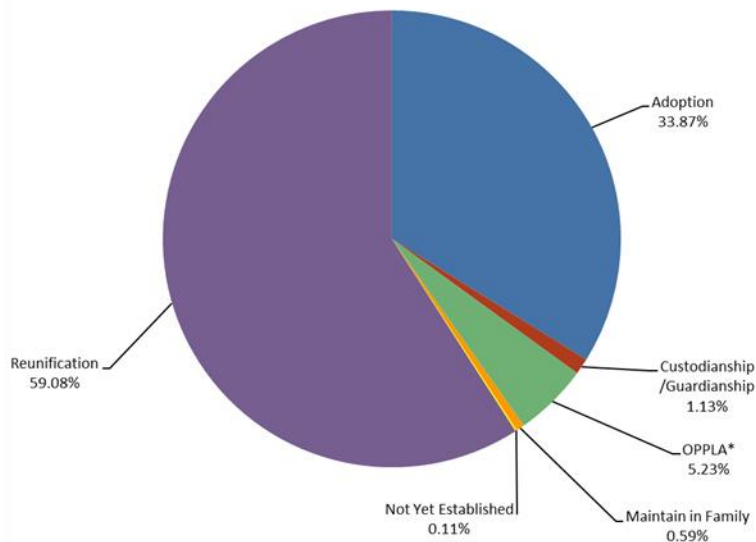
Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	70%
<b>PIP Review 1:</b>	July 2016 – September 2017	68.89%
<b>PIP Review 2:</b>	January 2017 – March 2018	72.5%
<b>PIP Review 3:</b>	July 2017 – September 2018	72.5%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 5: Permanency goal for the child.** Did the agency establish **appropriate permanency goals** for the child in a **timely manner**?

In SFY 2018, 59% of children in out of home placement had a permanency goal of reunification. For the same time period, 34% had adoption as their permanency goal.

**SFY 2018 Permanency Goal for Children in Out of Home Placement**



Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 5 because 65% of the 40 applicable cases were rated as a Strength. Since completion of CFSR, Kansas has finalized three measurement reviews. Kansas has increased in performance since CFSR and successfully met the PIP Measurement goal in PIP Review 1.

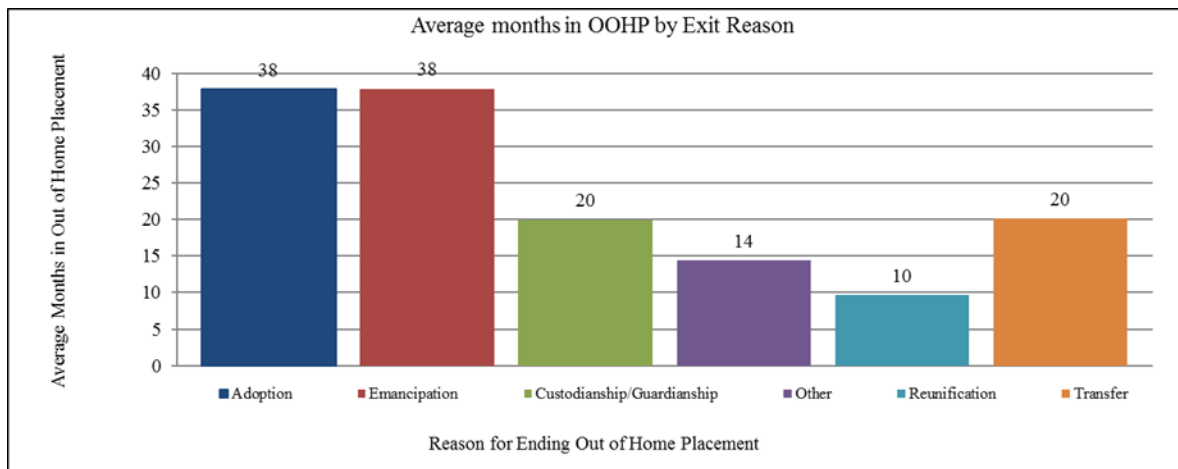
**Item 5: Permanency Goal for Child**  
**PIP Measurement Goal: 74.7%**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	65%
<b>PIP Review 1:</b>	July 2016 – September 2017	77.78%
<b>PIP Review 2:</b>	January 2017 – March 2018	56.41%
<b>PIP Review 3:</b>	July 2017 – September 2018	72.5%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 6: Achieving Reunification, guardianship, adoption, or other planned permanent living arrangement.** Did the agency make concerted efforts to **achieve reunification, guardianship, adoption, or other planned permanent living arrangement** for the child?

Kansas recognizes the following six reasons for ending out of home placement: Adoption, Emancipation, Custodianship/Guardianship, Other, Reunification and Transfer, which is defined as transfer to another state agency, such as KDOC-JS. The reason of “Other” includes; death of a child, discharged for living with relative, or runaway. Kansas monitors average length of stay for each of the reasons for ending out of home placement. The graph below represents SFY 2018.



Kansas monitors the CFSR Round 3 permanency statewide indicators. At this time, Kansas is not meeting the national standard for the outcomes identified below. However, data for SFY 2019 July – February shows an increase in performance for children who were in foster care 12 to 23 months and 24 months or longer.

Federal Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
% of children who discharged to permanency within 12 months of entering foster care and before turning 18. Standard: 40.5%	*	*	40%	38%	37%	37%				
# of children who were in foster care 12 to 23 months on the first day of the 12-month reporting period, who discharged to permanency within 12 months and before turning 18. Standard: 43.6%	*	*	41%	40%	37%	39%				
# of children who were in foster care 24 months or longer on the first day of the 12-month reporting period, who discharged to permanency within 12 months and before turning 18. Standard: 30.3%	*	*	31%	35%	29%	35%				

\*SFY 2019 data reflects July 2018 - February 2019

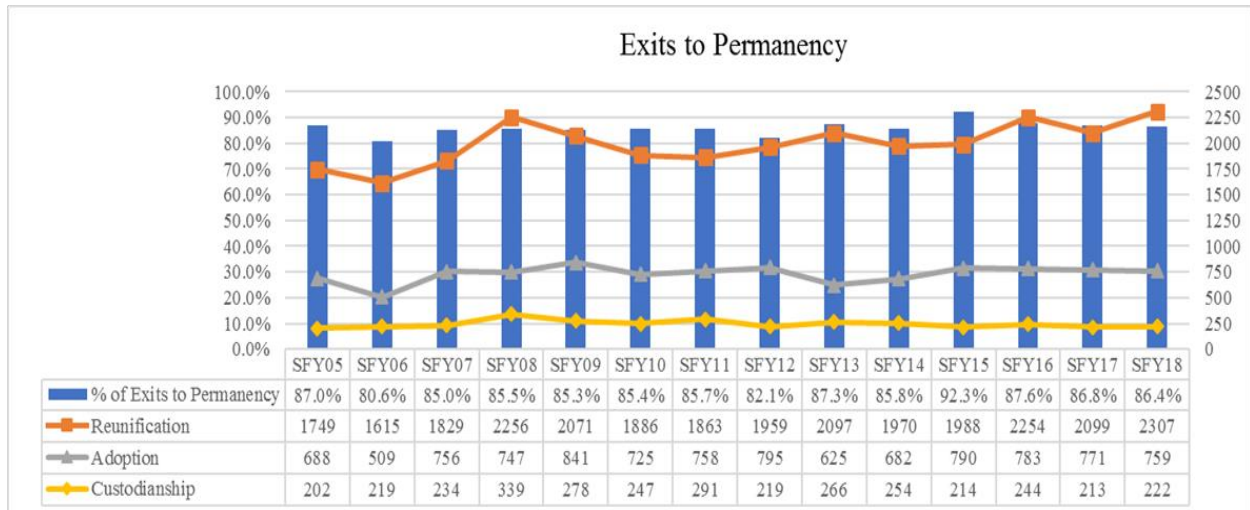
\*\*Outcomes established in SFY 2016

Similarly, to the outcomes above, Kansas has seen an increase in performance in data from SFY 2019 July-February, of children who became legally free for adoption in the 12-month period prior to the year.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Of all children who became legally free for adoption in the 12-month period prior to the year, what percent was discharged from foster care to a finalized adoption in less than 12 months of becoming legally free? Standard: 45.8%	45%	43%	42%	40%	29%	37%				

\*SFY 2019 data reflects July 2018 - February 2019

The percentage of exits to permanency (reunification, adoption or custodianship) remains fairly stable; between 80% and 90% of all exits are exits to permanency. In SFY 2018, the number of reunifications (2,307) was a 10% increase compared to SFY 2017. Custodianships also increased in SFY 2018 compared to SFY 2017 (4%).



**Federal Reviews**

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 6 because 63% of the 40 applicable cases were rated a Strength. Since completion of CFSR, Kansas has finalized three measurement reviews and timely permanency remains an Area of Opportunity.

**Item 6:** Achieving Reunification, guardianship, adoption, or other planned permanent living arrangement  
**PIP Measurement Goal:** 72.3%

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	62.5%
<b>PIP Review 1:</b>	July 2016 – September 2017	44.44%
<b>PIP Review 2:</b>	January 2017 – March 2018	47.5%
<b>PIP Review 3:</b>	July 2017 – September 2018	47.5%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

- ii. Permanency Outcome 2: The Continuity of Family Relationships and Connections is Preserved for Children.

**Item 7: Placement with Siblings:** Did the agency make concerted efforts to ensure that **siblings in foster care are placed together** unless separation was necessary to meet the needs of one of the siblings?

Child Welfare Case Management Provider contracts continue to stress the importance of keeping brothers and sisters placed together in foster care. The current contract includes Sibling Placement as a contract outcome.



Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Of all children in out of home placement who have siblings in out of home placement, what percent are placed with at least one sibling? Standard: 78%	79%	78%	79%	77%	74%	74%				

\*SFY 2019 data reflects July 2018 - February 2019

### Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Strength for Item 7 because 100% of the 14 applicable foster care cases were rated as Strength. Since completion of CFSR, Kansas has finalized three measurement reviews. Data suggests this is an Area of Opportunity for Kansas.

### **Item 7: Placement with Siblings**

**PIP Measurement Goal: NA**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	100%
<b>PIP Review 1:</b>	July 2016 – September 2017	85.71%
<b>PIP Review 2:</b>	January 2017 – March 2018	82.35%
<b>PIP Review 3:</b>	July 2017 – September 2018	76.19%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 8: Visiting with Parents and Siblings in Foster Care:** Did the agency make concerted efforts to ensure that **visitation between a child in foster care and his or her mother, father, and siblings** was of sufficient frequency and quality to promote continuity in the child’s relationships with these close family members?

Visitation remains a key component of the family centered care approach adopted by the agency. Frequent visitation not only provides opportunity for families to maintain a connection with the child, it provides additional opportunities to assess interaction and the need for intervention or additional support.

### Federal Reviews

Kansas received an overall rating of Area Needing Improvement for Item 8 because 85% of the 26 applicable foster care cases were rated as a Strength. In 75% of the 8 applicable cases, the agency made concerted efforts to ensure both the frequency and quality of visitation with a sibling(s) in foster care who is/was in a different placement setting was sufficient to maintain and promote continuity of the relationship. In 90% of 21 applicable cases, the agency made concerted efforts to ensure that both frequency and quality of visitation between the child in foster care and his or her mother was sufficient to

maintain and promote the continuity of the relationship. In 92% of 12 applicable cases, the agency made concerted efforts to ensure both frequency and quality of visitation between the child in foster care and his or her father was sufficient to maintain and promote the continuity of the relationship.

Since completion of CFSR, Kansas has finalized three measurement reviews. Data suggests this remains an Area of Opportunity for Kansas.

**Item 8: Visiting with Parents and Siblings in foster care**  
**PIP Measurement Goal: NA**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	85%
<b>PIP Review 1:</b>	July 2016 – September 2017	61.76%
<b>PIP Review 2:</b>	January 2017 – March 2018	81.48%
<b>PIP Review 3:</b>	July 2017 – September 2018	65.52%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 9: Preserving Connections.** Did the agency make concerted efforts to **preserve the child’s connections** to his or her neighborhood, community, faith, extended family, Tribe, school, and friends?

Preserving connections for children in foster care continues to be an expectation in the Child Welfare Case Management Provider contracts. The expectations for increased parent/child interactions, siblings being placed together, placement with relatives or other non-related kin, and placement within the same school catchments area are methods to increase earlier reunification for children in out of home care.

Success Indicator	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Permanent Connection: % of Adults ending Custody with Secretary having an identified overall / everyday living connection for success	18%	55%	60%	76%	81%	78%				

\*SFY 2019 data reflects July 2018 - February 2019

Young people who leave the Secretary's custody shall have at least one connection for success with an adult they can reach out to for support. Youth shall also be assisted in identifying additional connections with community resources for help with housing, employment, transportation, finances, and school. The CWCMP worker shall work with the young person and community agencies, including Youthrive, extended family members, foster parents and their relatives, teachers or ministers, friends, or volunteer staff to help the young person find connections for success. All young people shall be provided with opportunities to interact and develop relationships with dedicated adults in the community. CWCMP staff, including IL Coordinators, shall not be considered for this purpose. Connections for success are

documented in Section 6: My Connections Plan in the PPS 3059 My Plan for Successful Adulthood. Section 6 is reviewed at every transition planning meeting with the youth and kept up to date.

Success Indicator	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Of all children in out of home placement who are age 6 or older, what percent attend the same school as prior to Removal? Standard: 25%	15%	16%	15%	15%	16%	17%				

\*SFY 2019 data reflects July 2018 - February 2019

Data indicates the percentage of children who attend the same school after removal from the home as prior to removal may be an area of opportunity in Kansas. Fewer than 25% of children removed from the home since SFY 2010 have remained in their home school.

### Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 9 because 83% of 40 applicable foster care cases were rated as a Strength. Since completion of CFSR, Kansas has finalized three measurement reviews.

### **Item 9: Preserving Connections**

**PIP Measurement Goal: NA**

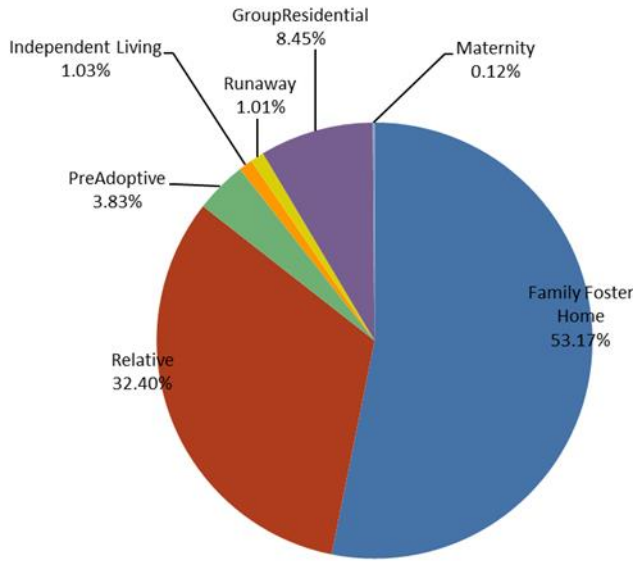
Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	83%
<b>PIP Review 1:</b>	July 2016 – September 2017	75.56%
<b>PIP Review 2:</b>	January 2017 – March 2018	76.92%
<b>PIP Review 3:</b>	July 2017 – September 2018	80%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 10: Relative Placement.** Did the agency make concerted efforts to **place the child with relatives** when appropriate?

Placement with relatives or other kin continues to be the preferred placement, when it is in the child’s best interest.

Placement Settings for Children in Out of Home SFY2018



The current Child Welfare Case Management Provider contracts include Placed with Relatives as a contract outcome. Kansas has met or exceeded the standard for children placed with relatives since SFY 2011.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Of all children in out of home placement, what percent are placed with a relative? Standard: 29%	31%	32%	33%	33%	32%	32%				

\*SFY 2019 data reflects July 2018 - February 2019

\*This item was a success indicator until SFY 2013, when it became an outcome measure.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 10 because 86% of 37 applicable foster care cases were rated as a Strength. Since completion of CFSR, Kansas has finalized three measurement reviews. Case reviews, interviews, and aggregate data suggest Kansas makes concerted efforts to identify, locate, and evaluate maternal and paternal relatives for children.

**Item 10: Relative Placement**  
**PIP Measurement Goal: NA**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	86%
<b>PIP Review 1:</b>	July 2016 – September 2017	88.64%
<b>PIP Review 2:</b>	January 2017 – March 2018	80%
<b>PIP Review 3:</b>	July 2017 – September 2018	92.5%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

**Item 11: Relationship of Child in Care with Parents.** Did the agency make concerted efforts to promote, support, and/or maintain **positive relationships between the child in foster care and his or her mother and father** or other primary caregivers from whom the child had been removed through activities other than arranging for visitation?

When serving children and families there is a major emphasis on creating the most family and child friendly environment for those served by DCF. This facilitates a level of engagement crucial to successful outcomes related to permanency and stability. Policy and Procedure Manual (PPM) 3237 states, “If the case plan goal is reintegration, in person parent/child interaction shall occur at least once a week, with telephone and email contact if deemed appropriate and in the best interests of the child. Parent/child interaction shall increase in duration, as appropriate.”

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 11 because 79% of the 24 applicable foster care cases were rated as a Strength. In 81% of the 21 applicable cases, the agency made concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her mother. In 92% of the 12 applicable cases, the agency made concerted efforts to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his or her father.

To date, Kansas has finalized three PIP measurement reviews. Data suggests making concerted efforts to promote, support, and otherwise maintain a positive, nurturing relationship between the child and his and her parents is an Area of Opportunity for Kansas.

**Item 11: Relationship of Child in Care with Parents**

**PIP Measurement Goal: NA**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	79%
<b>PIP Review 1:</b>	July 2016 – September 2017	77.42%
<b>PIP Review 2:</b>	January 2017 – March 2018	73.08%
<b>PIP Review 3:</b>	July 2017 – September 2018	62.96%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

iii. **Permanency Outcome 1 and 2 Current and/or Planned Improvement Activities:**

Kansas is dedicated to improving pathways to permanency by increasing timeliness, stabilizing placements, and promoting continuity of child’s connections.

As part of the renegotiated PIP, Rapid Permanency Reviews (RPR) was added as Activity 3.2: Enhance permanency and effectiveness with children in out-of-home care. The RPR model is designed to identify systemic barriers within the permanency process, implement solutions to “bust” through the barriers to reach permanency and replicate any “bright spots” found along the way.

Facing growing numbers of children in care with a case plan goal of adoption, Kansas elected to apply RPR to the adoption process. To define the target population, Kansas identified children who have a case plan goal of adoption, have been in care 15 of the last 22 months, are legally free for adoption and have been stable in a family-like setting for at least six months. A sample of 300 children, drawn from the target population in five counties (Shawnee, Sedgewick, Wyandotte, Ford and Finney), was selected as the pilot cohort.

Using feedback from stakeholders and information from RPR and other permanency-focused efforts, Kansas made sweeping changes to adoption policy and practice in Fall 2018. The most common bottleneck identified by RPR was the adoption packet—a collection of forms to be completed by an identified adoptive resource before the CWCMP would even begin the adoption assessment. Prospective adoptive families often complained about completing multiple packets because caseworkers misplaced them or reported the packet was lost in the mail. In response, Kansas created a two-page adoption application.

In SFY 2017, DCF contracted with the CWCMPs for the Kansas Parent Management Training Oregon Model (K-PMTO), an evidence-based intervention with family preservation and foster care, to promote reunification and/or placement stability. In SFY 2018, the intervention was implemented with identified families who meet specified criteria to achieve more timely permanency. In SFY 2019, DCF continued to contract with the CWCMPs for the delivery of K-PMTO with identified families who met specified criteria to achieve more timely permanency or safely maintain in the home.

Carematch, the Kansas placement management system, will deploy for testing July 1, 2019 and goes live October 1, 2019. The system will have data sharing between DCF, child welfare case management providers (CWCMP), and Child Placing Agencies (CPA). This system will contain every licensed foster home or residential bed, to be entered into a single system, regardless of which CPA sponsors the home. Additionally, this system will capture the placement abilities and characteristics. When a child needs placement, the system will look at all open and licensed beds. The search for placement will be based on needs of the child. The system will provide the practitioner with top matches to choose from for the child.

The Icebreakers model, originally developed by the Annie E. Casey Foundation, was selected in collaboration with the Capacity Building Center (CBC) to help strengthen connections between birth parents and foster parents to provide continuity of relationships, better meet the child's needs while in care and increase placement stability and the likelihood of successful and timely reunification. In November 2017, the CBC, DCF, and Kansas stakeholders began meeting to develop a Theory of Change and plan the implementation of Icebreakers. A pilot of Icebreakers was planned for June 2018 through August 2018—though it was later adjusted to run through October 2018. Icebreaker conversations expanded to 80+ counties on March 1, 2019. By July 1, 2019, Icebreaker conversations will be policy and practice in all 105 Kansas counties.

Tracking Icebreaker Conversations will help ensure Icebreakers are being held for each eligible placement. CareMatch Placement Management System will be utilized to track Icebreaker Conversations. When a placement is made in CareMatch, the system will always ask whether the placement meets criteria for an Icebreaker (per policy). If an Icebreaker is marked as required, an auto-generated task is placed on a user's dashboard with other post-placement tasks to be completed. When the Icebreaker has been held and the date entered in CareMatch, the Icebreakers task will disappear from the task list on the user's dashboard. Tracking capability will be incorporated into CareMatch when the system deploys on 07/01/19 for testing. CareMatch (and Icebreakers tracking) is scheduled to "go-live" on 10/01/19. Tracking Icebreaker Conversations will help ensure Icebreakers are being held for each eligible placement.

Qualitative data will help ensure long term fidelity to the Icebreakers model and may inform any revisions to policy or practice. The ability for Icebreaker participants (facilitators, birth families, foster families and youth) to provide feedback to DCF has continued, and the feedback will be reviewed and analyzed. Icebreaker participants may provide feedback on a paper survey or through a new electronic survey located on the agency's public website:

<http://www.dcf.ks.gov/services/PPS/Pages/IcebreakersSurvey.aspx>

The paper and electronic surveys are identical, and all feedback may be submitted anonymously.

DCF will collect data over time to measure the success of Icebreakers. According to the theory of change developed for the Kansas Icebreakers initiative, encouraging connections between birth parents and foster parents is expected to increase placement stability and improve the likelihood and timeliness of permanency. After Icebreakers has been implemented for one year (October 2019 to October 2020), success indicators for all cases with at least one Icebreaker will be collected. The success indicators to be measured include placement stability, reintegration rates and timeliness to permanency through reintegration.

To better level caseloads across the state, the new Foster Care Grants establish smaller catchment areas. These grants will be implemented in SFY 2020, will have eight catchment areas to increase quality of care and bringing more community providers and partners to the table. The foster care grants are focused on supporting children and families, promoting permanency and being responsive to the courts. It will also set caseload requirements for all areas of care, identify specific assessments and services to include trauma-informed care.

In SFY2020, Kansas will launch a phased implementation of Team Decision Making (TDM). Kansas is starting with the front end and will implement TDM to increase placement stability for children in foster care in SFY 2021. The TDM meeting is held before the child moves from their home or current placement. Kansas is receiving implementation and support from the National Center for Crime and Delinquency and Annie E. Casey Foundation (AECF). A case study completed by AECF, suggests TDM meetings made it 40% less likely that a placement change, particularly to a more restrictive setting, would be recommended.

Additionally, a major focal point of the new grant, Kansas Strong for Children and Families is improving timely adoption and timely reunification. The grant was awarded to the University of Kansas School of Social Welfare by the U.S. Department of Health and Human Services. In SFY 2020-2024, an adoption tracking tool will be implemented to reduce the time to adoption. This Adoption Plan will include measurable objectives, a time schedule, and a skill-based coaching program to promote engagement and support in case planning to advance safety and permanency outcomes.

More information related to these initiatives can be located in Section IV - Plan for Enacting the State’s Vision.

**C. Well-Being Outcomes 1, 2 and 3**

- i. Well-being Outcome 1: Families have enhanced capacity to provide for their children’s needs

**Item 12: Needs and services of child, parents and foster parents.** Did the agency make concerted efforts to **assess the needs** of and **provide services** to **children, parents, and foster parents** to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family?

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 12 because 58% of the 65 cases were rated as a Strength. Item 12 was rated as a Strength in 63% of the 40 foster care cases, and 52% of the 25 in-home services cases.

**Item 12: Needs and Services of Child, Parents, and Foster Parents**  
**PIP Measurement Goal: 66.30%**

Review Type and Period Under Review		Item Performance
CFSR:	April 2014 – May 2015	58%



<b>PIP Review 1:</b>	July 2016 – September 2017	57.14%
<b>PIP Review 2:</b>	January 2017 – March 2018	44.62%
<b>PIP Review 3:</b>	July 2017 – September 2018	55.38%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided by case type below.

Assessments:

<b>Practice Description</b>	<b>Foster Care</b>	<b>In-Home Services</b>	<b>All Case Types</b>
The agency conducted formal or informal initial and/or ongoing comprehensive assessments of the <b>child</b>	93.6% (117) of 125	73.33% (55) of 75	86% (172) of 200
The agency conducted formal or informal initial and/or ongoing comprehensive assessments of the <b>mother</b>	79.76% (67) of 84	83.56% (61) of 73	81.53% (128) of 157
The agency conducted formal or informal initial and/or ongoing comprehensive assessments of the <b>father</b>	65.67% (44) of 67	56.6% (30) of 53	61.67% (74) of 120
The agency conducted formal or informal initial and/or ongoing comprehensive assessments of the <b>foster or pre-adoptive parents</b>	87.18% (102) of 117	NA	87.18% (102) of 117

Services:

<b>Practice Description</b>	<b>Foster Care</b>	<b>In-Home Services</b>	<b>All Case Types</b>
Appropriate services were provided to meet the needs of the <b>child</b>	83% (83) of 100	62.96% (34) of 54	75.97% (117) of 154
Appropriate services were provided to meet the needs of the <b>mother</b>	68.75% (55) of 80	72.86% (51) of 70	70.67% (106) of 150
Appropriate services were provided to meet the needs of the <b>father</b>	59.68% (37) of 62	46% (23) of 50	53.57% (60) of 112
Appropriate services were provided to the <b>foster or pre-adoptive parents</b> related to the caring for the children in their care	79.41% (81) of 102	NA	79.41% (81) of 102

Case read results reflect Kansas performs better when assessing the child, mother and foster parents needs. Improving assessment on the father, related to needs and appropriate services, may be an area of opportunity.

**Items 13: Child and family involvement in case planning.** Did the agency make concerted efforts to involve the **parents and children** (if developmentally appropriate) **in the case planning** process on an ongoing basis?

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 13 because 65% of 63 applicable cases were rated as a Strength. Item 13 was rated as a Strength in 68% of 38 applicable foster care cases, and 60% of 25 applicable in-home services cases.

**Item 13: Child and Family Involvement in Case Planning**

**PIP Measurement Goal: 72.80%**

<b>Review Type and Period Under Review</b>		<b>Item Performance</b>
<b>CFSR:</b>	April 2014 – May 2015	65%
<b>PIP Review 1:</b>	July 2016 – September 2017	70.31%
<b>PIP Review 2:</b>	January 2017 – March 2018	61.9%
<b>PIP Review 3:</b>	July 2017 – September 2018	58.06%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided by case type below.

<b>Practice Description</b>	<b>Foster Care</b>	<b>In-Home Services</b>	<b>All Case Types</b>
The agency made concerted efforts to actively involve the <b>child</b> in case planning process.	80.26% (61) of 76	58.06% (36) of 62	70.29% (97) of 138
The agency made concerted efforts to actively involve the <b>mother</b> in the case planning process	81.25% (65) of 80	82.61% (57) of 69	81.88% (122) of 149
The agency made concerted efforts to actively involve the <b>father</b> in the case planning process	62.3% (38) of 61	60% (27) of 45	61.32% (65) of 106

Data Source: Federal Online Monitoring System

Case Review data suggest involving the child(ren) and fathers in the case planning process remain areas of opportunity for Kansas.

**Item 14: Caseworker visits with child.** Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

In FFY 2018, Kansas was not in compliance with monthly caseworker visit performance standards. Although the minimum monthly visit requirement was 5% less than the performance standard, Kansas exceeded the requirement of visits occurring in the home by 33%.

<b>Outcome</b>	FFY 2014	FFY 2015	FFY 2016	FFY 2017	FFY 2018	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Children will be visited by workers each and every eligible month. Standard: 95%	96.76%	98.21%	97.14%	95.24%	90.01%					
The majority of visits between workers and children will be at the child's place of residence. Standard: 50%	79.13%	81.32%	82.76%	83.23%	83.17%					

### Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 14 because 78% of 65 cases were rated as a Strength. Since completion of the CFSR, Kansas has finalized three PIP measurement reviews.

**Item 14: Caseworker visits with Child**

**PIP Measurement Goal: 85%**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	78%
<b>PIP Review 1:</b>	July 2016 – September 2017	68.57%
<b>PIP Review 2:</b>	January 2017 – March 2018	64.62%
<b>PIP Review 3:</b>	July 2017 – September 2018	78.46%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided below.

Practice Description	Foster Care	In-Home Services	All Case Types
The <b>frequency</b> of visits between the caseworker and the child(ren) was sufficient.	91.2% (114) of 125	72% (54) of 75	84% (168) of 200
The <b>quality</b> of visits between the caseworker and the child(ren) was sufficient.	83.2% (104) of 125	56% (42) of 75	73% (146) of 200

Case read results and caseworker visit data suggest frequency and quality of visits between the caseworker and children remain areas of opportunity.

**Item 15: Caseworker visits with parents.** Were the **frequency and quality of visits between caseworkers and the mothers and fathers** of the child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 15 because 55% of 56 applicable cases were rated as a Strength. Kansas has finalized three PIP measurement reviews and exceeded the measurement goal in PIP Review 1. However, Case read results suggest frequency and quality of visits between the caseworker visits, particularly with the father, continue to be areas of opportunity for Kansas.

**Item 15: Caseworker visits with parents**

**PIP Measurement Goal: 63.90%**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	55%
<b>PIP Review 1:</b>	July 2016 – September 2017	70.18%

<b>PIP Review 2:</b>	January 2017 – March 2018	54.9%
<b>PIP Review 3:</b>	July 2017 – September 2018	61.54%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided below.

<b>Practice Description</b>	<b>Foster Care</b>	<b>In-Home Services</b>	<b>All Case Types</b>
The <b>frequency</b> of visits between the caseworker and the <b>father</b> was sufficient.	53.33% (32) of 60	57.78% (26) of 45	55.24% (58) of 105
The <b>quality</b> of visits between the caseworker and the <b>father</b> was sufficient.	73.58% (39) of 53	65.12% (28) of 43	69.79% (67) of 96
The <b>frequency</b> of visits between the caseworker and the <b>mother</b> was sufficient.	71.79% (56) of 78	84.06% (58) of 69	77.55% (114) of 147
The <b>quality</b> of visits between the caseworker and the <b>mother</b> was sufficient.	78.67% (59) of 75	86.76% (59) of 68	82.52% (118) of 143

Data Source: Federal Online Monitoring System

ii. [Well-being Outcome 2: Children receive appropriate services to meet their educational needs.](#)

**Item 16: Educational needs of the child.** Did the agency make concerted efforts to assess **children’s educational needs**, and appropriately address identified needs in case planning and case management activities?

The current Child Welfare Case Management Provider (CWCMP) contract includes an outcome measure focusing on educational progression within 365 days. In SFY 2018, for the entry cohort of those children who are in out of home placement for 365 days, 99% have progressed to the next grade level.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Children in Care for a full SFY will Progress to the Next Grade Level. Standard: 70%	70%	36%	83%	86%	99%					

Quarterly Case Read results for Foster Care services indicate the State’s areas of strength as having required releases for educational records in the child’s file and timely enrollment in school for each placement are areas.

Case Read Question	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Are the required releases for educational records forms in the child's file?	92%	93%	94%	87%	92%					

### Federal Reviews

Kansas received an overall rating of Area Needing Improvement for Item 16 because 91% of 47 applicable cases were rated as a Strength. Item 16 was rated as a Strength in 94% of 35 applicable foster care cases, and 83% of 12 applicable in-home services cases.

#### Item 16: Educational Needs of Child

##### PIP Measurement Goal: NA

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	91%
<b>PIP Review 1:</b>	July 2016 – September 2017	89.47%
<b>PIP Review 2:</b>	January 2017 – March 2018	78%
<b>PIP Review 3:</b>	July 2017 – September 2018	80%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided below.

Practice Description	Foster Care	In-Home Services	All Case Types
The agency made concerted efforts to accurately <b>assess</b> the children's educational needs.	92.92% (105) of 113	65.91% (29) of 44	85.35% (134) of 157
The agency made concerted efforts to address the children's educational needs through appropriate <b>services</b> .	88.31% (68) of 77	57.5% (23) of 40	77.78% (91) of 117

Data Source: Federal Online Monitoring System

- iii. **Well-being Outcome 3: Children receive adequate services to meet their physical and mental health needs.**

**Item 17: Physical health of the child.** Did the agency address the **physical health needs** of children, including dental health needs?

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 17 because 81% of 48 applicable cases were rated as a Strength. Since completion of CFSR, Kansas has finalized 3 measurement reviews.

**Item 17: Physical Health of Child**

**PIP Measurement Goal: NA**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	81%
<b>PIP Review 1:</b>	July 2016 – September 2017	74.55%
<b>PIP Review 2:</b>	January 2017 – March 2018	76.09%
<b>PIP Review 3:</b>	July 2017 – September 2018	68%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided below.

Practice Description	Foster Care	In-Home Services	All Case Types
The agency provided appropriate <b>oversight of prescription medications</b> for the physical health issues of the target child in foster care.	84.91% (45) of 53	NA	84.91% (45) of 53
The agency accurately assessed the children's <b>physical health</b> needs.	94.4% (118) of 125	76.92% (20) of 26	91.39% (138) of 151
The agency accurately assessed the children's <b>dental health</b> care needs.	88.62% (109) of 123	62.5% (5) of 8	87.02% (114) of 131

**Item 18: Mental/behavioral health of the child.** Did the agency address the **mental/behavioral health needs** of children?

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 18 because 78% of 54 applicable cases were rated as a Strength. Since completion of CFSR, Kansas has finalized 3 measurement reviews.

**Item 18: Mental/Behavioral Health of the Child**

**PIP Measurement Goal: NA**

Review Type and Period Under Review		Item Performance
<b>CFSR:</b>	April 2014 – May 2015	78%
<b>PIP Review 1:</b>	July 2016 – September 2017	73.58%
<b>PIP Review 2:</b>	January 2017 – March 2018	73.91%
<b>PIP Review 3:</b>	July 2017 – September 2018	63.64%
<b>PIP Review 4:</b>	April 2018 – June 2019	
<b>PIP Review 5:</b>	January 2019 – March 2020	
<b>PIP Review 6:</b>	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

An aggregate summary of practice performance for all three PIP measurement reviews is provided below.

Practice Description	Foster Care	In-Home Services	All Case Types
The agency provided appropriate <b>oversight of prescription medications</b> for the mental/behavioral health issues of the target child in foster care.	75.56% (34) of 45	NA	75.56% (34) of 45
The agency accurately <b>assessed</b> the children's Mental/behavioral health needs.	93.33% (84) of 90	79.25% (42) of 53	88.11% (126) of 143
The agency provided appropriate <b>services</b> to address the children's mental/behavioral health needs.	75% (63) of 84	67.31% (35) of 52	72.06% (98) of 136

#### iv. Well-Being Outcome 1, 2 and 3 Current and/or Planned Improvement Activities:

Kansas is committed to helping families build capacity to provide for their children's needs. The Kansas Assessment Permanency Project and the Kansas Strong federal grants are both collaborative efforts to improve services and outcomes for children in the child welfare system. Kansas has worked with the Capacity Building Center to implement the Icebreakers program in order to engage birth families and foster families to work together in meeting the needs of children in foster care. The Family First Prevention Services Act will provide Kansas families additional access to mental health, substance abuse, and parent-skill building programs in order to prevent children from being placed in foster care. Family Preservation is beginning new contracts in January 2020, with new approaches to case planning and crisis services.

The Kansas Assessment Permanency Project (KAPP) is a grant through University of Kansas School of Social Welfare in collaboration with CWCMPs and PPS. SFY 2019 is the final year of the grant. KAPP's vision is to create an integrated child welfare system using trauma-informed, evidence-based/informed



assessments and interventions for children and families. This promote social-emotional well-being, family functioning, safety, and permanency.

The target population of KAPP are youth in the child welfare system who have mental health needs and who have experienced trauma. There are five tools used with youth ranging from birth to eighteen years of age. These tools assess the child's history of trauma, social emotional functioning, and behavioral health functioning. Assessments are completed by the caregiver, youth, or case manager (as appropriate), depending on the tool used. An assessment of parental stress related to parenting children is completed by the caregiver. Although this project focused primarily on the foster care population, Family Preservation Services has started utilizing several of the KAPP assessments as part of the case planning process. These tools are used at the onset of services and every 170 days afterwards to assess for change over time.

CWCMPs implemented standardized screening and needs assessments and delivered training to their staff in all offices. Training on assessments has now been incorporated into new worker training by the CWCMPs and is on-going. Successful use of identified tools allows families to have enhanced capacity to provide for their child's needs. Ideally, parental stress will decrease over time while their child social and emotional functioning will improve.

KAPP established a workgroup in SFY 2017 and 2018 to review the case planning process and make it more streamlined and family friendly. The new case planning form, PPS 3051 Child's Permanency Plan and instructions, (<http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>), was developed by the KAPP Case Plan Workgroup and became effective January 1, 2018. The KAPP Steering Committee also approved updates to the Practice Tips for Child Report of Past Posttraumatic Symptoms (CROPS) and new case plan activities for the CROPS and Child Stress Disorder Checklist (CSDC). These changes further enhance the tools case managers may use while conducting case planning conferences.

The KAPP Steering Committee provided feedback to staff from KU in developing a new grant, Kansas Strong for Children and Families. The grant was awarded to the KU School of Social Welfare by the U.S. Department of Health and Human Services. School of Social Welfare researchers will collaborate with Kansas Department for Children and Families, KVC Kansas, Saint Francis Ministries, the Kansas Court Improvement Program and the new DCF Grantees. This grant will implement a skills-based coaching model for supervisors to continue to improve youth and parent engagement. At the completion of the Kansas Program Improvement Plan, Activity 2.2.5 Utilize survey results to enhance worker/family engagement, was rolled into Kansas 2020-2024 CFSP. This activity will be addressed via Kansas Strong. The grant began in October 2018 and is currently in the 9-month planning period.

Kansas is also collaborating with The Capacity Building Center (CBC) to assist in implementing and sustaining the Icebreaker Practice in Kansas. Kansas recognizes the protective qualities of family relationships and believes in working to keep birth families involved in caring for their children while in foster care will promote reunification and assist in meeting the needs of children. Kansas is aware the implementation of this practice is changing the current mindset of child welfare staff, birth parents, foster parents and foster children.

The Family First Prevention Services Act also offers new possibilities for Kansas to provide families access to additional prevention services. The goal of Family First is to provide services preventing children from being placed into foster care. In June 2019, Kansas posted a Request for Proposal (RFP) to invite nonprofit, not-for-profit, and/or for-profit child welfare agencies in becoming a prevention partner

to support families with children in their communities. Building Kansas' services array with specified evidence-based services in mental health, substance use, and parent skill building will help families meet their needs. Grantee awards will occur in SFY 2020 and implementation of services will begin October 1, 2019.

Kansas will begin new Family Preservation contracts January 1, 2020. The current referral period, prior to January 1, 2020 is for one year. The new contracts will have two tiers of services. Tier 1 will be Intensive In-Home Family Preservation, provided by a master's level practitioner for an intensive and time-limited service period with the intent to mitigate immediate child safety concerns, stabilize family crises, and assess the family's needs. The Tier 1 referral period will be for up to six weeks. The amount of family contact will be determined by the evidence-based model selected, with the expectation the therapist will meet with the family intensively. Tier 2 will be Short-Term Family Preservation Case Management, provided by a worker dyad consisting of an assigned Case Manager and a Family Support Worker, assessing for existing risk and emergent safety issues when identified, initiating services to stabilize and support the family. Tier 2 referrals are for three to six months. The assigned Case Manager shall spend a minimum of one-hour weekly meeting face-to-face with the family in the family's home. For both tiers, the assigned Family Preservation staff shall meet with each child in the home, alone, at least monthly. These visits must address child safety, well-being and the child's input regarding case plan goals and activities. By decreasing the duration of the referral and increasing the intensity of contact, Kansas aims to better serve families at a time when it is most needed.

The case planning process will also be changing under the new Family Preservation contracts. Current practice is for a case plan to be completed within twenty days. Under the new contracts, the initial family case plan will be completed, in collaboration with the family, at the initial family meeting. The initial case plan will include all activities to be completed immediately to address the safety concerns and reasons for referral. It will also include observation by the Family Preservation staff related to parent-child interactions to gain information and determine, in collaboration with the family, additional activities that may be included in the subsequent case plan. Between the first and second case plan, Family Preservation will be actively assessing the children and parents in order to provide appropriate services. Assessments may include, but are not limited to, Structured Decision Making, the Child Stress Disorder Checklist-KS, Child Report of Post-Traumatic Symptoms, and Ages and Stages Questionnaire – Social Emotional. Elements of the Family Group Decision Making model will be incorporated in the case planning process. The second case plan will be completed with the family within twenty calendar days from the referral date, utilizing all available assessment to identify the family's needs, the services to be provided, and activities to be included.

Family Preservation services coordinate with the family and medical providers to ensure each child(ren) identified medical, dental, and mental health needs are met. They are to continue to access medical services via the Medicaid card for children qualifying for Medicaid. They will assist families in applying for Medicaid benefits for which they may be eligible. The contracts shall partner with KanCare Managed Care Organizations to ensure access to all available services and supports for children referred to Family Preservation.

More information related to these initiatives can be located at Section IV - Plan for Enacting the State's Vision.

## D. Systemic Factor 1: Statewide Information System

Kansas uses four primary systems to track data and information relative to the child welfare system. The State uses these four systems in lieu of the SACWIS/CCWIS system:

- KIPS: Kansas Intake/Investigation Protection System
- FACTS: Family and Child Tracking System
- KIDS: Kansas Initiative Decision Support
- SCRIPTS: Statewide Contractor Reimbursement Information and Payment Tracking System

**Item 19: Statewide Information System.** How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

FACTS is the official Kansas Child Welfare agency information system. This system contains information from point of intake through permanency, including post permanency services. This system identifies the status, demographic characteristics, location, and permanency goals for the placement of every child who is (or within the immediately preceding twelve months, has been) in foster care.

FACTS is a statewide mainframe-based information system. FACTS was created to collect and maintain information regarding individuals, families and providers who receive services from or interact with the agency. Information in the system is accessible to DCF and CWCMP employees across the state with system access capability. Collecting and maintaining this information allows immediate access to information about any child, family member, or other involved party who has had contact with the State's child welfare system. The system allows timely data reporting and analysis that is key to monitoring outcomes and identifying areas of opportunity. In addition, this system allows us to collect and report data as requested by Adoption and Foster Care Analysis and Reporting System (AFCARS), National Child Abuse and Neglect Data System (NCANDS), National Youth in Transition Database (NYTD), and other stakeholders.

Information in FACTS includes demographic information, legal status, current and previous location(s) and placement(s), case plan management information, current and previous case plan goal(s) for all children who currently are or have been the subject of an investigation / assessment and who currently are, have received in-home service, or have been in foster care. This information system contains all data points required to readily identify the status, demographic characteristics, location, and goals for every child and/or family receiving services. Data collected in the system is consistent across geographic areas statewide and across all populations served. This is an area of strength in Kansas. FACTS also contains the State Central Perpetrator Registry, containing the names of perpetrators of child abuse and neglect. This is a critical component in achieving the safety outcomes.

FACTS complies with internal and external data quality standards. The PPS Policy and Procedure Manual (PPM) provides guidance on entry of data into FACTS. The FACTS User Manual also provides additional detailed instructions. Questions in the AFCARS Case Read Review and questions included in other case read protocols help to monitor the accuracy of information entered into the system. Case Read results suggest that the data in FACTS is consistently and highly accurate.

<b>Case Read Question</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Does the child's birth date in FACTS accurately reflect the child's birth date on the PPS 1000 for the most recently assigned intake or the PPS 5110?	100%	99%	100%	100%	99%					
Does the information on the race of the child in FACTS accurately reflect the child's race on the PPS 1000 for the most recently assigned intake or the PPS 5110?	93%	95%	96%	96%	95%					
Does the information on the child's Hispanic origin in FACTS match information found on the PPS 1000 or the PPS 5110?	98%	98%	97%	97%	97%					
Does the information in FACTS reflect all diagnosed disability types for the child as indicated on the PPS 5110, the PPS 3052, or other documentation in the case file?	84%	77%	78%	76%	87%					
Does all placement history information in FACTS accurately reflect the placement history information on all PPS 5120 documents?	100%	96%	97%	96%	95%					
Does the current placement address in FACTS match the information on the most recent notice of move/acknowledgement (PPS 5120) from the provider?	97%	96%	98%	97%	90%					
Does the information on the PLAN screen accurately reflect the most recent case plan conference date as indicated on the PPS 3051?	98%	99%	97%	95%	93%					
Does the information in FACTS accurately reflect the child's current permanency goal as indicated on the most recent PPS 3051?	99%	98%	98%	96%	95%					
If the child's out of home placement has ended, does FACTS accurately reflect the Out Of Home End Date and	98%	97%	98%	96%	100%					

Reason as indicated in the case file?										
If the child was discharged from custody, does FACTS accurately reflect the date and reason of discharge?	97%	97%	97%	97%	100%					
Does the date of the mother's termination of parental rights in FACTS accurately reflect information found in the case file?	87%	95%	81%	87%	92%					
Does the date of the father's termination of parental rights in FACTS accurately reflect information found in the case file?	94%	94%	82%	90%	89%					
If child has been adopted, does the finalization date of the adoption in FACTS accurately reflect information found in the case file?	100%	87%	87%	91%	100%					
If child is being adopted, does the information in FACTS regarding the adoptive parent/child relationship accurately reflect information in the case file?	100%	93%	94%	88%	100%					

Each CWCMP uses a resource management system independent from the state system. This requires a close working relationship between state and CWCMPs to ensure consistency in reporting data and in the manner in which the agencies access data from the state. Each time information including a child's status, demographic characteristics, location or permanency goals needs to be entered or updated, CWCMP staff submit the information using DCF issued forms to DCF Regional staff for data entry into FACTS. Policy provides instructions and timeframes for submitting information to Regional staff for data entry. CWCMP staff are required to submit the PPS 5120 within 48 hours of initial referral for out of home services and anytime there is a placement change, address change, or level of care change. CWCMP staff are required to submit the PPS 5120 within 24 hours of a move or Release of Custody court hearing unless the move occurs over the weekend or on a holiday, in which case the form should be submitted by 11:00 a.m. on the next working day. CWCMP staff are required to submit the PPS 5120 within 48 hours of the child being AWOL, receiving inpatient medical or psychiatric services, respite, or if there is a change of address for the placement unless it occurs over the weekend or on a holiday, in which case the form should be submitted by 11:00 a.m. on the next working day. CWCMP staff are required to report a critical or significant incident verbally within 12 hours and in writing by next working day. Once information is received by the DCF Regional office, data entry staff have five days to enter into FACTS.

In SFY 2014, contract changes for Child Welfare Case Management Providers (CWCMP) prompted Kansas Administration staff to facilitate a series of data quality and reconciliation meetings with Regional staff and CWCMP. During these meetings DCF Administration staff provided an overview of Child Welfare Outcomes, and guidance on calculating outcomes. Technical assistance was provided for using error lists and other available data quality monitoring tools. Technical assistance was also provided regarding processes/procedures for correcting errors. Regional staff and CWCMP staff developed written plans for the monthly process of CWCMPs reconciling the data in their information systems with the State's official data system, FACTS. Monthly reconciliation promotes the timeliness of data entry and this reconciling process will be continued with the new foster care contracts starting in October of 2019. Additionally, Kansas is confident about the quality of data in FACTS and the timeliness of data entry proved by validated AFCARS submissions with no requirement to resubmit for numerous years.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 19. Regarding the Statewide Information System, Kansas' current assessment is an overall strength for this systemic factor. The Statewide Information System is functioning well in Kansas to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care. Kansas' Statewide Information System exceeds these minimum expectations for functioning.

#### E. Systemic Factor 2: Case Review System

**Item 20: Written Case Plan.** How well is the case review system functioning statewide to ensure each child has a written case plan developed jointly with the child's parent(s) and includes the required provisions?

DCF policy requires each child in DCF custody, including those who are part of a sibling group who are also in custody, have their own individual case plan. All providers use the same forms for case plans. Case plan forms are in the PPS Policy and Procedure Manual and include federal requirements. Case plans are approved and reviewed by DCF Child Protection Specialists to assure requirements are met. To ensure timely decision making, case planning meetings are conducted at minimum every 170 days. The CWCMP submits a copy of applicable documents from the PPS 3050 series to the DCF Foster Care (FC) Liaison assigned to the case. The DCF FC Liaison reviews the submitted documents and completes the PPS 3058 Permanency Plan Checklist and sends it to the CWCMP. If necessary, the CWCMP makes corrections to the PPS 3050 series documents, and in some cases may need to conduct a new case planning conference. The corrected documents are resubmitted to the DCF FC Liaison for review and approval. Upon receiving approval of the PPS 3050 series documents from the DCF FC Liaison, the CWCMP submits a copy to the court.

DCF policy requires both in-home and out-of-home services, an initial team meeting between the assigned case worker and the family occurs within two business days of referral. This meeting provides an opportunity for the team to clarify each person's role, continue the assessment process and build a support network for the child and family.

For both in-home and foster care services, the initial case plan is completed no later than 20 days from the date of referral with the active participation of all persons identified at the initial team meeting and other possible resources identified by the family.

A PPS outcome measure has been established to measure the timely completion of the initial case plan. Kansas has consistently met or exceeded this standard since SFY 2014.

Outcome	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Families will complete a case plan within 20 days of referral to case management services. Standard: 95%	95%	97%	96%	97%	96%	93%				

\*SFY 2019 data reflects July 2018 - February 2019

Timeliness of case plans is a Strength for Kansas, however, actively involving families (See item 13 in assessment), particularly fathers, continues to be an Area of Opportunity.

**Item 21: Periodic Reviews.** How well is the case review system functioning statewide to ensure a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Case planning conferences are also considered administrative reviews and the PPS 3050 series is sent to the court for review. After the initial case plan meeting, completed within 20 days of out of home placement, subsequent plans are developed with the family at minimum every 170 days. The Child/Family Team is invited to all case plans, and they are sent to DCF for review and approval.

A report is posted monthly on the agency share point site, available to DCF and CWCMP staff, showing cases due for a periodic review within the next thirty days. This report is used by supervisors to ensure timely case plans.

Kansas completed the Child and Family Services Review (CFSR) Round 3 in SFY 2015 between April 1<sup>st</sup> 2015, and May 22<sup>nd</sup>, 2015. Kansas received an overall rating of Strength for Item 21. Findings were determined based on information from the statewide assessment and stakeholder interviews. Kansas did not provide sufficient data in the statewide assessment to demonstrate functioning of this systemic factor item. In interviews, stakeholders consistently reported periodic reviews were routinely occurring across the state. Courts are holding periodic reviews at least every 6 months, some as often as every 30 or 90 days. Stakeholders reported there are systems in place such as the FullCourt- Juvenile Compliance System, FACTS system, and contractors' individual tracking systems providing tickler or advance information for planning purposes, and most capture the date of periodic reviews. However, no statewide data system to track and report on periodic reviews.

Kansas recognizes an area of opportunity in gathering quantitative and qualitative data to determine functioning statewide, of Item 21 Periodic Reviews.

**Item 22: Permanency Hearings.** How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Kansas Statutes Annotated (K.S.A.) 38-2264(d) requires a permanency hearing be held within 12-months of the date court authorized the child's removal from home and not less frequently than every 12 months

thereafter. A report regarding permanency/no reasonable efforts is provided by DCF on a quarterly basis to Office of Judicial Administration (OJA). This report includes cases without a reasonable efforts clause in the initial journal entry (NIR) and cases with findings where no reasonable efforts is documented in the journal entry at required permanency hearings every 12 months (NOR). OJA uses this report when working with judges and courts to gather missing information or set permanency hearings as needed.

There is specifically required language regarding ongoing reasonable efforts in the permanency hearing Journal Entry per federal law to allow DCF, as the IV-E agency, to categorize a hearing as a permanency hearing. In compliance with the federal law specific reporting requirement, DCF data indicates as follows:

- Of all children who entered care SFY 2017 who were in care for at least 12 months, 71% had their first permanency hearing within 12 months of removal. Of all children who entered care SFY 2017, in care for at least 24 months, 62% had their second permanency hearing within 12 months of their first permanency hearing.

Data may not be indicative of whether the court convened a permanency hearing or second permanency hearing in a timely manner as required by Kansas state statutes.

Kansas completed the Child and Family Services Review (CFSR) Round 3 in SFY 2015 between April 1<sup>st</sup> 2015, and May 22<sup>nd</sup>, 2015. Kansas received an overall rating of Area Needing Improvement for Item 23. Findings were determined based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Kansas did not provide data or information on the filing of termination of parental rights proceedings or cases where a compelling reason should have been documented. During interviews, stakeholders indicated a consistent process to ensure the timely filing of termination of parental rights was not in placement across all jurisdictions, and tracking of timely filing of TPRs varies.

Kansas recognizes an area of opportunity regarding ensuring each child in foster care has a permanency hearing in a qualified court no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

**Item 23: Termination of Parental Rights.** How well is the case review system functioning statewide to ensure filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Of all children discharging foster care who were legally free at time of discharge, the following were discharged to a permanent home prior to their 18<sup>th</sup> birthday?  
Performance Standard is 96.8%

Statewide	SFY2015	SFY2016	SFY2017	SFY2018	*SFY2019
Children who were discharged to permanent home prior to 18 <sup>th</sup> birthday and were legally free	91%	91%	89%	88%	91%

\*SFY2019 is not a completed state fiscal year and only represents 8 months of data

Data indicates for children who became legally free in calendar year 2018, there was an average of 21.8 months between date of removal and date of legal freedom.



Kansas received an overall rating of Area Needing Improvement for Item 23. Findings were determined based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Kansas did not provide data or information on filing of termination of parental rights proceedings or cases where a compelling reason should have been documented. During interviews, stakeholders indicated a consistent process to ensure timely filing of termination of parental rights was not in placement across all jurisdictions, and tracking of timely filing of TPRs varies.

Office of Judicial Administration (OJA) and the DCF Liaison to OJA have met regularly during the CFSR process and since the Program Improvement Plan (PIP) was approved to collaborate and develop a plan to track filing of Termination of Parental Rights (TPR) and/or request for filing (PIP Activity 3.4.2). DCF system contains data regarding the date when a child’s parental rights were terminated and when the child became legally free (TPR of last parent to have rights terminated or relinquished and approved). Data was shared, under the applicable confidentiality provisions in the CINC Code, with the Kansas Office of Judicial Administration data staff to compare to information they have in their system regarding dates of hearings and orders entered by the courts. The SFY 17 report is identified below.

SFY 2017	Total # of Terminations	Average # of Months between petition to terminate parental rights and termination
Mother	271	4.2 Months
Father	359	4.1 Months

ASFA provides, in the case of a child who has been in foster care under the responsibility of the State for 15 of the most recent 22 months (or abandoned infant or parent has committed certain crimes (set out in K.S.A. 38-2271 (7)), the “State shall file a petition to terminate the parental rights of the child’s parents”. K.S.A. 38-2264 specifically requires if reintegration is not a viable alternative and either adoption or appointment of permanent custodianship, the county or district attorney or designee shall file a motion to terminate parental rights (or appoint PC) within 30 days and the court shall set a hearing with 90 days of the request/filing. This is a total timeframe of 120 days/4 months. The SFY 2017 data supports the average number of months between the petition/request for mother and for fathers would be within the parameter of this statutory timeframe. This supports timely filing/request for termination of parental rights, consistent with state and federal law (ASFA).

Office of Judicial Administration (OJA) and DCF Liaison to OJA are in collaboration in developing the 2018 report, as required per PIP Activity 3.4.2 (PIP rollover activity). OJA and DCF will continue to collaborate and develop such reports on an annual basis.

**Item 5: Permanency Goal for the Child**

**Question 5F:** Did the agency file or join a termination of parental rights petition before the period under review or in a timely manner during the period under review?

Review Type and Period Under Review		Item Performance
CFSR:	April 2014 – May 2015	57.89%
PIP Review 1:	July 2016 – September 2017	90%
PIP Review 2:	January 2017 – March 2018	77.78%
PIP Review 3:	July 2017 – September 2018	73.91%
PIP Review 4:	April 2018 – June 2019	
PIP Review 5:	January 2019 – March 2020	
PIP Review 6:	July 2019 – September 2020	

Data Source: Federal Online Monitoring System

It is important to note, this question only applied to a total of 93 cases in all 4 reviews, and 70 cases were rated as a Strength.

In Kansas, the child in need of care (CINC) cases are filed and processed by County/District Attorneys. The IV-E agency, DCF, is not generally a party to the legal CINC case. Per Kansas Statute, it is not required a separate termination of parental rights petition be filed in a CINC action as such a motion/petition may be orally submitted to the court. Additionally, Kansas statutes allows, prior to hearing on termination of parental rights, a parent or parents to relinquish their parental rights to the DCF Secretary, subject to the Secretary’s approval. The Secretary (or designee) subsequently executes the Consent to Adoption. If parent relinquishes parental rights, there is no necessity for hearing on a motion/petition for termination of parental rights.

Kansas recognizes an area of opportunity regarding gathering data about how effective the State is in filing for termination of parental rights (TPR) when a child is in foster care for 15 of 22 months unless there is a compelling reason not to file, in accordance with the provisions of the Adoptions and Safe Families Act.

**Item 24: Notice of Hearings and Reviews to Caregivers.** How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review hearing held with respect to the child?

K.S.A. 38-2239 requires notice of hearings be given to all parties and interested parties as defined in the Kansas Child in Need of Care Code by the court clerks and 38-2239 describes the manner of service. PPS Policy and Procedure Manual (PPM) 3372 addresses permanency hearings and notice of same: “The court is responsible for sending a notice of the permanency hearing to all interested parties. The court may elect to notify other individuals as appropriate.

Interested parties include but are not limited to: 1. Parents; 2. Maternal/Paternal grandparents; 3. Resource Parents; 4. Adoptive Parents; 5. Court Appointed Special Advocates; 6. DCF and Child Welfare Case Management Provider involved with the child.”

When notice is sent by mail, the court receives a certificate of delivery confirming the notice was received. Per statute, notice can also be given verbally during one of the next hearings. Verbal notice is documented in individual case files.

There is a specific Foster Care Parent/Placement Court Report form in the PPM, Appendix 3G, which can be completed by the Foster Care family and submitted to the Court. This form provides an opportunity for foster parents to be heard. PPM 3383 indicates CWCMPs shall inform foster parents of their right to submit the report and of the available form. In addition to the Foster Care Parent/Placement Court Report, foster parents may also be given the opportunity to provide feedback during court hearings. The Kansas Supreme Court Task Force on Permanency Planning collaborated with DCF and the Foster Care Parent/Placement Court Report was revised and approved by DCF.

Kansas completed the Child and Family Services Review (CFSR) Round 3 in SFY 2015 between April 1<sup>st</sup>, 2015, and May 22<sup>nd</sup>, 2015. Kansas received an overall rating of Area Needing Improvement for Item 24. Findings were determined based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Kansas described two methods for providing notice of hearings and reviews to caregivers. Kansas was not able to provide data or information to show whether either method was occurring. Information collected through stakeholder interviews revealed notification of court hearings is inconsistent across the state. There is no statewide data system for collecting information on the foster parent's court notifications. Stakeholders also reported caregivers' ability to be heard is dependent on the judge overseeing the case.

The SCTFPP, CIP staff and DCF staff met and reviewed the CFSR Final Report and K.S.A. 38-2265 which requires notice of permanency hearings be provided to the following individuals:

- the child's foster parent or parents or permanent custodian providing care for the child;
- pre-adoptive parents for the child, if any;
- the child's grandparents at their last known addresses or, if no grandparent is living or if no living grandparent's address is known, to the closest relative of each of the child's parents whose address is known;
- the person having custody of the child; and
- upon request, by any person having close emotional ties with the child and who is deemed by the court to be essential to the deliberations before the court.

The SCTFPP determined if the individuals listed under K.S.A. 38-2265 are not provided notice, the permanency hearing cannot proceed. The SCTFPP was hesitant to recommend revisions to statute or improvements due to the lack of data on notices and decided to establish a project between CIP and DCF to address the notice issue.

CIP and DCF developed a survey and sent out to foster parents. The SCTFPP requested the survey address all types of notices required under statute; whether the foster parents attended the hearing or not, if they were addressed during the hearings, and the use of the foster parent court report.

After the survey was completed, the SCTFPP reviewed the data and the following are currently identified as approved interventions:

- Prepare for training for child welfare stakeholders concerning the requirement for foster parents to receive notice and be heard during permanency hearings.

- Edit Foster Parent Report to the Court (Policy and Procedure Manual, Appendix 3G)- Completed.
- Consider making the Foster Parent Report to the Court (Policy and Procedure Manual, Appendix 3G) available on the DCF placement management system.
- Review notice statute and language requiring the notice to foster parents include the Foster Parent Report to the Court (Appendix 3G) to determine whether revision is needed.
- Review documents in "red book" and consider adding the next hearing date and contact information for the guardian ad litem to the child's "red book".

A Best Practices Training (by OJA with collaboration of DCF) was made available to foster parents, judges, attorneys, social workers and Court Appointed Special Advocates (CASAs) on the statutory notice requirement.

The same foster parent survey referenced above will be sent out to the foster parents within the next 12 months to assess any improvement (PIP roll over activity 3.4.8). A copy of the survey disseminated by CIP in collaboration with DCF and the results of same are attached to the agency's Child and Family Services Plan for 2020-2024. See Attachment 2 Foster Parent Survey Results.

## F. Systemic Factor 3: Quality Assurance System

**Item 25: Quality Assurance System.** How well is the quality assurance system functioning statewide to ensure it is (1) operating in the jurisdictions where services included in the Child and Family Services Plan (CFSP) are provided, (2) has standards to evaluate the quality of services (including standards to ensure children in foster care are provided quality services protecting their health and safety) (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

The Agency's Policy and Procedure Manual (PPM) Section 8000 provides guidance on the Quality Assurance (QA) system. PPM 8100 includes an overview of the Continuous Performance Improvement structure and scope:

“The Department for Children and Families Prevention and Protection Services has leadership and ownership of a Continuous Performance Improvement (CPI) process which is applied consistently across the State. The process shall be utilized by state and provider staff at all levels as a systemic problem-solving process and cycle of learning and improvement. The CPI cycle includes identifying and understanding the root cause of problems, researching and developing theories of change, developing or adapting solutions, implementation of solutions and monitoring and assessing solutions.

The functional components of CPI include data collection, data analysis and interpretation, communication and collaboration and support for sustainable CPI.

Prevention and Protection Services (PPS) Continuous Performance Improvement staff shall be responsible for providing support and accountability for the structure, methodologies and administration of quality assurance and continuous performance improvement activities for the DCF Regions and Providers. Outcomes are reviewed at least quarterly by state and provider staff.

To assess performance of the Contractor, the state will review and monitor accountability for child welfare programs through direct oversight, case read processes and administrative site visits. Case read

and oversight activities are used to assess and improve delivery of services to families. Results of case read, and oversight activities may be published by DCF on the internet or in other public information material.

I. Poor performance on case read questions, nonconformities identified during an audit, not meeting the requirements of an administrative site review, or other sources identifying a significant or repeated problem impairing performance or compliance may lead to the implementation of a corrective action plan (CAP). Case management providers have been placed on CAPs at different times within the contract period when DCF has identified areas or contract performance outcomes in need of improvement. When a problem is identified by DCF, the contractor shall develop a Corrective Action Plan (CAP). The CAP is approved by DCF. The CAP is to address the root cause of the issue and action steps to be taken toward improvements and prevent recurrence of the problem. Failure to meet CAP provisions shall require the Contractor to reimburse DCF for costs incurred in resolving the problem. The concepts of a CAP are:

- a. Using clearly identified sources of data which identify problems needing investigated.
- b. Completing a root cause analysis to identify the cause of a discrepancy or deviation and suggest corrective actions to potentially prevent recurrence of a similar problem, or preventive action to ensure discrepancies do not occur.
- c. Implementing corrections to rectify the problem which is identified.

## II. Monitoring Contract Outcomes:

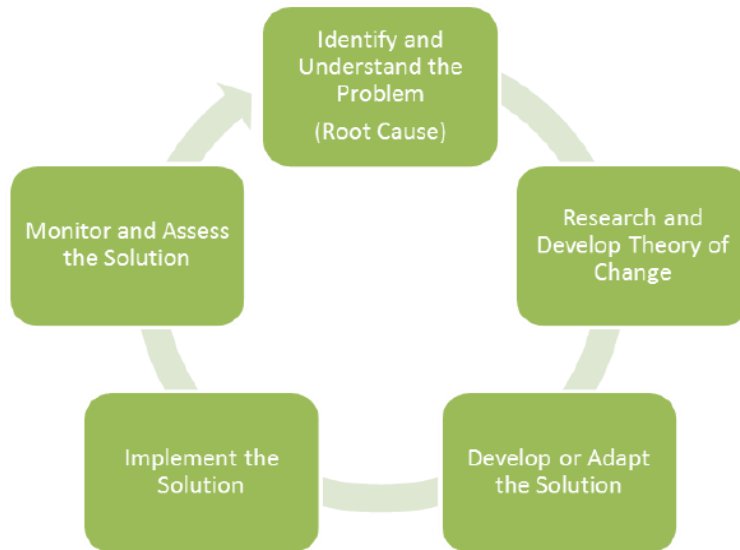
Contractor performance is also measured, in part, through contract outcomes. Contract outcomes include the national data standards for safety, permanency, and well-being.

The contract performance year is the state fiscal year (SFY) July 1- June 30. Reports published may reflect both federal and state fiscal year periods.

Standard case reads are conducted by the DCF Regional Offices on an ongoing basis and focus on the timeliness and accuracy of service delivery. Additional targeted case reads are conducted as required for policy compliance or continuous performance improvement projects.

Stakeholder meetings are organized at the case specific. Kansas also continues to involve community stakeholders through a variety of established workgroups and community convenings in discussions about the delivery of Child Welfare services.

Kansas utilizes the Continuous Performance Improvement (CPI) Cycle, a systematic problem-solving process and cycle of learning and improvement, to address areas of opportunity.



Kansas works to include the following for functional components of CPI into the cycle at each step: Data Collection, Data Analysis and Interpretation, Communication and Collaboration, and Support for Sustainable CPI.

**Kansas’ QA system operates in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided.**

Kansas utilizes a Performance Management process which is applied consistently across the State and for which the child welfare agency has leadership and ownership.

Department for Children and Families Prevention and Protection Services conducts case read reviews for many programs and processes. Case read instruments are utilized to review a sample of cases each quarter from each of the DCF regions. Cases are reviewed by DCF Regional CPI staff and as appropriate, CPI staff from the Child Welfare Case Management Providers in each region. CPI case review staff are experienced in the programs and processes under review, and have no direct responsibility for the programs, processes, cases or staff under review.

The case read sample for each program and process is derived from the respective case population that has been active during the last three months in a twelve-month period under review. A Stratified Random Sample is utilized to establish the sample size. The statewide population is stratified by DCF Region. Cases are assigned a random ID number and randomly selected until the correct percentage for the Region is achieved.

To enable comparison of case read data across Regions and on a statewide basis over time, Kansas employs a standardized approach to data gathering and reporting. Case read instruments are standardized for use across the agency and a consistent data entry process is employed using a Case Read Application.

Data from State information systems is analyzed in a variety of ways. Outcome information is calculated monthly for the Child Welfare Outcomes. Reports for each outcome include statewide analysis as well as regional analysis. Outcome data is available in a variety of formats including a one-page snapshot with

quarterly outcome performance by region for each outcome, and reports by outcome and region with performance by month.

**Kansas has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety).**

Standards to ensure children in foster care are provided quality services protecting their safety and health, standards were developed based on requirements from statute, regulations, policies, and best practices. Standards, outcomes, volume indicators and success indicators are used to monitor performance and ensure quality service delivery to all children and families who have contact with the child welfare system, including those in foster care. Case reads also provide information regarding quality of services provided and protecting the safety and health of all children in contact with the system, including those in foster care. Input from stakeholders, through Case-Specific Stakeholder interviews and Citizen Review Panels adds additional information. Kansas monitors performance on Federal outcomes related to safety, permanency and well-being. These outcomes are also written into the Child Welfare Case Management Provider (CWCMP) contracts.

Kansas has standards and regulations for foster homes and institutions. This information can be found in Systemic Factor 7 section of this assessment. Kansas monitors compliance with background check requirements for foster homes. Results of this monitoring can be found in Systemic Factor 7 of this assessment.

Developing and implementing standards to ensure children in foster care are provided quality services protecting their safety and health is an area of strength in Kansas. The State collects data from many sources including information systems, case read reviews, and stakeholder interviews. The State conducts in-depth analysis using a variety of techniques and ensures data quality and validity using multiple methods.

Kansas reviews in-home and out of home cases quarterly using the federal OSRI which monitors safety, permanency and well-being. Some of the questions in this instrument evaluate services related to protecting the health and safety of children.

**Kansas identifies strengths and needs of the service delivery system.**

Department for Children and Families Prevention and Protection Services conducts case reads for a many programs and processes. Case read instruments are utilized to review a sample of cases each quarter from each of the DCF regions. Cases are reviewed by DCF Regional CPI staff and as appropriate CPI staff from the Child Welfare Case Management Providers in each region. CPI case review staff are experienced in the programs and processes under review, and have no direct responsibility for the programs, processes, cases or staff under review.

The In-Home and Out of Home case read instruments include replicates of the CFSR On Site Review Instrument (OSRI) and Kansas compliance procedures. Other instruments include questions/outcomes concerning procedures and practices with a focus on safety, permanency and well-being.

The case read sample for each program is derived from the respective case population based on a two-year (or eight quarter) sample of active cases meeting each program case review criteria. The samples are re-determined periodically, except during a CFSR PIP due to stipulations samples cannot change more

than +/- 5% during that time. A Stratified Random Sample is utilized to establish the sample size. The statewide population is stratified by DCF Region. Sample size for each Region is proportionate to the total population for each Region. Cases are assigned a random ID number and randomly selected until the correct percentage sample size for that Region is achieved

To enable comparison of case read data across Regions and on a statewide basis over time, Kansas employs a standardized approach to data gathering and reporting. Case read instruments are standardized for use across the agency and a consistent data entry process is employed using a Case Read Application.

Data gathered from case reads in which the sample size is at a reliable confidence interval, may be generalized to the entire population. Case reads in which the sample size is too small for a reliable confidence interval, are conducted to identify examples of areas which may warrant further investigation.

Kansas utilizes multiple techniques to validate case read data, including monitoring reader consistency. This is an area of strength in Kansas. Reader consistency concerns may be identified during reconciliation meetings with Child Welfare Case Management Providers (CWCMP) or through the quality assurance process during measurement reviews. Reader consistency concerns may also be identified during quarterly CPI review meetings. Consistency concerns are addressed as part of the quarterly CPI review process and are also flagged for discussion at annual case reader trainings. Reader consistency reports are generated and reviewed for each outcome/question in each instrument as part of the annual case reader training process.

Kansas began conducting Case-Specific Stakeholder Interviews in SFY 2018 during PIP Measurement Reviews. Case specific interviews are conducted individually with children, parents, foster parents, case managers, court representatives and/or other professionals who have knowledge about the case. Interviewers utilize the federal Child and Family Services Reviews Stakeholder Interview Guide plus a variety of clarifying and/or follow-up questions created by CPI staff. Since beginning these reviews, Kansas has finalized 200 cases and interviewed a total of 1081 stakeholders.

Data from state information systems is analyzed in a variety of ways. Outcome information is calculated monthly for Child Welfare Outcomes. Reports for each outcome include statewide analysis as well as regional analysis. Outcome data is available in a variety of formats including a one-page snapshot with quarterly outcome performance by region for each outcome, and reports by outcome and region with performance by month.

Volume indicators, including reports received, reports assigned, removals into Foster Care, referrals to Family Preservation, out of home on last day of the month, discharges from foster care are analyzed to identify trends over time, and linear trending including projections. Kansas uses US Census information to calculate various rates including the rate of children removed into care per 1,000, the rate of children in care per 1,000, maltreatment rates, and rates based on demographic characteristics as well as a Disproportionality Metric. Additional analysis is conducted on removal and discharge. Additional analysis includes the out of home population to include the rate of children discharged from care per every 100 children in care and a ratio of removals to discharges. Kansas primarily utilizes descriptive and exploratory data analysis techniques, but also conducts other statistical analyses including correlational analysis, linear regression, etc. when appropriate.



Continuous Performance Improvement Quarterly Meetings: DCF Administration and Regional staff meet quarterly with Child Welfare Case Management Providers (CWCMP) to review outcome data from the State's information system and case reads, as well as stakeholder input. Current data, as well as trend-over-time reports are reviewed. Statewide and Regional Performance Improvement activities are discussed during these meetings, in addition to identifying areas of success and opportunity, and prioritizing areas of opportunity for future improvement activities.

Kansas is confident in the quality of data, including data in the Data Profile because Kansas conducts many data quality monitoring activities. Processes in place to identify and address data quality issues include the use of Federal Utility programs, a PPS error and reporting correction process, case read questions measuring the accuracy of data entry into FACTS including a case read review for AFCARS elements, as well as other tools used by field offices to correct potential data entry errors.

Federal Utility programs:

- Kansas utilizes the Data Compliance Utility (DCU), the Data Quality Utility (DQU) and the Frequency Report Utility monthly, to identify potential issues with AFCARS data. This is a way to identify potential compliance issues and data accuracy and make corrections as appropriate prior to submission. Prior to submission of the NCANDS file, the data is processed through the NCANDS validation program and identified errors are sent to the field for correction.
- To ensure quality data is submitted for NYTD, Kansas utilizes the NYTD Data Review Utility (NDRU) quarterly. Identified errors are sent to the field for correction.

PPS error and reporting correction process:

- After the AFCARS Federal Review in August 2007, the Agency began extensive monitoring of AFCARS accuracy. Error reports are distributed monthly to facilitate error correction. Preventative measures are also taken to reduce the number of errors and dropped cases. This is an area of strength in Kansas. AFCARS submissions continue to comply with data quality standards and Kansas has not had to resubmit an AFCARS file since the FFY 2007 file.
- Data accuracy for the NCANDS submission is consistently monitored and includes monthly error reports, monthly data correction, two PPS Outcomes related to Timely Contact and Timely Findings, and case read reviews related to intake and assessment. Data quality related to NCANDS is an area of strength in Kansas; Kansas has submitted the annual NCANDS file since 1995, meeting all data quality validation standards required.
- Data accuracy related to NYTD is monitored through the use of NDRU as well as monthly error reports sent to the field for correction.

Kansas recognizes ensuring quality data related to AFCARS, NCANDS and NYTD increases confidence in the quality of all system data. In addition to data quality monitoring related to these three Federal Submissions, Kansas conducts monthly reconciling with the CWCMPs. This process helps ensure the accuracy of data in FACTS.

**Kansas provides relevant reports.**

Two different applications are involved in gathering and analyzing results from case read reviews. The Case Read Application is used by readers for data entry and the Central Reporting Application (CRA) is used to compile and analyze case read data. All DCF supervisors and management-level staff have access to the Central Reporting Application. Reports can be generated from the Central Reporting Application for selected quarters going back to SFY 2008, and can display statewide data, or data by

Region, unit, or worker. Data is available in a variety of forms including tables, Pareto charts, line graphs and bar charts. The CRA is used to review case read data for the current quarter under review, trends over time, and case reader consistency reports. Outcome and Volume Indicator Reports and Reports with additional types of analysis are also produced on a recurring basis. A complete report list can be located below:

Sorting Group	Report Name	Report Desc	Where Posted	Report Frequency
Adoption	Adoptions Finalized	Number of adoptions finalized by month. Also includes demographic information such as race, ethnicity, special needs, etc.	PPS Website (Report) Reports   Foster Care/Adoption Summary Reports  PPS SharePoint (Data) PPS Foster Care & Adoption   APA & Finalized Adoptions	Monthly Report
Adoption	Adoptive Placement Agreements	Number of adoptive placement agreements signed each month	PPS SharePoint PPS Foster Care & Adoption   APA & Finalized Adoptions	Monthly Report
Adoption	Fostering Connections: Adoption Assistance Criteria for the Applicable Child by Age, Time in Foster Care and Siblings	For SFY 2014 forward the report includes children 8 and older who had an adoptive placement agreement signed and if sibling placed in same home. Report also contains those who had an adoptive placement agreement signed who have been in foster care for 60 consecutive months and if sibling placed in same home.	E-mail group	Quarterly Report
AFCARS	AFCARS Errors	List of errors in AFCARS file that need corrections by regional FACTS staff.	PPS SharePoint PPS Foster Care and Adoption   AFCARS   Error Lists	Monthly Report
AFCARS	AFCARS Errors DESC	List of all AFCARS elements with description of what causes an error and where it can be corrected in FACTS	PPS SharePoint PPS Foster Care and Adoption   AFCARS   Error Lists	Updated as Needed
AFCARS	FACTS_SCRIPTS_PermanenciesCompare	List of errors which compares FACTS to SCRIPTS to help identify differences in ending dates and eliminate dropped cases.	PPS SharePoint PPS Foster Care and Adoption   AFCARS   Error Lists	Monthly Report

AFCARS	NegatedReferrals_in_FACTS	List of errors which compare FACTS to SCRIPTS to identify referrals that were negated in SCRIPTS and should be removed in FACTS.	PPS SharePoint PPS Foster Care and Adoption   AFCARS   Error Lists	Monthly Report
APS	APS / CMS Involvement	Shows APS involvement for waiver recipients- reports, investigations and substantiations by allegation	E-mail group	Monthly Report
APS	APS Age of Alleged Victim - Semi Annual	Shows number of APS reports assigned for further investigation statewide, during a six-month period, by age of the involved adult.	E-mail group	Semi-Annual Report
APS	APS Allegations by Age Group	Report showing numbers of adults involved in assigned investigations and substantiated allegations by age of involved adult allegation type. Statewide and by DCF Region.	PPS Website Reports   Adult Protective Services	Monthly Report
APS	APS Annual Summary	Overview of statewide trends in APS data including reports received, reports assigned for further investigation, substantiated investigations, and maltreatment vs. self-neglect.	PPS SharePoint PPS APS   Reports and Raw Data	Annual Report
APS	APS Closed After Assignment	Number of APS Investigations closed after assignment each month by DCF Region.	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Closed After Assignment by Region with Determination Notes	Lists APS Investigations closed after assignment for the current month for each region, including description of why CAA.	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Corrective Action Plans	Number of corrective action plans opened each month by social worker and allegation type.	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Findings with Requested Extensions	Report and raw data showing investigations that have findings during the month and whether or not there was an extension requested.	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Initial Contact Date Errors	Tracking report and raw data by region and statewide for investigations with an error (or significant	PPS SharePoint PPS APS   Error Reports	Monthly Report

		delay) in the date of face to face contact.		
APS	APS Intakes Assigned	Number of adult reports assigned for further investigation by county, DCF Region and Statewide	PPS Website Reports   Adult Protective Services PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Intakes Assigned by Maltreatment Type	Report of adult reports assigned for further investigation by maltreatment type (allegation) Statewide	PPS Website Reports   Adult Protective Services	Monthly Report
APS	APS Intakes Received	All adult reports received by county, DCF Region and Statewide	PPS Website Reports   Adult Protective Services  PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Investigations Missing Region	Investigation records set to Complete status with nothing in the "region" field.	PPS SharePoint PPS APS   Error Reports	Monthly Report
APS	APS Investigative Findings	Report tracking the numbers and percentages of substantiated/unsubstantiated APS investigations by month, by DCF Region and statewide.	PPS Website Reports   Adult Protective Services	Monthly Report
APS	APS Open Service Plan List	List of all investigations with a Service Plan in a status other than "Complete"; regardless of the status of the investigation.	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Percent of Allegations Substantiated	Shows the percent of substantiated findings by allegation for each region and statewide by SFY	PPS SharePoint PPS APS   Reports and Raw Data	Semi-Annual Report
APS	APS Portrait	The APS Portrait provides a snapshot of the population served by Kansas' Adult Protective Service Program and state and national information as available.	PPS SharePoint PPS APS   Reports and Raw Data	Annual Report
APS	APS Recurrent Maltreatment	Report tracking adults with a maltreatment finding to show the percentage that did not experience another maltreatment finding within six months, by DCF Region and statewide.	PPS Website Reports   Adult Protective Services	Monthly Report

APS	APS Substantiations by Allegation	Shows monthly the percent of substantiated findings by allegation for each region and statewide	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Timely Findings	Report showing the percentage of APS investigations with findings made timely by region; includes worker-level data	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Timely Initial Contact	Report showing the percentage of APS investigations where initial contact (or attempts) were made timely per PPM, by Region and statewide; includes worker-level data	PPS Website Reports   Adult Protective Services  PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	APS Timely Service Plans	Number of initial services plans opened each month and whether they were opened timely.	PPS SharePoint PPS APS   Reports and Raw Data	Monthly Report
APS	Caseload Report-APS	Shows new APS investigations, open APS investigations, and New Service Plans, along with the number of APS social workers with an open investigation by region for the month.	PPS SharePoint PPS Multi Program   Caseload Reports	Monthly Report
Case Read	Adoption Assistance Case Read Report	This report covers adoption assistance services provided to children and families. Report results are provided for each case read question by DCF Region, Contractor Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   Adoption Assistance	Quarterly Report
Case Read	AFCARS Case Read Report	This report covers program review for Adoption and Foster Care Analysis and Reporting System (AFCARS) and Family and Child Tracking System (FACTS) data quality. Report results are provided for each case read question by DCF Region, Contractor Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   AFCARS	Quarterly Report
Case Read	AFCARS Case Read Reviews	These reports contain the case read instrument along with the AFCARS Services Reports used in the quarterly Case Read Review Meetings.	PPS SharePoint PPS Foster Care and Adoption   Case Read Reviews   AFCARS	Quarterly Report

Case Read	APS Case Read Report	This report covers program review for Adult protection services and assessments. Report results are provided for each case read question by DCF Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   Intake and Assessment   Adult Reports	Quarterly Report
Case Read	APS Case Read Reviews	These reports contain the case read instrument along with the APS Intakes Assigned and APS Intakes not Assigned Management Reports used in the quarterly Case Read Review Meetings.	PPS SharePoint PPS APS   Case Read Reviews	Quarterly Report
Case Read	CPS Case Read Reviews	These reports contain the case read instrument along with the CPS Intakes Assigned and CPS Intakes not Assigned Management Reports used in the quarterly Case Read Review Meetings.	PPS SharePoint PPS CPS   Case Read Reviews	Quarterly Report
Case Read	In Home Family Preservation Case Read Report	This report covers program review for family preservation services to prevent out of home placement services. Report results are provided for each case read question by DCF Region, Contractor Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   In Home Services	Quarterly Report
Case Read	In Home Family Preservation Case Read Reviews	These reports contain the case read instrument along with the In-Home Family Preservation Reports used in the quarterly Case Read Review Meetings.	PPS SharePoint PPS In-Home Services   Case Read Reviews   Family Preservation	Quarterly Report
Case Read	In Home Family Services Case Read Report	This report covers program review for other family services to prevent out of home placement services. Report results are provided for each case read question by DCF Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   In Home Services	Quarterly Report
Case Read	In Home Family Services Case Read Reviews	These reports contain the case read instrument along with the In-Home Family Services Reports used in the quarterly Case Read Review Meetings.	PPS SharePoint PPS In-Home Services   Case Read Reviews   Family Services	Quarterly Report

Case Read	Intake and Assessment Case Read Report	This report covers program review for child protection services and assessments. Report results are provided for each case read question by DCF Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   Intake and Assessment   Child Reports	Quarterly Report
Case Read	Out of Home Services Case Read Report	This report covers program review for services provided to children and families who receive reintegration, adoption, or other permanency services when there is a child in state agency custody and placed out of home. Report results are provided for each case read question by DCF Region, Contractor Region and Statewide.	PPS Website Reports   Case Reviews   Case Review Results   Out of Home Services	Quarterly Report
Case Read	Out of Home Services Case Read Reviews	These reports contain the case read instrument along with the Out of Home Services Reports used in the quarterly Case Read Review Meetings.	PPS SharePoint PPS Foster Care and Adoption   Case Read Reviews   Out of Home	Quarterly Report
CPS	Assigned Abuse Neglect Intakes with ALV under 6 years of age	Assigned abuse neglect intakes with alleged victim under 6 years of age.	PPS SharePoint PPS CPS   Report and Raw Data	Weekly Report
CPS	Assigned Abuse Neglect intakes with no Decision	Error report--Assigned abuse neglect intakes with no decision data entered in FACTS. In same Excel document as Missing MAAS screen.	PPS SharePoint PPS CPS   Report and Raw Data	Monthly Report
CPS	Assigned intakes in FACTS but not in KIDS	Error report--Assigned intakes in FACTS but intake is not in KIDS. Excludes intakes assigned for ICPC, new case needed, and those involving a facility.	PPS SharePoint PPS CPS   Report and Raw Data	Monthly Report
CPS	Assigned Intakes with children under 1 year of age	Assigned intakes involving a child under the age of 1 year	PPS SharePoint PPS CPS   Report and Raw Data	Weekly Report
CPS	Caseload- PPS	Caseload report detailing CINC intakes assigned during the month for investigation and assessment by supervisor, staff, service center and type of intake report.	PPS SharePoint PPS Multi Program   Caseload Reports	Monthly Report

CPS	CINC Reports Assigned	Number of CINC intake reports assigned each month and by county	PPS Website (Report)Reports   Child Protective Services PPS SharePoint (Data) PPS CPS   Reports and Raw Data	Monthly Report
CPS	CINC Reports Assigned to Investigate Alleged Maltreatment	Percentage of intakes assigned for each alleged maltreatment type	PPS Website Reports   Child Protective Services	Monthly Report
CPS	CINC Reports Received	Number of CINC intake reports received each month and by county	PPS Website (Report) Reports   Child Protective Services  PPS SharePoint (Data) PPS CPS   Reports and Raw Data	Monthly Report
CPS	Decision within 30 Working Days	Percentage of finding decisions done timely within 25 days of assignment.	PPS SharePoint PPS CPS   Reports and Raw Data	Monthly Report
CPS	Investigative Findings	Number of substantiated and unsubstantiated findings by month	PPS Website Reports   Child Protective Services	Monthly Report
CPS	Missing MAAS screen in FACTS	Error Report--Assigned intakes whose MAAS screen has not been started in FACTS. Excludes intakes assigned for ICPC, new case needed, and those involving a facility.	PPS SharePoint PPS CPS   Report and Raw Data	Monthly Report
CPS	Non-Abuse/Neglect Presenting Situations for Assigned CINC Reports	Percentage of intakes assigned for each alleged Non-Abuse Neglect presenting situation types	PPS Website Reports   Child Protective Services	Monthly Report
CPS	Recurrent Maltreatment	Children who experienced a subsequent substantiated finding w/in 6 months of previous substantiated finding	PPS Website (Report)Reports   Child Protective Services PPS SharePoint (Data) PPS CPS   Reports and Raw Data	Monthly Report
CPS	Timely Contact with Victim/Family	Percentage of contacts completed with victim/family timely for those assigned for Same day or 72 hr. response time.	PPS Website (Report) Reports   Child Protective Services  PPS SharePoint (Data) PPS CPS   Reports and Raw Data	Monthly Report
CPS	Timely Family Based Assessment	Percentage of family-based assessments completed timely.	PPS SharePoint PPS CPS   Reports and Raw Data	Monthly Report



Family Preservation	Family Preservation In-Home	Number of families referred to family preservation each month and those served by family preservation. Information is from SCRIPTS.	PPS Website Reports   Family Preservation Reports	Monthly Report
Family Preservation	Family Preservation Referrals with Removals	This report looks at the Family Preservation referrals for the current state fiscal year detailing which cases have already has a child removed into out of home placement. It has counts by family and number of children.	PPS SharePoint PPS In Home Services   Family Preservation   Reports and Data	Monthly Report
Family Preservation	Pregnant Woman Using Substances Referrals	Number families referred to family preservation for reason of pregnant woman using substance abuse .	PPS SharePoint PPS In-Home Services   Family Preservation   Outcomes	Monthly Report
Family Preservation	Presenting Situation for Family Preservation Referrals	Presenting situations for a referral to family preservation (info from KIDS)	PPS Website Reports   Family Preservation Reports	Quarterly Report
Family Services	Family Services Cases (Contract Provider)	Number of family service cases with the contract provider initiated by month.	PPS SharePoint PPS In-Home Services   Family Services	Monthly Report
Family Services	Family Services Cases Initiated	Number of family service cases initiated by month.	PPS Website Reports   Family Service Reports	Monthly Report
Family Services	Presenting Situation for Family Service Referrals	Presenting situations for a referral to family services (info from KIDS)	PPS Website Reports   Family Service Reports	Quarterly Report
Foster Care	Out of Home Foster Care Placement Utilization Report	Children in Out of Home Placement by Placement and Contract Region Breakout. Now available in DCF region breakout.	PPS SharePoint PPS Foster Care and Adoption   Last Day of Month Snapshot	Annual Report
Foster Care	Aftercare Client List	This report shows by month which foster care clients were in aftercare at least 1 day of that month.	PPS SharePoint PPS Foster Care and Adoption   Aftercare	Monthly Report
Foster Care	Children Served Report	This report contains demographic information of children served in out of home care by SFY. The demographic reports posted on the public website are for children in out of home on the last day of the month only whereas this report is all children	PPS SharePoint PPS Foster Care and Adoption   Children Served Over Time	Annual Report

		served in a year accumulatively.		
Foster Care	Court Improvement Project (CIP)	Average time between removal date and legally free, average time between removal and date OOH placement ended and average time between removal and first permanency hearing. For Ks Courts-Dawn Rouse	E-mail group	Annual Report
Foster Care	Ethnicity by County	Children in Out of Home Placement on the last day of the month by Ethnicity	PPS Website Reports   Foster Care/Adoption Summary Reports	Monthly Report
Foster Care	Females in Secure Care Placement	Monthly snapshot of females who are placed in secure care facilities by age groups.	E-mail to KDOC-JS Staff Member	Quarterly Report
Foster Care	HCBS Waiver under 18	HCBS waivers and abuse/neglect intakes plus findings—emailed to KDADS	E-mail group	Monthly Report
Foster Care	IV-E report -Ineligible placements section only	Includes the ineligible placements, temporary licensed facility, unlicensed relative and unlicensed non-related person EP segments.	E-mail group	Monthly Report
Foster Care	Length of stay in OOH Placement	Children exiting out of home placement by exit reason and length of time in out of home placement. This report is also process by Judicial District and County those versions are posted in the same SharePoint location as the Length Of Stay raw data.	PPS Website (Report)Reports   Foster Care/Adoption Summary ReportsPPS SharePoint (Data)PPS Foster Care and Adoption   Length of Stay	Monthly Report
Foster Care	NIR/NOR report	Eligibility report for Courts involving those with no reasonable efforts or contrary to the welfare language in JE. Includes permanency hearing data— For Ks Court Frayna Scinopskie.	E-mail group	Quarterly Report

Foster Care	OOH Monthly File for KDADS	List of children in OOH placement at any-time during the entire month including discharges.	E-mail group	Monthly Report
Foster Care	OOHP by County with Census Data	Children in Out of Home Placement on the last day of the month by County	PPS Website Reports   Foster Care/Adoption Summary Reports	Monthly Report
Foster Care	OOHP by Gender and Age	Children in Out of Home Placement by Age Groups and Gender	PPS Website Reports   Foster Care/Adoption Summary Reports	Monthly Report
Foster Care	Out of Home Snapshot Data	Data set that lists all the children in out of home placement on the last day of the previous month. This dataset also has a multitude of demographic and placement information.	PPS SharePoint PPS Foster Care and Adoption   Last Day of Month Snapshot	Monthly Report
Foster Care	Permanency Goal Report	Children in Out of Home Placement by Permanency Goal	PPS Website Reports   Foster Care/Adoption Summary Reports	Monthly Report
Foster Care	Placement Errors	Error listing posted with Out of Home Snapshot Data that has children with no placements, missing highest grade level completed, mismatched responsibility and placement codes and incorrect goal codes.	PPS SharePoint PPS Foster Care and Adoption   Last Day of Month Snapshot	Monthly Report
Foster Care	Placement Settings by Region	Children in Out of Home Placement by Placement Type	PPS Website Reports   Foster Care/Adoption Summary Reports	Monthly Report
Foster Care	PPS Rate of Removal Reports	Current year removals and removal rates by county.	PPS SharePoint PPS Foster Care and Adoption   Removal Reports and Data	Annual Report
Foster Care	Race by County	Children in Out of Home Placement by Primary Race	PPS Website Reports   Foster Care/Adoption Summary Reports	Monthly Report

Foster Care	Removals by Primary Reason	Children removed into out of home placement by primary removal reason and age groups.	PPS Website (Report) Reports   Foster Care/Adoption Summary Reports  PPS SharePoint (Data) PPS Foster Care and Adoption   Removal Reports and Data	Monthly Report
Foster Care	Removals with Prior LE Plans	Current year removals who had a Law Enforcement (LE) plan within 7 days of coming into care.	PPS SharePoint PPS Foster Care and Adoption   Removal Reports and Data   Removals with Prior LE Plans	Annual Report
Foster Care	Removals, Exits and Out of Home Summary (FACTS) Report	Shows a monthly breakout of removals, discharges and children in out of home placement. The excel version of this report is posted on the PPS SharePoint Site.	PPS Website (Pdf) Reports   Foster Care/Adoption Summary Reports  PPS SharePoint (xls) PPS Foster Care and Adoption   Removals, Exits &OOH	Monthly Report
Foster Care	Safe Haven report	Contains the number of children removed and placed into foster care based on the Newborn Infant Protection Act.	E-mail group	Quarterly Report
Foster Care	Timely Permanency Hearing	Number of permanency hearings completed timely each month	PPS SharePoint (Data) PPS Foster Care and Adoption   Timely Permanency Hearings	Monthly Report
Foster Care	KPI Report (Gov Office)	Graphs statewide performance on Permanency In 12 Months: Entering Care and Timely Adoption outcomes	E-mail group	Monthly Report
Foster Care	YRC II and PRTF Trend Report	Children in Out of Home Placement specifically in a YRCII or PRTF facility by gender.	PPS SharePoint PPS Foster Care and Adoption   YRCII and PRTF Placements	Monthly Report
Independent Living	Caseload Report -IL	Caseload report detailing SS plans opened during the month and SS plans open at any time during the month by supervisor, staff, region and statewide.	PPS SharePoint PPS Multi Program   Caseload Reports	Monthly Report

Independent Living	IL Demographics	Report detailing number of youth served with IL Services by gender, age, race, ethnicity, and education level. Report results are provided by DCF Region and Statewide.	PPS Website Reports   Independent Living Services  PPS SharePoint PPS Foster Care and Adoption   Independent Living	Monthly Report
Independent Living	IL/SS Annual Report	Summary of youth served by IL/SS Program, including information about various funding sources	PPS Website Reports   Independent Living Services  PPS SharePoint PPS Foster Care and Adoption   Independent Living	Annual Report
Management Report	Caseload Report - Point In-Time	Point in Time report containing various programs monthly data.	PPS SharePoint PPS Multi Program   Caseload Reports	Monthly Report
Management Report	Child Fatality Bi-Annual Report	This report reflects attributes of children in Kansas whose death is substantiated by DCF as the result of maltreatment. This report does not reflect all child deaths in Kansas.	PPS SharePoint PPS CPS   Reports and Raw Data	Semi-Annual Report
Management Report	Child Fatality Reports	2 reports--Child fatalities by DCF region for current fiscal year and Kansas Child Fatalities known to DCF by year substantiated and year of death from SFY 2001 to present.	PPS SharePoint PPS CPS   Reports and Raw Data	Monthly Report
Management Report	DCF-JIAS Cross Over Report	An analysis of youth 10 and over who have been in out of home placement with DCF who are then at some point served through the Department of Corrections division of Juvenile Services.	PPS SharePoint PPS Multi Program   Year End Reports	Annual Report
Management Report	IV-E Management Report files	Reports by region are generated showing the most up to date standing of IV-E eligibility, both maintenance and admin. Also produced is a report showing the EP Segments from FACTS and the percentage each type of funding represents the whole. The first half of this	PPS SharePoint PPS Finance and Allocations   IV-E	Monthly Report

		report is provided by OFM and the second half comes from FACTS.		
Management Report	Management Team Report	Report showcasing many service points and budget information for quick and easy reference.	PPS SharePoint PPS Multi Program   Management Team Reports	Monthly Report
Management Report	Milestones Across State Fiscal Years	Report contains total CINC reports received, assigned, and percentage assigned for abuse/neglect. Also contains # of family preservation referrals, foster care removals, discharges and finalized adoptions.	PPS SharePoint PPS Multi Program   Year End Reports	Annual Report
Management Report	PPS and Contract Outcomes Report	This report provides quarterly performance for PPS Regional outcomes and all family preservation and foster care contract outcomes related to Safety, Permanency and Well-Being.	PPS SharePoint PPS Multi Program   PPS Contract Outcomes	Quarterly Report
Management Report	PPS Contract Outcomes Report	This report provides quarterly performance for all family preservation and foster care contract outcomes related to Safety, Permanency and Well-Being.	PPS SharePoint PPS Multi Program   PPS Contract Outcomes	Quarterly Report
Management Report	State Fiscal year Abuse Neglect report by County	Report by county of CINC reports received, assigned for abuse/neglect and non-abuse/neglect, and substantiated victims.	PPS SharePoint PPS Multi Program   Year End Reports	Annual Report
Management Report	Statewide Child in Need of Care Distribution	Report contains total CINC reports received, percentage assigned for abuse/neglect, assigned for non-abuse neglect, substantiated victims, and perpetrators from calendar year 1998 to SFY 2013.	PPS SharePoint PPS Multi Program   Year End Reports	Annual Report

Outcomes - Adoption	Progress Towards Adoption: Adopted in less than 12 Months from Legal Freedom	Number of children who became legally free and also discharged to finalized adoption in less than 12 months of becoming legally free.	PPS Website (Report) Reports   Foster Care\Adoption Case Management Contract Performance Outcomes  PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Adoption	Monthly Report
Outcomes - Adoption	Timely Adoption in Less Than 24 Months	Children adopted in less than 24 months of removal from out of home date.	PPS Website (Report) Reports   Foster Care\Adoption Case Management Contract Performance Outcomes  PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Adoption	Monthly Report
Outcomes - Family Preservation	Babies Are Born Substance Free	Number of births to families referred to family preservation for reason of substance abuse during pregnancy born with negative alcohol and drug toxicology.	PPS Website (Report) Reports   Family Preservation Reports  PPS SharePoint (Data) PPS In-Home Services   Family Preservation   Outcomes	Monthly Report
Outcomes - Family Preservation	Children are Maintained at Home with Family (Family Preservation)	Families referred to family preservation and if had a child removed from home within 365 days of referral	PPS Website (Report) Reports   Family Preservation Reports PPS SharePoint (Data) PPS In-Home Services   Family Preservation   Outcomes	Monthly Report
Outcomes - Family Preservation	Families Engaged in Services - Family Preservation	Families referred to Family Preservation services that have a case plan in 20 days.	PPS Website (Report) Reports   Family Preservation Reports  PPS SharePoint (Data) PPS In Home Services   Family Preservation   Outcomes	Monthly Report

Outcomes - Family Preservation	Safety during Family Preservation In Home Services between referral and 365 days	Number of families referred to family preservation 365 days ago who did not have substantiated finding between referral and 365 days.	PPS Website (Report) Reports   Family Preservation Reports  PPS SharePoint (Data) PPS In-Home Services   Family Preservation   Outcomes	Monthly Report
Outcomes - Family Preservation	Safety during Family Preservation In Home Services between referral and 90 days	Number of families referred to family preservation 90 days ago who did not have substantiated finding between referral and 90 days.	PPS Website (Report) Reports   Family Preservation Reports  PPS SharePoint (Data) PPS In-Home Services   Family Preservation   Outcomes	Monthly Report
Outcomes - Family Services	Children are Safe from Abuse & Neglect by Parent or Caregiver (365 days)	Families will not have a child experience abuse and/or neglect by a parent or in-home caregiver for 365 days from the date of referral to community-based family services.	PPS Website (Report) Reports   Community Based Family Service Reports PPS SharePoint (Data) PPS In-Home Services   Family Services	Monthly Report
Outcomes - Family Services	Children Remain at Home After Community Based Family Services (365 days Post Conclusion)	Families will not have a child placed outside the home for 365 days post conclusion of the community-based family service referral.	PPS Website (Report) Reports   Community Based Family Service Reports  PPS SharePoint (Data) PPS In-Home Services   Family Services	Monthly Report
Outcomes - Family Services	Children Remain at Home During Community Based Family Services (During Open Case)	Families will not have a child placed outside the home between the community-based family service referral date and conclusion date	PPS Website (Report) Reports   Community Based Family Service Reports  PPS SharePoint (Data) PPS In-Home Services   Family Services	Monthly Report
Outcomes - Family Services	Families Referred to Community Based Family Services will not be Referred to Family Preservation Services (180 days)	Families referred for community-based family services will not be referred for family preservation services within 180 days from the referral date for community based family services.	PPS Website (Report) Reports   Community Based Family Service Reports  PPS SharePoint (Data) PPS In-Home Services   Family Services	Monthly Report



Outcomes - Family Services	Families Engaged in Services - Family Services	Families referred to Community Based Family Services will have a case plan in 20 days.	PPS Website (Report)Reports   Community Based Family Service ReportsPPS SharePoint (Data) PPS In-Home Services   Family Services	Monthly Report
Outcomes - Foster Care	Achieving Permanency: Permanency for Children with Termination of Parental Rights	Children who were discharged to a permanent home prior to their 18th birthday and who were legally free for adoption at that time.	PPS Website (Report) Reports   Foster Care\Adoption Case Management Contract Performance Outcomes  PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Permanency	Monthly Report
Outcomes - Foster Care	Children in Care 3+ yrs.	Children emancipated who were in out of home care 3 years or longer.	PPS Website (Report) Reports   Foster Care\Adoption Case Management Contract Performance Outcomes  PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Permanency	Monthly Report
Outcomes - Foster Care	Children Live with Relatives	Number of children residing with relative on last day of the month	PPS Website (Report)Reports   Foster Care\Adoption Case Management Contract Performance Outcomes PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Well Being	Monthly Report
Outcomes - Foster Care	Educational Progression	Children in Foster Care for entire state fiscal year (June 30 file from end of year compared to the June 30th file from the end of the current SFY.) will progress to the next grade level.	PPS Website (Report) Reports   Foster Care\Adoption Case Management Contract Performance Outcomes  PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Well Being	Quarterly Report

Outcomes - Foster Care	Placement in Family Like Setting	Children in Out of Home Placement who are in a placement considered to be a "Family Like" placement.	PPS Website (Report) Reports   Foster Care\Adoption Case Management Contract Performance Outcomes  PPS SharePoint (Data) PPS Foster Care and Adoption   Outcome Reports   Well Being	Monthly Report
Outcomes - Foster Care	Placement Stability (In care less than 12 months)	Children with 2 or less placements who have been in out of home care for less than 12 months.	PPS SharePoint (Reports & Data) PPS Foster Care and Adoption   Outcome Reports   Stability	Monthly Report

**Dissemination of Data:** Kansas provides data to internal and external stakeholders in a variety of ways including a public website, an internal SharePoint site, Quarterly CPI Review meetings, and Citizen Review Panels.

The PPS Website provides reports with case read data, volume indicators and outcome data. The report list above indicates reports available on the PPS Website and how frequently each report is updated. The PPS Website is public and can be accessed from any computer or device with internet access. Reports on the PPS Website are formatted for accessibility by visually impaired stakeholders. Based on feedback from internal and external stakeholders, Kansas recognized an opportunity regarding improving the ease of navigation of the PPS Website

The PPS SharePoint site is a secure website where case read data, volume indicators and outcome data is available to internal stakeholders. Administrative Office and regional staff have access to SharePoint, as do representatives from each of the Child Welfare Case Management Providers (CWCMP). The report list above indicates reports available on the PPS SharePoint site and how frequently each report is updated. Also available on SharePoint is a list of all reports routinely produced by the agency along with a description of the report, the frequency of the report, and the location of the report. The PPS SharePoint site is an area of strength for Kansas. The site, which went live in SFY 2013 replacing the previous internal website, is praised by internal stakeholders for its ease in navigation.

Case read data and outcome data from the State’s information system is reviewed during quarterly CPI meetings with internal stakeholders. Attendees at quarterly CPI meetings include DCF Administration and regional CPI staff, program managers and administrators, supervisors and CWCMPs as appropriate.

Data is reviewed with external stakeholders on a quarterly basis with the Citizen Review Panels. Case read and information system data and reports are reviewed with the Kansas Citizen Review Panel Intake to Petition/Children’s Justice Act Task Force based on their agenda for that quarter. Kansas recognizes there is an opportunity for additional data sharing with external stakeholders through the citizen review panels. Stakeholders play a key role in providing input as areas of opportunity are identified and prioritized.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 25. In the statewide assessment, Kansas provided data and information on CPI, the state's quality assurance process applied consistently across the state. The data and information included case review results and performance data from the management information system. Case reviews using the federal Onsite Review Instrument are conducted quarterly in each regional office on a sample of cases including the three components of in-home child welfare cases (family preservation, family services, and alternative response), out-of-home cases, and review of the Adoption and Foster Care Analysis and Reporting System. Beginning in state fiscal year 2013, Kansas augmented its case review in one region per quarter with case-related interviews and added second-level quality assurance for all cases in state fiscal year 2015 during the CFSR case review. Additionally, targeted case reviews are conducted as needed for policy compliance or continuous performance improvement projects. Case review and management information systems data are available to internal stakeholders through a secure website and used at the statewide, regional, county, judicial district, unit, and worker levels. Information is shared with external stakeholders through a public website, Quarterly CPI Review meetings, Citizen Review Panel meetings, and Data Dabbles.

Kansas continues to have a robust quality assurance system. In SFY 2020, Kansas intends to move toward strengthening this system and will begin a feasibility study with the goal of identifying a systematic approach to becoming Comprehensive Child Welfare Information System (CCWIS) compliant. In SFY 2020, Kansas will also explore implementation of a new case review system to allow for more real time data and targeted reads.

#### G. Systemic Factor 4: Staff and Provider Training

The Kansas Child Welfare Professional Training Program (KCWPTP) is a public/private partnership between the DCF and the CWCMPs. The KCWPTP was launched in January of 2017. The intent of the system is to deliver fiscally responsible training to equip child welfare professionals with knowledge and the ability to transfer knowledge to the job.

The KCWPTP is a Comprehensive, Competency-Based In-Service Training (CCBIT) System. Key components of the system include: increased collaboration with private contractors, use of competencies to develop curriculum, Individual Training Needs Assessments, recruitment and development of competent trainers, job specific content, a statewide system for delivery, transfer of learning, and a computerized system for administration, monitoring and quality control. Prevention and Protection Services (PPS) and DCF Strategic Development collaborated with the Institute for Human Services (IHS) in Ohio to develop the training system. The KCWPTP system is modeled after the competency-based system developed by IHS for the Ohio Child Welfare Training Program.

A key component of the KCWPTP is the Steering Committee, which provides oversight and evaluation, strategic program planning and governance of the developmental activities and operations for the system. Steering Committee membership includes DCF and CWCMP representatives.

In January 2017, the KCWPTP public website was established. It provides information related to the training program including course descriptions, competencies, regional training centers, the steering committee membership, purpose and mission statement, the training calendar, newsletter and resources for the trainer and trainee <http://www.dcf.ks.gov/Agency/KCWPTP/Pages/default.aspx>

The Pathlore Learning Management System serves as the statewide data tracking system for all training within the Kansas child welfare system. Staff from DCF, KVC, and Saint Francis Ministries are entered into the Pathlore system. Plans are being made to add the new family preservation and foster care grantees. This practice allows for documentation and accurate tracking of all child welfare staff trained through KCWPTP.

Training is available in a variety of formats, including online, computer-based, blended, simulation and classroom delivery. Online courses are completed through the DCF Training Center (Learning Management System Pathlore). Computer-based training includes courses completed on computers not connected to a network, e.g. the Building Family Foundation series of 10 courses are available on stand-alone computers at multiple locations around the state. Blended training includes courses created or modified for some activities to be completed online by the individual and some activities to be completed either individually or with a group in consultation with a trainer or supervisor. Simulation training includes the use of the DCF lab to simulate real-world client interactions in a safe learning environment. Classroom delivery is provided in a face-to-face environment. All CWCMP and DCF trainings are available to Tribal staff and other community partners.

DCF and CWCMPs collaborate to offer Special Topic courses to all staff. DCF and CWCMP staff also attend special topics courses provided by community agencies.

**Item 26: Initial Staff Training.** How well is the staff and provider training system functioning statewide to ensure initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions?

The goal of pre-service and pre-caseload training is for every newly hired PPS Child Protection Specialist or Investigator or CWCMP Case Manager to be ready to take a case load at the end of their pre-service training. The Pre-Service training teaches the skills and knowledge necessary to effectively address safety, permanency and well-being.

Beginning in May 2018, changes were made to the hiring requirements for Child Protective Services (CPS) Specialists employed by DCF. A person with a four-year degree in a Human Services or Behavioral Sciences field of study may be employed as a CPS Specialist. DCF also completed a contract amendment for the CWCMPs to allow for unlicensed Case Management positions. These changes were made to address significant staff shortages experienced within the Kansas child welfare system.

#### **Initial Staff Training for Department for Children and Families (DCF) staff**

Initial staff training is required for all DCF CPS Specialists and Investigators. With the addition of unlicensed CPS Specialists, DCF established the Prevention and Protection Services (PPS) Training Academy in May 2018. The Academy is a four-week process which includes the completion of required online training, shadowing experiences, pre-training assignments, and two classroom courses. All new hires or current staff who transition to the unlicensed CPS Specialist positions are required to complete the Academy prior to carrying a caseload. Training groups are scheduled as needed. The first face-to-face course is Investigation and Assessment, which concentrates on topics related to safety, such as abuse/neglect definitions, policies and procedure related to the investigation and assessment, engagement, and documentation. The second face-to-face course focuses on various topics related to ethics, confidentiality, documentation, interviewing, critical thinking, decision making, the assessment process, testifying in court, ICWA/ICPC/MEPA, worker safety, and mandated reporting. The Academy

participants are expected to complete the remaining initial training requirements within 90 to 180 days of hire. See Attachment 3 for additional information: Training Requirements & Recommendations for PPS Assessment & Prevention CPS Specialists and CPS Investigators.

The table below shows the number of PPS staff who completed the various preservice trainings. Starting in May 2018, classroom courses are offered more frequently than in previous years due to the increased number of new hires. Numbers vary between courses because some courses are only available to new staff while some courses are also available to staff as on-going training. The numbers in the table below reflect new and veteran PPS staff who participated in the training.

<b>Pre-Service Training</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Customer Service & the Telephone	*	*	*	109	62	167				
Investigation and Assessment online	*	*	*	*	*	59				
KIDS Training (Kansas Initiative for Decision Support)	102	84	87	58	81	166				
KIPS: Intake and Investigation	*	*	*	46	52	158				
PPS Academy - Investigation and Assessment	122	78	86	71	69	208				
Shadowing Experiences	*	*	*	17	33	194				
Documentation 101	*	*	*	411	205	203				
PPS Academy Week 4 Wrap-up	*	*	*	*	*	167				
PPS Academy Wrap Up Assignments	*	*	*	*	*	135				
Facilitated Discussions: Active Case Review	*	*	*	1	62	172				
Facilitated Discussions: Ethics and Confidentiality	*	*	*	10	55	185				
Facilitated Discussions: Meeting with Resistance	*	*	*	18	66	198				
Facilitated Discussions: Worker Safety	*	*	*	23	70	203				
Facilitated Discussions: Safety Risk Assessments	*	*	*	10	54	82				
Facilitated Discussions: Self-Care	*	*	*	3	59	85				
Facilitated Discussions: Time Management	*	*	*	2	8	85				
Interviewing Children: Getting more with Less	59	100	148	61	64	166				
Interviewing Skills for Child Welfare	69	93	89	64	51	118				
Worker Safety: Verbal and Non-Verbal De-Escalation	311	241	184	162	105	267				
The Period of Purple Crying	92	74	85	75	61	171				
PPS Safety Intervention System Fundamentals	122	109	86	91	61	197				

Identifying and Explaining Parent and Alleged Perpetrator Rights	115	87	86	76	40	174				
MECAN: Abusive Head Trauma in Infants and Children	291	194	141	81	63	186				
PPS Introduction to Human Trafficking	307	0	121	62	51	106				
*Working Safe Working Smart 1: Intro to Personal and Workplace Safety	*	*	*	545	520	743				
*Working Safe Working Smart 2: Field Safety	*	*	*	198	153	308				
*Working Safe Working Smart 3: Office Safety	*	*	*	540	516	728				
*Working Safe Working Smart 4: Interviewing Behaviors	*	*	*	226	177	329				
*Working Safe Working Smart 5: Post-Incident Trauma	*	*	*	139	95	254				

\*Courses required for all DCF staff.

At this time, Kansas is collecting Level One Evaluation data on all face-to-face pre-service courses provided to DCF staff. The results of these evaluations are reviewed and used to identify points of improvement for training content or delivery. One item on the evaluations is used to identify additional training needs and interests of staff, while additional items collect feedback on the appropriateness of the audience being trained. This information is helpful in identifying when some courses would benefit a broader audience.

The following table provides the Level One Evaluation results for PPS Academy: Investigation and Assessment between SFY 2018 and SFY 2019.

<b>PPS Academy: Investigation and Assessment</b>	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Information provided was of use.	71.26%	20.11%	5.17%	3.45%	0%
Information was at a level that I could comfortably use.	65.71%	25.71%	5.14%	3.43%	0%
Content was of interest to me.	0%	27.43%	6.29%	2.29%	.57%
The learning objectives of the program were clear.	72.00%	17.71%	6.86%	2.29%	1.14%
Presenters made the ideas clear.	68.75	24.43%	3.98%	1.70%	1.14%
Presenters invited participation from group.	85.23%	12.50%	.57%	.57%	1.14%
Handouts and visuals assisted the overall understanding of material.	77.27%	18.75%	1.70%	1.70%	1.14%

The following table provides the Level One Evaluation results for PPS Academy: Wrap Up between SFY2018 and SFY2019.

<b>PPS Academy: Wrap Up</b>	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Information provided was of use.	50.44%	35.40%	7.08%	0%	7.08%
Information was at a level that I could comfortably use.	58.93%	37.50%	1.79%	0%	1.79%
Content was of interest to me.	33.04%	41.96%	21.43%	1.79%	1.79%
The learning objectives of the program were clear.	43.75%	37.50%	10.71%	5.36%	2.68%
Presenters made the ideas clear.	43.05%	41.44%	9.91%	2.70%	.90%
Presenters invited participation from group.	76.58%	19.82%	1.80%	1.80%	0%
Handouts and visuals assisted the overall understanding of material.	50.45%	36.94%	9.91%	1.80%	.90%

The following table provides the Level One Evaluation results for Kansas Initiative for Decision Support (KIDS).

<b>Kansas Initiative for Decision Support (KIDS)</b>	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Information provided was of use.	56.82%	34.09%	4.55%	2.27%	2.27%
Information was at a level that I could comfortably use.	50.00%	27.27%	18.18%	2.27%	2.27%
Content was of interest to me.	47.73%	31.82%	15.91%	2.27%	2.27%
The learning objectives of the program were clear.	56.82%	27.27%	13.64%	0%	2.27%
Presenters made the ideas clear.	63.64%	20.45%	13.64%	2.27%	0%
Presenters invited participation from group.	59.09%	29.55%	4.55%	2.27%	4.55%
Handouts and visuals assisted the overall understanding of material.	61.36%	25.00%	6.82%	2.27%	4.55%

The following table provides the Level One Evaluation results for Interviewing Skills between SFY 2015 and SFY 2019.

<b>Interviewing Skills</b>	Rating: 5=Best 1=Worst				
	5	4	3	2	1
Information provided was of use.	76.3%	20.2%	.3%	.2%	0%
Information was at a level that I could comfortably use.	80.0%	17.5%	2.0%	.3%	.3%
Content was of interest to me.	72.8%	22.2%	4.7%	.3%	0%
The learning objectives of the program were clear.	80.5%	16.8%	2.5%	.3%	0%
Presenters made the ideas clear.	84.0%	13.0%	2.7%	.2%	0%
Presenters invited participation from group.	88.3%	10.5%	1.0%	.2%	0%
Handouts and visuals assisted the overall understanding of material.	76.8%	19.6%	3.5%	0%	0%

Kansas recognizes there may be an area of opportunity related to collection and analysis of data to demonstrate how effective initial training is for new DCF staff and help identify what core skills transfer into practice.

#### **Initial Staff Training for Child Welfare Case Management Providers (CWCMP) staff**

Pre-service training required by DCF for CWCMP staff is provided through Pathlore using course material originally developed through Children’s Alliance of Kansas (CAK). This is a standardized training curriculum managed by DCF. All CWCMP staff are required to complete the training which

involves testing at 100% on each module prior to carrying a caseload. The curriculum is currently being updated by DCF for delivery beginning in October 2019.

In November 2016, Documentation 101, an online course, was added to Pathlore. All CWCMP staff are required to complete this training as a pre-service requirement. DCF monitors compliance through Pathlore Learning Management System (LMS). Weekly reports are sent to KVC and SFM for monitoring and compliance purposes. The reports are reviewed by the PPS training unit. In addition to the courses required by DCF, each of the CWCMPs require multiple pre-services courses for new staff. See Attachment 4 Saint Francis Ministries SFY19 Trainings and Attachment 5 KVC Mandatory Training for New Hires for additional information

<b>Pre-Service Training</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Pre-service training for CWCMPs through Pathlore	254	571	433	414	308	485				
KVC			217	233	153	189				
SFM			207	174	155	288				
Documentation 101(CWCMP)	*	*	*	1210	366	525				
KVC				596	199	228				
SFM				614	167	297				

Item 26, Initial Staff Training, is functioning well in Kansas statewide to ensure initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions. Kansas recognizes there may be an area of opportunity related to the collection and analysis of data to demonstrate how effective initial training is for new CWCMP staff and help identify what core skills transfer into practice.

**Item 27: Ongoing Staff Training.** How well is the staff and provider training system functioning statewide to ensure ongoing training is provided for staff addressing skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

Kansas supports ongoing training for staff through internal training and technical resources, courses developed through a contract with the Institute for Human Services (IHS) in Ohio and through a myriad of specialized resources selected by the CWCMPs. Courses developed and provided through community partners and/or CWCMPs are also available to DCF staff.

Due to the change in hiring requirements, all DCF Child Protective Services (CPS) Specialists and CWCMP case managers are required to complete 40 hours of continuing education, including 3 hours of ethics training bi-annually. Licensed child welfare staff will continue to meet the Kansas Behavioral



Science Regulatory Board (BSRB) standards for licensure within their discipline. By contract, CWCMPs are required to be accredited by a national child welfare organization. Maintaining accreditation ensures that the standards related to training are met.

Two trainings required for PPS staff as pre-service training are also offered annually. These trainings, as well as special topic trainings, are also offered to professionals from CWCMPs, other agencies and tribes. The tables below show the number of individuals who completed these trainings, not limited to PPS staff.

<b>Annual Training</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Worker Safety: Verbal and Non-Verbal De-Escalation	311	241	184	162	105	267				
MECAN: Abusive Head Trauma in Infants and Children	291	194	141	81	63	186				

\*Course available through Pathlore.

### Caseworker Core Modules

A critical component of the KCWPTP are the Caseworker Core Modules. Caseworker Core consists of eight modules; see Attachment 6, KCWPTP Caseworker Core Course Descriptions. The long-term goal is to require all child welfare staff in Kansas to complete the Core Caseworker Modules. The capacity for each round is 30 individuals with priority given to new workers. Participants include staff from DCF, KVC and SFM. A condensed Caseworker Core Overview has been developed for supervisors. Currently instructors for the Core Modules are PPS regional trainers or contract trainers who are subject matter experts specific to each module.

<b>KCWPTP Core Module Series</b>	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023	SFY 2024
KCWPTP Core Module 1 - Family-Centered Approach to Child Protective Services (PPPSCW0200)	*	29	99	85	49					
DCF		23	35	27	20					
KVC		3	30	26	18					
SFM		3	34	32	11					
KCWPTP Core Module 2 - Engaging Families In Family-Centered Child Protective Services (PPPSCW0202)	*	25	77	82	34					
DCF		20	33	28	12					
KVC		3	14	22	3					
SFM		2	30	32	19					
KCWPTP Core Module 3 - Legal Aspects of Family-Centered Child Protective Services (PPPSCW0203)	*	*	102	66	65					
DCF			49	20	34					
KVC			17	16	6					
SFM			36	30	25					
KCWPTP Core Module 4 - Assessment and Safety Planning In Family-Centered Child Protective Services	*	27	70	54	48					

(PPPSCW0204)										
DCF		21	30	21	16					
KVC		3	12	17	1					
SFM		3	28	16	31					
KCWPTP Core Module 5 - Gathering Facts In Family-Centered Child Protective Services (PPPSCW0205)	*	23	48	64	54					
DCF		20	18	30	16					
KVC		2	13	16	4					
SFM		1	17	18	34					
KCWPTP Core Module 6 - Case Planning In Family-Centered Child Protective Services (PPPSCW0206)	*	*	59	58	52					
DCF			32	25	20					
KVC			14	15	8					
SFM			13	18	24					
KCWPTP Core Module 7 - Child Development Implications For Family-Centered Protective Services (PPPSCW0207)	*	23	51	63	70					
DCF		8	25	36	21					
KVC		7	17	11	17					
SFM		8	9	16	32					
KCWPTP Core Module 8 - Separation, Placement And Reunification In Family-Centered Child Protective Services (PPPSCW0208)	*	19	34	104	56					
DCF		6	19	53	19					
KVC		6	12	13	14					
SFM		8	3	38	23					

### Assessor Core Training

Kansas identified the need to better prepare CWCMP and Child Placing Agency (CPA) staff to assess and prepare children and families for adoption. To address this need, Assessor Training, based on OCWTP curricula, began in April 2016. The training is delivered by contract trainers, who are subject matter experts specific to each course. Participants included DCF, CWCMP and CPA staff who provide foster care and/or adoption services. The training includes two Caseworker Core modules serving as a prerequisite: Child Development: Implications for Family-Centered Protective Services (Module 7); Separation, Placement, and Reunification in Family-Centered Child Protective Services (Module 8). The participants completed Tier I of Foster and Adoption Training consisting of six workshops. The topics include Family and Child Assessment, Services for Birth Parents, Post-Finalization Adoption Services, Adoption Assistance, Placement Strategies and Pre-Finalization Services. Based on feedback from participants and trainers the current curriculum is being reviewed, revised, and updated. See Attachment 7 for KCWPTP Assessor Tier I and II Course Description.

Assessor Core Courses	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023	SFY 2024
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KCWPTP Assessor Tier I (PPPSCW0280)	*	17	14	25	16					
DCF		5	5	14	3					
KVC		5	8	3	7					
SFM		7	1	8	6					
KCWPTP Assessor Tier II (PPPSCW0280)	*	*	13	24	13					
DCF			5	15	6					
KVC			5	1	5					
SFM			3	8	2					

<b>Special Topic Training</b>	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023	SFY 2024
Human Trafficking Understanding the Dynamics – Protection Reporting Center	*	*	*	*	59					
Domestic Violence	*	*	*	*	104					
Shadowing CPS	*	*	*	*	31					
Why Bring Dads into the Picture (The strategies and importance of healthy father engagement.	*	*	*	92	68					
Trauma, Drama and Calm	*	*	5	91	*					
The SPA Treatment (Self-Caring preventative attention to avoid burnout.	*	*	*	112	*					
Bridges Out of Poverty Overview			2	19	65					
Social Work Safety Awareness	*	*	*	30	131					
PPS Documentation Enhancement	*	*	*	115	165					
Play Based Interactions	*	*	160	113	11					

## Supervisor Training

New PPS supervisors are required to complete all pre-service trainings in addition to the following trainings required of all state supervisors: Advanced ADA Online Training, Leadership and Supervisory Issues, Legal Issues for Supervisors, Performance Management Process Training for Managers and Supervisors, Personnel Services Overview, Tools for Crucial Conversations, Sexual Harassment Prevention (taken annually). Completion of training requirements is monitored by State Human Resources.

The statewide quarterly supervisor meetings and an annual supervisor conference are considered a strength for Kansas. The meetings were instituted in January 2017. Participants are supervisors from DCF, the CWCMP, Family Service Grantees, Child Placing Agencies, and tribal representatives. Each meeting provides an opportunity for child welfare supervisors to network and complete continuing education units on relevant topics. Speakers have provided training on multiple topics including: Human

Trafficking, Domestic Violence, Fatherhood Involvement, ICWA information, Reflective Supervision, Family First, Risk vs. Safety and Team Building.

The Excellence in Supervision Conference is developed each year by Kansas State University through a contract with DCF. It includes seminars and key notes on a variety of topics that are different each year. In SFY 2019, 94% of participants ranked the conference as satisfactory or above.

**Kansas Strong for Children and Families**

The University of Kansas School of Social Welfare (KUSSW) and its partners, the Kansas Department for Children and Families (DCF) and the state’s network of privatized providers of adoption and foster care (KVC Kansas and Saint Francis Ministries), in concert with the Court Improvement Program (CIP), are currently in the planning period of a federal five-year grant to develop and deliver Kansas Strong for Children and Families.

A goal of the project is to implement a coaching program for public and private supervisors across child welfare programs to address basic social work practices in four areas: parent and youth engagement; risk and safety assessment; relative/kin connections; and, concurrent planning. Plans include training on coaching for supervisors, implementing coaching services, and developing a comprehensive set of methods and tools for supervisors to deliver coaching to frontline workers.

Kansas recognizes an area of opportunity related to gathering data on CWCMP supervisor training requirements.

**Icebreaker Training for Facilitators**

An Icebreaker is a facilitated conversation providing an opportunity for parents/caregivers and foster parents to meet face-to-face, talk about the needs of the child and share information about themselves and their family routines and traditions. The focus is on the care and well-being of the child.

Kansas chose to implement the Icebreakers model created by the Annie E Casey Foundation. The Center for States worked with Kansas to implement Icebreakers and assist with the pilot of the model. During SFY 2019, Melinda Feola-Mahar, with the Capacity Building Center for States, piloted the Facilitator Training and completed several train-the-trainer classes. The KVC and SFM staff in the pilot counties attended the Icebreaker training for facilitators during the summer of 2018. Beginning in January 2019, KVC and SFM began Icebreaker facilitator training for the case managers in the remaining counties across their regions. On October 1, 2019, TFI and Cornerstones of Care will begin providing Foster Care Services in the East and Kansas City regions, respectively. Staff from TFI and Cornerstones of Care have attended the Train the Trainer and will be training new staff prior to transition. Each CWCMP will be responsible for training their new staff to use the Icebreaker model.

	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Icebreakers Training for Facilitators (PPPSCW0251)	110				
DCF	21				

KVC	46				
SFM	43				
Icebreakers Training for Facilitators TOT (PPPSCW0250)	15				
DCF	5				
KVC	8				
SFM	2				

## Simulation Training Lab

In SFY 2017, Strategic Development and PPS collaborated to develop a simulation lab. Simulation is a technique for education and training used in different disciplines, including the military, medicine and aviation. It offers guided, immersive experiences replicating aspects of a real-world experience in an interactive fashion. The Kansas simulation lab offers two residential settings, which can be staged to create various “home” environments to enhance the learning experience of staff attendees. The simulation lab also offers a court room setting, which can be used to simulate a court room experience. Prior to SFY2019 the simulation lab was used during demonstrations for stakeholder groups and during Interviewing Skills training. In SFY2019, Strategic Development (SD) and Prevention and Protection Services (PPS) began collaborating with the Social Work program at Kansas State University (KSU) to expand the use of simulation for the KCWPTP. During SFY 2019, KSU staff developed and presented four courses for the Training Lab Series. Topics include caregiver substance abuse, ethics, court testimony and supervision. Attendees at the initial presentations included DCF, KVC and SFM staff.

<b>DCF Training Lab Series</b>	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023	SFY 2024
<b>Who Cares? The Practical and Ethical Considerations of Stress, Burnout, and Compassion Fatigue for Professional Helpers Caregiver Substance Abuse and Use: Simulation Training Lab Training Series PPPSCD0101</b>	*	*	*	*	19					
DCF					13					
KVC					3					
SFM					3					
Central Nervous System Depressants: A General Overview (PPPSCD0102)	*	*	*	*	73					
Central Nervous System Stimulants: A General Overview (PPPSCD0103)	*	*	*	*	78					
Cannabis: A General Overview (PPPSCD0104)	*	*	*	*	78					
Opiates and Opioids: A General Overview (PPSPCD0105)	*	*	*	*	89					

<b>Who Cares? The Practical and Ethical Considerations of Stress, Burnout, and Compassion Fatigue for Professional Helpers PPPSLE0101</b>	*	*	*	*	33					
DCF					29					
KVC					3					
SFM					1					
<b>Social Work Documentation and Court Testimony Simulation Training PPPSLE0102</b>	*	*	*	*	18					
DCF					12					
KVC					3					
SFM					3					
<b>Rethinking and Reconceptualizing Supervision in Child Welfare PPQITD0102</b>	*	*	*	*	15					
DCF					11					
KVC					1					
SFM					3					

Kansas recognizes there may be areas of opportunity related to collecting and analyzing data to demonstrate how effective on-going training is for staff and to help identify what core skills transfer into practice.

**Item 28: Foster and Adoptive Parent Training.** How well is the staff and provider training system functioning to ensure training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (caring for children receiving foster care or adoption assistance under title IV-E) addressing skills and knowledge needed to carry out their duties with regard to foster and adopted children?

Kansas requires the Trauma-Informed Partnering for Safety and Permanency - Model Approach to Partnerships in Parenting (TIPS-MAPP) be completed by foster parents prior to becoming licensed. Approved adoptive parents are also required to complete TIPS-MAPP and relatives can be directed to complete the training if it is deemed necessary. Children cannot be placed in foster or adoptive homes until the training is complete. Exceptions are allowed for relatives and nonrelated kin. DCF monitors compliance through the licensing process and requires documentation of completion of the course along with their assessment and the instructor’s recommendation

TIPS-MAPP is a nationally recognized, pre-service training for prospective foster and adoptive parents. Using TIPS-MAPP assures a consistent curriculum statewide and fidelity to the model. The TIPS-MAPP curriculum model includes family and individual assessments. It is considered a mutual selection process. Multiple delivery methods are now available to meet the needs of prospective families including ten 3-hour sessions or a 3-day “weekend intensive” option. Another form of TIPS-MAPP, TIPS-Deciding Together may be substituted in situations where group training is not possible. The TIPS-MAPP model:

- is designed to mutually prepare, assess, and make selection decisions;
- has a focus on skill building assuring preparation/selection workers can observe the skills in action in order to document the skills in the family's assessment;
- offers TIPS-MAPP Family Consultations assuring private time for the prospective adoptive/foster family and TIPS-MAPP leader to discuss strengths, progress and family needs and plan ways to meet identified needs;
- offers a Professional Development Plan for growth while becoming an adoptive/foster family or child welfare advocate;
- provides a Summary and Recommendation document creating an overview of the family's behavioral struggles and needs at the completion of the program and to clearly state next steps for professional development.

In a two-parent household, if both parents are listed on the license, then both parents are required to go through training. If an adult in the household is not going to be a foster parent, background checks are still required, and their role in the family would be included in the assessment. DCF has a contract with the Children's Alliance of Kansas (CAK) to provide TIPS-MAPP training. The TIPS-MAPP model involves a Child Welfare Professional and a foster or adoptive parent to provide the co-training together. CAK provides the curriculum and leader training to staff from private Child Placing Agencies (CPA), and monitors the fidelity and delivery. CAK also offers a tribal version of TIPS-MAPP. Staff from DCF, KDOC-JS, group homes and other agencies may also attend TIPS-MAPP classes. CAK indicates evaluations for both training programs are positive.

In SFY 2019, 139 people will complete both TIPS-MAPP and TIPS-DT Leader training. This number has remained consistent across the years and ensures the child welfare system has qualified trainers who are ready to train new foster/adoptive parents in various formats.

CAK develops and updates training to meet the needs of foster, adoptive, and relative placements. CAK worked with the National Child Traumatic Stress Network as well as a committee made up of about 1416 professionals from different areas within child welfare to complete the revisions on this pre-service curriculum model to assure it reflects trauma informed practices. In 2018, CAK added an Icebreaker activity to the curriculum to introduce foster families to the Icebreaker protocol and to the importance of working with bio-families for the purpose of reunification.

CAK offers a curriculum for relatives, "Caring for Our Own." This training is currently being revised to be more sensitive to needs and culture of families and include trauma-informed practices. It is anticipated the new version of Caring for Our Own will be available beginning in SFY 20.

Components to the TIPS-MAPP program allowing participants to evaluate the effectiveness are:

- strengths/needs worksheets done every other week for the family to assess their strengths and needs in relation to the 12 criteria;
- an opportunity to do a written evaluation on the leaders after the 2nd meeting;
- a discussion about the leader evaluations during the family consultations;
- a final evaluation filled out during the 10th session;
- the right to revise their family portfolio after the 10 meetings;
- and the final family consultation when leaders are to review the summary and recommendations during the final consultation.

Participants are asked to submit follow up surveys to CAK with questions measuring fidelity to the training model. Kansas recognizes an area of opportunity in collecting and analyzing this data to determine the effectiveness of TIPS-MAPP training.

The contract with CAK also includes training to provide on-going foster parent training. Foster parents are required to participate in at least eight hours of training annually as part of the licensure renewal. A multitude of courses on various topics are available through this training network. In addition, on-line training is available for Medication Administration, Universal Precautions, TIPS-MAPP Update, and Ethical Relationships in Child Welfare. Classroom-type training categories include:

- Trauma, mental health and SED issues
- Developmental disability issues
- Substance abuse issues
- Domestic violence
- Loss and attachment
- Behavior management issues
- Child abuse and mandated reporting
- Children development issues
- Cultural diversity
- Regulations and safety issues
- Parenting education'
- Professional development
- Teen issues and independent living
- Impact of fostering
- Adoption
- Documentation
- Community resources/education
- Legal issues
- First aid, CPR, and universal precautions
- Case planning and permanency
- Medical
- Birth parent and family connections

On-line training is effective for some types of training and class room training is better for others. Through the contract with CAK, a variety of courses are offered statewide to ensure that the adults providing care for children in foster care are skilled and prepared to meet their needs. Child Placing Agencies (CPA) monitor foster parent compliance with training requirements. Kansas recognizes an area of opportunity in gathering, aggregating and analyzing this data.

<b>Number of Training Participants by Type</b>	<b>SFY 2019</b>
Classroom Training	280
On-Line Training	48

\*\*SFY2019 numbers are July 2018-April 2019, does not include May & June 2019.



**Outcomes for the current CAK contract include:**

- A total of 80 new TIPS-MAPP, TIPS-DT or Caring for Our Own leaders will successfully complete the required training by certified trainers. This shall include foster/adoptive families and child welfare professionals.
- 90% of randomly selected attendees will report the MAPP training they took addressed training content identified as well as the relevance of the training to the attendees and behavior/attitudinal changes as identified in the training materials.
- 90% of families will wait no longer than four (4) weeks from the time they requested TIPS-MAPP/DT and when the training was offered.
- 90% of families will be provided TIPS-MAPP which are a maximum travel time of two hours one way.

Numbers below indicate continued efforts to train and prepare foster and adoptive families in Kansas.

<b>Pre-Service Foster and/or Adoptive Parent Training</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019
TIPS-MAPP	1,012	1,145	1,018	1,053	1,431	1,202
TIPS-Deciding Together	751	773	720	676	547	413

\*\*SFY2019 numbers are July 2018-April 2019, does not include May & June 2019.

**Residential/Group Home Requirements:** All Residential/Group Home placement providers shall be licensed through DCF Foster Care and Residential Facility Licensing Division and meet the DCF/PPS Placement Standards and requirements in the Child Welfare Handbook of Client Purchases in order to obtain a provider agreement with DCF.

Each facility is required to have an in-service orientation training program for new employees, directed needs of staff working directly with residents. Documentation of completion of orientation training is kept in the staff member’s personnel file and is made available to DCF upon request. Facility staff are required to complete 18 hours of in-service orientation training before they can work independently with youth.

The in-service orientation program ensures staff are oriented to the following:

- Facility policy and procedures manual
- Facility emergency and evacuation procedures
- Emergency safety interventions (including management of aggressive or suicidal behavior and orientation to the facility’s restraint policies and procedures)
- The handling of blood borne pathogens
- Facility discipline standards
- Abuse/neglect mandatory reporting laws
- Client record documentation policies and procedures
- Policies and procedures for resident medication management
- Resident rights
- Confidentiality laws
- Training in CPR/First Aid within 3 months of employment
- De-escalation techniques
- Trauma based informed care
- LGBTQA+

Facilities are required to have a written annual staff in-service training plan which addresses the annual training needs of all staff having direct contact with residents. This annual training is beyond or in addition to the initial 18-hour orientation training program. Topics are provided to assure that facility staff are prepared to meet the needs of children/youth in their care.

Topics for annual training may include but are not be limited to:

- CPR and First Aid (current not expired)
- Blood borne pathogens
- Medications
- Emergency safety interventions
- Substance use disorder patterns
- Childhood and adolescent development (including developmental disorders)
- Childhood and adolescent psycho-pathology (including such topics as effects of abuse/neglect, reactive attachment disorders, separation anxiety disorders, ADHD)
- Childhood and adolescent sexuality issues, especially the effects of early sexual abuse
- De-escalation techniques/physical restraints techniques
- Trauma based informed care
- LGBTQA+

#### H. Systemic Factor 5: Service Array and Resource Development

**Item 29: Array of Services.** How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the Child and Family Services Plan (CFSP)?

DCF provides services designed to help children safely and appropriately return to families from which they have been removed, to provide pre-placement preventive services designed to help children at risk of foster care placement remain safely with their families, and to provide services designed to help children be placed for adoption, with a legal guardian, or if adoption or legal custodianship are determined not to be appropriate for a child, in some other planned, permanent living arrangement. Intake, investigation and assessment, family services and family preservation, reintegration/foster care, adoption and independent living services are available statewide in all 105 counties. Community mental health services are available statewide through community mental health centers and their satellite offices. Intellectual Developmental Disability services are available statewide through Community Developmental Disability Organizations and their affiliated community service providers. Substance Use Disorder (SUD) assessment, referral and treatment is available statewide through a provider network managed by the Kansas Department for Aging and Disability Services, Behavioral Health Services. Regional Prevention Centers support communities in the development of long-term comprehensive prevention plans to support the targeted statewide prevention outcomes.

In CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 29. Kansas indicated that family services, family preservation, foster care, adoption, and independent living services were available in all 105 counties. Community mental health, substance abuse services, and intellectual developmental disability services were also available. However, information received from stakeholders during interviews indicated that this systemic factor item was not routinely functioning statewide. Stakeholders noted a lack of mental health services, specialized foster homes, substance abuse

treatment, and contracted case managers. Stakeholders reported that although there are mental health centers across the state, these centers are short-staffed with waiting lists ranging from 2 weeks to 30 days. A main concern of some stakeholders was the lack of admissions to psychiatric residential treatment facilities for children with severe behavioral and mental health needs. Stakeholders also reported a notable difference in the array, availability, and accessibility of mental health services in the urban versus rural areas of the state.

In SFY 2019, stakeholder meetings, interviews, and focus groups have yielded the same concerns identified in the CFSR related to PRTF stays and substance use disorder treatment resources. The passage of Family First Prevention Services Act (FFPSA) is an opportunity which offers exciting possibilities for Kansas. Kansas is amplifying foster care prevention services through grant awards in SFY 2020 for emerging and evidenced-based prevention services, including specified mental health, substance abuse, parenting education programs and kinship navigator programs supported by the Prevention Clearinghouse. The intent of these grants is evaluating Kansas communities and help build bridges to services in communities that are less service rich. This funding is prevention focused and allows for additional possibilities to entertain and build new services.

Also, in SFY 2020, Kansas will implement new Foster Care Grants establishing smaller catchment areas. These grants will serve eight catchment areas and will increase quality of care by bringing more community providers and partners to the table. The foster care grants are focused on supporting children and families, promoting permanency and being responsive to the courts. It will also set caseload requirements for all areas of care, and it identifies specific assessments and services needed to include trauma informed care.

Kansas Department for Aging and Disability Services (KDADS) is in contract negotiations for Crisis Stabilization Services which will assist in expanding services across the state. These services include a 24/7 crisis behavioral health hotline, psychiatric hospitalization screens, and mobile response and stabilization services. Mobile Response and Stabilization Services (MRSS) is an intervention service that offers short-term, flexible service coordination to assist in stabilizing an individual in their community setting. Interventions are designed to maintain the individual in their current living arrangement, to prevent repeated hospitalizations, to stabilize behavioral health needs and to improve functioning in life domains.

Lastly, Kansas Strong for Kansas Families (Kansas Strong) is a federal grant which combines federal, state, and local resources to improve children's safety, well-being, permanency, service array, and CQI processes. Kansas Strong is led by the University of Kansas School of Social Welfare and the steering committee is comprised of staff from the Department for Children and Families, the Court Improvement Plan, the child welfare case management providers, the Children's Alliance of Kansas and the Kansas Family Advisory Network. A strategy of Kansas Strong aims to improve the service array across Kansas by implementing an interagency advisory board. This will improve service array by establishing a cross-system interagency board of leaders, so that cross-system knowledge of service needs and gaps is improved. Members will hold shared ownership and accountability for outcomes.

More information related to Family First and Kansas Strong can be located at Section IV - Plan for Enacting the States' Vision.

**Item 30: Individualizing Services.** How well is the service array and resource development system functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served by the agency?

Services are individualized through the development of a case plan for each child or family that addresses the needs of children and families to assure the safety, permanency and well-being of children.

Services are provided to children from birth to age three with identified developmental delays available through a statewide network of providers.

DCF offers many forms, brochures, and appendices in Spanish. One form is available in Laotian. DCF contracts for translation services including verbal, telephonic and braille translation services. The Kansas Protection Report Center accepts reports in any language.

Services through the Home and Community Based Service (HCBS) waiver are individualized based on the needs of the child. These waivers include services for Intellectual/Developmental Disability, Physically Disabled, Technology Assisted, Head Injury, Severely Emotionally Disturbed, Autism, and Psychiatric Residential Treatment Facility.

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 30. Kansas did not provide quantitative or substantive qualitative information for this systemic factor item that demonstrated functioning. Stakeholders were inconsistent in their opinions regarding whether services were individualized to meet the needs of children and families. Several stakeholders described a “cookie cutter” approach to service identification and provision, while other stakeholders reported that case plans do identify the individual needs of children and families. However, these stakeholders indicated although individual needs were identified, the services to address those needs were either not available statewide or obtaining them was difficult.

Kansas recognizes services to Kansas families must be unique to their need. The first step in individualizing services to families lies with a comprehensive assessment that accurately identifies their strengths and needs. As stated earlier in this assessment, Kansas will be implementing several new practices which include: Structured Decision Making, Team Decision Making, and possibly Signs of Safety. Additionally, through the Kansas Assessment and Permanency Project (KAPP) five assessment tools are being used that are trauma-informed, evidence-based to help guide interventions for children and families, and promote social-emotional well-being, family functioning, safety, and permanency. The next step is to connect and engage the family in services. The Kansas Strong model has a plan to create a coaching culture throughout child protective service, family preservation, and foster care case managers. Under the coaching culture, families and workers collaborate in problem solving as opposed to workers directing the family on what services in which to participate. The families will have increased ownership and participation in what strategies will work best to meet their needs.

## I. Systemic Factor 6: Agency Response to the Community

**Item 31: State Engagement in Consultation with Stakeholders Pursuant to CFSP and APSR.** How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public

and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

DCF consults and coordinates with a wide variety of stakeholders: family members, youth, tribal representatives, Child Welfare Case Management Provider (CWCMP) organizations, Medicaid, contracted providers, Kansas Department of Aging and Disability Services (KDADS) representing mental health and developmental disabilities, Economic and Employment Services, child day care, Head Start programs, and Child Support Services. Coordination of programs is consistent and ongoing both at the state and community levels. In addition, there is a systems collaboration meeting which includes DCF, KDADS, Kansas Department of Correction-Juvenile Services (KDOC-JS) and Kansas Department of Health and Environment (KDHE). DCF also collaborates with Child Support Services (CSS) and KDHE on an as needed basis.

Kansas collects input from stakeholders through Kansas Citizen Review Panels at least quarterly through meeting minutes and annually through formal reports. The purpose of Kansas Citizen Review Panels is to determine, with attention to a citizen's perspective, whether state and local agencies effectively administer their child protection responsibilities. Membership consists of a broad range of people who work on behalf of families and/or the best interests of the child including law enforcement, civil court judge, prosecuting attorney, defense attorney, a judge, district attorney, prosecuting attorney, guardian ad litem, foster parent, social service supervisors, Court Appointed Special Advocate, health care professional, child protective services personnel, foster care provider staff, family advocates, state foster care and adoption personnel, Kansas Department of Corrections-Juvenile Services, Kansas Department of Health and Environment, Office of Judicial Administration, and tribe representatives. The citizen review panels are a logical source of stakeholder feedback.

In addition to collaboration with OJA through the Citizen Review Panels, DCF collaborates with OJA on the Court Improvement Project. DCF Regional offices and CWCMP offices collaborate locally with court personnel including judges and county attorneys regarding jurisdiction-specific concerns.

DCF participates in statewide meetings with all the federally recognized tribes headquartered in Kansas four times per year. These meetings are in addition to tribal involvement through Citizen Review Panels. The statewide meetings include representatives from the tribes, foster care providers, Office of Judicial Administration, Kansas Department of Health and Environment, Region VII for the Administration of Children and Families, the Governor's office tribal liaison and DCF.

DCF participates in a minimum of one site visit to each of the Kansas recognized tribes Social Services Department each year. The DCF regional representative and the Office of the Governor's Native American Affairs Tribal Liaison/Executive Director attend the meetings when availability allows. The purpose of site visits is to further facilitate on-going tribal and state partnerships for the provision of tribal child welfare programs and to offer technical assistance. The site visits also provide context to the tribes for input and review of the state plan.

Kansas Youth Advisory Council (KYAC) holds a Strategic Planning Conference (SPC) every year. KYAC members identify issues at the conference that are of concern to older youth in foster care and to youth who have aged out. The issues are based on input from RYAC members through regional events and meetings.

In addition to utilizing the already established workgroups and/or venues outlined in section II. Collaboration and Coordination, Kansas conducted a minimum of semi-annual meetings with internal DCF division staff, external stakeholders, and the community over the last four years to discuss CFSR results, Program Improvement Plan (PIP) development, PIP progress, and new improvement initiatives. In March through May 2019, Kansas held seven community convenings across the state to gather feedback from the powerful community voices. Additionally, DCF Secretary Laura Howard held an additional two DCF Spring Stakeholder Meetings June 18<sup>th</sup>, 2019 in Emporia and June 20<sup>th</sup>, 2019 in Garden City. Remote sites also participated with Hiawatha, Kansas City and Pittsburg for the first meeting and Hays and Wichita for the second. Stakeholders provided Kansas with valuable opinions, perspectives, perceptions and ideas which were utilized in drafting the objectives and strategies of the CFSP.

During CFSR Round 3, Kansas received an overall rating of Strength on Item 31. Kansas described consultation and coordination with a wide variety of stakeholders. Information collected from stakeholders during interviews confirmed that the state agency collaborates with a variety of entities and that their input is integrated into the agency's CFSP and yearly APSR updates.

**Item 32: Coordination of the CFSP services with other federal programs.** How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the Child and Family Services Plan (CFSP) are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

DCF has regular communication with agencies responsible for implementing other federal programs and services. System collaboration meetings include representatives from Kansas Department for Aging and Disability Services (KDADS), Kansas Department of Correction-Juvenile Services (KDOC-JS) and Kansas Department of Health and Environment (KDHE). DCF also collaborates with Economic Employment Support Services (EES), Rehabilitation Services (RS), and Child Support Services (CSS) on an as needed basis.

DCF works closely with Kansas Kids at GEAR UP (KKGU) to insure youth receive education enrichment and financial support through post-secondary scholarships. DCF and CWCMP staff attend KKGU training and networking opportunities. KKGU participates in IL meetings for DCF and CWCMP IL staff. KKGU staff in some DCF regions are located in DCF offices.

DCF Regions work to collaborate and enter into needed Memorandums of Understanding (MOUs) with military installations regarding investigations and assessments of reports of alleged abuse and/or neglect. DCF then coordinates with family advocacy programs administered by the military to provide needed services.

DCF established a Memorandum of Understanding (MOU) with the Kansas Department of Education (KSDE). This MOU permits DCF to share, on a daily basis, the names of children receiving Foster Care services with KSDE who then disseminates this information to individual school districts where children receiving Foster Care services are in attendance.

Detailed information regarding consultation with stakeholders is provided in Section II. Collaboration and Coordination and Section V. Title IV-B Subparts 1 and 2 and Child and Family Continuum of the CFSP.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 32. Kansas provided descriptive information about stakeholder consultation and engagement in developing its CFSP and how these efforts have resulted in opportunities to coordinate services and benefits of other federally assisted

programs serving the same population. Specifically, collaborative efforts have resulted in youth receiving educational enrichment and financial support through post-secondary scholarships, agency and Child Welfare Case Management Provider staff accessing training and networking opportunities, and Memoranda of Understanding with the Kansas Department of Education and military installations for the purpose of investigations and assessments. The Kansas DCF also coordinates with Family Advocacy Programs administered by the military.

## J. Systemic Factor 7: Foster and Adoptive Parent Licensing, Recruitment and Retention

**Item 33: Standards Applied Equally.** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

DCF completes a re-determination for IV-E maintenance eligibility for all placement changes for all IV-E eligible children in foster care. A review is done for all placements for licensing compliance in order to accurately claim IV-E funds each time a new placement is entered in Kansas Eligibility Enforcement System (KEES). A review will be done a minimum of once every twelve months. Reviewing all placements annually ensures that standards are applied equally.

Only fully licensed foster homes and child care institutions are claimed by the State for federal funds reimbursement. Standards are applied equally to all licensed homes and facilities. Placements in approved relative homes are allowed in Kansas, but IV-E and IV-B funding is not claimed for these homes unless all licensing requirements are met. Relative homes that are not licensed are still required to pass safety requirements including a walk through, and background checks including KBI, Child Abuse Central Registry, and fingerprints. A home assessment is completed within 20 days of placement with a non-licensed relative.

The last three IV-E Federal Reviews for Kansas were conducted in 2011, 2014, and 2017. There was one finding as a result of the 2011 review which indicated a child was placed in a home that had not received a full license due to a change in residence. The process for notification for a residence change was reviewed by DCF and the Child Welfare Case Management Provider (CWCMP) to alleviate further issues regarding notification of changes in residence. The 2014 review indicated no findings in terms of meeting license standards. This suggests that licensing standards are applied equally and consistently. The process to ensure all safety checks are completed for all residential staff per K.A.R. 28-4-125 was identified as an area of opportunity for Kansas. Procedures have been established to rectify non-compliance for residential providers and to improve performance for this identified area. The 2017 review had no findings related to licensing.

K.A.R. 28-4-94.

(a) Initial and renewal background check requests. Each applicant submitting an initial application and each licensee submitting a renewal application shall submit a background check request on a form provided by the department. The request form shall be submitted with the application and shall include the name and all other required information for each individual who is at least 10 years old and is residing, working, or regularly volunteering in the residential center, group boarding home, or child placement agency.

(b) Additional background check requests. Each applicant with a temporary permit and each licensee shall submit a background check request on a form provided by the department before any individual who is at

least 10 years old begins residing, working, or regularly volunteering in the residential center, group boarding home, or child placement agency.

(c) Background check not required. No background check request form shall be submitted for any individual admitted for care.

(d) Documentation. A copy of each background check request form shall be kept on file at the residential center, group boarding home, or child placement agency.

(Authorized by K.S.A. 2014 Supp. 65-508; implementing K.S.A. 2014 Supp. 65-516; effective May 15, 2015.)

This statute ensures that standards related to individuals residing in, working in or regularly volunteering in residential facilities are applied equally.

In CFSR Round 3, Kansas received an overall rating of Strength for this item. Results from the 2011, 2014 and 2017 federal title IV-E foster care eligibility reviews contained no significant findings regarding meeting licensing standards.

**Item 34: Requirements for Criminal Background Checks.** How well is the foster and adoptive parent licensing, recruitment and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Foster Care and Residential Facility Licensing became a division of DCF effective July 1, 2015. This allows PPS to have a cooperative relationship with Foster Care and Residential Facility Licensing ensuring state standards are being met in all areas of licensure.

The Kansas Department for Children and Families (DCF) will only issue a full license after the applicants, any residents of the family foster home age 14 and above (excluding children in foster care), and any listed alternative caregivers for the home have completed and cleared; 1) a federal fingerprint-based background check, 2) a Child Abuse/Neglect Central Registry check, and 3) A national Sex Offender Registry check. This also includes a child Abuse/Neglect Registry check from each state of residence within 5 previous years of application are completed on adult applicants, residents and alternative caregivers ages 18 and above.

Non-custodial residents of the potential family foster home between the ages of 10-13 must complete and clear; 1) a name-based criminal history check through the Kansas Bureau of Investigation (KB), 2) a Child Abuse/Neglect Central Registry check, and 3) a national Sex Offender Registry check.

A DCF Licensing Surveyor will complete a full walk-thru survey of the home to assure compliance with Kansas Family Foster Home statutes and regulations. A Notice of Survey Findings (NOSF) is completed at that time. Any correction must be made prior to issuance of license.

Non-related kin placements must pass safety requirements including a walk through, and background checks including KBI, Child Abuse Central Registry, and fingerprints. Within two weeks of placement, non-related kin begin the licensing process including MAPP training and are issued a temporary permit within 30 days of placement. The temporary permit remains in effect for 90 days. Non-related kin comply with all licensing requirements prior to a full license being issued.



Kansas received an overall rating of Strength for Item 34 during CFSR Round 3. Kansas provided information from the 2011 and 2014 federal IV-E reviews, which contained no significant findings with regard to criminal background clearances. The state noted that a full license is issued only after prospective foster parents clear the criminal background, fingerprint, and child abuse registry checks.

**Item 35: Diligent Recruitment of Foster and Adoptive Homes.** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

In SFY 2014, Kansas recognized an area of opportunity related to the functioning of Item 35, Diligent Recruitment (DR) of Foster and Adoptive homes and initiated a Continuous Performance Improvement project (CPI). This project intended to ensure that efforts were being made statewide to recruit potential foster and adoptive families who reflect the ethnic and racial diversity of children in the Kansas foster care system. This CPI project included technical assistance from the National Resource Center for Diligent Recruitment. A Diligent Recruitment Plan was developed and initiated.

The 2014 Diligent Recruitment Plan identified 3 goals that continue to be pertinent to Kansas Child Welfare and will be included in the 2020-2024 plan as well. These goals are to: Recruit families for children who are age 13 and older and who have significant behavioral and mental health needs; Recruit African American foster and adoptive families; and Recruit adoptive families for the children/youth registered on the adoption exchange. Review of current data supports the need for continued recruitment and retention efforts towards meeting these priority goals.

Kansas, with technical assistance from the Center for Capacity Building for States (CBC), will develop and implement updates to the Kansas Diligent Recruitment Plan. This work will include updating the Diligent Recruitment Plan, written materials, and dissemination of information. Beginning October 1, 2019, the Department for Children and Families (DCF), will have direct relationships with Child Placing Agencies (CPAs) throughout the state. Diligent Recruitment Meetings will be held at least twice each year for the purpose of consistency in messaging and measuring of progress towards goals. These meetings will include key stakeholders to support and monitor Foster and Adoptive Parent Recruitment and Retention activities in the State. These stakeholders include tribal leadership, the Kansas Caregiver's Association, the Kansas Family Advisory Network (KFAN), Kansas Department for Health and Environment (KDHE), and the Children's Alliance of Kansas (CAK), which is an umbrella agency for private Child Placing Agencies (CPAs) in the state. CWCMPs and CPAs will also participate along with DCF and representatives from the CBC as needed. The participation of the Kansas Adoption Exchange, AdoptKsKids, will be crucial in accomplishing the Diligent Recruitment goals.

In addition to the Kansas' Diligent Recruitment Plan, each CWCMP and Child Placing Agency (CPA) also has an individualized recruitment plan that includes general, targeted and individual recruitment strategies. Participants in their targeted recruitment activities include a wide variety of audiences such as individuals familiar with working with special populations, people in the helping professions, teachers, NAACP, African/American fraternities and sororities, and churches that have memberships with a large number of minorities in their congregation. Targeted recruitment occurs in communities specified as needing more foster homes based on referral and placement data.

CWCMPs and CPAs host recruitment activities to recruit foster families to meet the needs of children in care. Until the contract changes in October 2019, CWCMPs have subcontracts with Child Placing Agencies for placement of children in foster homes. The Child Placing Agencies host recruitment activities to recruit foster homes under their sponsorship. The CWCMPs share recruitment plans with DCF and conduct joint recruitment activities. CWCMPs, CPAs, and other community stakeholders are engaged with DCF Diligent Recruitment Planning and dedicated to making improvements and meeting the needs of children in care.

Generally speaking Kansas has demonstrated consistency in recruiting and preparing foster families across the state. However, focusing on the goals indicated on the DR plan will improve the ability to meet the needs of children in foster care.

	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
# of licensed foster parents	3305	3433	3545	3535	3562					
*# of African American licensed foster parents	690	699	703	642	622					

On May 31, 2019, of all children placed in out of home placement, only 6% were placed in a Group/Residential type placement. The low percentage of children placed in a Group/Residential setting demonstrates moderate success in recruiting and retaining foster and adoptive families that meet the needs of children in care.

<b>Out of Home Placement Settings</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Family Foster Home	60%	58%	57%	55%	55%	53%				
Relative	31%	32%	33%	33%	32%	32%				
Pre-Adoptive	3%	4%	4%	3%	3%	4%				
Independent Living	1%	1%	1%	1%	1%	1%				
Runaway	1%	1%	1%	1%	1%	1%				
Group/Residential	5%	5%	6%	7%	8%	9%				
Maternity	1%	1%	1%	1%	1%	1%				

\*SFY 2019 data reflects July 2018 - February 2019

DCF continues to contract for the adoption exchange (AdoptKsKids) with Kansas Children's Service League. The number of children with photo-listings on the exchange has increased in recent years and as of May 31, 2019, there were 529 children referred to AdoptKsKids for recruitment. These children are legally free for adoption and are without an identified adoptive resource. 23% of these children identify as African American indicating a large over representation compared to 6% of Kansas population and validating the Diligent Recruitment goals targeting this population.

**Item 36: State use of Cross-Jurisdictional Resources for Permanency Placements.** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

DCF meets the requirements of the Safe and Timely Interstate Placement of Foster Children Act of 2006 for foster care and adoptive placement requests. Requests for home studies are completed and reported back to the sending state within 60 calendar days from the date the request is received in the Kansas ICPC office. If the family is not interested in placement or cannot meet background check requirements, a report must be submitted to the ICPC office.

During the Children and Family Services Review Round 3 which occurred in 2015, Kansas received an overall rating of Area Needing Improvement for Item 36. Findings were determined based on information from the statewide assessment submitted February 20, 2015 and stakeholder interviews. In the statewide assessment, Kansas described the process for identifying adoptive resources for children using the Kansas Adoption Exchange and AdoptUSKids. Kansas said that the state does not have a way to track the timelines of completion of home studies but noted that requests from other states for home studies are completed and results provided to the sending state within 60 calendar days of the request. During interviews, stakeholders generally reported that the use of cross-jurisdictional placements was not consistent statewide. They cited difficulties in working with other states and the effort required for workers with full caseloads as reasons for the inconsistency.

Kansas implemented the National Electronic Interstate Compact Enterprise (NEICE) in October 2018. NEICE is a national electronic system for quickly and securely exchanging the data and documents required by the Interstate Compact on the Placement of Children (ICPC) to place children across state lines. NEICE reduces the time children spend awaiting placement. Kansas will utilize NEICE to track timeliness of completion of home studies. Kansas is participating in a NEICE data workgroup to improve reports available in NEICE. Kansas is initiating new contracts for foster care services for FY2020 and responsibilities for ICPC home studies and monitoring placements in Kansas will transition to the new providers October 2019. The providers will have dedicated ICPC staff for consistency.

The tables below provide data available for ICPC cases.

#### Types of Outgoing ICPC Cases

Type of Case	FFY 2015	FFY 2016	FFY 2017	FFY 2018	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Adoption Cases	208	191	169	147					
Foster Home Cases	61	99	78	79					
Parent Cases	404	258	216	183					
Relative Cases	384	448	360	302					

#### Disposition of Outgoing ICPC Cases

	FFY 2015	FFY 2016	FFY 2017	FFY 2018	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Total Received	868	983	692	626					
Approvals	458	475	415	371					
Denials	410	408	277	255					
Placements*	325	337	303	243					

#### Types of Incoming ICPC Cases

Type of Case	FFY 2015	FFY 2016	FFY 2017	FFY 2018	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Adoption Cases	58	78	68	88					
Foster Home Cases	131	144	144	172					
Parent Cases	121	122	158	114					
Relative Cases	214	202	218	239					

#### Disposition of Incoming ICPC Cases

	FFY 2015	FFY 2016	FFY 2017	FFY 2018	FFY 2019	FFY 2020	FFY 2021	FFY 2022	FFY 2023
Total Received	506	473	483	550					
Approvals	276	259	262	261					
Denials	230	214	221	289					
Placements*	205	169	221	170					

\*Placement data represents the number of children placed during the specific FFY.

DCF and CWCMPs seek out relatives as possible placement resources at the beginning of each child's out of home placement and throughout the life of the case. Priority consideration is given to relatives regardless of where they reside. The current CWCMP contracts include Placed with Relatives as a contract outcome.

<b>Outcome</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Of all children in out of home placement, what percent are placed with a relative? Standard: 29%	31%	32%	33%	33%	32%	32%				

\*SFY 2019 represents data from July 2018 – February 2019

<b>Adoptive Parent Relationship</b>	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	*SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Percent of all finalized adoptions where the Adoptive Parent Relationship to the Child is a Relative	43%	45%	48%	50%	51%	48%				

When a child does not have an identified resource (adoptive family), attempts are made to find a match for the child through the Kansas Adoption Exchange. The Kansas Adoption Exchange oversees the Adopt Kansas Kids program, which features a statewide website listing all children who are available for adoption that do not have an identified resource, and links them to families who are interested in adopting children in foster care. The adoption exchange contractor, the Kansas Children's Service League (KCSL) manages the Adopt Kansas Kids program and partners with AdoptUSKids to place children on the National Registry, AdoptUSKids website when appropriate. Adopt Kansas Kids also works with families from out of state who have approved home studies that are looking to adopt.

The CWCMP registers the child on the adoption exchange via the Adopt Kansas Kids website in order to maximize the child’s opportunity for permanency. The Adopt Kansas Kids website is accessed by families looking to adopt, for possible matches to children who need adoptive families. If a family from out of state is interested in adopting a child from Kansas, the CWCMP is responsible to work with them to assess whether they might be a match for the child and proceed with the adoption process. In certain situations, a child may have a connection in Kansas that needs to be maintained and it would not be in their best interest to be adopted out of state. The Adoption Exchange Information form which is a referral to the Adopt Kansas Kids website is filled out by the CWCMP. It asks the questions, “can this child be placed out of state? If the child cannot be placed out of state, what is the reason? Can this child be placed in their own region? If the child cannot be placed in their own region, what is the reason?” If the reason on the form is not clear, Adopt Kansas Kids follows up with the CWCMP to assess. At the end of April 8, 2019, there were 501 total children listed on the Adopt Kansas Kids website.

Kansas recognizes an area of opportunity related to gathering data to assess the functioning of Item 36, State use of Cross-Jurisdictional Resources for Permanency Placements. Kansas is participating in a NEICE data workgroup to improve reports available in NEICE.

## IV. Plan for Enacting Kansas’ Vision

### Introduction

The vision of Kansas can be simplified as stating, “*a Strong Workforce with Strong Organization leads to Strong Outcomes.*” The quality and timeliness of services for families is influenced by the strength of the workforce. The organization impacts the physical, emotional, and behavioral needs of children and families. When there are strong outcomes, children are safe, families receive services to prevent foster care, and children in foster care reach timely permanency. To achieve this vision, the process is multi-stepped and relies on following the framework of the goals outlined in the Child and Family Services Plan. Objectives for each goal are strategies the state plans to pursue to reach the goals and work toward the vision.

Two different decision points contribute to the number of Kansas children in out of home placement: removals into out of home placement and discharges from out of home placement. If discharges increase and removals decrease, the out of home population will decrease. If removals increase and discharges decrease or do not change, the out of home population will increase. By addressing both prevention in goal 1 and permanency in goal 3, Kansas hopes to decrease the number of children in out of home placement.

As Kansas reinvests in prevention and early problem intervention, trauma-informed evidence-based programs will support the strong foundation of the state’s vision. As more practices emerge, equity in training models and practice approaches will circulate statewide.

### Vision Item: Strong Workforce

Kansas recognizes there is a nationwide child welfare workforce shortage. The state is invested in a high-quality workforce and seeks to shore-up existing processes and add qualified practitioners to create a better system for children and families in the future. While maintaining policies, Kansas must take

aggressive actions to recruit new employees and seek to retain the current workforce. As an example of recruitment, the Department of Children and Families (DCF) offers a paid practicum program for social work students, with available positions for twenty student per region. The hope is for students to consider full-time employment with the agency when they graduate.

### **Goal 1: Implement Prevention Practice Approach**

A primary goal for Kansas is to safely reduce the number of children in out of home care by supporting more children safely in their homes. Kansas will focus on safely reducing the removal rate of children from home, increasing timely permanency and improving services to prevent re-entry.

Practice culture will be transforming over the next five years with a resurgence of the prevention practice approach. Prevention encompasses both preventing child maltreatment and preventing entry into foster care when safely possible. Prevention is time-consuming and takes connection and commitment to families. The rationale behind recruiting heavily with this goal is to improve the prevention practice skills of both new and future staff. New staff will be trained during this revival period of prevention practices. Current staff will be supported with tools to enhance their skillset. The goal is to provide child welfare workforce with a fulfilling career and ultimately shift the practice culture.

Increased access to prevention services is crucial for addressing the most common risk factors for abuse and neglect and ensuring children can remain safely in their homes. With additional prevention services, it is anticipated the number of children that will be able to remain safely in their homes will increase.

Case reviews, stakeholder interviews, and aggregate data indicate that Kansas is not in substantial conformity with Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect and Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate (See Section 3 -Assessment of Performance). Qualitative data suggests delays in initial assessments, staff turnover, lack of initiating identified services, and lack of ongoing assessments at critical times in the case as the contributing factors. Safety is of paramount importance, thorough assessments leading to informed decisions and actively involving the family in identifying service needs and protective factors is necessary in keeping families intact. On June 30, 2011, there were 5,199 children in out of home placement and on June 30, 2018, there were 7,588 children, a 32% increase, in out of home placement. Kansas must focus efforts on building a strong workforce of qualified prevention focused practitioners.

Kansas will *measure* success of the strategies outlined in this goal by the following:

1. decrease in agency vacancy rates
2. decrease in case load sizes (PIP roll over activity 1.3.2)
3. decrease in staff to supervisor ratio
4. increase in timely initial assessments
5. decrease in number of children removed from their homes

### **Objectives/Stages:**

The following objectives each present a unique outcome but the common goal for youth, children and families is they will receive more personalized, quality case management. By retaining dedicated staff, there will be less turnover and uninterrupted case management. This builds trust with communities and families.

Recruitment and Retention of Child Welfare Staff – DCF has challenged the four regions with “Getting to Zero” vacant Child Protection Specialist positions. The Wichita region has reached this goal. Additionally, partners to the State have similar recruitment and retention plans. DCF and partners will continue to share progress to improve the child welfare workforce.

- Aggressive Recruitment - The *rationale* is the state will attract high-quality staff and develop the current staff with Continued Education and reimbursement for professional licensure.
  - During SFY 2020, \$400,000 has been submitted for recruitment and retention services via advertisements on job websites, social media, professional recruiters, fees, Continuing Education, and licensure reimbursement.
- Additional Allocated Positions - The *rationale* is by adding positions, this will lower the caseload for staff to be in line with nationwide averages.
  - During SFY 2019, DCF received 13 additional Child Protection Specialists.
  - During SFY 2019, DCF received 8 Foster Care Liaison positions.
  - During SFY 2020, an additional 16 more CPS positions were requested in the Governor’s Budget Report.
- Improve work policies – The *rationale* for this objective is to retain dedicated staff, increase tenure, to lift morale and support responsiveness in communities.
  - Support was provided by the Governor with an approved 2.5% pay increase and a vote by the Kansas Employees Health Care Commission to reduce health insurance benefits that include spouses or families by 6%.
  - In SFY 2020, DCF will implement telework policy providing an option for workforce in service centers to base their work from home 2 days each week.

Prevention Focused Culture- Having a prevention focused philosophy also means extending that to new positions, new opportunities, models, and tools that are all prevention focused to ingrain and infiltrate the entire workforce. When this happens, state agencies, community service providers, and other key stakeholders will begin to see a stronger Kansas child welfare system.

- Increase timely initial assessments - The Kansas Protection Report Center (KPRC) serves as the inception for all contact with the Department for Children and Families. Community partners and families need to be assured information provided is used to determine next steps in making an initial assessment. The *rationale* is to continue to focus on increasing timely initial assessments and processing of reports based on child safety and risk factors provided by communities. Early interventions can prevent further maltreatment and are important to provide families the tools and resources they need to raise their children in healthy and nurturing homes free from abuse and neglect. In SFY 2019, KPRC secured three additional positions to assist with timely initial assessments. Kansas will continue to reevaluate the number of cases assigned and advocate for needed additional positions annually in SFY 2020 to 2024.

SFY 2020

- In FY2019 policies and procedures were evaluated to determine efficiency and duplication. KPRC will continue to reevaluate current policies and procedures to develop a more efficient timely initial assessment.
  - KPRC has developed and maintained a work plan for periods of time when the volume of incoming reports is extremely high. KRC will continue to reevaluate the work plan in SFY 2020 to ensure timely initial assessments. Data will be utilized from previous years to determine the need for assistance. KPRC will recruit current staff in DCF to serve a part of triage team to be utilized in time of need. They will provide proper training to assist with time initial assessments and quality assurance.
  - KPRC in SFY 2019 contracted with a third-party consultant to evaluate current policies, procedures, work force development, recruitment and retention. The results of these efforts will be provided in will SFY 2020. KPRC will review and assess for possible change in FY2020 through 2021 and ongoing.
  - SFY2020, Structure Decision Making will be implemented, see additional information in next bullet.
- Implement Structured Decision-Making (SDM)– Kansas chose this tool to support staff in making safety and risk assessments. SDM complements the other initiatives Kansas is pursuing, such as Team Decision Making. The *rationale* behind this decision is assessments will be well-informed and consistent across the state.

#### SFY2020

- KPRC implements the first module of SDM (PIP Rollover activity 1.2.3).
  - August 2019 in KPRC and has begun initial phase of training (PIP rollover 1.2.4).
- Assessment and Prevention phased implementation of SDM (PIP rollover activity 1.2.5)
  - November 2019 training for ongoing risk and safety assessments will occur (PIP rollover 1.2.4).
  - December of 2019 SDM will be implemented in the following four counties: Wyandotte, Johnson, Cherokee and Crawford.

#### SFY 2020 - 2021

- After completion of the pilot Kansas will evaluate and determine future roll out of SDM statewide for assessment and prevention staff
    - Kansas will enter into new case management contracts. Exploration with new providers related to ongoing risk and safety assessments will be determined (PIP rollover 1.2.6)
- Implement Team Decision Making- This is a facilitated meeting involving parents, children, and youth, friends/others who support the family, agency staff, service providers, and community partners, and others in all decisions involving a child leaving



home. These meetings involve thoughtful decision-making process regarding the child's safety and care. The *rationale* for this initiative is to empower and engage families in being active participants of improvement, service referrals and identifying protective factors. They are active decision-makers in selecting services for themselves and their children. Future planning includes implementation of TDM in SFY2021 with children in foster care – see Goal 3 for additional information. Implementation supports will be provided by the National Center for Crime and Delinquency (NCCD) and the Annie E. Casey Foundation (AECF).

#### SFY 2020

- 5 Team Decision Facilitator positions will be added. These are non-caseload carrying supervisor level positions.
- Facilitators will complete learning exchanges with child welfare workers in Missouri and training to fidelity of model by NCCD.
- A communication plan will be developed with key stakeholders including, but not limited to: courts, communities, service providers, families and law enforcement.
- Phase 1 implementation will begin with the following four counties: Wyandotte, Johnson, Cherokee and Crawford. The same pilot area is beginning SDM and TDM; these models complement each other by creating a seamless transition from assessment to facilitation discussions.
- Phase 2 implementation plan will be finalized and implemented.

#### SFY 2021

- TDM statewide implementation will occur.

#### SFY2020 -2024

- Ongoing technical assistance the AECF and NCCD will continue
- Explore Signs of Safety (SOS) – SOS is a practice approach to equip practitioners and supervisors with tools to evaluate safety factors and build constructive working relationships with families. Use of these tools and practices will engage families and professionals in partnerships to address situations of child abuse and maltreatment. The *rationale* behind this idea is Kansas needs a new progressive approach to build a strong safety planning framework.

#### SFY 2020

- Kansas will receive technical assistance from Casey Family Programs and is exploring Signs of Safety.
- Kansas will enter a learning exchange with other states and organizations.

#### SFY 2021

- Kansas will evaluate to determine next steps.

## Vision Item: Strong Organization

By listening to the powerful voices throughout Kansas communities, DCF has heard the chant for change: changes in the child welfare system, changes within DCF related to communication, strong partnerships, further reaching service array, reductions in staff turnover, a decrease in children in foster care. The voices spoke of keeping kids with their families and building strong community networks for families. There were those who insisted they have ways of helping and Kansas heard this feedback. In SFY 2019-SFY 2024, Kansas is poised to meet the challenge of making organizational changes and welcomes partnerships in this endeavor. The goal identified in this section speaks to the commitment to looking at the child welfare system across programs and agencies. Community partnerships, engagement with families, supporting federal law, building trust within community citizens and professionals create a strong organization.

## Goal 2: Strengthen Healthcare Coordination and Create Strong Safety, Resiliency and Prevention Networks

Kansas will strengthen and expand the safety net and early childhood programs through public services and community-based partner programs and reduce barriers for families needing to access concrete supports.

During Round 3 of the Child and Family Services Review, information received from stakeholders noted a main concern of lack of admissions into Psychiatric Residential Treatment Facilities (PRTF) for children with behavioral and mental health needs. In SFY 2019, Stakeholder meetings, interviews, and focus groups have yielded the same concerns related to PRTF stays and substance use disorder treatment resources. Additionally, data analysis shows a disproportionate number of youths aged 15 years and older placed into foster care and subsequently aging out of foster care. Kansas is seeing older youth, with behavioral and mental needs, having one-night stays in offices. By concurrently focusing on the needs of younger children, older children with behavioral needs, and rural and frontier communities who lack access to services, Kansas strives to improve safety and well-being of its more vulnerable populations. Kansas will *measure* success of the strategies outlined in this goal by the following:

1. Decrease in PRTF waitlists
2. Decrease number of children placed out in out of home
3. Increased placement stability
4. Increased family engagement
5. Increased service array measured through general stakeholder interviews or surveys

### Objectives/Stages:

Building Community Networks – Services to Kansas families must be unique to their need. Expanding services to rural areas of the state allows for families to experience comparable service array as those living in more densely populated areas of the state. As outlined in Goal 1, the first step is to build a strong workforce. In this goal, the rationale is to extend this thinking to include Kansas communities and the rich experience that lies within them. Kansas is committed to building bridges and trust with the communities throughout the state to ensure service array, continuity and sustainability.

- Implement Family First Prevention Services - Kansas received \$13 million on all funds for evidence-based foster care prevention programs. This is an opportunity to reduce the number of children entering out of home care, build strong partnerships with families and communities, and begin to change the perception and culture of the child welfare system. The *rationale* for this initiative is to build a strong workforce of qualified prevention focused practitioners to provide individualized services to families aimed at keeping children safely in their homes.

SFY 2020:

- In SFY 2019 Kansas held several venues with community stakeholders and staff to begin gathering feedback to build a successful program. These venues were held at seven different sites across Kansas. Moving forward, Kansas will develop services, resources, and processes based on their voices.
- Kansas will explore mobile enhancement tools for fingertip access to create efficiencies and real time service engagement with families.
- Kansas will equip staff with tools to make Family First referrals and assessments to have strong engagement with families.
- Kansas will reach frontline practitioners to strengthen their awareness of their value in delivery of family first prevention services through modern technology (e.g.: podcast or video).
- Kansas will expand service array with new prevention partners providing evidence-based services with the goal of connecting families to services in all geographic parts of the state in the following specified categories: mental health, substance use, parent skill building, and kinship navigation.
- Kansas will partner with community agencies to establish approximately 171 Qualified Residential Treatment Program (QRTP) beds.
- In SFY19, DCF added a service to a Request for Proposal the Kansas Department for Aging and Disability Services (KDADS) was posting to the public. The RFP closed in June. DCF and KDADS will continue to collaborate in choosing a vendor to fulfill the Family First Independent Assessor as a requirement to determine if a child should be placed in a Qualified Residential Treatment Facility or a less restrictive placement. The Grantee will be named in SFY20 and discussions will begin related Independent Assessor requirements.
- Kansas will establish partnerships with Substance Use Disorder facilities to allow children in foster care to be placed with their parent while the parent receives needed services.
- A grant will be awarded in early SFY 2020 for evaluation of the evidence-based services selected.
- Interagency statewide and regional level advisory boards will be established and implemented. Recommendations and decisions from this workgroup will be considered by all key stakeholders and will be utilized to inform: legal practices, laws, service delivery, service gaps and strengths, and any other service modification.

## SFY2021

- Review data and evaluation of first year of services.
- Home Visitation Grant – This evidence-based program (Healthy Family America) targets at-risk families facing challenges such as single parenthood, low income, childhood history of abuse or other adverse experience, or current or previous issues related to substance use, mental health issues, or domestic violence. This relationship-based home visiting program is guided by the belief that early, nurturing relationships lay the groundwork for lifelong healthy development. This program provides strength-based, family-centered services designed to promote healthy attachment and positive parent-child relationships. Program services are designed to be culturally-sensitive. Kansas has supported Healthy Families through funding from the Children’s Cabinet and granted to Kansas Children’s Service League. Kansas will continue in future years to expand and work with community partners to deliver services to families with children under the age of five.

## SFY 2020

- There will be continued exploration in the future to expand services to all counties to support families with children under the age of five.
- Collaboration with Law Enforcement - In an effort to reduce reoccurrence of child maltreatment and child deaths in Kansas, DCF is working with local law enforcement to develop strategies to provide earlier intervention. In Kansas, 52 child fatalities occurred between 2013 and 2017 per the U.S. Department of Health and Human Services Children’s Bureau (2019) Child Maltreatment 2017 report. Sedgwick county has experienced 14 child abuse fatalities since 2014.
  - In SFY 2019, Kansas Department for Children and Families applied for an award to prevent child fatalities and recurring child injuries. The application was made for a cooperative agreement/grant with the Office for Victims of Crime and the purpose of the award is to reduce child fatalities and recurring child injuries caused by crime victimization. The jurisdiction of the site demonstration would be Sedgwick County. If awarded there will be one year of planning and assessment in SFY 2020 and will include an evaluation of the processes and implementation of community support specialists as early intervention. The community support specialist will be employed by Wichita Police Department and Sedgwick County Sherriff’s Office. If awarded, implementation will plan to begin in October of SFY 2020 and will continue through SFY 2022.
  - In addition to the grant application identified above, in SFY 2020 DCF will continue to collaborate with law enforcement in Wichita to hire community support specialists with the support of DCF. The goal of this project is to prevent or reduce family law enforcement contacts and increase social and safety network supports and family functioning/resiliency toward the goal of reducing child abuse injury and fatality.
  - In SFY 2020, DCF is in the process of developing a process for law enforcement to access valuable information in the Kansas Protection and Report Center Systems. This will provide needed information to help make a more informed and thorough assessment for a family in crisis. This system will provide information regarding previous intakes, reason for assessment, and indicate all family members, including children who may be in the home. DCF will implement in Sedgwick County and evaluate the process in 2020 prior to implementing statewide.

- Strengthening services for older youth and youth with acute behavioral needs (PIP rollover activity 2.5.6-2.5.8)- This population is the highest needs group for healthcare coordination and one of most challenging age groups to place due to the likely history of trauma. Foster home resources are scarce for this population, thus the *rationale* for this objective is to increase timeliness of services to the child and family and utilize a holistic approach to meet their needs.

#### SYF 2020

- Through partnership with Kansas Department of Correction – Juvenile Services (KDOC-JS), youth with offender behaviors will be referred to DOC-JS Family Functional Therapy (FFT) vendors to meet their individualized needs and prevent possible Child in Need of Care custody.
- Explore implementation of mandatory referrals for older youth to Family Preservation Services or KDOC-JS FFT prior to custody.
- Explore funding to increase Family Preservation services for families with older youth.
- Continue collaborative works groups with cross-agency representation which will sustain through SFY24 and beyond with the goal of reducing PRTF waitlists. The need to constantly evaluate processes for meeting service needs of children in foster care will always remain in the forefront of policy and process decisions.
- A proviso crossover youth workgroup was initiated SFY 2019 by the Governor to evaluate the impact of the 2016 Senate Bill No. 367 on youth with offender behaviors entering into foster care placement. From this group, a new collaborative effort will begin SFY 2020 to develop strategies to address the needs of this population.
- Kansas is continuing to collaborate with Missouri to expand the current border agreement to expedite acute behavioral services to support placement stability and meet the needs of youth, without requiring an Interstate Compact on the Placement of Children agreement. Youth can stay in either state in these facilities for up to 90 days.
- Explore additional evidence-based practice models that are specific to older youth and youth with acute behavioral needs

#### **Vision Item: Strong Outcomes**

A strong workforce with strong organization leads to strong outcomes. Kansas is dedicated to building a qualified and skilled workforce, building partnerships with families and communities, and providing quality services. Through this work, Kansas is confident that children and families will have improved outcomes related to safety, permanency and well-being.

#### **Goal 3: Reduce child trauma by strengthening services to families, placement stability and timely permanency**

Research tells us children experience trauma when they are removed from their homes. Kansas is determined to reduce childhood trauma by making decisions based on safety and providing services to address risks. When the decision is made the child can no longer safely remain in their home, Kansas practitioners understand the impact and ensure children are stable in their placement to reduce further trauma and promote well-being. Equally important is the advocacy and work we commit in assuring each

child has timely permanency. Kansas believes the following initiatives will move us toward attaining this goal.

Kansas will *measure* success of the strategies outlined in this goal by the following:

1. decrease in child placement moves
2. decrease in the number of children in out of home care
3. decrease in number of months a child is in out of home care
4. increase in number of children placed with a relative

Goal 3 will be monitored utilizing reports that measure timely permanency and placement stability.

Timely Permanency:

2020-current statewide is 39.7. Goal for 2020 is to reach 40% or higher

2021-41%

2022-42%

2023-43%

2024-Benchmark is currently 43.6% and we will achieve 44% or better

### Objectives/Stages:

Each objective below is seen as having a strong impact on decreasing trauma in children who experience placement outside of their homes.

Strengthening Services to Families – Strengthening the connections between birth parents and foster parents to provide continuity of relationships, better serves the child’s needs while in care.

- Icebreakers -Originally developed by the Annie E. Casey Foundation. Icebreakers was piloted in SFY18 and is being fully implemented statewide in SFY19 and SFY20. On October 1, 2019, TFI and Cornerstones of Care will begin providing foster care in the East and Kansas City regions respectively. Staff from TFI and Cornerstones of care have attended Icebreakers train the trainer and will be training new staff prior to transition. Each CWCMP will be responsible for training their new staff to use the Icebreaker model. (PIP Rollover Activity 2.4.7) Measures for effectiveness of Icebreaker will be placement stability, less time to reunification, and evidence of concerted efforts to support and promote relationships with parents (through case reads and stakeholder interviews). The *rationale* for including this objective is to improve placement stability and reduce the time to reintegration.
  - SFY2020, the Icebreaker model will be infused into agency training (PIP rollover activity 2.4.4)
  - SFY2020, the Icebreaker model will be implemented and a data collection and tracking strategy in place. (PIP rollover activity 2.4.5)
  - SFY2020 Icebreaker policies and procedures will be implemented (PIP rollover activity 2.4.6)
  - SFY2021, the Icebreaker model will be evaluated for program success.
- Kansas Strong- This federal grant combines federal, state, and local resources to improve children’s safety, well-being, and permanency. Kansas Strong is led by the University of

Kansas School of Social Welfare and the steering committee is made up of staff from the Department for Children and Families, members of the Court Improvement Plan, the child welfare case management providers, the Children’s Alliance of Kansas, Kansas Family Advisory Network, and other community members and stakeholders. Objectives surrounding utilization of the Kansas Strong are broad and will potentially mean positive outcomes related to timely permanence, this being the rationale for selecting this goal. The *rationale* for this step is it will increase the service array across the state.

- Establish an interagency board by SFY23- This Advisory Board will advocate for children and families involved with the child welfare system who need services and supports.
- Parent/youth relationship facilitation program – Program to decrease the number of older youth in care and increase permanency by decreasing the number of youth aging out of foster care and increasing services to families to divert older youth from entering out of home placement. Target youth age 15 years and older who are experiencing behavioral problems or at risk for entering foster care. Facilitation offered to families prior to a Child in Need of Care Petition being filed.

The proposed pilot for this program includes launching it in 3 judicial districts: one urban, one rural, and one frontier. The plan is to refer families to facilitation rather than separating the family by removing the child and placing them in foster care. Each referral to this program will be tracked and considered successful if the child was not removed and placed in the custody of the secretary.

- SFY20 - Implement pilot program in rural and urban courts prior to statewide implementation.

Placement Stability: Kansas believes increasing relative placements will lead to decreased trauma, placement stability, and timely reunification for children entering foster care. With the goal being 50% of placements with relatives, Kansas will explore models and practices that will directly improve the number of relative placements as well as providing support for relatives in order to stabilize placements.

[http://www.dcf.ks.gov/services/PPS/Documents/FY2019DataReports/FCAD\\_Summary/PlacementbyRegionFY19.pdf](http://www.dcf.ks.gov/services/PPS/Documents/FY2019DataReports/FCAD_Summary/PlacementbyRegionFY19.pdf)

Benchmarks for stability:

2020-current statewide average is 9.6. Goal for 2020 is to reach 8.5

2021-7.0 or below

2022-6.0 or below

2023-5.0 or below

2024-Benchmark is currently 4.12 (lower is better) and we will achieve 4.0 or lower

As of May 31, 2019, 32.3% of the children in out-of-home placement are with relatives. Evidence suggests adverse childhood experiences result in short and long term, negative consequences. The negative effects can be lessened when a child has a trusted and loving caregiver or connections in their life.

- Exploration of a successful model to increase placement and connections with family - Placing children with familiar, supportive, relatives to reduce trauma experienced by children and promote and preserve the child's family connections is the rationale for this objective.
  - Kansas will explore models such as Kevin Campbell's Family Finding model or 30 Days to Family. Exploration will focus on programs successful in finding relative placement, and supportive permanent connections for the child.
  - DCF is researching ways to partner with Aetna to promote and train on the Family Finding model. Kevin Campbell is currently under contract with Aetna.
  - In SFY20 Cornerstones of Care will implement 30 Days to Family as their preferred model.
  - In SFY20, Kansas will see implementation of one or more models creating the opportunity to achieve our goals around placement with relatives.
  
- Implement strong matching and stability tool- Kansas will deploy the Carematch (Placement Matching System) by October 1, 2019. Utilization of this system will allow CWCMPs to have access and knowledge of statewide placement options. The system will match child attributes with Family Foster Placements most equipped to meet their needs. Increased knowledge and data regarding moves in populations by age, goal, and geography to inform practice and identify barriers is the rationale for this objective.
  - SFY 2020 Strengthen relationships with CPA's. DCF will have direct relationships and grants with Kansas Child Placing Agencies who serve children in foster care.
  - SFY2020 Children Alliance (under current contract) will partner with DCF to revamp readiness and educational programs for relative care providers.
  - WSU holds the current Caregivers Association contract. In SFY19-21, this organization will fully implement to support and prepare foster families, relative and non-related kin placements.

Timely Permanency - Relative placements, parent engagement, and improved services are known to lead to more timely permanency. Kansas recognizes children need to have permanency and stability to further reduce trauma.

- Rapid Permanency Reviews (RPR): DCF utilized rapid permanency reviews in 2018 to identify barriers to timely permanency through adoption. Based on the barriers that were identified, many policy and practice changes were made and permanency through adoption increased exponentially for SFY 2019. Successful outcomes and the need to continue is the rationale for this objective.
  - In SFY2020, DCF, with consultation from Casey Family Foundation, will identify another cohort to examine through RPR.
  - Kansas continues to work with Casey Family Programs (CFP) to move more children to permanency through the use of Rapid Permanency Reviews (RPR). In SFY 2020, RPR may be used to examine two new target populations: children awaiting termination of parental rights and children reunified with their families pending court and case closure.



**Tentative RPR implementation timeframes:**

- Aug 2019 – CFP onsite to help develop RPR tracking tools
  - Sep/Oct 2019 – Review and finalization of RPR tracking tools
  - Oct 2019 – CFP onsite for RPR kick-off
  - Nov/Dec 2019 – CFP onsite for implementer training; Kansas to finalize target population cohorts and plan onsite cohort case reviews; Kansas to formalize Cadence of Accountability process
  - Jan/Feb 2020 – Onsite cohort case reviews; Kansas to begin monthly tracking of cohort cases
- Adoption Tracking Tool - In partnership with Court Improvement Plan and in consultation with the Capacity Building Center for Courts, creation of an adoption tracking tool has been recommended. This will monitor progress toward adoption. The *rationale* for this objective is to improve timeliness of adoption and overcome any barriers by providing courts with benchmark dates and clearly defining next steps. The tool will be used to serve children and youth with parental rights terminated and a case plan goal of adoption. A draft of the Adoption Tracking Tool court document is currently being circulated for comment (July 2019). Further timeframes and evaluation procedures will be developed through the Kansas Strong grant. There are currently proposed jurisdictions, but these have yet to be solidified.
- SFY20 the tracking tool will be developed.
  - SFY 20 Court jurisdictions will be selected to do pilot testing of the adoption tracking tool before being implemented state wide.
- “KanCoach” - Skills-based coaching for supervisors. The *rationale* for this objective is to increase retention and decrease secondary traumatic stress. Concept designed to increase safety while decreasing the number of children in foster care. Additional benefits are increasing permanency by improving timely reunification and timeliness of adoption.
- SFY20 – Identify external coaches to the agency to provide training to child-welfare supervisors in child protection services, foster care case management, and family preservation.
  - SFY20 – Implement coaching model practiced by supervisors with their practitioners.

## V. Title IV-B Subparts 1 and 2 and Child and Family Services Continuum

The Stephanie Tubbs Jones Child Welfare Services Program (Title IV-B Subpart 1) funding is utilized by the State of Kansas to provide Family Services, Family Preservation services and adoption support services. Service delivery is designed to protect and promote the welfare of all children, prevent the neglect, abuse or exploitation of children and support at-risk families through services allowing children to remain with their families or return to their families in a timely manner. Fund utilization also promotes

the safety, permanence and well-being of children in foster care and adoptive families and provides training, professional development and support to ensure a well-qualified work force.

See signed attachment 8: Title IV-B, subpart 1 Assurances for States.

## A. Promoting Safe and Stable Families Programs

The Kansas Department for Children and Families (DCF) utilizes Promoting Safe and Stable Families (PSSF) funds for prevention, family support, time-limited family reunification and adoption support programs. These PSSF funds address prevention initiatives through agency-wide efforts to deliver services in the most comprehensive efficient way possible, while at the same time, building capacity in local communities to meet local needs. Kansas uses Title IV-B, Subpart 2 funding fully on service delivery. When selecting a child welfare agency to provide community-based family support services, proposals are requested for each of the four geographic regions in the state. DCF invites applications from nonprofit, not-for-profit, and/or for-profit child welfare agencies when choosing service providers. When selecting a child welfare agency to provide family support services, the review team includes both regional and administrative staff. The proposals are evaluated on: cost, adequacy and completeness of proposal, bidder's understanding of the project, compliance with the terms and conditions of the request for proposal, experience in providing like services, qualified staff, methodology to accomplish task, and the response format as requested by the request for proposal. Each category receives at a minimum 21% of the Subpart 2 funding. In Kansas with focus shifting towards prevention the Family Preservation program expends 33% of these funds and the Family Services program 24%. Please refer to the Attachment 18 and 19 CFS101 IVB subpart 2 for estimated expenditures.

**Title IV-B, subpart 2, Promoting Safe and Stable Families (PSSF)** funds have been allocated statewide to provide family support, family preservation, time-limited family reunification services, and services to promote and support adoptions through the Child Welfare Case Management Provider (CWCMP) who offer a full array of services to meet these goals. The PSSF-funded services delivered by the CWCMPs aim to:

- Protect and promote the welfare and safety of all children;
- Prevent or assist in the solution of problems that may result in the neglect; abuse, exploitation or delinquency of children;
- Prevent unnecessary separation of children from their families;
- Restore children to their families who may be safely returned by the provision of services to the child and family;
- Ensure adequate care of children away from their homes; and
- Place children in suitable adoptive homes when reintegration with the biological family is not possible or appropriate.

## B. Kansas Protection Report Center

The foundation of the Kansas child protection system is the **Kansas Protection Report Center (KPRC)**. The KPRC receives reports regarding allegations of abuse and/or neglect statewide, 24 hours per day, and seven days per week, including holidays. The KPRC is fully-consolidated in three locations: Topeka, Wichita and Kansas City. The Topeka location provides around-the clock availability, and the Wichita and Kansas City locations operate seven days a week, during daytime hours. A single, toll-free number

is utilized, and during regular business hours, calls are routed to a single queue at all KPRC locations. The next available worker responds to the reporter regardless of their work-place location. The KPRC utilizes a web-based information system to document reports and decisions for further assessment. Reports are accessible to all locations at any step throughout the process, which facilitates timeliness and efficiency.

Reports are received by telephone, faxes, online web reporting or by United States Postal Service (USPS) mail. These various methods provide reporters options to report alleged child abuse and neglect, and all reports are processed in the same manner upon receipt by staff. KPRC has two positions who receive reports: Intake Protection Specialist (IPS) and Protection Specialist. The IPS or Protection Specialist who received the call, fax or online web report complete all steps in the intake and screening process of a case.

The Quality Assurance Review Team consists of designated Protection Specialists responsible for reviewing all reports not meeting criteria for further assessment. If the Quality Assurance Review Team member identifies the report was not appropriately screened, a KPRC supervisor will review to make the final screening decision.

IPS and Protection Specialist conduct an Initial Assessment to determine whether the report meets the policy definitions of abuse and neglect under the Revised Kansas Code for Care of Children. Reports meeting criteria for further assessment are assigned with one of the following response types: Abuse/Neglect, Family In Need of Assessment (FINA), and Pregnant Woman using Substances (PWS).

The KPRC follows a structured training plan for all new staff. The KPRC staff go through a 12-week training program which includes classroom training to review systems, policy and critical thinking. In addition, they receive on-the-job training through shadowing existing employees, technical training and close review of the new employees work by supervisors. A new employee checklist was developed to ensure all employees are learning the same information. New and existing employees are offered the opportunity to shadow a worker from the Assessment and Prevention division. The KPRC has also brought specialized training to each location for staff development. Those topics have included Human Trafficking, Adult Protection Services and Domestic Violence. The KPRC Protection Specialist are required to complete 40 hours of continuing education every two years to maintain their social worker license. If the Protection Specialist is unlicensed, they are still required to complete 40 hours of continuing education every two years.

Based on the DCF PPS Policy and Procedure Manual (PPM) section 1330, timeframe for Initial Assessment ([http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/PPS\\_Policies/1000\\_Intake/1330\\_Timeframe\\_for\\_Initial\\_Assessment.htm](http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/PPS_Policies/1000_Intake/1330_Timeframe_for_Initial_Assessment.htm)), KPRC staff complete the Initial Assessment Decision within the next half working day. If a report is assigned for investigation and/or assessment, the report is available immediately to the regions in the KPRC web-based information system.

## C. Family Services

**Family Services** (FS) recognize the inherent integrity and value of the family. Provision of family services is considered when there is a need for Prevention and Protection Services (PPS) assistance beyond the initial 30 working days of intake case assignment. Services are delivered to the family as a unit rather than to individual family members. However, individual family members may also receive

specific services. Services may be court ordered, recommended by the Child Protection Specialist (CPS), or requested by the family.

Family Services are voluntary and are offered to families to prevent recurrent maltreatment, prevent the need for out of home placement or to prevent further involvement with the child welfare system. Family Services may be provided to address family stressors, such as substance misuse, out-of-control behaviors of children or youth, truancy prevention and intervention, parenting education, maltreatment prevention, stress and /or anger management, crisis intervention, and mentoring. Family Services are family centered, culturally informed, and build on the strengths of the family. Family Services case managers may work directly with families or assist families in connecting with existing and available services in the community to meet the needs of each family. Family Service or flex funds may be utilized to alleviate a family crisis that may put a child at risk of maltreatment.

Family Services may be provided by DCF through direct PPS case management, PPS may enter into Client Purchase Agreements with community service providers and may monitor the services provided, or the family may be served by a referral to the Community Family Service Grant Provider.

The Community Service Family Service Grants allowed PPS and families to have access to in-home family services in all counties in the state. This is especially important in the geographic regions where community services are limited. Community Family Service grants were awarded to three providers for three of the four regions in Kansas. The following providers are currently serving Kansas' children and families: East Region – The Children's Shelter, Kansas City Region – Cornerstones of Care, and Wichita Region – Mental Health Association. A provider was not selected for the West region. The West Region may enter into Client Service Agreements with community service providers to purchase services for children and families. The Request for Proposal for new Community Family Service Grant providers will be completed in SFY 2020 and the new service providers will begin SFY 2021.

#### D. Family Preservation Services

**Family Preservation Services (FPS)** emphasize home-based, intensive, therapeutic and/or case management services to families in crisis when children are at high risk of out-of-home placement. The decision to refer a family to Family Preservation Services may be made at any point during DCF's assessment and prevention process. All Family Preservation Services are based on family-centered practice, characterized by mutual trust, respect, honesty and open communication between parents and service providers. Families are active participants in the discussion of program improvement, service referrals and evaluation. They are active decision-makers in selecting services for themselves and their children. Family and child assessment are strengths-based and solution-focused. Services are community-based and build upon formal and informal support and resources. Services are accessible in all 105 counties in Kansas.

DCF has extended the current Family Preservation contracts with KVC Behavioral Health Care and Saint Francis Ministries until December 31, 2019. The current referral period for Family Preservation is for 365 days. Cases referred on or before December 31, 2019 will receive the 365-day service period with the current provider. These services provided are concentrated and clearly defined with an emphasis on intensive, home-based services to families in crisis when children are assessed as being at imminent risk of out-of-home placement. This model includes intensive services until the safety concerns have been addressed, then a period of less intensive services to address and monitor the family's ability to manage risk factors.

The new Family Preservation contracts are effective January 1, 2020 through June 30, 2024, with the option to renew for one additional two-year period. The new contracts will have a two-tier model. Tier 1 will be Intensive In-Home Family Preservation Services, provided by a master's level practitioner for an intensive and time-limited service period with the intent to mitigate immediate child safety concerns, stabilize family crisis, and assess family's needs. Tier 2 will be Short-Term Family Preservation Services Case Management, provided by a worker dyad consisting on an assigned Case Manager and a Family Support Worker, assessing for existing risk and emergent safety issues and when identified, initiating services to stabilize and support the family. Referrals to a specific tier of service may be made directly to that service tier at any point during DCF's assessment and investigation, or the referral may be made by DCF because of on-going assessments and recommendation by an FPS team member, indicating the need to transition the family to another level of service.

### E. Family First Prevention Services Act (FFPSA)

On January 31, 2019, for the state of Kansas, there were 7,351 children in foster care out of home placement with a monthly average of 328 children and youth entering care. With the growing number of children in care, it's evident there is a need for partnerships alongside families in communities with local organizations, private providers, and other stakeholders to generate innovations to reduce entry into foster care.

FFPSA provides a unique opportunity to position Kansas as a leader in child welfare. Family First requires laying a foundation of evidence-based treatments and trauma-informed decisions, which will bolster the states strong child welfare workforce. The vision of Kansas is to build on that groundwork and strengthen prevention networks, placement stability, health care coordination, and reduce delays to legal permanency. Ultimately, Kansas will re-invest in prevention, place an emphasis on family-based placements, and pursue systematic partnerships throughout the communities, counties, and state. Since FFPSA was signed into law, Kansas has been taking steps to prepare the workforce and to align the State with the new Federal guidelines. Beginning summer 2018, Kansas began working with the Children's Alliance of Kansas and Casey Family Programs; advocating with the Child Welfare Task Force on prevention resources; and reviewing policies to begin project planning. In Fall 2018, surveys were sent to Youth Residential Care (YRC II) group home providers regarding Qualified Residential Treatment Programs (QRTP) readiness and provider agreements were explored for inpatient Substance Use Disorder (SUD) treatment for children in care with a parent in need of the SUD treatment. In 2019, the Governor's Budget Recommendations included eight million dollars for Family First Prevention Services; legislative action to amend CINC code for QRTP court review was approved; seven community convenings were held across the state; and a Request for Proposal was posted for evidence-based prevention grants.

Kansas has five licensed residential family-based substance use disorder (SUD) treatment facilities, with a potential of six. Kansas is currently exploring partnerships starting in SFY 2020 with all SUD treatment facilities and began utilizing facilities as a pathway to keep children with their parents. When children are unable to safely remain with their parents, Kansas will have another placement option with Qualified Residential Treatment Programs (QRTP) for children with demonstrated clinical need. By October 1, 2019, Kansas anticipates 61 QRTP beds available for placement; and this number will grow significantly in SFY 2020-2021. Kansas has secured the independent assessor for placement requirement for QRTP by partnering with sister agency Kansas Department for Aging and Disability (KDADS).

To provide services and supports to kinship caregivers, DCF contracted with the Kansas Family Advisory Network (KFAN) to develop a statewide Kinship Navigator program. The Kinship Navigator program, facilitated by KFAN, was created to aid kinship caregivers in need by helping them acquire information about programs and services that are designed to meet the needs of the children they are raising. Through this connection, kinship caregivers may also develop the ability to access and utilize additional programs. The momentum generated will help encourage and develop successful collaborations among public and private agencies to ensure kinship caregiver families are effectively served.

The target population of the Kinship Navigator Program consists of children who are in, or at risk of entering, foster care as well as their kinship caregivers. Kinship families may have low incomes along with limited resources and generally receive fewer services from child welfare agencies than foster families.

KFAN will be utilizing the Children's Home Society of New Jersey kinship navigator model. The service area includes identified high-needs counties in all four regions in Kansas. Work has begun to proactively identify and contact families within these counties who live in kinship care arrangements. Families themselves can learn by referral about the program directly through the DCF or the CWCMPs, the 2-1-1 service number, the Department of Aging, senior centers, Area Agencies on Aging, Re-Entry Programs, Juvenile Intake and Assessment Centers, Courts, Head Start/Early Head Start Programs, local health departments, physician's offices, attorney's offices, school personnel, licensed day care facilities, churches, community events and more.

In June 2019, Kansas posted an RFP to invite nonprofit, not-for-profit, and/or for-profit child welfare agencies in becoming a prevention partner to support families with children in their communities from entering foster care through implementation of evidence-based programs. Grantee awards will occur 2020 and implementation of services will begin October 1, 2019.

### Efforts to Track and Prevent Child Maltreatment Deaths

The Family First Prevention Services Act amended requirements of the Act relating to information about child maltreatment deaths. Below is a description of the steps Kansas is taking to compile, complete, and accurately report information on child maltreatment deaths to be reported to NCANDS.

Kansas uses data from the Family and Child Tracking System (FACTS) to report fatalities to NCANDS. Maltreatment findings recorded in FACTS on child fatalities are made from joint investigations with law enforcement. The investigation from law enforcement and any report from medical examiner's office is used to determine if the child's fatality was caused by maltreatment. The Federal Child Abuse Prevention and Treatment Act (CAPTA) requires each state to establish citizen review panels in order to receive funding for child abuse prevention services. The Kansas State Child Death Review Board serves in the capacity as one of three Citizen Review Panels in the State. The child death review board works with Kansas Department of Vital Statistics for notifications of child deaths. Death and birth certificates, as well as the coroner information are used to identify sources of additional information. Information is obtained from coroner reports, autopsy reports and photos, medical records, law enforcement reports, scene photographs, Department for Children and Family Record, school records, media reports, obituaries, and other relevant documents. The Kansas Child Death Review Board holds monthly meetings. The board members consist of members from the Attorney General's Office, Kansas Bureau of Investigation, Kansas Department of Children and Family Services, Kansas Department of Health and Environment,

Commissioner of Education, State Board of Healing Arts, Attorney General advocacy groups and Kansas County District Attorney Association.

Since 1964, the Child Death Review Board has reviewed 10,856 child deaths in Kansas. In 2016, Kansas had 394 child fatalities. The Review Board completes an annual report providing recommendations to the state of Kansas to prevent child deaths.

Child fatalities reported to NCANDS are child deaths as a result of maltreatment. Review completed by the state child death review are completed after all the investigations, medical examiners results, and any other information related to the death is made available. The review by this board does not take place at the time of death or during the investigation of death. The state's vital statistics reports on aggregate data are not information specific to an individual child's death. Kansas utilizes all information sources currently made available when child fatalities are reviewed by the state child death review board.

The State Child Death Review Board has developed the following three goals to direct its work:

- To describe trends and patterns of child deaths, identifying risk factors in the population;
- To improve inter-agency communication so recommendations can be made regarding recording of actual cause of death, investigation of suspicious deaths, and system responses to child deaths;
- To develop prevention strategies including community education and mobilization, professional training, and changes in legislation, public policy and/or agency practices.

Recommendations and review of the Kansas Child Death Review Board Reports indicate a need for services for prevention of Sudden Death Syndrome and sleep related deaths. Contributing factors for prevention indicated the need for prenatal care, services for substance use including drugs, alcohol and nicotine. Related to sleep related deaths, education and knowledge for proper supervision, safe environments for safe sleep.

Kansas is in the process of developing policies and procedures to ensure care to children under the age of one, focusing on Motivational Interviewing and engagement with families. Kansas is currently in the process of exploring both Motivational Interviewing and Signs of Safety for practices engaging families and assessment information gathering. Policy was developed for families with a child under the age of one who come to our attention, regardless of case assignment type, to be referred to Parent Skill Building services. Also, the worker will assess the home for safe sleeping conditions will provide education and information on safe sleep.

Training will be a vital part of the prevention strategies put in place. Kansas has recently signed up 28 people to attend a Trainer of Trainer for Safe Sleep in September 2019. These staff will come back and host "showers" aka training for all staff. As part of the trainer of trainers they will need to train at least 10 more people regarding safe sleep to complete the training process. Kansas is also in the process of developing training with a community partner to deliver Medical Forensic Field of Child Maltreatment training which will be covering bruising, burns, fractures, head injury and abdominal trauma. These will be one day trainings and webinars and plan to be ongoing for new and seasoned staff. Training for the Kansas Child Protector App is now incorporated into training for new workers and has been asked to be added to all Child Protective Staff's phone. Training is provided and part of policy for all historic information to be reviewed when assessing a case.

Kansas child protection policies include provisions or categories of families in need of services creating challenge understanding impact of caregiver behavior on predicting occurrence or recurrence of serious injury and fatality. Sedgwick County has experienced 14 child abuse fatalities since 2014. To amplify collective impact and achieve no child abuse fatalities, Sedgwick County seeks to create an opportunity for law enforcement to directly provide case management services to support safe, stable and nurturing relationships and environments. The goal of this project is to prevent or reduce law enforcement contacts and increase social and safety network supports and family functioning/ resiliency toward reducing child abuse injury and fatality.

In addition, Kansas is currently implementing Families First and will be utilizing funds to determine evidence-based services currently in Kansas and possible implementation of new services in Kansas to provide early intervention for children and families with a focus to serving all counties in rural and urban areas.

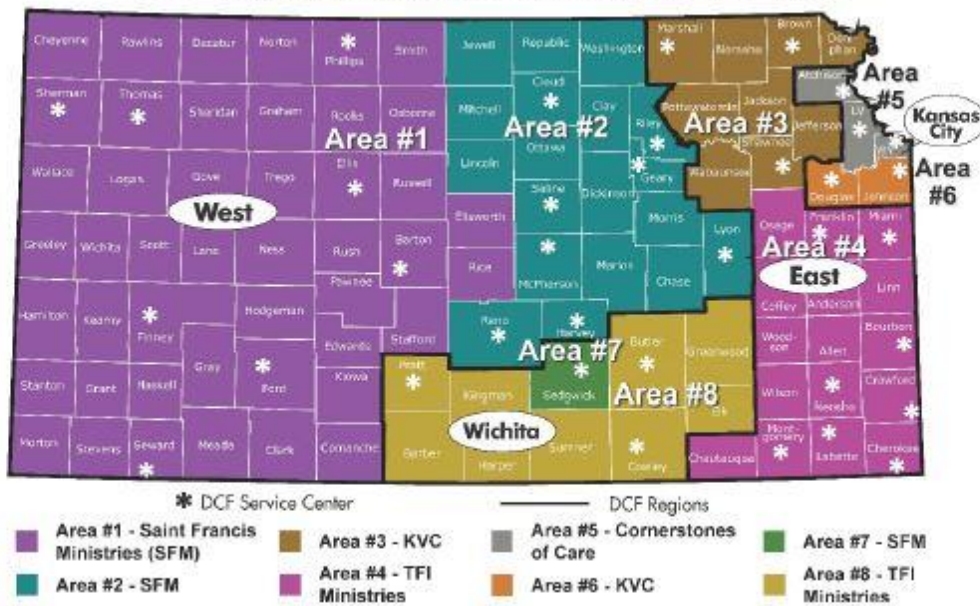
Kansas will be working on ways to assist law enforcement in obtaining information from the Department for Children and Families when responding to a home involving children, domestic violence, or any situation that may put children risk. DCF is working to establish sharing of systems to give officers current and past knowledge of cases to allow for a more thorough assessment of a situation requiring emergency response.

## F. Reintegration, Foster Care, and Adoption Services

Kansas privatized statewide **reintegration, foster care and adoption services** in 1996 and 1997. Over the years, different contract models have been awarded to licensed Child Placing Agencies (CPAs) licensed to provide these services. And in October 2019, DCF will begin new grants with four agencies to provide reintegration, foster care and adoption services throughout the state. The grants were awarded by catchment areas within the traditional four regions.



## DCF Regions and Foster Care Catchment Areas



The four contracted agencies, also known as Child Welfare Case Management Providers (CWCMP), include KVC Kansas (KVC), Saint Francis Ministries (SFM), Cornerstones of Care (COC) and TFI Family Services (TFI). Each of the CWCMPs has experience providing services to Kansas children and families.

When the court determines a child is in need of care and cannot remain safely in the home, custody of the child may be granted to the Secretary of DCF. DCF is responsible for providing care and treatment for children removed from their parents or other caregivers. In partnership with DCF, the CWCMPs provide a full array of family-centered, trauma-informed services and supports from removal through permanency. Case planning prescribes targeted services based on evidence-based assessments. Services are planned, goal-directed activities focused on safety, permanency and wellbeing.

DCF staff provide technical assistance and administrative support to the CWCMPs. This includes approving case plans, clarifying policies, licensing foster homes, supplying historical records and facilitating information sharing with other state agencies. DCF is also responsible for evaluating CWCMP performance. Performance outcomes for safety, permanency and wellbeing are measured quarterly through case reviews. In addition to federal standards, DCF also measures success indicators such as placement with relatives, educational stability and locating permanent homes for children without an identified adoptive resource.

The Initial Family Meeting (IFM) is held within three business days of a new referral for foster care services. This meeting helps to transition the case from DCF to the CWCMP. The IFM allows the parents/caregivers to meet the assigned CWCMP case manager, identify relatives and kin who may provide support or placement and discuss plans for visitations. The Initial Service Plan is also developed, in consultation with the family, so reintegration efforts may begin without delay.

If the child has been placed in a non-temporary foster home, an Icebreaker Conversation is required within 10 days of the placement. The Icebreaker is an informal, facilitated conversation that provides an opportunity for birth parents and foster parents to meet each other, share information about their families and to support the child who has just entered care or who has just moved to a new foster home placement. In the past, interactions between birth parents and foster parents were often implicitly and/or explicitly discouraged, when birth parents and foster parents do not know each other, they often make assumptions about each other based on very limited information. New thinking in child welfare on foster care as a service to families shows building alliances between birth parents and foster parents can be crucial to the well-being of the child.

Icebreaker Conversations open the door for communication. They strengthen connections and promote a sense of shared parenting among all the caregivers in the child's life. Icebreakers also serve as a respectful reminder birth parents are the experts about their children and their input is important and valued. Icebreaker Conversations often help ease some of the worries from birth parents about their child's care, they provide important information allowing foster parents to better care for the child. While there are many meetings focused on paperwork and decision-making, Icebreaker Conversations offer a meaningful opportunity to solely focus on relationship-building. When birth parents and foster parents work together, the child may adjust more easily in the foster home and better maintain a bond with his or her birth parents, resulting in increased placement stability and improved outcomes for reintegration.

With help from Casey Family Programs (CFP), Kansas implemented Rapid Permanency Reviews (RPR) in 2018. From 2018 to 2019, Kansas used RPRs to identify and "bust" barriers in the adoption process. Managing with data—not anecdotes—allowed Kansas to make system-wide changes in policy and process to facilitate more timely adoptions.

In 2020, Kansas plans to use RPRs to shine a similar light on any delays or bottlenecks for children achieving permanency through reintegration. Identifying and busting barriers to reintegration will help Kansas safely reduce the number of children in out-of-home-care.

When reintegration is not possible, permanency through adoption or permanent custodianship is explored. Over 99% of children in Kansas adopted from foster care are adopted by foster parents (51.8%) or relatives (47.3%). Children without an identified adoptive resource are referred to the state's single adoption exchange provider. Through general and specialized recruitment activities, the adoption exchange provider helps find and match families interested in adoption from foster care.

The CWCMP provides case management and permanency services throughout the duration of the case. Aftercare supports, and services are also provided to families for six months when children achieve permanency through reintegration, adoption or permanent custodianship. Aftercare services are designed to enhance stability and continue efforts focused on safety, permanency and wellbeing.

## G. Adoption Promotion and Support

In State Fiscal Year 2019 (thus far July 2018-March 2019) approximately 99 percent of the adoptions finalized were by the children's relatives or the foster parent(s.)

**Adoptions Finalized SFY 2019\***  
(July 2018 - March 2019)

Adoptive Parent Relationship	East Region		Kansas City Region		West Region		Wichita Region		Statewide	
	#	%	#	%	#	%	#	%	#	%
Foster Parent	189	60.8%	65	35.9%	89	45.4%	109	53.2%	452	50.6%
Other	0	0.0%	2	1.1%	1	0.5%	5	2.4%	8	0.9%
Relative	122	39.2%	114	63.0%	106	54.1%	91	44.4%	433	48.5%
Step Parent	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
<b>Total</b>	<b>311</b>	<b>100.0%</b>	<b>181</b>	<b>100.0%</b>	<b>196</b>	<b>100.0%</b>	<b>205</b>	<b>100.0%</b>	<b>893</b>	<b>100.0%</b>

\*This report only includes finalized adoptions of children while in State custody.

[http://www.dcf.ks.gov/services/PPS/Documents/FY2019DataReports/FCAD\\_Summary/adoptions\\_finalizedFY19.pdf](http://www.dcf.ks.gov/services/PPS/Documents/FY2019DataReports/FCAD_Summary/adoptions_finalizedFY19.pdf)

When parental rights are terminated (PRT) or relinquished and the child’s case plan goal is adoption, the Child Welfare Case Management Provider (CWCMP) prepares the child and prospective adoptive family for adoption and provides needed services to assist the child in achieving permanency through adoption. The CWCMP is responsible for a full range of adoption services for adoptive families, from the time of recruitment/identification, to completion of aftercare up to 6 months after the adoption is finalized. The CWCMP works together with the adoptive family and child to provide supportive pre- and post-placement services. Pre-placement services may include training regarding a specific condition or need, counseling to address concerns, etc. Services provided to families after the adoption is finalized depend on the child and family needs. For DCF staff responsibilities related to adoption, see Section F. Reintegration/Foster Care/Adoption Services.

If a disruption (child leaves the home before the adoption is finalized) or dissolution (child leaves the home after the adoption is finalized) occurs, the CWCMP is responsible for placement and other services the child may need, including the identification of another adoptive family. No data is available on disruptions. Few adoptions in Kansas dissolve. Kansas has tracked finalized adoptions from SFY 2003 through SFY 2018. Of the 11,055 finalized adoptions, only 7.8 percent (n=866) have dissolved. Of those families with a re-entry, the majority (78.5 percent) occurred two years or more after the finalized adoption.

When a child in foster care with a case plan goal of adoption and PRT does not have an identified resource (family), they are referred to the Kansas Adoption Exchange for general and targeted recruitment services through the Adopt Kansas Kids program. The CWCMP prepares an Individualized Recruitment Plan (IRP) by completing a PPS 5305 form (Appendix 5N is an example of an IRP), and if the child agrees, attempts are made to find a match for the child through the Adoption Exchange. The goal of the IRP is to widen the circle of adults who may be a potential adoptive resource. The focus is on finding the right family the child; one that can best parent and serves the needs of the child and will be there for them “no matter what”. The Adoption Exchange Contractor also partners with the National Adoption Exchange, AdoptUSKids (AUK) to photo-list children awaiting adoption on its website as well ([www.adoptuskids.org](http://www.adoptuskids.org).) Referral to both exchanges, AdoptKSKids and AdoptUSKids can be done

through The PPS 5310 form, the Adoption Exchange Information Form (Appendix 5N is an example of the form.) The referral form is filled out by the CWCMP and sent to the Kansas Adoption Exchange. At the end of April 8<sup>th</sup>, 2019, there were 501 total children listed on the Adopt Kansas Kids (AKK) website. This number has steadily increased over the past two years. The average age of the child listed on AKK is 12 years old. The racial demographics for the children are as follows: Caucasian – 290 (58%), African American – 117 (23 %); Bi-racial (AA/Caucasian) – 49 (10%), Hispanic – 38 (8%), Indian/Alaskan - 6 (1 %); and 1 child considered “Other.” Of the 501 children listed on the Adoption Kansas Kids; 116 children are also listed on the AdoptUSKids Exchange.

In SFY 2019 and beyond, AKK plans to continue to utilize social media to promote adoption from foster care. They plan to continue to provide professional photos and video interviews of children on the website and available to share on social media and will utilize adoption success stories on news segments and on the web site to promote adoption specifically of teens and sibling groups.

The CWCMP and other Child Placing Agencies (CPAs) recruit, train, retain and support adoption and foster families to meet the needs of the children in care. All new foster families and adoption resources must complete a Trauma Informed Partnering for Safety and Permanence Model Approach to Partnerships in Parenting (TIPS-MAPP) training course or equivalent. The TIPS-MAPP course is designed to ensure individuals and families make an informed decision about becoming a licensed foster home and/or adoptive family. In its traditional format, the pre-service training is offered as a 10-week program providing 30 hours of training.

Children’s Alliance of Kansas (CAK) is in the process of adapting the TIPS-MAPP program to allow flexibility in the delivery of this preservice training by offering prospective foster and adoptive parents alternative class structures. This includes compressing the class to span either a 5-week period or two weekends allowing families access to the same information with less time constraints.

In January 2019 CAK began the implementation of an updated version of TIPS-MAPP with content updates, including information on Adverse Childhood Experiences (ACEs.) Researchers have demonstrated a link between adverse childhood experiences (ACE) of abuse, neglect and family dysfunction and health status later in life. This may be explained in part by a toxic physiological stress response, such as elevated stress hormone levels, to multiple stressors, which may have damaging effects on a child’s developing brain. and best practices for alternative methods of delivery. In January 2019 CAK established a plan for increasing the number of TIPS-MAPP trainers by making leader training more accessible through alternative delivery methods. Through a partnership with The Call to Care and the Kansas Children’s Service League, the first pilot of providing TIPS-MAPP to prospective foster parents in two full weekends was completed in May 2018. CAK will be taking the experience from this pilot to guide the development of a set of guidelines to be used across the state.

### **KVC Behavioral Health Services SFY 2019 Recruitment Plan**

The KVC Behavioral Health Services (KVC) SFY 2019 Recruitment Plan focuses on the recruitment of foster families with targeted efforts for families interested in teens. Churches, schools and other

community organizations are targeted by KVC to increase awareness of the need for families. While working together, the Community Resource Specialist team is committed to finding the best homes and resources for the children KVC serves. Foster parents make the best recruiters and will be utilized to reach the goals that are outlined.

The SFY 2019 Recruitment Plan for KVC includes predetermining TIPS-MAPP schedules for the entire year, filling those classes and then adding more classes as needed. No family will be turned away because of a scheduling conflict. The SFY 2019 Recruitment Plan for Saint Francis Ministries (SFM) includes developing an annual TIPS-MAPP schedule that offers on-going trainings for families throughout the service area. The rest of the CPAs are private agencies that provide non-foster care adoption services. All the CPAs that license foster homes work with children with various disabilities and needs. There is one CPA who is of tribal affiliation. Targeted recruitment is necessary for children where there are no matches found on the adoption exchange. The current contract expires September 30th, 2019. A new scope of work and performance outcomes will be developed for the next fiscal year. Specialized adoption services are offered by KVC throughout most of Kansas. Adoption Specialists are assigned to children who are legally free for adoption. The Adoption Specialist works through the adoption process with the child. Often the child has an identified adoptive resource and efforts begin to finalize this adoption if the team decides this resource remains in the best interest of the child. If the child does not have an identified adoptive resource, the Adoption Specialist works with the Adoptive Resource Coordinator to actively recruit for the child using the KVC adoption webpage, AdoptKSKids, AdoptUSKids, social media and within faith-based communities. Assessment and preparation of both the child and adoptive resource is important to KVC.

KVC started an Adopt Only program in 2018 for families who are not interested in becoming a foster parent but desire to adopt from foster care. They have not finalized any adoptions yet but have matched 15 children with seven families. There are nine families who have home studies completed and are waiting to match, and other families who are in the home study process or are currently in TIPS-MAPP. Work is being done by KVC to strengthen the adoption program to ensure more successful adoptions and fewer future disruptions.

Additional KVC recruitment, for the rest of 2019 and beyond, the goals, action steps and target dates for the Community Engagement /Recruiting:

- Goal 1: 600 families will complete training to become foster and/or adoptive parents.
- Goal 2: Open a total of 400 new homes.
- Goal 3: Recruit homes to meet the needs of the children in foster care.
- Goal 4: Recruitment team will assist in retention efforts of foster parents to ensure they supported and have the resources they need.
- Goal 5: Maintain an effective volunteer program.
- Goal 6: Engage church and school communities on needs of children and families served by KVC.
- Goal 7: Develop diverse partnerships within communities.

Goal 8: Raise funds for foster parent retention, school supplies and holidays.

**Saint Francis Ministries (SFM) Recruitment Plan for 2019 and beyond:**

When adoption becomes the case plan goal and there is no identified adoptive resource, Saint Francis Ministries (SFM) requires the case manager to do a comprehensive file review to revisit relative options. This is also required if a child disrupts from an adoptive placement. SFM is implementing a version of Extreme Recruitment differently in the West and Wichita regions. In the West Region, one staff has been hired to focus on finding connections for older youth and youth who have re-entered foster care from either being reintegrated or adopted. In Wichita, the Extreme Recruiter has been in place longer and is being used on cases at the time of referral. The Wichita Extreme Recruiter attends Initial Team Meetings and makes initial calls to relatives to screen for potential placement. There has been an increase in relative placements in Wichita, so it is anticipated there will be more adoption cases with identified relative resources. A process of staffing cases internally for children who could potentially have a case plan goal of adoption has been developed by SFM. They discuss potential identified resources, and if there are none, refer the children to the Extreme Recruiter.

Adoption Specialists with SFM will work with families on helping them understand the strengths and needs of children in foster care who are available for adoption and assist the families in exploring their ability and desire to adopt children who have these characteristics and needs. If a family meets the established criteria, SFM will assist them in enrolling in TIPS-MAPP classes and be assessed as an Adopt Only Home. Support is provided by SFM to the family in helping them continue to grow and learn more about adoption through foster care. SFM will work to identify children for whom the families may be a good match. SFM Recruiters will support the Adopt Only Homes through the adoption process. The Adoption Specialists ensure referrals to Adopt Kansas Kids are done timely and complete. They also refer families who are interested in adopting a child from foster care but have yet to be matched with a child to Adopt Kansas Kids.

The SFM Recruitment Plan incorporates a multi-faceted approach that begins with the primary goal of meeting the needs of children and youth needing permanency. The plan includes a marketing focus that builds awareness about the critical need for foster and adoptive parents while presenting a positive image of child welfare and the children in need of care. The plan emphasizes customer service provided to prospective foster or adoptive parents throughout their journey toward licensing or adopting. The plan is data driven which includes tracking the progress of families throughout their journey process resulting in data gleaned to guide and adjust efforts towards successful recruitment. The plan includes partnering with the Department for Children and Families (DCF) in supporting and advancing the Statewide Diligent Recruitment plan which targets efforts to increase the supply of foster and adoptive families, specifically focusing on families willing and able to care for sibling groups, older youth, children and youth with high emotional, mental, and behavioral challenges, and families able to maintain cultural and ethnic connections of the child.

The following strategies are in place internally by SFM. The Recruitment Team, or other Foster Care Home staff involved with recruiting functions, will be responsible for carrying out these efforts to ensure success:

- Invest time to gather, learn, and distribute information about the needs of children in care so that team members can access information to share readily with those who inquire about becoming foster and/or adoptive parents.
- Strategically communicate recruitment needs in targeted communities of SFM service area, utilizing the *Recruitment Needs* reports and an intranet site where recruitment information and materials are readily available and accessible for distribution.
- Support the *Power of You* internal campaign designed to encourage current SFM foster families and SFM staff to recruit potential foster families. To encourage participation amongst employees, strategies are designed to inform, remind, equip, and challenge employees and sponsored foster families to share in the responsibility of recruitment in natural settings.
- Utilize a family-focused intake process for prospective families inquiring about becoming foster parents so they will be supported throughout stages of inquiry, training, and licensing by assigning staff to maintain consistent contact until families are licensed and receive their first placement.
- Develop an annual TIPS-MAPP schedule that offers pre-service trainings for families throughout the service area.
- Encourage and seek current foster families to serve as mentors to prospective families.
- Maintain a recruitment database to allow for tracking and accountability in the referral and intake process.
- Enhance database of current foster families to include additional demographic, such as information of ethnicity, tribal membership, education, employment, etc.
- Utilize Performance Improvement strategies and data to track achievement of established goals from securing prospective family referrals through the training and licensing of foster homes, as well as analyzing sources of foster parent referrals.
- Promote informal inter-department staff training related to Customer Service practices and the impact on recruitment and retention of foster homes.
- Continue to utilize information obtained in Foster Family Profile Survey Research Report, an extensive market research study conducted by Insight Market Research and Consulting firm acquiring profiles of SFM foster care providers in the Wichita, KS market area. The information obtained assists in better understanding foster families interests and motivations for fostering, thus leading to designing strategies to attract additional foster families.

Externally SFM utilizes a broad range of recruitment strategies that effectively recruits families to foster and to adopt. In collaboration with the marketing and communications department, a strategic state-wide campaign is used to increase awareness regarding Kansas children in need of care. The awareness campaign functions in tandem with community-based outreach approaches that personalizes the needs of children at the local level and promotes on-going engagement with community members. The campaign

is designed to inspire potential foster and adoptive families to act and make the initial call to inquire about foster care and adoption. Various forms of media and person-to-person interaction with the public are used to disseminate the message and motivate action. A major component in the recruitment plan is the identification and implementation of marketing strategies focused on purchased or donated media and public relations.

### **Broadcast, Digital, and Print Media**

- Continually evaluate and enhance advertisement strategy for SFM to build awareness for recruiting foster and adoptive homes.
- Use ad space, purchased or donated, from broadcast media outlets including radio, television and cable stations, and digital and print media outlets in target market areas.
- Create direct mail pieces to share with target audiences in key counties.
- Conduct on-air interviews with radio stations by recruitment staff and current foster families to share positive and inviting messages.
- Submit press releases to community news outlets regarding upcoming community informational meetings, recruitment events, training classes, monthly profiles of current foster families, and foster care needs.
- Submit information of upcoming trainings to community calendars, newsletters, bulletins, etc.
- Redesign and maintain an active, user-friendly website where individuals learn more about becoming a foster parent.
- Bolster the use of social media (Facebook, Twitter, YouTube) to communicate the need for foster families; help build a positive image for foster care; announce pre-service training schedule.
- As available, regularly review analytics of digital outlets used to determine most effective means of communication with parties interested in fostering.

### **Community Outreach**

- Create partnerships with churches to display information, provide presentations, share print information in newsletters/church bulletins, to include information about fostering, the Fostering in Faith program.
- Collaborate with SFM Development and Church Relations staff on applicable community engagement initiatives.
- Provide recruitment presentations at community groups and organizations including civic, social, educational, and faith-based organizations.
- Organize community special events that recognize current foster families and help raise awareness about the need for additional foster families, including but not limited to Foster Care Forums and Foster Care Educational Nights.



- Develop and build relationships with community partners, organizations, and businesses to feature stories and ads in their print materials on behalf of SFM to message the need for foster families.
- Connect with schools in targeted communities to share information with teachers, manage informational booths at parent/teacher conferences or other school events to draw families.
- Coordinate efforts with civic groups and community organizations including but not limited to African American Foster and Adoption Council, Kansas Foster and Adoptive Parent Association, Kansas Family Advisory Network, Global Orphan/ CarePortal, and other social service agencies to support recruitment efforts and spread the need for foster and adoptive parents in local communities.
- Partner with DCF Faith Based and Community Liaisons, as available, to distribute information and coordinate presentations to civic and faith-based organizations.
- Partner with CarePortal, an online platform that brings the needs of local at-risk children and families in the community to the forefront where people who want to help can do so. Caseworkers uncover the needs. CarePortal makes local churches aware, giving them a real-time opportunity to respond. SFM plans to elevate relationships with CarePortal churches to engage in activities supporting recruitment and retention efforts, such as hosting pre-service or ongoing trainings, appreciation activities, respite nights and supporting of current foster families. Moving forward in 2019 and beyond, CarePortal church members will be challenged to become licensed foster homes to provide full time care for children in need of OOH placement. Also, as the Foster Care Child Care program is implemented in Kansas, members will be approached about being licensed as a foster home to provide part time respite or in-home respite at a licensed foster home, to support foster families in communities where approved day care options are limited.
- Hold specific informational meetings with targeted audiences that hold a special interest in meeting needs of specific types of children (nursing associations; mental health profession; intellectual/developmental groups, etc.).
- Enter formal partnership with Backyard Orphans intended to train and equip churches desiring to formally move their mission of fostering forward.

The Department for Children and Families (DCF) and its community and contracted partners have worked together, in collaboration with the National Resource Center for Diligent Recruitment (NRCDR), to develop a cohesive Diligent Recruitment Plan. The first publication of the plan occurred in 2016. The plan is updated annually and posted to DCF's website. DCF submitted a request to continue to receive technical assistance from the NRCDR after it became part of the Capacity Building Center for States. The updated workplan was approved. Through the first year of implementation of the diligent recruitment plan and program, DCF has served as the child welfare system leader, guiding the development of a systematic and integrated approach to all recruitment and support strategies and messaging across the state, see attachment 9 for Diligent Recruitment Plan.

DCF and partners have developed an “adopt-only” track for families interested in adoption from foster care. DCF is committed to developing a strong adoption program for children and families that includes preparation, assessment and support. The Kansas Adoption Network (KAN) helps bring adoption expertise to Kansas to improve adoption from foster care best practice.

In addition, the Kansas Child Welfare Professional Training Program (KCWPTP) has established specialized adoption training for all staff involved with the assessment and preparation of children and families for adoption from foster care. The training is referred to as “Adoption Assessor” training and includes 72 hours of specialized training for CWCMP and staff who assess and prepare children and families for adoption, as well as internal DCF staff who provide Adoption Assistance services. The training was adapted from the Ohio Child Welfare Training Program’s curriculum and was piloted in Kansas during the fourth quarter of SFY 2016 through first quarter of SFY 2017. Three rounds of the training were provided during calendar year 2017 and will continue in future years under KCWPTP. The CWCMP and CPAs provide recruitment, placement and support services of foster and adoptive families for children in foster care. To ensure that all prospective adoptive parents have access to the home study process, two years ago, DCF expanded the adoption exchange contract to include the recruitment, preparation and assessment of adopt-only families. The need for more home study writers has been identified as a barrier to this process and possible solutions will continue to be explored in SFY 2019.

One of the targeted needs of the SFY 2017 and 2018 Recruitment Plan includes recruiting adoptive families for the children/youth registered on the adoption exchange. This complies with approved Program Improvement Plan (PIP) Key Activity 3.1.3, implement identified strategies to recruit, develop, support and retain families that can best meet the needs of the children in foster care.

DCF held a Diligent Recruitment (DR) meeting with stakeholders on 01/08/19. The DR plan was also updated, so stakeholders would have the most up-to-date information about the Kansas children in need of foster and adoptive homes. During the meeting, partners and stakeholders provided updates on many of the activities designed to recruit, prepare and support Kansas foster and adoptive homes. Breakout groups were formed to brainstorm ways to enhance targeted recruitment efforts. DR meetings will be held semiannually. The next DR meeting has been scheduled for 07/23/19.

In SFY 2018, adoption policies have been reviewed by the Kansas Adoption Network group. No major changes to policy were made in July 2017 or January 2018, but there are several being considered for July 2019 that would enhance preparation of children for adoption (5311), and streamline the Best Interest Staffing process (5339, 5340, and 5341).

In July 2018, the policy regarding the child’s adjustment to the adoptive placement was updated to include the stages the child may experience, and to require the CWCMP document the adjustment when requesting the consent to adopt. Policies regarding the Best Interest staffing were changed to allow for the meeting to be held electronically, and for the BIS Team to make the selection of the adoptive

placement, with the Regional Director authorizing their decision. In January 2019, these sections were further changed to allow CWCMPs to not hold a BIS in situations where there was only one family interested in adopting the child and the child was already placed in the home and had maintained placement for a period of 6 months or longer without displacement. The policy on Individual Recruitment Plans changed so they are only required for children who do not have an identified resource. As of January 2019, adoptive parents no longer must submit an annual TB test.

PPS efforts have been focused on the agency’s strategic objectives to strengthen families and safely reduce the number of children in care. PPS has developed and updated related policy and procedures, to help bust barriers, which has proven to be successful. As can be seen in the chart outlined below, Kansas has finalized more adoptions in SFY 2019 than in years past.

Adoptions from foster care in Kansas from SFY 2012 – SFY 2019 (July 2018-March 2019)

	SFY 2012 Jul. 11- Jun. 12	SFY 2013 Jul. 12- Jun. 13	SFY 2014 Jul. 13- Jun. 14	SFY 2015 Jul. 14- Jun. 15	SFY 2016 Jul. 15- Jun. 16	SFY 2017 Jul. 16- Jun. 17	SFY 2018 Jul. 17- Jun. 18	SFY 2019 Jul. 18- March 19
Statewide								
Finalized Adoptions	777	620	666	765	755	758	766	893

**PPS has partnered with Adopt Kansas Kids (AKK)** to form the Kansas Post Adoption Resource Center (K-PARC). K-PARC supports families who have adopted children from foster care or who are providing permanent care because of a kinship placement. Adoptive and kinship families often find the need for support grows in the years after their adoption or placement is finalized. The ongoing impact of early childhood trauma can destabilize good placements, challenge solid marriages, and put children at risk even in the healthiest of families. K-PARC strives to extend the mission of DCF and AKK to Post-Adoptive Families through 1) parent, youth, and child education, 2) peer and community support and activities, and 3) resource development and referrals.

**Kansas Post Adoption Resource Center (K-PARC) Project Plan for SFY 2020**

Peer to Peer Support

- Twenty-Five mentors will be identified and trained in TBRI and The Sound Relationship House.
- Mentors will be trained in crisis response.
- At least five mentors will become trained in Educational Advocacy.
- K-PARC coordinators will work with mentors to sustain support for families in the form of groups, online and social media training and support, as well as in person one-to-one support. This model has worked in several communities including Lawrence, and Olathe.
- K-PARC staff will match referred families to existing and newly trained support throughout the year.
- Low to no cost family activities will be coordinated with the help of volunteers.

- The Kansas Adoption Advisory Council and Regional Councils will assist with recruitment and in sustaining a network of Mentors.
- KPARC will continue to utilize social media to reach families in all parts of the state and support the growth of expertise among adoptive families and the professionals who serve them.

#### Resource Development and Referral

- At least 600 congratulations packets will be distributed to new adoptive families. This bag contains information about K-PARC and other community resources available to families as well as promotional materials to remind them to reach out for help and connection during their adoption journey.
- The Parent Helpline is available 24/7 to all families. Scripts identifying resources and helpful information that is adoption specific will be updated this fiscal year.
- Website: This year K-PARC will focus on finding and promoting professionals who are serving adoptive families and children with excellence. The website will be one vehicle for shining a light on good practice and service. Stories of how adoptive families have persevered through tough situations will be highlighted on the website this year.
- An adoption respite exchange is in development by K-PARC and the Kansas Adoption Advisory Council. K-PARC will continue that effort. K-PARC staff has identified a number of ways to recruit families and individuals who can provide respite for adoptive parents.

#### Ongoing Support and Education

- Four Weekend Retreats will be hosted this year. The retreats will focus on the Sound Relationship House as detailed in the *Home with Heart* curriculum from Michigan State University.
- Ongoing workshops for topics relevant to adoptive families will be provided throughout the year both on-line and in-person as a group, and in-home for families in crisis. To serve families best contract TBRI practitioners may be used to deliver services.
- K-PARC will work with the Parent Leadership Conference to provide a track of training for families raising children from hard places.
- K-PARC will continue to find and support the training of adoptive parents and professionals who are interested in attending TBRI practitioners training or other trainings important to families.
- Four of the new practitioners that paid their own way to practitioner training will be contracted with to provide Parent Circle, Kids Club or Teen Talk training.
- At least 10 contracts for the delivery of Parent Circle/Kids Club/Teen Talk will be executed in order to further develop the community of practitioners that can teach TBRI to adults, children, and teens.
- K-PARC will locate, develop, and highlight the efforts of at least 30 therapists or other professionals who work to meet the needs of kids from hard places.
- K-PARC will deliver Trust-Based Caregiving (TBRI) training to at least 80 families.
- K-PARC will expand the network of therapist who can work with families during and after participation in Parent Circle. Families will be encouraged to participate in therapy by a trained practitioner or adoption competent therapist during their participation in this 10-week training class.
- Approximately 80 volunteer positions will be filled so that children can learn social/emotional skills one on one with an adult buddy at Kids Club and Camp. Many of these slots will be filled by veteran volunteers, but training will be completed for new volunteers. The training and work with volunteers form the core of K-PARC efforts to develop new professionals who can better serve kids with trauma and attachment injury in their history.
- K-PARC will host training for adoptive families and professionals utilizing professional from The Karyn Purvis Institute for Child Development or similar organization in Wichita.

- Camp will be held for 15 youth who have been adopted from foster care. Parents sending kids to camp will complete a 2-hour TBRI training and join their teen for the end of camp lunch.
- Records of all services offered will be maintained and added to the AdoptKSKids database.

## H. Permanent Custodianship

In 1999, the Kansas Legislature established State funding for a permanent guardianship subsidy (PGS) to assist families willing to assume responsibility for providing care for a youth to adulthood. Additional funding was designated for those guardianships established pursuant to K.S.A. Chapter 38, Article 15 (permanent guardians). Starting January 1, 2007, the CINC Code changed the name to Permanent Custodian and Permanent Custodianship Subsidy (PCS).

Legislation established permanent custodianship in the Kansas Code for Care of Children to distinguish it from guardianship established in the probate court. The permanent custodianship process ensures the Child in Need of Care (CINC) case remains in the same court.

The permanent custodianship subsidy is not an entitlement program and the child must meet all the following criteria:

1. be in the custody of the Secretary of DCF with or without parental rights terminated at the time permanent custodianship is established;
2. a court order appointing a permanent custodian;
3. not receiving Supplemental Security Income (SSI); and
4. the permanent custodian meets eligibility to receive Temporary Assistance for Families as defined by the Economic and Employment Services policy manual (KEESM 2220 - Living with a Caretaker).

As of May 2019, 157 children were receiving a permanent custodianship subsidy. Permanent custodianship subsidy may be considered if one of the following is met:

1. The child is age 14 and over, or
2. The child is part of a sibling group being placed together and one child is age 14 and over, or
3. The child has an approval for an exception from the Director of Prevention and Protection Services for other extenuating circumstances making adoption not a reasonable option.

Some children may be released from custody into a permanent custodianship without receiving the subsidy. For example, the child may have other unearned income sources. The maximum monthly permanent custodianship subsidy payment cannot exceed \$300, and children do not receive a subsidy if their countable income exceeds \$486 per month. Once established, the subsidy amount does not change unless there is a change in the child's circumstances.

Income to consider shall include but is not limited to:

1. Social Security Survivors Benefits (SSA);
2. Social Security Disability Insurance (SSDI);
3. Child Support;
4. Income for the child from a trust or annuity
5. Other benefits, e.g. railroad or veteran's benefits

Additionally, some children may only receive the subsidy for a short period. For example, if the permanent custodianship was established when the child was near age 18, the child may only receive the subsidy for a few months. In State Fiscal Year (SFY) 2018, 222 children exited custody into a permanent custodianship; and in SFY 2019, as of April 4, 2019, that number was 146.

The Child Welfare Case Management Provider (CWCMP) is responsible for assessing whether a permanent custodianship best meets the child's needs and to prepare the family for the responsibilities associated with custodianship, including an assessment of the family's capabilities of parenting the specific child. The assessment is completed through a home study process and background checks. When determining if an individual family might be suitable for custodianship of a child in the custody of the Secretary of DCF, factors considered in the case planning conference and home study evaluation are similar to factors considered in adoption.

Permanent Custodianship Subsidy (PCS) was established to provide financial assistance to those who care for children who have been in DCF custody and for whom the permanency plans of reunification and adoption have been ruled out. PPS approves and processes the payments for PCS and Regional DCF offices handle the medical card case and annual reviews.

Permanent custodianship subsidy ends when a child is 18 (unless the child is still in high school); the child becomes emancipated, dies or otherwise ceases to need support; the child no longer resides with the permanent custodian; or the permanent custodian fails to complete and return the annual review.

Clarification of permanent custodianship subsidy compared to adoption subsidy is being done with the regions and CWCMP to help determine which case plan goal is more appropriate and which program will help provide the stability and resources needed to raise the child into adulthood.

The CWCMPs are responsible for 6 months of aftercare, which includes a full array of services to the family, on an as needed basis, to ensure the success of the permanent custodianship. Families or individuals entering a permanent custodianship may need help understanding the effects of separation, abuse and neglect. Families may also need added services such as transportation, respite care, mediation, etc. to ensure the success and stability of the custodianship.

Permanent custodianship subsidy does not require an annual eligibility re-determination. An annual review is made to determine if any changes in the circumstances of the child exist.

Permanent Custodians are responsible for reporting the following changes regarding their household to the Department for Children and Families:

- Change in home address
- Change in phone number
- Change in email address
- Any changes in the child's living situation
- If the custodianship is set aside or they cease to be legally or financially responsible for the child
- When the child reaches 18 and has completed high school
- When the child becomes emancipated
- If the child dies, or otherwise ceases to need support

Kansas implemented policy 6925 Permanent Custodianship Subsidy Overpayments ([http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/PPS\\_Policies/6000\\_Permanent\\_Custodianship\\_\\_\\_Adoption/6925.htm](http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/PPS_Policies/6000_Permanent_Custodianship___Adoption/6925.htm)), effective July 2016, to address overpayments.

## I. Relative and Kinship Care

**Relative and kinship** placements are more likely to take sibling groups, more likely to experience greater placement stability and may be less traumatic for children. Consistent with federal and state law, Kansas gives relatives and kin preference and consideration for placement when a child is placed in care. DCF and CWCMP staff are required to make concerted efforts to identify, locate, inform and evaluate maternal and paternal relatives as potential placements both initially and throughout the case. Today, placements with a relative total over 32% of all placement settings in Kansas.

For placement purposes, DCF defines a relative as a person who can trace a blood tie to a child. This includes parents, grandparents, siblings, uncles/aunts, nephews/niece, first cousins, etc. Termination of parental rights does not alter or eliminate the blood relationship to relatives. A relative is also a person who is or was related to the child through marriage or adoption and with whom the child maintains a kinship relationship, such as step parents, even though the marriage or adoption may have ended. This may also include birth and adoptive parents and grandparents of siblings and half-siblings.

Kansas defines “kinship care” as the placement of a child in the home of the child’s relative or in the home of another adult with whom the child or the child’s parent already has a close emotional tie (K.S.A. 38-2202).

Relatives may, but are not required to, obtain a foster home license. Unlicensed relatives will be paid between ten and fifty dollars per day (per child) based on the child’s level of care assessment. Specific staff at the CWCMP help support and maintain relative placements. If relatives choose to become licensed, they must meet the same regulatory standards and requirements as other licensed family foster homes.

Non-related kin must obtain licensure; however, agency policy allows for children to be placed with non-related kin prior to the completion of pre-service foster parent training. Non-related kin are generally issued a temporary license within 30 days of a placement. Non-related kin are provided a monthly subsidy—equal to the rate a licensed foster home would receive for the same level of care—once a temporary license is obtained. A standard license is issued once all training and other requirements have been completed.

With new initiatives such as Team Decision Making and evidence-based programs utilized by the CWCMPs—such as 30 Days to Family—Kansas hopes to increase the percentage of relative and kinship placements. At the same, Kansas has invested in preventative services available to relative and kin caregivers through a kinship navigator model.

To provide services and supports to kinship caregivers, DCF contracted with the Kansas Family Advisory Network (KFAN) to develop a statewide Kinship Navigator program. The Kinship Navigator program, facilitated by KFAN, was created to aid kinship caregivers in need by helping them acquire information about programs and services that are designed to meet the needs of the children they are raising. Through

this connection, kinship caregivers may also develop the ability to access and utilize additional programs. The momentum generated will help encourage and develop successful collaborations among public and private agencies to ensure kinship caregiver families are effectively served.

The target population of the Kinship Navigator Program consists of children who are in, or at risk of entering, foster care as well as their kinship caregivers. Kinship families may have low incomes along with limited resources and generally receive fewer services from child welfare agencies than foster families.

KFAN will be utilizing the Children's Home Society of New Jersey kinship navigator model. The service area includes identified high-needs counties in all four regions in Kansas. Work has begun to proactively identify and contact families within these counties who live in kinship care arrangements. Families themselves can learn by referral about the program directly through the DCF or the CWCMPs, the 2-1-1 service number, the Department of Aging, senior centers, Area Agencies on Aging, Re-Entry Programs, Juvenile Intake and Assessment Centers, Courts, Head Start/Early Head Start Programs, local health departments, physician's offices, attorney's offices, school personnel, licensed day care facilities, churches, community events and more.

By providing strength-based case management to these families, services will begin with a strength-based assessment, modeled on existing best practices. Case managers will offer information and referral services to a variety of state and community benefits and programs. This service will also help families apply for eligible federal, state and local benefits, training, legal advice and community services such as housing, food, and clothing.

The Kinship Navigator Program is coordinated by KFAN, which is a network specifically designed to work with parents and kinship providers by providing them direct support and assistance. The goal is for families to have a voice during their involvement with child welfare services in Kansas. KFAN has the unique opportunity to provide support, education, advocacy and training to family and community partners. KFAN currently uses the Family Centered Systems of Care (FCSOC) model. The FCSOC model principles encourage building partnerships between providers and families to create a broad array of services and supports that are organized into a coordinated network. The network is culturally competent and developed to meet the needs of children, youth, and their families. KFAN has incorporated FCSOC principles into child welfare policy and practice at all levels to promote positive sustainable change to benefit Kansas children, youth, and families. Its main goal has been to increase awareness of the importance of culturally competent child welfare practice within DCF and among partner agencies. Development of prevention and intervention services that can provide direct support to parents and kinship caregivers can ultimately have an enormous impact on Kansas child welfare outcomes such as out of home placement rates and lengths of stay in foster care. The goal is to restore families as well as promote shared parenting, permanency, safety, and well-being, for children and families. Support groups will be explored and implemented.

Through these strategies, the Kansas Department for Children and Families will provide the support the parents and kinship caregivers of the children in the child welfare system so desperately need. Connecting all partners in Kansas through the Kinship Navigator program will greatly reduce stress on the families providing care as well as reduce disruptions in the caregiving process.



## J. Independent Living Services

**Independent Living Services** are available to adults age 18 who have been released from the Department for Children and Families Secretary’s custody until age 21, or until age 26 if enrolled in post-secondary education or training programs and participating in the Education and Training Voucher (ETV) Program. The IL Program is voluntary, and adults may receive services in all 105 counties in Kansas. Adults ages 18-26 complete the Kansas Independent Living Self-Sufficiency Matrix and develop an open formal Self-Sufficiency Services Case Plan with the regional IL Coordinator. This plan is adult-driven and identifies the individual’s goals as well as the steps to achieve those goals. Adults involved in the IL Program are eligible to receive assistance with the following: room/board, medical care, completion of high school/General Equivalency Diploma, post-secondary education or training, mentors, career planning, assistance with checking and correcting credit reports, life skills, and other services, as identified by the adult.

The Kansas Foster Child Education Assistance Act, which began July 1, 2006, requires tuition and fees to be waived by educational institutions for DCF youth who meet the eligibility criteria, up until the semester the youth turns 23 years old. Youth may receive additional funds through the ETV Program to help offset other costs of post-secondary education.

Kansas offers the Chafee Medicaid Option as Aged Out Medical coverage to young adults who leave the custody of DCF, Kansas Department of Corrections – Juvenile Services (KDOC-JS) and Tribes at age 18, until the month of their 26<sup>th</sup> birthday. The young adult does not have to participate in any other services to be eligible for the Aged Out Medical Card.

## K. Another Planned Permanent Living Arrangements (APPLA)

Kansas changed policy in January 2017 to use the term “Another Planned Permanent Living Arrangement” (APPLA) to match federal language. The permanency goal of APPLA is appropriate only for youth age 16 or older, and when documentation has been provided to the court that compelling reasons exist that make all other permanency options unacceptable. Department for Children and Families Prevention and Protection Services is compliant with Preventing Sex Trafficking and Strengthening Families Act regulations that require youth with a case plan goal of APPLA to be 16 or older. As of March 31, 2019, 6.67 percent (n=497) of youth in DCF custody had a current case plan goal of APPLA. Choosing this option is appropriate only when there is a plan for a specific, long-term placement for the child. Long-term, out-of-home placement is not an acceptable permanency option and is not to be chosen as a planned permanent living arrangement. When the child is in APPLA, the plan for the child to stay in the placement resource until achieving permanency is documented. The youth and the placement resource sign a commitment agreement, PPS Appendix 5K (<http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>), indicating their understanding of the plan.

A planned permanent living arrangement is subject to ongoing review at later permanency hearings. Other permanency options for the child continue to be explored throughout the time the child is placed out of the home. The permanency option of APPLA does not rule out other more permanent options. The PPS regional Independent Living (IL) Coordinator or designee attends scheduled case plans for all youth in out-of-home placement with a case plan goal of APPLA, beginning at age 16. The IL Coordinators attend case planning conferences for all other youth in care age 17 and older to begin

discussion and preparation for self-sufficiency services when permanency is not achieved. The PPS regional IL Coordinator or designee continues to attend the youth's permanency case plans until attainment of permanency or transitioning from foster care into adulthood. Continued involvement assists with engaging the youth and ongoing rapport building.

A transition plan is initiated, beginning at age 14, for all youth in care, regardless of case plan goal. The youth is assisted in considering and identifying specific options on the transition plan for housing, health care and insurance, education, continued support services, employment and financial support and services, transportation, and other services needed to maintain self-sufficiency for the youth and, if applicable, for any minor child of the youth. Information on available resources from internal and external programs is provided. Referrals to supportive services are made, when applicable. The transition plan identifies Connections for Success, which are adults and other resources to whom the youth would reach out to for assistance as they travel their path to independence.

## L. Adoption Assistance

Adoption Assistance is designed to remove barriers to the adoption of children with special needs who otherwise may not be adopted. The intent of the program is to assist the adoptive family in meeting the special needs of the child. This program is authorized by state and federal statutes and regulations. Kansas implemented a state adoption assistance program in 1972.

The agency's policy is to uniformly operate both the state and federal programs. Adoption subsidy and medical assistance are provided for eligible children regardless of the funding source. Eligibility for adoption assistance is based on the special needs of the child and not the income/resources of the family. In determining the type and amount of assistance, Prevention and Protection Services (PPS) assesses the community and family's resources available to meet the child's ordinary and special needs. Children in the Custody of the Secretary of the Kansas Department for Children and Families (DCF), or a licensed nonprofit Child Placing Agency (CPA), may be eligible for one or more of the following types of adoption assistance: Title XIX Medicaid, monthly subsidy payment, special service payment, and non-recurring expenses. At the end of April 2019, the average subsidy payment was \$349.75 a month. At the end of April 2019, there were 9,829 open adoption assistance cases. This represents an increase of approximately 5.14 percent from April 2018 (at 9323) to April 2019 (9,829.)

The Child Welfare Case Management Provider (CWCMP) is required to provide services and supports for 6 months following finalization of an adoption or permanent custodianship. These services, referred to as Aftercare, are provided to ensure safety and stability of the placement for the child and to assist all family members in obtaining needed resources. The Aftercare Contact Agreement is developed with family to outline the services and supports needed to maintain the placement and meet the needs of the child. Once completed, is signed at the same meeting as the Adoptive Placement Agreement (APA), which is a written agreement signed by the family, the child's case manager, and DCF to place the child in an adoptive home. This is the step prior to finalization. The child remains in the State's legal custody until finalization.

Policy regarding Aftercare was strengthened in January 2017 on the APA, to include the parent(s) agreement to work collaboratively with the CWCMP to develop and implement/participate in an Aftercare Plan. Also, the PPS Adoption Specialists will approve the submitted Aftercare Plan. Once the Aftercare Plan is developed, the CWCMP engages with the child and family to provide services and

supports, as outlined in the plan, and submits a completed monthly report to DCF. The CWCMP is responsible for Aftercare for 6 months post-adoption finalization. This includes providing services to families in crisis. If a family is not involved in Aftercare services, the PPS Adoption Assistance Specialist assists families with connecting to community services to meet crisis needs. If further assessment is needed, a report may be made to the Kansas Protection Report Center (KPRC) to initiate an assessment for services. The PPS Child Protective Services (CPS) Specialist would then complete an assessment and work with the family on determining services needed to maintain the child in the home and de-escalate the crisis.

The Kansas Department for Children and Families (DCF) expanded the Adopt Kansas Kids contract to form the Kansas Post Adoption Resource Center (K-PARC). K-PARC supports families who have adopted children from foster care or who are providing permanent care as a kinship placement. For additional information on K-PARC see Section H Adoption Promotion and Support

## M. Populations at Greatest Risk of Maltreatment

Kansas has used the following information to identify the populations at the greatest risk of maltreatment.

- In Kansas, 85% of counties are rural communities with scarce resources for families per the Institute for Policy & Social Research. (2017), Population Density Classifications in Kansas, by County, 2017.
- In fiscal year 2017, Kansas had 67,372 reports of child abuse and neglect, an increase of 20% from per the 2010 to 2017, Kansas Department for Children and Families (2018).
- In Kansas, 52 child fatalities occurred between 2013 and 2017 per the U.S. Department of Health & Human Services Children's Bureau (2019), Child Maltreatment 2017 report.
- Children under age one are at the highest risk of dying as a result of abuse or neglect. U.S. Department of Health & Human Services Children's Bureau. (2019). Child Maltreatment 2017.

Kansas has a universal approach to prevention, incorporating a Strengthening Families and Protective Factors framework to support all families in the state. Kansas will focus on providing primary prevention services to children birth to five and are targeted to at-risk and underserved populations. Services are targeted to at-risk communities, which are identified through the presence of multiple risk factors, including low-income, unemployment, low educational attainment, substance abuse, births to teen mothers, single parent homes, child welfare involvement, homelessness and crime.

Kansas will continue to develop policies and procedures to ensure care to children under the age of one focusing on motivational interviewing and engagement with families. Policies will also focus on children under one, involving making referrals to available services and education and information on safe sleep.

There is continued work for future implementation of Team Decision Making (TDM) model to prevent removal and provide prevention services starting with the East and Kansas City Region with the plan to implement statewide. See section IV: Plan for Enacting Kansas' Vision for more information on TDM.

Kansas child protection policies include provisions or categories of families in need of services creating challenge understanding impact of caregiver behavior on predicting occurrence or recurrence of serious injury and fatality. Sedgwick County has experienced 14 child abuse fatalities since 2014. Kansas child protection categories broadly include families in need of services, additional research, analysis and implementation of earlier intervention is necessary to end child abuse fatalities. Historical knowledge and

past evaluations provide insights to absence or presence of public health and social or economic contributing factors, yet there is more to learn and effect with emerging concepts.

To amplify collective impact and achieve no child abuse fatalities, Sedgwick County seeks to create an opportunity for law enforcement to directly provide case management services to support safe, stable and nurturing relationships and environments. The goal of this project is to prevent or reduce law enforcement contacts and increase social and safety network supports family functioning and resiliency toward reducing child abuse injury and fatality.

This emerging Sedgwick County program concept engages coordinated outreach to a special population of families identified as at-risk for child maltreatment. A Community Support Specialist employed by the Wichita Police Department or Sedgwick County Sheriff's Office visits a family's home when law enforcement identifies the home environment as in crisis or need of supportive resources. The trained Community Support Specialist engages the family with motivational interviewing, provides home visits and offers case management. The specialist makes referrals to community-based services for parent skill building, home visiting, mental health and substance use and connects the family with education for safe sleep, parent peer support, service navigation, public health or school district programs.

In addition, Kansas is currently implementing Family First and will be utilizing funds to determine evidence-based services currently in Kansas and possible implementation of new services in Kansas to provide early intervention for children and families with a focus to serving all counties in rural and urban areas. See section IV: Plan for Enacting Kansas' Vision for more information on Family First.

## N. Services for Children Under the Age of Five

Activities to address the developmental needs of children under the age of 5 start with assessment tools to screen for developmental disabilities and mental health issues. If the Social-Emotional Screening Tool-R Children Birth to 5 Years identifies a child that has a developmental or emotional/behavioral need, the Child Welfare Case Management Provider (CWCMP) refers a child Birth to age 2 years to the Infant-Toddler or Tiny-K program for further assessment, and children 3 years and above are referred to their local school districts' IDEA Preschool Program. Head Start/Early Head Start programs have policies that place children in foster care at the top of the list for admission.

Tools used by CWCMPs to assess various aspects of a child's emotional, behavioral and well-being needs include North Carolina Family Assessment Scale + Reintegration (NCFAS+R) or, the Parenting Stress Index, Child Stress Disorder Checklist (CSDC) and the Ages and Stages Questionnaire Social Emotional (ASQ-SE), Preschool and Early Childhood Functional Assessment Scale (PECFAS).

Information related to children in care, include demographics, developmental and emotional/behavioral health issues are tracked through the Kanas statewide data system, Family and Child Tracking System (FACTS).

<b>Statewide</b>	<b>SFY 2015 Jul. 14 - Jun. 15</b>	<b>SFY 2016 Jul. 15- Jun. 16</b>	<b>SFY 2017 Jul. 16- Jun 17</b>	<b>SFY 2018 Jul. 17- Jun 18</b>	<b>SFY 2019 Jul. 18- Feb 19</b>
Percentage of children in out of home placement under the age of 5	32%	30%	30%	30%	29%
Of those the percentage placed with relatives.	40%	38%	39%	38%	39%
Of those the percentage with 2 or fewer moves while in care.	97%	96%	95%	94%	75.6%
Percentage of children awaiting adoption under the age of 5	26%	23%	23%	23%	22%
Percentage of children on the AdoptKSKids website under the age of 5	2%	0%	4%	4%	5%
Percentage of children with a finalized adoption under the age of 5	43%	43%	36%	27%	33%

The Children’s Alliance of Kansas (CAK), through a contract with DCF, provides and supports ongoing training for foster parents. Some of the training topics available for foster parents that are geared toward children age 5 and younger include:

- American Red Cross First Aid/CPR
- Autism Spectrum and other Neurodevelopmental Disorders
- Born Substance Affected: Lifetime Ramifications from Exposure to Drugs & Alcohol
- Car Seat Training and Booster Seat Safety
- Child Development Ages Birth to 5
- Child Sexual Abuse & Foster Care
- Shaken Baby Syndrome
- SIDS: Sudden Infant Death Syndrome
- Trauma affects Development and Behavior
- Understanding Children's Temperament

Kansas Serves Substance Affected Families (KSSAF) is one of two projects funded by the U.S. Department of Health and Human Services Administration for Children and Families Children’s Bureau to Increase the Well-being and Permanency Outcomes for Children Affected by Substance Abuse. The purpose of this project is to scale up and test the Strengthening Families Program: Birth-to-Three (SFP B-3) in out-of-home placement removed for reasons associated with caregiver substance use to achieve the goal of improved safety, permanency and child well-being. KSSAF is currently in year four of a five-year award and is conducted in partnership between the University of Kansas School of Social Welfare, the Kansas Department for Children and Families (DCF), Kansas Department for Aging and Disability Services (KDADS), Saint Francis Ministries (SFM), KVC Behavioral Health Services (KVC), Kansas Head Start Association, Ahearn Greene Associates, and federal cross-site partners. Representatives from these organizations meet monthly as members of KSSAF Steering Committee.

The Kansas Serves Substance-Affected Families (KSSAF) is a statewide public-private collaborative partnership that seeks to increase the wellbeing of, and to improve the permanency outcomes for children

affected by substance abuse. This initiative includes an evidence-based parenting skills training program (Strengthening Families Program Birth-to-Three [SFP B-3]). Eligible children and families are randomly assigned to the SFP group or to services as usual. The treatment group participates in a 16-week SFP B-3 and in trauma-informed functional assessments and referrals to positively impact the following domains: parenting, family attachment, parental substance use, understanding risk and protective factors to avoid substance use, and child behavior. Funding for this project is provided through a Regional Partnership Grant (Round 3) from the Children's Bureau, Administration for Children and Families (ACF), U.S. Department of Health and Human Services. This study contributes to a national cross-site evaluation conducted by ACF, Children and Families Futures, Mathematica and a local evaluation conducted by the University of Kansas School of Social Welfare.

KSSAF is implementing a developmentally appropriate version of the Strengthening Families Program (SFP) Birth-to-Three, in partnership with the Kansas Department of Children and Families (DCF), KVC, St. Francis Ministries (SFM), the Kansas Department for Aging and Disability Services (KDADS) and the Kansas Head Start Association. SFP B-3 is a family-based evidence-informed parenting intervention that seeks to positively impact the following domains: parenting, family attachment, parental substance use, understanding risk and protective factors to avoid substance use, and child behavior. KSSAF is preparing to enter its fifth and final year of successful implementation throughout Kansas. KSSAF has delivered SFP B-3 training to 239 families to date (81% retention rate). These families have been served in the Kansas communities of Wichita, Salina, Hutchinson, Topeka, Kansas City, and Olathe.

Preliminary findings suggest significant pre-test/post-test improvements in child well-being, including (as measured by the Ages and Stages Questionnaire-3 and Ages and Stages Questionnaire- Social Emotional: 2), including communication, gross motor, fine motor, problem solving, and social emotional skills. Significant pre-test/post-test improvements were also found in two subscales of the Adult Adolescent Parenting Inventory, including empathy (i.e., parent demonstrates empathy and values children's needs) and expectations (i.e., realistic expectations of the developmental capabilities of children). Additionally, there were significant improvements in parental depression (Center for Epidemiological Studies CESD-12) and trauma symptoms (Trauma Symptoms Checklist-40, including the Trauma total scale, depression, and sleep disturbance) and in legal and psychological issues (Addiction Severity Index, ASI). Lessons learned, cost study, and implementation outcomes and resources, such as fidelity evaluation, will also be described. Although KSSAF is currently conducting a randomized controlled trial where eligible children and families are randomly assigned to the SFP group or to services as usual, the project also serves families receiving aftercare or family preservation cases. In the final six months of implementation (April 2019), KSSAF will receive referrals within and outside child welfare, transitioning from a research study to full SFP implementation and long-term sustainability.

In SFY 2019, the University of Kansas School of Social Welfare partnered with the DCF, Haskell University, SFCS, KVC, and other potential partners (e.g., tribes) and was awarded a grant from the U.S. Department of Health and Human Services Administration for Children and Families Children's Bureau for Round 4 of the Regional Partnership Grants to Increase the Well-being and Permanency Outcomes for Children Affected by Substance Abuse in American Indian Communities and was awarded this grant. The purpose of this project is to scale up and evaluate the Strengthening Families Program (Birth-to-3, 3-5, and 6-11 age versions) among Native American families of children, in out-of-home placement, removed for reasons associated with caregiver substance use, and who are working toward reunification to achieve the goals of safety, permanency and well-being.

Children under the age of one are the most vulnerable population. Providing families with services and supports early may help prevent future maltreatment. Beginning SFY 2020, Kansas will refer any child

under the age of one who is identified in a maltreatment or family in need of assessment report for a referral to a Parent Skill Building program. Parent Skill Building programs include but are not limited to Infant-Toddler Services or Home Visitor programs. The Child Protection Services Specialist (CPS) will inform the parent of the Parent Skill Building program and make the referral to the program of the parent's choice. The referral shall be made regardless if child under age of one is an alleged victim of abuse/neglect or not. Additionally, in SFY 2020, if a family with a child under the age of one is involved identified in a maltreatment or family in need of assessment the CPS Specialist shall assess the infant's sleep environment using guidance from Safe Sleep Kansas (<http://www.safesleepkansas.org/>) and Appendix 2C located in Kansas' policy and procedural manual. The CPS specialist shall provide information and resources to help support a safe sleep environment for the infant, as needed.

Kansas children under the age of 5 are not placed in congregate care or Psychiatric Residential Treatment Facilities. For children in foster care, the CWCMPs provide support for appropriate day care. In SFY 2020-2024, PPS will be working with CWCMPs to develop procedures to reduce the length of time for children under the age of 5 in foster care without a permanent family.

## O. Services for Children Adopted from Other Countries

Families who adopt children from other countries may access the Kansas Post Adoption Resource Center (K-PARC) for services and supports. K-PARC serves families by offering parent, youth, and child education, 2) peer and community support and activities, and 3) resource development and referrals. For additional information about K-PARC, see Section H.

In Kansas, if an adoption of a child from another country disrupts and the adoption has not been finalized, the Kansas Department for Children and Families (DCF) contacts the original adoption agency to assume responsibility for the child. If there is no agency involvement, or the child is not here for adoption, the consulate for the child's country is contacted and DCF coordinates with them to plan for the child accordingly. In the interim, DCF provides the same care and services for this child as it would for any other children in DCF custody. If a finalized adoption dissolves, the child is placed in DCF custody, enters foster or relative/kinship care, the child will also receive the same care and services as other children in DCF custody. These children receive services to either reintegrate with their adoptive families or help them achieve permanency with a different family. The statewide Family and Child Tracking System (FACTS) includes information about whether a child in State custody has had previous DCF involvement, a previous adoption, and whether the parents have relinquished their parental rights or if the court has terminated their rights.

During the last year, 2019, DCF has had four children in custody who were previously adopted internationally. Three of the children, one with KVC and two with SFM are currently in foster care with a case plan goal of adoption. The fourth child has a case plan goal of Another Planned Living Arrangement (APPLA) and is being served by SFM.

## VI. Consultation and Coordination Between States and Tribes

There are four federally recognized tribes headquartered in Kansas. They are: Iowa Tribe of Kansas & Nebraska; Kickapoo Tribe in Kansas; Prairie Band Potawatomi Nation (PBPN) and Sac and Fox of Missouri in Kansas and Nebraska.

The Department for Children and Families (DCF), in collaboration with the tribes, convene quarterly statewide meetings. The meetings are held in July, October, January and April. The statewide meeting includes representatives from the tribes, Child Welfare Case Management Providers (CWCMP's), Office of Judicial Administration (OJA), DCF Foster Care and Residential Facility Licensing (DCF Licensing), Administration of Children and Families (ACF), Office of the Governor's Native American Affairs Tribal Liaison/Interim Executive Director and DCF Prevention and Protection Services (PPS). Meetings were created and implemented during CFSP 2015-2019 and have proven to be helpful to all participants. Discussion topics have included technical assistance for the tribes, grants, ICWA policy, DCF policy updates, tribal updates, general DCF updates, invites to participate in DCF workgroups, training opportunities, APSR/CFSP updates and PIP updates.

Invitations for tribal representation and participation in the state's Citizen Review Panels, (Intake to Petition and Custody to Transition), the Permanency Advisory Committee (PAC), Foster Care in KanCare, Diligent Recruitment, KanCare High Needs Workgroup, Psychotropic Medication Workgroup, the Icebreakers Implementation Group and the Quarterly Supervisors Meetings. Invitations/information about said groups, as well as any other pertinent workgroups will continue to be given to each tribe at the quarterly meeting and/or at annual site visits throughout SFY 2020 to 2024.

Each year DCF conducts individual site visits with each tribe. The purpose of site visits is to further facilitate on-going tribal and state communication and collaboration related to tribal child welfare programs and to offer technical assistance. The site visit includes meeting new tribal staff, reviewing the Memorandum of Understanding (MOU) with DCF, answering questions and exchanging information with each other. The upcoming grant or grant renewal amendments, including the submission of Budget and Itemization Reports, written justification of the report's line items modifications and budget revisions, along with the submitted Status and Quarterly Program Report are discussed. Information related to all program areas are discussed. The PPS regional tribal liaison participates in site visits as requested and availability allows.

The site visits provide the opportunity to share information with each other regarding any changes and updates in the child welfare systems. Tribal social services concerns are addressed, and needed follow-up provided. The tribes may ask program questions any time during the year. PPS remains in regular contact with the tribes through emails, telephone calls, requested meetings by the tribes in addition to the statewide meetings and annual site visit to each tribe.

All tribes are provided copies of the Tribal Child and Family Services Plan (CFSP)/Annual Progress and Services Report (APSR) for the appropriate Federal Fiscal Years. A copy of the Tribe's CFSP and APSR is requested at each site visit. Reminders are emailed later in the fiscal year, if not received.

Once a child who is subject of a report of alleged abuse and/or neglect is identified as an Indian child, the CWCMP is required to inform the appropriate tribe and invite the tribe to the initial team meeting, all case planning meetings and keep the tribe apprised of the court hearing(s) and progress on the case. If the tribe is not known the worker will discuss with legal the issue of sending notice to Bureau of Indian Affairs.

The Kansas Protection Report Center (KPRC) sends intakes to the tribes that are not assigned for further assessment when there is "reason to know" a child may be an Indian child.



## A. Services Provided by the Tribes through the Child Welfare Grants from the State

The comprehensive Social Service Grants with all four tribes for Child Protection Services, Family Preservation and Foster Care Services are funded through State General Funds (SGF). Independent Living (IL) services are funded through John H. Chafee Program for Successful Transition to Adulthood (formerly known as the Chafee Foster Care Independence Act). Regular contact with tribal staff is conducted through scheduled meetings with PPS staff for coordination of child welfare services. Each tribe submits a quarterly status and program report which provides data concerning the number of tribal families and children served and specifying the provided services under each program. Each program report is reviewed by the PPS program manager in PPS Administration. The regional tribal liaison is available for consultation regarding case specific child protective services and foster care cases. Provision of information and technical assistance (TA) is available to tribes wishing to pursue Title IV-E funding. Such information and TA can include: Title IV-E requirements, data collection, reporting, and general process information.

## B. Child Protection Services

The Department has entered into Memorandums of Understanding (MOU) with Native American Family Services (for the Iowa Tribe in Kansas & Nebraska), PBPN and the Kickapoo Tribe in Kansas Social Services regarding provision of protective and/or family services to Native Americans of the tribes located in Kansas.

At the time of intake, the KPRC requests ethnic/tribal information for the children and family from the reporter and then documents the information gathered on the DCF PPS Face Sheet. The state agency does not have the authority to assign reports made to the KPRC regarding a family living on a Native American Reservation. The KPRC follows procedures, as outlined in PPS policies and as established in the current MOU.

Grants are provided by DCF to each Kansas tribe to assist in the cost of conducting investigations of reports received from the community regarding the alleged abuse or neglect of children. Upon completion of the investigation, the tribal worker will file, if necessary, petitions to the court, refer the family for services, or close the case.

The Native American Indian Tribal agencies may send notice(s) of substantiated findings of abuse and neglect in connection with the tribe's investigation/s to DCF. When the substantiated finding is received by DCF, the matter will not be assigned to PPS for further investigation/assessment. Substantiated findings made by Iowa tribe of Kansas and Nebraska, Kickapoo Tribe in Kansas, PBPN or Sac and Fox of Missouri in Kansas and Nebraska and forwarded to DCF will be accepted and the perpetrator's name will be entered in the Kansas Child Abuse/Neglect Central Registry. If a substantiated finding is received from tribes other than the four federally recognized tribes headquartered in Kansas, such finding will be reviewed by DCF to determine if the report contains sufficient information to reach a conclusion regarding a finding consistent with DCF policies and procedures and applicable state and federal law, using the clear and convincing standard of evidence on reports prior to July 1, 2016 and preponderance standard of evidence on reports as of July 1, 2016 and subsequent to such date. After review, the finding may result in the name of the perpetrator being entered in the Kansas Child Abuse/Neglect Central Registry.

If a report of abuse/neglect is assigned to PPS for investigation, and during the investigation/assessment information is obtained which indicates a child is or may be a member of an Indian tribe or eligible for tribal membership and is the biological child of a member of an Indian tribe, the available supporting information is documented in the case record. It is presumed a child is an Indian child if the child or any other person informs PPS that the child is Indian or there is “reason to know” the child is an Indian child. When PPS is conducting, an investigation involving an Indian family not residing on a reservation, the family shall be informed they may request a tribal representative. Assessment of the family should consider the prevailing social and cultural conditions and way of life of the Indian community. Determination of the child's heritage and eligibility is made at the earliest possible time it appears likely the child will come into the custody of DCF, or whenever a child has been placed in DCF custody by a court. DCF staff asks whether the child or parent is enrolled in a Native American Tribe. The tribe shall be notified by DCF as soon as there is “reason to know” the child may be an Indian child. The state court notifies the parent, Indian custodian and the Indian child's tribe of any pending Child in Need of Care proceeding, information about the proceeding and of their right to intervene, when the court knows or has reason to know that an Indian child is involved.

The DCF worker provides to the district or county attorney, when known, the following information:

- A. Full name and birth date of the child or children involved;
- B. The maiden names of all females (if applicable);
- C. Tribal affiliation; and
- D. The identity of a qualified expert witness who can testify that continued custody with the Indian custodian is likely to result in serious emotional or physical damage to the child.

If the identity or location of the parent or Indian custodian and the tribe cannot be determined, a letter is sent to the Secretary of Interior requesting assistance.

The CWCMP's responsibility generally ends for children who reside in out-of-home placement when there is a transfer of the child's case to tribal court of a federally recognized tribe. The CWCMP shall promptly notify regional PPS staff of the change in jurisdiction and venue to a tribe by sending PPS the Reintegration/Foster Care/Adoption (RE/FC/AD) Acknowledgement of Referral/Notification of Move/Placement Change Acknowledgement form indicating case closure due to change of jurisdiction and venue of court case. Staff from PPS shall forward the information to the tribe within 5 working days of the receipt of information from the receiving court documenting the acceptance of the change of jurisdiction and venue of the child's case. The tribe should promptly acknowledge the receipt of the information by e-mail.

A transfer of the child's case is not considered as fully transferred to the tribe until the case is accepted by the tribal court. The CWCMP will continue to provide services until the transfer is completed. Once fully transferred, the regional PPS office shall transfer all files and service responsibility to the tribe. Each tribe has a Social Service Department that addresses the full range of child welfare issues occurring on the Reservation and with tribal members living near the Reservation. If the child in need of care case, for a child living on or near the Reservation is transferred to the Tribal Court, the Tribal Court Judge presides over all child welfare matters related to the case.

### C. Family Preservation Services

Tribes will provide prevention services to families at risk of child removal with the goal of maintaining the family unit and preserving tribal connections. A family support worker may also be utilized in this program. The services in this program range from intensive direct services to referrals to community resources. The primary goal of this program is to assist families and to help them to learn how to access resources and informal support systems independently of government involvement. Services provided to families may vary from tribe to tribe. The Department for Children and Families collaborates with the tribes when requested or as needed.

### D. Foster Care Services

Tribes provide services to assist youth in need of out-of-home placement. Each tribe is responsible for the staff hired to provide the services, which may include a tribal support worker. The services include case management, placement of children in approved relative homes or licensed foster homes by the tribe, in conformance with placement practices of the Indian Child Welfare Act (ICWA), case planning, reporting to the court on the progress of the case, assisting with child care costs, and the direct provision of or referral to services to the family and child to assist in reintegration. This service may also be used to provide any out-of-home needs of children who are unable to be returned to their family of origin, such as adoption, custodianship, or another planned permanent living arrangement. Services provided to families may vary from tribe to tribe.

### E. Independent Living Services

Tribes assist youth who are ages 14-20 and in custody pursuant to an order of the tribal court. The services provided in this program include any service to promote the youth's independence, including subsidy, adult education classes, independent living classes, and assistance with obtaining job skills. Life Skills Services provided by tribal workers are identical to those provided by the CWCMP's. Regular contact with tribal staff is conducted through scheduled meetings made directly by PPS staff to tribal staff for coordination of child welfare services. All youth currently in out of home care or custody are informed of program eligibility and resources by contractor, Kansas Department of Corrections– Juvenile Services (KDOC-JS), tribal and PPS staff at case planning conferences. Tribal youth are invited to participate in the Regional Youth Advisory Council (RYAC) and Kansas Youth Advisory Council (KYAC), PPS Computer Camps and the annual KYAC Youth Conference. There is one youth from the Prairie Band Potawatomi Tribe who currently participates on the Kansas Youth Advisory Council. There is one youth from the Prairie Band Potawatomi Tribe who regularly participates in Regional Youth Advisory Council meetings. No other tribes are represented on the councils, at this time.

### F. Memoranda of Understanding

During the Tribal Social Services site visits during CFSP 2015-2019, PPS discussed with each tribe any needed language changes to their respective MOU's. In the spring of FY 2019 changes were made to PBPN, Kickapoo, Sac and Fox and NAFS MOU's. The draft MOU's were sent to each tribe on March 19, 2019. It was asked that each tribe return the draft MOU executed or with suggested revisions. Kickapoo returned their executed MOU on April 8, 2019. PBPN returned their draft MOU with comments on April 11, 2019. A reminder email was sent to NAFS on April 16, 2019 to return their MOU with edits or

executed. Discussions continue between DCF and Sac and Fox regarding MOU revisions and specific language changes.

DCF created a draft MOU. Sac and Fox submitted a newly created MOU. Language from both documents has been combined and DCF and the tribe will continue progress of review to come to an agreement which the parties can execute. When the new MOU is completed, it will proceed through the DCF concurrence process and be submitted for the Secretary's signature. The goal is to enter into an MOU that is beneficial to the tribal families, youth and children served that will be approved by the DCF Secretary and Tribal Council, no later than July 1, 2019. An MOU (not the identical document) has been reviewed each year from 2011 to 2016 but the tribe has not signed which must be a voluntary execution of contract.

The MOUs for all federally recognized tribes in Kansas will continue to be reviewed annually with each tribe. Each individual tribal MOU will be emailed to the tribal chairperson(s) and Tribal Social Service Directors for review, comments and questions. The tribe should submit any comments, suggestions, and questions to be reviewed and discussed at the on-site visit. If language changes are warranted and agreed upon by DCF and the tribe, a draft of the revised MOU will be sent for tribal review. After DCF and tribal discussions, a draft MOU will be sent to each tribe. If there are no suggested revisions and the tribe executes the MOU, it will be sent through the DCF concurrence routing process for DCF signature and forwarded to each individual tribe for and subsequently forwarded to the federal partners with each annual update.

The MOU affirms the state's commitment to prevent unnecessary removal of Indian children from their parents/caregivers, and to secure placement with an Indian relative or an Indian foster home whenever possible, if placement becomes necessary.

The MOU outlines with each tribe the understanding that the respective tribal social service agency has been designated by the tribal government to provide child welfare services to the children and families of the tribe on tribal lands and/or under the jurisdiction of the tribal court. In addition, each MOU indicates DCF is the single state agency designated for the purpose of receiving and distributing federal funds for the protection of children, prevention of child abuse and neglect, provision of safe and stable homes for children in foster care throughout their childhood and compliance with all applicable state and federal child welfare laws.

The MOUs outline with each tribe the policy of PPS to involve Indian tribes and organizations at the earliest possible point in social service intervention with Indian families, whether the Indian children are from the tribes based in Kansas or from tribes based outside Kansas. The purpose of such involvement is to:

- Facilitate communication with the Indian family,
- Strive to prevent unnecessary removal of Indian children from their parents/caregivers.
- Secure placement with an Indian relative or an Indian foster home whenever possible.
- Assist with needed information to meet the notification requirements of the Indian Child Welfare Act.
- Assist in securing reliable identification of Indian children, and, if not possible, assist in the placement of Indian Children in appropriate homes.
- Strive to ensure compliance with ICWA and related regulations and guidelines.

Each MOU outlines the understanding between DCF and the tribal government in relation to the identification of Indian children and tribal affiliation, assessments of a child alleged or adjudicated to be a

child in need of care, services to prevent out of home placements, the decision to request filing a child in need of care petition, transfer of jurisdiction of child in need of care case, adoption and funding for Indian children in foster care and licensing requirements for foster homes.

A letter from the Secretary of DCF will be sent to the tribes confirming commitment to effective collaboration and consultation related to social services with the four federally recognized tribes in Kansas. PPS plans to ensure a government to government letter is drafted and sent to each tribe from the DCF Secretary on an annual basis. The purpose of the letter is to recognize each tribe as a sovereign nation and to delineate the role of PPS staff as delegated by the Secretary. The child will be considered to be an Indian child by DCF if any party to the case, any person, Indian tribe, Indian organization or public or private agency informs the worker that the child is a member of an Indian tribe or is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe. Upon receipt of a referral for Kansas Code for Care of Children (CINC) petition or receipt of a copy of a petition whichever occurs first, pursuant to such code, regarding a child whom a PPS Child Protection Specialist knows or has “reason to know” that a child is an Indian child, the Child Protection Specialist will immediately contact tribal social services of the respective tribe regarding the child.

The PPS Face Sheet requests ethnic/tribal information for the child(ren) at the time of intake. The PPS Medical and Genetic form requests information on the child and his/her parents and must be completed for each child at the time they enter foster care. Information is collected in the Kansas Intake Protection System (KIPS) and Family and Child Tracking System (FACTS).

The Kansas Judicial Council maintains certain specific court forms related to cases involving Indian children to facilitate compliance with ICWA and applicable regulations and guidelines. A Judicial Council sub-committee commenced work in the spring of 2018 to update all Judicial Council ICWA forms. The workgroup included DCF and tribal representation. The revised forms, with the exception of the ICWA permanency hearing forms, were approved by the Kansas Judicial Council and posted on their website on December 27, 2018. The plan is for the ICWA permanency hearings to received final Judicial Council approval and be additionally posted on their website by the end of July 2019. The forms will continue to inform, guide and assist in consistent statewide practice in each and every child in need of care case to which ICWA applies.

If the Tribal court decides not to take jurisdiction of the child’s case, Indian children in the custody of the Secretary of DCF receive appropriate services which promote safety, permanency and wellbeing. Services are designed to help children, where safe and appropriate, return to families from which they have been removed or be placed in a permanent placement.

## G. Other Collaboration, Coordination and Technical Assistance

Kansas Serves Native American Families (KSNAF) seeks to improve the wellbeing, safety, and permanency of Native American children affected by parent and community substance abuse through implementing and assessing an evidence-based parenting skills training, Strengthening Families Program (SFP), with cultural adaptations. KSNAF recruits, trains and supports individuals who are Native American to offer SFP within tribal communities and other sites in Kansas. The goal of KSNAF SFP is to positively impact family bonding, communication, and parental supervision. In addition, KSNAF facilitates cross-systems collaboration and infrastructure development to build culturally sensitive and trauma-informed capacity across agencies who provide services to Native American families affected by substance abuse and involved or at-risk of involvement with child welfare systems in Kansas.

The KSNAF target population is families with Native American children ages 0-18 who are in or at risk of out-of-home placement, affected by parental/community substance use and have a case plan goal of reunification or guardianship. KSNAF also has a strong prevention component and accepts referrals from other family-serving systems such as behavioral health centers, tribal health services and other community agencies (e.g., domestic violence, early childhood). KSNAF serves between 8-12 families per SFP group, offering five groups per year for a total of 180-270 families served over the course of the project.

In February 2019, SFP groups began in Lawrence and at Prairie Band Potawatomi Nation (PBPB) in Mayetta, KS. These pilot groups for families with children ages 6-11 include 4 families in Lawrence and 5 families at PBPB. The KSNAF team is currently working with the Iowa Tribe of Kansas and Nebraska (ITKN) and the Sac and Fox Nation of Missouri in Kansas and Nebraska (SFN) on a June 2019 SFP start date. These two smaller tribes are planning to implement SFP jointly by combining their resources and families for the groups. In addition, PBPB is planning a fall SFP group that will serve families with children of all ages and there will be a fall group planned for an urban site, likely Topeka or Lawrence. KSNAF is a partnership between the University of Kansas School of Social Welfare, PBPB, ITKN, SFN, Haskell Indian Nations University, Kansas Department for Children and Families, Kansas Department for Aging and Disability Services, and KVC. Funding for this project is provided through a Regional Partnership Grant (Round 4) from the Children's Bureau, ACF, U.S. Department of Health and Human Services. This project is part of a national cross-site study conducted by ACF, Children and Families Futures, and Mathematica.

The Program Manager for Group Homes and Tribes attended the Regional Partnership Grants Round 3 and 4 Annual Meeting on June 28-29, 2018. A workgroup was created in 2016 called PPS Policy Tribal Advisory Work Group. The purpose of this work group is to assist PPS in reviewing and revising policies for any needed revisions due to new Federal ICWA regulations and guidelines. The work group consisted of at least one representative from each federally recognized tribe in Kansas, the PPS Program Manager for Group Homes and Tribes, the PPS Permanency Administrator, Assistant General Counsel with PPS, a representative from KVC Behavioral Health Services (KVC) and St. Francis Ministries (SFM). Sac and Fox and PBPB were very active in participating in the ICWA workgroup. They were present for the in-person meetings/teleconferences held and made suggestions for policy changes. The workgroup was suspended in 2017 to await finalization of updated Kansas Judicial Council forms related to ICWA cases. As Kansas Judicial Council ICWA forms have been completed and all should be posted on the Judicial Council website by July 1, 2019. Additional input from the tribes and other members of the PPS Policy Tribal Advisory Work Group will be requested and considered to move forward with completion of any needed revisions of PPS policies.

PPS created and granted access to a Tribal section on DCF SharePoint for all federally recognized tribes headquartered in Kansas. The Tribal section will include meeting agendas from the quarterly meetings and meeting agendas from the technical assistance phone calls. Other information may be shared as the Tribal section is developed. This is an effort to keep the tribes included and informed.

Currently, workers are required to complete the ICWA training included in PPS Academy, prior to assuming a caseload. The course includes information on: reason to know the child is an Indian Child, the ICWA Act (active versus reasonable efforts), Top 10 ICWA myths facts sheet and an ICWA case scenario is used. A video presentation is required prior to class, on the background and purpose of ICWA by Justice William Thorne, Associate Presiding Judge of the Utah Court of Appeals and former tribal

court judge in Utah, Idaho, Montana, New Mexico, Colorado, Arizona, Wisconsin, South Dakota, Nebraska, and Michigan.

Module 1 of Caseworker Core reviews the Indian Child Welfare Act. There is a handout on Contemporary American Law Regarding Child Protection, which reviews major Federal legislation concerned with child protection, child welfare and adoption (1970 to present). It covers CAPTA, ICWA, Adoption Assistance, MEPA and Adoption and Safe Families Act (ASFA). Additional handouts cover NICWA frequently asked questions, a NICWA glossary and on Setting the Record Straight about ICWA. Participants in Caseworker Core include DCF, KVC, and St. Francis Community Service staff. The Program Manager for Group Homes and Tribes worked with the Organizational and Strategic Development Manager to grant access to Pathlore, DCF's training site, to the tribes. Access, for the tribes, occurred in FY 2019.

## VII. Chafee Foster Care Program for Successful Transition to Adulthood

### A. Agency Administering Chafee

Prevention and Protection Services (PPS) is a division of the Department for Children and Families (DCF) and is responsible for administering the state's child welfare programs, including the John H. Chafee Foster Care Program for Successful Transition to Adulthood, according to federal statutes and requirements. The Kansas Chafee Program for Successful Transition to Adulthood (KCPSTA) seeks to provide youth transitioning from custody to independence with support and guidance while successfully navigating the path to self-sufficiency. Child Welfare Case Management Providers (CWCMPs) serve foster youth ages 14 and older and the DCF Independent Living (IL) Program serves youth who have exited foster care as they transition to adulthood.

### B. Description of Program Design and Delivery

Services of the KCPSTA are available to youth beginning at age 14. All youth in out-of-home placement must have a case plan and receive services assisting them in the development of life skills. The KCPSTA ensures that life skills are provided to all youth in out-of-home placement. The need for both formal and informal skills and training opportunities related to developing life skills is assessed beginning at age 14 using the Casey Life Skills Assessment (CLSA) for all youth in out-of-home care, regardless of the youth's permanency goal. Upon completion of the CLSA, youth, their case worker, and other supportive adults in the youth's life participate in identifying tasks for the development of their learning, which is included in the overall case plan. CWCMPs, foster parents, and/or placement staff are responsible for teaching or arranging information to be provided to youth regarding all aspects of life skills.

Effective October 1, 2018, the KCPSTA applied the changes to the John H. Chafee Foster Care Program for Successful Transition to Adulthood as prescribed by the Family First Prevention Services Act. DCF IL Administration staff and the Independent Living Policy Workgroup will continue to review and update eligibility guidelines and program services to ensure consistency with the amended Chafee and ETV programs, including the use of Chafee and ETV funding to serve eligible youth ages 14 to 26.

All youth age 14 and older in out-of-home placement participate in transition planning, regardless of case plan goal. Transition planning occurs prior to each case plan every 170 days until the youth is released

from custody. The DCF IL Coordinator or designee is available to assist in case plans and attends the final case plan. Transition planning helps build a relationship between PPS and the youth while preparing for the transition from foster care services to self-sufficiency and ensures no gaps in services occur between the time a youth leaves the care of the CWCMP and receives services from the DCF IL Program. A transition plan, titled My Plan for Successful Adulthood, is developed with youth addressing the areas they will receive assistance:

- Obtaining identifying documents, such as birth certificate, Social Security card, education and medical records, Tribal membership documentation, citizenship/immigration documents, voter registration, state photo ID or driver's license, selective service registration, and letter verifying that the youth experienced foster care custody;
- Education, including plans for secondary and post-secondary education completion, including ACT/SAT preparation, tutoring, Free Application for Federal Student Aid (FAFSA) and financial aid, completing admissions applications, placement testing, education credit recovery program, Pre-Employment Transition Services (Pre-ETS) and/or Vocational Rehabilitation referrals, Individualized Education Program (IEP), 504 plan, and award of high school diploma upon meeting state minimum graduation requirements;
- Employment/personal finances, including assistance in preparing a resume/cover letter, completing job applications, interviewing, establishing a checking account, learning how to check credit reports and address credit issues, filing income taxes, accessing workforce programs, applying for Social Security Income (SSI)/Social Security Disability Insurance (SSDI), and referral to Vocational Rehabilitation services;
- Health, including continuing Medicaid coverage, providers and locations of where the youth will receive medical care, mental health and other related services, learning how to schedule appointments and fill prescriptions, learning about medications and the importance of continuing to take medications, and information on medical power of attorney and living will;
- Transportation, including current available and needed transportation options, obtaining a driver's license, obtaining a bus pass, and owning and maintaining a vehicle;
- Housing, including current living situation, plans for where the youth will live when released from custody, assistance in locating housing and completing rental applications, understanding and signing rental contracts, developing a budget for housing costs, referral to income-based housing, planning for roommates, and contacting utilities and paying deposits;
- Connections for Success, including identifying adults or other resources the youth can reach out to as a connection for success in each of the areas of their transition plan, and obtaining a mentor; and
- Assessing the youth's interest in participating in a Regional Youth Advisory Council (RYAC) and/or the Kansas Youth Advisory Council (KYAC).

PPS 3059 My Plan for Successful Adulthood (<http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>) also provides youth an opportunity to share information about themselves, including their interests and hobbies; cultural preferences, identities and activities; strengths, abilities, and talents; current needs, concerns, and ideas for how those concerns could be alleviated; and the youth's goals and dreams for the future. The development of the transition plan is youth-led, with input from the youth's case worker and other supportive adults in the youth's life.



Youth who leave custody or are emancipated at age 18 participate in an exit interview completed at the last case plan, not more than 90 days prior to the release of custody or emancipation. The exit interview is used as a method to verify that the following information has been provided to youth:

- The process to request services, including the DCF IL Program, after their release from foster care custody, along with appropriate referral forms;
- The updated record of dental, eye care, immunizations, medical services, genetic information, and health and mental health providers;
- Essential identity and other documents noted above;
- Information and application for the Aged Out Medical Card Program;
- Information that provides the youth with the opportunity to execute a health care power of attorney, health care proxy, or other similar document recognized by Kansas law;
- Education records;
- Copies of any existing credit reports and verification of corrective action to dispute inaccuracies or identity theft;
- How to continue to obtain credit reports and address inaccuracies or identity theft;
- Custody verification letter; and
- Information about the National Youth in Transition Database (NYTD) and the importance of providing feedback through the NYTD surveys.

CWCMPs provide youth with information about resources for housing, employment, health care, education, etc. upon leaving the custody of the Secretary. Resources include information on services provided through the PPS IL Program. All eligible youth are assisted with completing the application for the Aged Out Medical Card. Youth are provided with the PPS Administration number and website, which youth can contact for IL services anytime until their 21<sup>st</sup> birthday, or until their 26<sup>th</sup> birthday for the ETV Program, or for help in finding other resources if they are not eligible to participate in the IL Program.

The IL Program serves young adults who have been released from the State's custody from age 18 until age 21, or until age 26 if participating in the ETV Program. Independent Living is a voluntary program and young adults may receive services anywhere in the State of Kansas. Young people ages 18 to 26 complete the Kansas Independent Living Self-Sufficiency Matrix and develop a Self-Sufficiency Services Case Plan with the regional IL Coordinator. This plan is driven by the young person and identifies his/her goals and the steps to achieve those goals. Young adults involved in the IL Program are eligible to receive assistance with the following: room/board, medical, completion of high school/GED, post-secondary education or training, mentors, career planning, transportation, assistance with checking and correcting credit reports, life skills, supports for pregnancy and/or parenting, and other services as identified by the youth.

Youth without identified Connections for Success who participate in the PPS IL Program are encouraged by IL staff to search within their existing networks to identify potential mentors and positive connections and are provided with guidance in forming and maintaining healthy interpersonal relationships. IL staff also work to connect youth to mentors through local mentoring programs, such as Youthrive, and academic success centers provided by post-secondary education institutions. IL staff speak with youth about their former foster families, birth families, and other existing relationships and encourage them to reconnect when appropriate. Youthrive is a mentoring and financial literacy program available to youth ages 16 to 21 in Johnson, Wyandotte, Sedgwick, Reno and Douglas Counties. Youthrive will continue to

expand to additional counties with identified need across the state. TANF funds are being used to facilitate the expansion.

The Kansas Foster Child Educational Assistance Act, which began July 2006, requires tuition and fees to be waived by Kansas Board of Regents educational institutions for DCF youth who meet the eligibility criteria, up to the semester the youth turns 23. Youth may be eligible to receive additional funds through the ETV Program to help offset other costs of post-secondary education.

For young adults who leave the State's custody at age 18, Kansas offers the Chafee Medicaid option which extends Medicaid coverage to young people until the month of their 26<sup>th</sup> birthday. The young adult does not have to participate in any other services to be eligible for the Aged Out Medical Card. All youth who participate in the DCF IL Program are required to develop a Self-Sufficiency Plan; maintain, at a minimum, monthly contact with their IL Coordinator; and participate in case plan reviews held at least every six months.

To strengthen awareness and understanding of the IL Program, the State continues to inform community agencies, schools, faith-based organizations, juvenile justice programs, and businesses of the services and resources available to youth formerly in foster care. Presentations have been provided at conferences and statewide stakeholder meetings. Materials such as brochures, posters, banners, and handouts continue to be developed and are distributed to inform the public about the DCF IL Program. During SFY 2020 to 2024, DCF IL staff will work to develop mobile-friendly program materials, and program materials in Spanish.

IL Administration and CWCMP staff have developed multiple communication tools, including: desk guides, program brochures, quarterly newsletters, postcard mailers, PowerPoint presentations, resource lists for youth in care, and transition packets for youth exiting care. These tools are reviewed and updated as necessary.

Training on KCPSTA program components, including services available for youth ages 14 to 26 and best practices in service delivery, will continue to be provided to DCF staff, CWCMP staff, Tribal staff, Kansas Department of Corrections-Juvenile Services (KDOC-JS) staff, youth, youth's families, foster parents, group homes and other placements, community agencies and organizations, secondary and post-secondary educational institutions, judges, guardians ad litem, CASA volunteers, and other stakeholders during SFY 2020 to SFY 2024. The IL Administration team continues to focus on collaboration within the program and with multiple community partners through involvement of community groups and organizations in exploring initiatives to support youth currently and formerly in care. Each of the DCF regions is currently implementing a consistent organizational service delivery model that includes PPS IL services. This organizational structured model allocates a regional supervisory position designated as the Independent Living/Adoption Supervisor, with three to four assigned regional IL Coordinators. DCF IL Administration staff includes the IL Program Manager, Transition Planning and Supports Coordinator, and NYTD Coordinator.

The Kansas Youth Advisory Council (KYAC) and Regional Youth Advisory Councils (RYACs) are designed to empower youth by having an organized structure for them to share their experiences and provide recommendations concerning the child welfare system in Kansas and on a national level. Chafee-eligible youth ages 14 to 20 are offered the opportunity and encouraged to participate in RYAC and

KYAC events. The councils are supported by federal Chafee funds through the CWCMPs and contractor staff.

DCF IL Administration and regional staff work collaborate with CWCMP and contractor staff to oversee and facilitate the activities of the youth councils. Kansas' youth councils are organized by two levels of participation. Each DCF region hosts a RYAC, and each RYAC selects up to five peers from their RYAC to serve on the KYAC. In addition, up to four youth representing the Tribes may serve in the East Region. Twenty-four total youth may serve on the KYAC. A Strategic Planning Conference (SPC) is facilitated by KYAC each year. At the SPC, KYAC members identify relevant issues concerning older youth in foster care and youth who have aged out of foster care and create a work plan to address these issues. The work plan is then presented to the PPS Director and the Secretary of DCF or designee. The current five-year work plan includes KYAC's goals and tasks from 2018 to 2022. DCF determines how the agency can support KYAC in addressing the work plan objectives throughout the year. This work plan is an integral part of the State's KCPSTA, as it is a basis for coordinating work on specific projects. Past work plan objectives have resulted in the passing of legislation, court improvement initiatives, and changes in policy and practice.

The DCF IL Program participates in bimonthly meetings with KYAC to gather youth's feedback and recommendations regarding program projects and improvement efforts, including the revision of the PPS 3059 My Plan for Successful Adulthood document and the development of the Chafee state plan. The KCPSTA promotes positive youth development on individual, regional, and statewide levels. Through the development of the PPS 3059 My Plan for Successful Adulthood for older foster youth and the Self-Sufficiency Plan for youth participating in the DCF IL Program, youth are encouraged to utilize their strengths, assess their needs, and engage with healthy supports and resources within their families and communities. Youth are invited to participate in leadership and advocacy training and opportunities through RYACs, KYAC, and attendance at statewide and national child welfare conferences. Foster care alumni serve on the State's Citizen Review Panels. The KCPSTA supports youth involvement in internships with organizations such as FosterClub, the National Foster Youth Institute, and the Congressional Coalition on Adoption Institute. DCF IL staff have invited foster care alumni to attend the Children's Bureau's Annual Chafee Meeting and the Daniel Memorial Independent Living Conference. During SFY 2020 to 2024, the KCPSTA will focus on increasing youth participation in child welfare workgroups and meetings to ensure the youth voice is represented in the development of agency policies, procedures, and initiatives. In addition, the KCPSTA will continue to involve cultural advisors in program activities to ensure that the KCPSTA develops plans and implements services that are inclusive of the cultures, values, and viewpoints of the youth and communities served.

Data concerning KCPSTA services and the State's IL Program is provided to stakeholders, including the Transition Taskforce with the KS Department of Education, Kansas Department of Aging and Disability Services (KDADS), Custody to Transition Citizen Review Panel, Children's Alliance, legislative committees, Vocational Rehabilitation/Pre-Employment Transition Services, and community forums. Data is also provided to DCF, CWCMP, KDOC-JS, and Tribal staff and management. The data is sourced from the FACTS system and the Self-Sufficiency Information System (SSIS) that collects payments and benefits to youth in the IL Program. Reports are published monthly and annually that include demographic, service and program participation information. The data is available to DCF and CWCMP staff through PPS' SharePoint site. The reports are reviewed periodically with youth through the Kansas Youth Advisory Council. The reports serve to inform KYAC's development of their yearly work plan and annual youth conference agenda.

The National Youth in Transition Database (NYTD) Coordinator facilitates the collection of surveys from identified youth at ages 17, 19, and 21. The NYTD Coordinator collaborates with the DCF IL Program, CWCMPs, Tribes, and KDOC-JS to locate and connect with youth via phone, email, social media, and mail. In conjunction with the DCF IL Administration team, the NYTD Coordinator continues to seek innovative ways to contact youth for the purpose of gathering surveys and referring youth to services and resources, as requested by the youth. DCF has developed an automated system for collecting National Youth in Transition Database survey results that will continue to be used. Data from that system is the source for the files that are reported to the Administration for Children and Families to meet NYTD requirements and is thus checked for quality compliance. Training will continue to be provided to staff who assist with collecting surveys to ensure fidelity to the survey model. Data for the served population will continue to be collected through reporting of IL services by the Tribes, DCF and CWCMP staff who serve members of the served population. This data is entered into the FACTS system. Since the beginning of the NYTD initiative, DCF has met or surpassed the required participation rates and data compliance requirements. The NYTD Data Snapshots produced by the Children's Bureau are shared with DCF, CWCMP, KDOC-JS, and Tribal staff, and with other stakeholders including youth, courts, and community partners. During SFY 2020 to 2024, the KCPSTA will focus on sharing NYTD data with a wider array of stakeholders, including families, foster parents, other placement providers, and the public.

### C. Serving Youth Across the State

Each DCF region is served by one or two IL Coordinators from the CWCMP and by three or four DCF IL Coordinators assigned to specific geographical areas within each region. Service to youth under Tribal custody is ensured through consultations with the Tribes, Tribal youth involvement in KCPSTA activities, and reporting of the NYTD served population. Youth in KDOC-JS custody are served through KDOC community supervision officers and residential providers who are informed of IL services from KDOC-JS. Outreach is conducted with KDOC-JS offices via PPS IL Administration and PPS regional IL staff. Youth in DCF, KDOC-JS, or Tribal custody may contact any DCF IL Supervisor or Coordinator to request services upon their release from custody.

DCF, CWCMPs, KDOC-JS, and the Tribes within each region collaborate to support youth in their transition to adulthood and self-sufficiency. Staff work to create and maintain a network of community partnerships that can provide an array of services and resources for youth served by the KCPSTA. These partnerships vary by region, but generally include the courts, secondary and post-secondary educational institutions, mentoring programs, community mental health organizations, housing authorities, workforce centers, disability support services, and other community agencies. Regional DCF, CWCMP, KDOC-JS, and Tribal staff work with staff from other regions on statewide initiatives and to ensure a seamless transition of services for youth who transfer from one region to another. During SFY 2020 to 2024, the DCF IL Program will focus on developing resources for youth living in rural areas of Kansas, including housing and mentoring opportunities.

All reports published by DCF that provide data about the State's KCPSTA are detailed by region. The SFY 2018 Independent Living/Self-Sufficiency Services Annual Report ([http://www.dcf.ks.gov/services/PPS/Documents/FY2018DataReports/IndependentLiving/SSIS\\_Annual%20Report%20SFY%202018.pdf](http://www.dcf.ks.gov/services/PPS/Documents/FY2018DataReports/IndependentLiving/SSIS_Annual%20Report%20SFY%202018.pdf)) provides data by region, age and gender about the number of youth served in each program: Basic Chafee, IL Subsidy, ETV, and the Kansas Foster Child Educational Assistance Act (Tuition Waiver). The report indicates the Wichita Region served the largest percentage of

young adults receiving Chafee funds and IL Subsidy in SFY 2018. The Kansas City Region served the largest percentage of young adults receiving ETV funds in SFY 2018.

The Independent Living Demographic Report is published each month and provides the monthly and year-to-date numbers of cases opened and closed and cases by gender, race and ethnicity, age, and highest grade level completed. See the 2018 Independent Living Demographic Report: <http://www.dcf.ks.gov/services/PPS/Documents/FY2018DataReports/IndependentLiving/ILMonthlyDemographicReport.pdf>. NYTD data is being organized by region for reporting services and outcomes and will be used to provide additional detail about specific services.

## D. Serving Youth of Various Ages and State of Achieving Independence

### **Youth Ages 14-15**

The KCPSTA provides life skills and transition services to all youth in out-of-home placement, starting at age 14, regardless of the youth's permanency goal. All youth in out-of-home placement must have a case plan, a transition plan, and receive services that assist in the development of life skills and transition services/self-sufficiency. The need for both formal and informal skills and training opportunities related to developing life skills and independent living skills are to be determined and provided to all youth age 14 and older. Youth participate and identify tasks in the development of a Learning Plan, upon completion of the Casey Life Skills Assessment (CLSA), which is included in the overall case plan. Formal transition planning begins at age 14 with a youth's development of PPS 3059 My Plan for Successful Adulthood, in partnership with their case worker and other supportive adults in the youth's life. Youth are encouraged to participate in age or developmentally-appropriate activities related to family, education, extracurricular activities, etc. The Kansas foster home licensing regulations address youth participation in the following activities: staying at a friend's house, participation in sports, senior pictures, attending prom, class trips, foster family vacations, obtaining a driver's license, completion of driver's education, participation in religious activities, appropriate activities of interest to the youth, etc. The CWCMP contracts also support youth participation in age or developmentally-appropriate activities. The PPS 3051 Permanency Plan for Child in Custody, Section 6: Child/Youth Well-Being Plan (<http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>), contains a summary of the child's wellbeing since the last case plan that includes authorizations for sleepovers, self-care, driving, or high-risk activities, when applicable, to encourage regular consideration for age-appropriate activities. The PPS 3052 Permanency Plan for Child in DCF Custody Administrative Requirements (<http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>) directs the CWCMP to list the age or developmentally-appropriate activities the child has had the opportunity to engage in. The State of Kansas will continue to support age or developmentally appropriate activities for youth. Youth age 14 and older are given the opportunity and are encouraged to participate in RYAC events and represent their peers as members of KYAC, at the recommendation of their case workers.

### **Youth Age 16 and Older in Foster Care**

Life skills and transition services continue to be provided to youth in foster care age 16 and older, with the annual Casey Life Skills Assessment and Learning Plan. Youth are informed of program eligibility and resources by providers, KDOC-JS, Tribal, and DCF staff at case planning conferences beginning at the age of 16. Youth are assisted with obtaining their high school diploma under Senate Bill 23, which requires school districts to award diplomas to youth in care who have met the State's minimum

graduation requirements. As the result of the collaboration between PPS and the Kansas Department of Revenue, all youth in foster care custody at age 16 who do not already have either a state ID or driver's license are provided with State-issued photo identification cards at no charge to the youth.

Youth are provided opportunities to visit educational institutions and training programs to help prepare them for decisions regarding their educational opportunities. Youth also receive assistance in completing school applications, the FASFA, other financial applications, and enrolling in educational or training programs.

PPS 3059 My Plan for Successful Adulthood includes prompts for case managers and youth to discuss engagement in age or developmentally-appropriate activities such as taking the ACT, going on a college campus tour, financial assistance covering admissions fees for education, living with friends as an adult, budgeting, volunteering within the community, starting a checking and/or savings account, joining the military, creating an email account, having a healthy relationship, completing driver's education, obtaining a mode of transportation, developing relationships with supportive adults, and participation in RYACs and/or KYAC.

All youth should be provided with opportunities to interact and develop relationships with dedicated adults in the community. CWCMPs assist youth in identifying one or more individuals who can serve as Connections for Success and help guide them into adulthood. Youth may be provided a mentor through local mentoring programs, including You thrive.

Youth also are assisted by CWCMP and DCF IL staff to identify a mentor if needed for financial guidance. The qualifications for Mentors include being age 25 or older; the ability to pass Child Abuse/Neglect Central Registry and KBI security clearance; the ability and willingness to work with adolescents and young adults; knowledge of budgeting and money management; knowledge of skills necessary to succeed in daily life; support of the goal of self-sufficiency; and the ability to model responsible behaviors.

Responsible older youth in care and young adults who have exited foster care custody may receive lock boxes for safe storage of their identifying documents and other documents of importance. Electronic records storage geared toward older youth will be a priority for the KCPSTA during SFY 2020. Prior to release of custody, youth are provided with information about how to contact the DCF IL Program for services after release of custody. Youth are informed that they may contact DCF at any time for services prior to their 21st birthday, or prior to their 26<sup>th</sup> birthday to participate in the ETV Program. Eligible youth are assisted with completing the application for the Aged Out Medical Program.

### **Former Foster Youth Ages 18 to 26**

After their release of custody, youth can decide in which region their DCF IL case will be served, based on their need for access to their IL Coordinator and services. The State of Kansas has established a variety of services for adults 18 to 20 years of age. All KCPSTA services available for youth 14 to 18 can be accessed by eligible former foster youth until their 21st birthday. Agency staff are expected to work with the young person to help him/her locate the resources necessary and provide encouragement to achieve individual goals, attain training, and reach outcomes.

Youth who are in out-of-home care served by the contractors are informed of their eligibility for IL Subsidy if they are released from custody at age 18. IL Subsidy is a time-limited financial plan between a

young person leaving foster care and the DCF IL Program. Eligible youth may receive up to \$350 per month. Subsidy rates decrease over time on a tiered system to encourage youth's progression toward financial independence. Adults who serve as Mentors for youth receiving Independent Living Subsidy may receive a stipend up to \$50 per month for their services.

Youth who are leaving foster care to live in their first apartment or other housing arrangement may need a one-time payment for start-up expenses, utility deposits, furniture, or household supplies. A cumulative payment of \$600 is allowed for this purpose. An additional cumulative payment of \$600 is allowed for rent or room and board.

Post-secondary educational supports are available to youth through the Educational and Training Voucher (ETV) Program and the Kansas Foster Child Educational Assistance Act, also known as the Tuition Waiver. Youth do not have to participate in the DCF IL Program to receive the Tuition Waiver. DCF also provides services and financial payments to support a youth's completion of high school or GED. Non-certified adult education or training that does not qualify through the ETV Program can be covered as needs are identified and requested.

Young adults ages 18 to 20 who are participating in DCF Independent Living services may be referred to Kansas Legal Services, under the DCF contract, for determination of SSI benefits.

Kansas implemented its Medical Card Extension Program in March 2004 for adults who turned 18 on or after July 2003, and/or were in a foster care placement on their 18th birthday. Beginning January 2014, Kansas extended medical coverage through its Aged Out Medical Program to youth up to age 26. Youth who were in the custody of DCF, KDOC-JS, or Tribal Authority are eligible. Youth do not have to participate in the DCF IL Program to receive the Aged Out Medical Card.

There are no statutory or administrative barriers that impede the State's ability to serve the range of youth who are eligible for the KCPSTA. Chafee services are available to all young people, regardless of marital status, citizenship, and to a large extent, income status.

## E. Collaboration with Other Private and Public Agencies

Staff from PPS DCF IL and the CWCMPs collaborate with non-profit community organizations, private businesses, and individuals to provide opportunities and resources for current and former foster youth to achieve independence. Events are held by community partners to provide youth with items and information needed to start a household. Business owners, housing resource organizations, educational institutions, and health providers participate in the annual youth conference. Efforts continue to secure support from private sources of funding for providing youth with the resources needed to secure housing, start college, find employment, transportation, or other items needed to achieve independence.

PPS and CWCMP staff partner with Kansas Kids @ Gear Up. Gear Up is a U.S. Department of Education-funded program with Wichita State University serving as the program administrator. The mission of Gear Up is to increase the number of students graduating from high school who are prepared for enrollment in post-secondary education, thereby enabling youth to reach their full potential and improving educational and social outcomes. Gear Up only serves youth who have experienced foster care custody. Program components include tutoring, educational workshops, summer programs, ACT/SAT test preparation, mentoring, career exploration, college scholarships and cultural activities. Gear Up provides

support at KCPSTA events, including RYACs, the annual KYAC youth conference, the annual Computer Camps, and IL retreats.

The DCF IL Program partners with Youthrive, a non-profit organization, to enhance services for older foster youth and IL Program participants. Youthrive serves Chafee-eligible youth in Johnson, Wyandotte, Sedgwick, Reno and Douglas Counties. Youthrive is currently funded by two DCF grants using Chafee and TANF funds. Youthrive continues to expand to additional counties as funding and resources are available. Youthrive has recently hired a case manager in Shawnee County and will begin recruiting support families soon.

Key Youthrive Program components are:

- Recruit, train, and support adult and family volunteers from the community who will commit to coaching and supporting youth in foster care through the end of their first year out of foster care, or for a minimum of one year, if the youth has already aged out of foster care.
- Provide foster youth with financial literacy education and a matched savings account (IDA- Individual Development Account) for purchasing productive assets and other critical needs of the youth.
- Provide foster youth with assistance with driver's education, driver's license attainment, and car purchases.
- Empower youth in foster care to develop leadership and advocacy skills.
- Provide youth in foster care with short-term rewards for program participation and completion.
- Offer regular opportunities for the youth to give back through community service projects.
- Partner with other service providers in the community to assist the youth with education, housing, and employment opportunities.

The DCF IL Program works with the Kansas Department of Corrections-Juvenile Services (KDOC-JS) to offer KCPSTA services to youth in their custody and in transitional living programs. Outreach is done to inform youth and staff about the Aged Out Medical Card and other IL Program benefits, engage youth in completing NYTD surveys, and participation in KCPSTA events, including RYACs, KYAC, youth conferences and Computer Camp.

The DCF IL Program partners with Pre-Employment Transition Services (Pre-ETS), a Vocational Rehabilitation (VR) Program. The Pre-ETS program launched within the agency during SFY 2017. Eligibility for Pre-ETS services includes: students ages 16 to 21 years of age who are participating in secondary, post-secondary, or other recognized education programs and are eligible for and are receiving services under an Individualized Education Program (IEP) based on disability, or the student is an individual with a disability for purposes of Section 504. Services provided by Pre-ETS include job exploration counseling, self-advocacy, workplace readiness training, counseling on comprehensive transition or post-secondary education, and work-based learning experiences. The Pre-ETS program has provided information at the annual KYAC youth conference, presented at statewide Independent Living Quarterly Meetings, and participated in workgroups with IL staff to improve collaboration efforts and increase the number of youth who access each program.

The Care Portal is an online faith-based engagement tool that connects child welfare professionals to their local faith-based communities. When a child welfare professional identifies a need, he/she can access the Care Portal online and submit a request for assistance. The local faith-based community is informed of the need and is given the opportunity to answer the call. The Care Portal provides ownership to the community regarding local social problems needing support and creates awareness. Since the beginning



of DCF's relationship with the Care Portal, the IL Program has submitted several requests to assist youth with car repairs and obtaining needed items, such as cribs and household appliances.

The DCF IL Program has partnered with the Kansas Department of Revenue and the Office of Vital Statistics to assist with obtaining identification cards and birth certificates for current and former foster youth.

During SFY 2020 to 2024, DCF will continue to focus on collaborating with local housing programs, organizations, and other resources to develop housing options for youth. The IL Program plans to partner with the Kansas Housing Resource Corporation and regional Kansas Community Action Programs, to include the local housing authorities, to create awareness and promote housing resources being made available to youth, both aged out and still in care.

Statewide IL Program meetings are held every quarter. Participation at these meetings by CWCMP staff, KDOC-JS staff, Tribal staff, and Kansas Kids @ Gear Up providers staff is encouraged. Many community partners attend these meetings to share program information and facilitate ongoing collaboration. Community partners include, but are not limited to: Youthrive; Kansas Youth Suicide Prevention Resource Center; Global Orphan Project-Care Portal; Flint Hills Foster Teen Camp; Homes of Hope; Kansas Housing Resource Corporation; Flint Hills Job Corps, Kansas Youth Empowerment Academy; Interfaith Creating Assets, Savings and Hope (CASH) program; Kansas Board of Regents (KBOR) Career Technical Education (CTE) and Accelerating Opportunity: Kansas (AOK) programs; Jobs for America's Graduates – Kansas (JAG-K); Dream Makers; O'Brate Community Foundation; Project Warm Embrace; Working Healthy; university student support programs for former foster youth; and DCF Vocational Rehabilitation and Pre-Employment Transition Services. This ongoing group facilitation increases community resource awareness for youth currently and formerly in foster care and continues to encourage an increased level of collaboration between private and public agencies.

## F. Determining Eligibility for Benefits and Services

Specific eligibility requirements apply to all services and supports offered through the DCF IL Program. Youth in out-of-home placement through their 18th birthday are eligible for all services and supports, as these youth are considered to have "aged out" of care. Services and supports include Basic Chafee, IL Subsidy, Start-Up Costs, Vehicle Repair and Maintenance, and the Education and Training Voucher (ETV) Program. Out-of-home eligible placements include resource homes, relative and kinship placements, group or residential homes, trial home visits, and independent living settings. Youth on run status from a foster care placement on their 18th birthday and youth placed in Secure Care as a Child in Need of Care are eligible for IL services and supports. Run status and Secure Care are considered foster care placements for specific eligibility criteria. See individual services and/or supports for specific eligibility criteria, Section 7000 of the PPS Policy and Procedure Manual (<http://content.dcf.ks.gov/PPS/robohelp/PPMGenerate/>). Youth in out-of-home placement through their 18<sup>th</sup> birthday are also eligible for the Aged Out Medical Card and the Kansas Foster Child Educational Assistance Act (Tuition Waiver); youth do not have to participate in the DCF IL Program to access these two benefits.

Youth who have a permanent order of guardianship or finalized adoption after their 16th birthday may be eligible for Basic Chafee, the ETV Program and the Tuition Waiver. Youth who were in out-of-home placement for any length of time on or after their 14th birthday may be eligible for specific independent living/self-sufficiency services through Basic Chafee eligibility.

A youth's marital status does not impact eligibility for services or supports. Youth who exit care from other states and move their permanent residence to Kansas may be referred or self-refer for services in Kansas. For a youth in foster care, the State with placement and care responsibility is responsible for providing Chafee services to the youth, including ETV. The State in which a former foster youth resides is responsible for providing such an eligible youth with Chafee and ETV services. For youth no longer in foster care who are already receiving ETV, if the youth moves to another State for the sole purpose of attending post-secondary education or training, the youth's original State of residence will continue to provide ETV services to the youth for as long as the youth remains eligible for the program.

## G. Cooperation in National Evaluations

As an agency that places heavy emphasis on data and program evaluation, DCF PPS IL will participate in any national program evaluations of its effectiveness in achieving the purposes of the Chafee Program.

## H. Chafee Training

During SFY 2020-2024, the DCF Independent Living Program plans to provide and/or participate in trainings related to the following topics:

- Adolescent Brain Development
- Adverse Childhood Experiences (ACEs) and Building Resiliency
- Trauma-Informed and Trauma-Led Care, with emphasis on Transitional Age Youth
- Positive Youth Development
- Normalcy and Reasonable and Prudent Parenting Standards
- Human Trafficking
- LGBTQI Issues and Advocacy
- Monitoring Youth's Prescriptions, including when youth transition between placements
- Transition Planning
- DCF Independent Living Program Overview

DCF IL Administration staff will utilize evidence-based research to explore training curricula for possible implementation. Trainings will be offered to DCF, CWCMP, KDOC-JS, and Tribal staff; current and former foster youth, including RYACs and KYAC; adoptive parents; foster parents and other placement providers; and community agencies and organizations.

In addition to the training outlined above, DCF Independent Living Program hosted a training titled "Trauma Competency for the 21<sup>st</sup> Century: The Empowerment & Resilience Structure" in June 2019 in Topeka. The training was facilitated by Dr. Robert Rhoton from the Arizona Trauma Institute. Dr. Rhoton is an expert in child, adolescent, and family trauma. His training is evidence-based in treatment and interventions and is recognized by the International Association of Trauma Professionals, which promotes national standards in evidence-based practice of trauma. There were over 100 professionals in attendance. CEUs were made available. State, local, tribal and community-based public and private social services providers were invited to attend. Registrants included professionals from the following agencies and organizations: DCF Prevention and Protection Services, Saint Francis Ministries, KVC, Kansas Department of Corrections- Juvenile Services, Prairie Band Potawatomi Nation, Sac and Fox Nation, TFI, CASA, Kansas Children's Service League, YWCA, Florence Crittenton, You thrive, The Shelter, Inc.,

Family Service & Guidance Center, Affirm Your Love, The Villages, Making the Connection, KidsTLC, Topeka Rescue Mission, Youth Horizons, Stormont Vail Health, Wichita Children's Home, RCI, Inc., Sequel Services, Kansas Attorney General's office, Shawnee County District Attorney's office, Ember Hope, Aahn's Place, Making the Connection, Human Trafficking Coalition, Healing and Refuge, New Beginnings for Youth, LifeHouse Child Advocacy Center, and SoHome Kids.

Each attendee is eligible to obtain a certification as a Family Trauma Professional or a Certified Trauma Support Specialist. The certifications are provided through the Trauma Institute International and are valid for one year. To promote continuing education, DCF has sponsored Independent Living staff to receive eight weeks of additional sessions for coaching and support as training content is implemented with Independent Living Program participants across the state. Other agencies and organizations are able to partner with the Arizona Trauma Institute to provide this opportunity for staff who attended the training.

## I. Education and Training Vouchers (ETV) Program

The Education & Training Voucher (ETV) Program serves youth by extending eligibility to the following for attendance at certified training programs and post-secondary educational institutions:

- Youth who were in the custody of the Kansas Department for Children and Families (DCF), Kansas Department of Corrections- Juvenile Services (KDOC-JS), or Tribal Authority and in a foster care placement on the date the youth attained 18 years of age; or
- Youth who left a foster care placement subject to a permanent custodianship or guardianship on or after the youth's 16<sup>th</sup> birthday; or
- Youth who were adopted from a foster care placement on or after the youth's 16<sup>th</sup> birthday; or
- Youth who were in an eligible out-of-home placement for any length of time on or after their 14<sup>th</sup> birthday, unless an adoption, permanent custodianship, or guardianship is finalized prior to the youth's 16<sup>th</sup> birthday.

Youth are eligible to participate in the ETV Program until they turn 26 years of age as long as they are enrolled in a post-secondary education or training program and are making satisfactory progress toward completion of that program (satisfactory progress is defined by individual program guidelines). Youth may only participate in the ETV Program for a total of five years, whether or not the years are consecutive.

Youth who continue to be under the responsibility of the child welfare case management provider (CWCMP), KDOC-JS, or Tribal Authority and meet the above criteria may receive ETV supports prior to the release of custody. Tribal case managers, KDOC-JS case managers and CWCMP case managers shall coordinate services for youth eligible for ETV and still in their care in custody through communication with the regional DCF Independent Living (IL) Coordinator.

Education and Training Vouchers are available to eligible youth for assistance with post-secondary education and certified training programs, based on need. ETV funds may be used for costs associated with post-secondary education and/or training only and cannot exceed \$6,250 (Federal maximum of \$5,000 with State match of \$1,250) or the total cost of attendance per youth per plan year, whichever is less.

The Kansas Department for Children and Families (DCF) administers the ETV program. IL Coordinators in the field are trained on ETV benefits and payment information and carry out the ETV Program with youth in their regions. The IL Coordinator or designee and the youth complete the PPS 7001 Education and Training Voucher (ETV) Program Plan. All youth participating in post-secondary education and training plans must be actively involved in all stages of the plan.

Documentation to support all identified costs associated with the plan must be attached to the PPS 7001 ETV Program Plan. To avoid duplication of benefits, documentation of all Federal or State financial awards associated with the ETV plan must also be attached (i.e. Pell Grant and scholarships). All youth applying for ETV funds must complete a minimum of five (5) scholarship applications with proof of documentation at the time of completing the PPS 7001 ETV Program Plan. Youth must complete the Free Application for Federal Student Aid (FAFSA) prior to applying for ETV funds. Youth you are eligible for the Kansas Foster Child Educational Assistance Act, also known as the Tuition Waiver, may be eligible to receive ETV funds, based on need.

The PPS 7001 ETV Program Plan is signed by the youth, IL Coordinator, and CWCMP case manager, if the youth is still being served by the CWCMP.

The IL Coordinators track all expenses so that the total does not exceed the maximum allowable funds per year or the total cost of attendance per youth. Expenses are entered into DCF's Self-Sufficiency Information System (SSIS) through the State's accounting system and tracked by each region and DCF Administration.

The methodology for reporting the unduplicated number of youth receiving ETV funds each school year is to use information from the State's accounting system that contains each payment made to each youth. This information is maintained by youth name, ID number, payment date, vendor, region, and other budget identifiers. The information is downloaded each month into the State's SSIS and a report filters duplicated youth names and ID numbers. This monthly report is maintained by the State's fiscal year, July 1 through June 30.

During SFY 2020 to 2024, DCF IL staff will be presenting information about the ETV Program to DCF, CWCMP, KDOC-JS, and Tribal staff; youth, including the Kansas Youth Advisory Council (KYAC); and community agencies and organizations. Feedback from this outreach will be used to establish goals and outcomes for the ETV Program in combination with other State resources, such as the Tuition Waiver, and methods for measurement.

There are several factors that may have contributed to the decrease in ETV awards. The largest decrease occurred in the West Region. During the summer months between the 2017/18 and 2018/19 school years, the Independent Living Supervisor and three Independent Living Coordinators in the West Region all transitioned to different positions. This change in staff could have affected the number of youths who requested and were approved for ETV awards for the 2018/19 school year. Other factors may include youth completing postsecondary education programs and no longer accessing ETV, and a general decrease in the number of youths choosing to participate in postsecondary education programs.

See Attachment 11, Annual Reporting of Education and Training Vouchers Awards (F).

## J. Consultation with Tribes

The comprehensive social service grants with all four Tribes for independent living services are funded through the Kansas Chafee program. These serve as agreements for each Tribe to administer their Chafee services. Regular contact with Tribal staff is conducted through meetings scheduled by Department for Children and Families (DCF) Prevention and Protection Services (PPS) staff for coordination of child welfare services. PPS staff and each Tribe share information about ongoing and scheduled Chafee activities. Tribal youth are included in youth conferences, learning opportunities, and the Kansas Youth Advisory Council. Each Tribe submits a quarterly program report reflecting the number of Tribal families and children served. Each program report is reviewed by the PPS DCF Administration Program Manager. The regional Tribal liaison is available for consultation regarding case-specific independent living services.

Tribes assist youth who are ages 14-21 and in custody pursuant to an order of the Tribal court. The services provided in this program include services to promote youth's independence, including subsidy, adult education classes, independent living classes, and assistance with developing job skills. Life skills services provided by Tribal staff are identical to those provided by the child welfare case management providers.

Chafee program benefits are available to Tribal youth on the same basis as they are to other youth. Tribal staff members are aware of the programs and benefits. Independent living services are delivered to Tribal youth under custody of the Tribal Authority by social workers or other support staff as designated by each Tribe. These services are reported in the quarterly program reports. Services and transitional planning for youth who have been released from Tribal custody are provided in coordination with the DCF Independent Living Program and Tribal staff. All youth under Tribal jurisdiction are eligible for services and supports through Chafee on the same basis as other youth.

## VIII. Targeted Plans within the 2020-2024 CFSP

### A. Foster and Adoptive Parent Diligent Recruitment Plan

The Department for Children and Families and its community and contracted partners have worked together, in collaboration with the National Resource Center for Diligent Recruitment (NRCDR), to develop a cohesive Diligent Recruitment Plan. The first publication of the plan occurred in 2016. The plan is updated annually and posted to DCF's website. DCF submitted a request to continue to receive technical assistance from the NRCDR after it became part of the Capacity Building Center for States. The updated workplan was approved. Through the first year of implementation of the diligent recruitment plan and program, DCF has served as the child welfare system leader, guiding the development of a systematic and integrated approach to all recruitment and support strategies and messaging across the state. In 2018, the Diligent Recruitment plan was updated to provide more current data and characteristics of the children in Kansas foster care. A condensed version of the Diligent Recruitment plan was also created as a resource in December 2018. This condensed plan was distributed at the semiannual diligent recruitment meeting in January 2019. At this meeting, DCF also gathered input and ideas from partners and stakeholders for strategies to intentionally recruit, prepare and support foster and adoptive parents best able to meet the needs of the children in care.

See Attachment 9 for Kansas Department for Children and Families Diligent Recruitment Plan and Attachment 10 for the Diligent Recruitment Brochure.

## B. Health Care Oversight and Coordination Plan

See Attachment 13 for Kansas Department for Children and Families Health Care Oversight and Coordination Plan.

## C. Disaster Plan

Kansas weather is often unpredictable; therefore, vulnerability to weather is always a concern. Due to the rural and frontier location of the many offices, severe weather can cause extra concern for both staff and clients that spend time traveling. Additionally, weather can disrupt communication and create challenges to providing the necessary services for clients. The Emergency Management/Disaster Plan while primarily used for either evacuation or disruption in services is also used to “account for assigned clients/families and foster/kinship/adoptive families to determine their level of need if affected by the disaster”. A recent example of the use of the emergency disaster plan was when foster care youth were impacted while residing at the O’Connell Youth Ranch, a residential facility in Lawrence, Kansas. On May 28, 2019 the facility suffered tornado damage. Saint Francis Ministries staff quickly collaborated with O’Connell staff to determine the level of need for the youth. All the boys from House 1, 2 and 3 found shelter at a University of Kansas dormitory.

Kansas is in the process of transitioning to new grants and contracts for foster care case management and family preservation. Planning for safety and disasters will be an important part of the transition planning process between DCF, the current providers and the newly added providers. Information and experience gained in the past five years will assist in developing an ever-improving response plan to unpredicted events. Both KVC and Saint Francis Ministries are accredited by the Joint Commission and a component of this accreditation is to develop disaster response protocol and safety standards. Accreditation is a requirement for grants and contracts to be awarded, so it is anticipated the new providers will have similar requirements for environmental safety planning.

See Attachment 14 for Kansas Department for Children and Families Disaster Plan.

See Attachment 15 for the Saint Francis Ministries Disaster Plan.

See Attachment 16 for the KVC Behavioral Health Disaster Plan.

## D. Training Plan

See Attachment 17 for Kansas Department for Children and Families Training Plan.

# IX. Financial

## A. Adoption Savings

Adoption savings are financial savings that state and tribal title IV-E agencies achieve with respect to their own funds due to the expansion of eligibility under the federal title IV-E Adoption Assistance program. These funds represent a significant source of resources to be spent on child welfare activities. Kansas chooses to utilize the same Adoption Savings calculation method and procedures for the current FFY as used in its lasted FFY reporting period submission.

The following are the services the Kansas Department for Children and Families (DCF) via the Prevention and Protection Services (PPS) department expects to provide to children and families using the Adoption Savings over the next five years, 2020-2024.

### **The Kansas Post Adoption Resource Center (K-PARC)**

K-PARC supports families who have adopted children from foster care or who are providing permanent care because of a kinship placement. Adoptive and kinship families often find the need for support grows in the years after their adoption or placement is finalized. The ongoing impact of early childhood trauma can destabilize good placements, challenge solid marriages, and put children at risk even in the healthiest of families. K-PARC strives to extend the mission of DCF and Adopt Kansas Kids (AKK) to Post-Adoptive Families through

- 1) parent, youth, and child education,
- 2) peer and community support and activities, and
- 3) resource development and referrals.

### **Safe Families Program**

Safe Families for Children (SFFC) is a non-profit program that works to provide support for parents in crisis, giving them time to get back on their feet while their children are cared for in a safe and loving environment. Parents in need, voluntarily approach through a self-referral or other referral sources. They can opt to reunify with their children at any time and never lose custody of their children.

Volunteers who host children and support parents are known as Host Families and are recruited from a large network of faith communities. Families in crisis, or Families in need, willingly place their children with a safe, loving, and thoroughly screened volunteer Host Family for a short period of time. Both the Family in need and the Host Family participate voluntarily, with no compensation or expectation of adoption.

The trust built between the Family in need and Host Family is central to the Safe Families program. It is at the heart of creating a safe haven for children and a support network for the Family in need. After the hosting arrangement ends, Safe Families' goal is for the two families to remain in contact, further reducing social isolation and providing ongoing support.

Key Components of Safe Families Program:

- Host children of at-risk families in approved volunteer homes for an average of 6 weeks.
- Provide families in crisis with a support network. Volunteers provide needed resources and services (e.g. mentoring and help securing employment).
- Engages faith communities to recruit and support volunteers and reach out to Families in need.

### **PPS Worker Recruitment**

For SFY 2019, DCF was allocated an additional 13 Child Protection Specialist positions and 8 Foster Care Liaison positions. DCF Administration has challenged the four regions with “Getting to Zero” vacant Child Protection Specialist positions. To help fill vacancies, DCF’s recruitment and retention efforts include:

- Enhancing the use of social media for recruitment and specifically targeting the counties with vacant positions
- Utilizing paid advertisements through Indeed.com
- Outreach with higher education across Kansas and some border schools in Missouri continues and with increased intensity as contacts are being made with career specialists at the educational institutions and special communication targeting graduating students
- Budgeting for 80 social work practicum students with the goal of hiring the students after graduation
- Continuing to pay fees associated with obtaining and renewing BSRB licenses

### **Family Preservation Services**

Intensive in-home services are provided through a contract with a Child Welfare Case Management Provider. Supports and services are offered to pregnant women using substances and to families. Services to families are focused on the entire family to address issues which the family identifies together with the Provider. Services are designed to assist pregnant women and families to overcome problems which may, if not effectively resolved, lead to placement of the newborn or child(ren) into out-of-home care.

New state funds have been added to increase the Family Preservation budget in FY20.

### **The National Electronic Interstate Compact Enterprise (NEICE)**

NEICE is a national electronic system for quickly and securely exchanging the data and documents required by the Interstate Compact on the Placement of Children (ICPC) to place children across state lines. It helps *expedite the placement of children in safe, permanent families across state lines and reducing administrative paperwork and costs.*

The American Public Human Services Association (APHSA), in conjunction with the Association of Administrators of the Interstate Compact on the Placement of Children (AAICPC), developed and implemented the NEICE.

The NEICE was launched in November 2013 with pilot funding from Office of Management and Budget, through the Partnership Fund for Program Integrity Innovation. Recognizing the success of the pilot and the potential for a nationwide, electronic data exchange, in June 2015, the Children's Bureau awarded a cooperative agreement (grant number 90XA0151) to APHSA and AAICPC to rollout NEICE to every state and jurisdiction. At this time, the NEICE project is expanding nationwide, with the goal of serving all states. Plans are in place to sustain the system beyond the grant and the aspirational goal is to have all states onboard.

### **Estimated Timetable for spending unused savings calculated for previous years.**



The table below indicates that DCF is behind in spending but will spend more than saved beginning in FY19. Once this occurs the overage will be used to offset prior year savings, the agency was unable to expend fully.

STATE FUNDS					
Description	FFY 15	FFY 16	FFY 17	FFY 18	FFY 19
Adoption Support Savings	\$649,090	\$1,031,256	\$1,711,669	\$2,088,959	\$2,141,183
MOE Expenditures by Year *	0	278,750	374,459	1,586,744	2,480,000
Unexpended Adoption Savings	649,090	752,506	1,337,210	502,215	(338,817)
<b>Cumulative MOE Deficit</b>	<b>649,090</b>	<b>1,401,596</b>	<b>2,738,806</b>	<b>3,241,022</b>	<b>2,902,205</b>

STATE FUNDS					
Description	FFY 20	FFY 21	FFY 22	FFY 23	FFY 24
Adoption Support Savings	\$2,194,713	\$2,249,581	\$2,305,820	\$2,363,466	\$2,422,552
MOE Expenditures by Year *	2,480,000	2,480,000	2,480,000	2,480,000	2,480,000
Unexpended Adoption Savings	(285,287)	(230,419)	(174,180)	(116,534)	(57,448)
<b>Cumulative MOE Deficit</b>	<b>2,616,918</b>	<b>2,386,499</b>	<b>2,212,319</b>	<b>2,095,785</b>	<b>2,038,338</b>

### Challenges in accessing and spending the funds.

The identification and development of applicable programs and projects took time to implement in Kansas. Now that these programs are in place, Kansas intends to spend above the Adoption Support Savings amount each year helping to reduce the deficit in spending from the first few years.

### B. Adoption and Legal Guardianship Incentive Payment

The Department for Children and Families (DCF) Prevention and Protection Services (PPS) received an Adoption and Legal Guardianship Incentive Payment Award in FFY2016. This was the first since 2013. The award amount received was \$442,500. Adoption Incentive funding is tracked through the DCF budget division.

The FFY2016 award amount received was not spent in SFY 2017. In SFY 2019, funds were and continue to be utilized to expand Trust-Based Relational Intervention (TBRI) an evidenced-based practice for parents parenting children who have experienced trauma.

The FFY2017 award amount was \$365,000 and has not been spent yet.

The award received for FFY2018, was \$4000 and has not been spent yet.

The following is how the FFY 2016 award (\$442,500) was spent, with the remaining being spent through the end of FFY 2019.

**Travel:** The Travel indicated was for staff members to attend the National Adoption Conference last August.

**Fostering KS Kids Printing:** Promotional materials related to the Foster Kansas Kids campaign. *The goal of Foster Kansas Kids is to connect interested families with private agencies that are*

*responsible for providing foster care services including case planning, placement, life skills and training.*

**Aug 18 Adoption Conference:** This is the conference registration fee.

**Adoptive Family Conference Speaker:** A conference containing workshops and trainings was held November 3-4, 2018 covering issues commonly related to adoption and foster care. The Kansas Foster and Adoptive Parents Association (KFAPA) members were invited to attend and were sponsored (lodging, travel and food.) Furthermore, a speaker from the North American Council on Adoptable Children (NACAC) was brought on board to present on Fetal Alcohol Spectrum Disorder.

**JNA Advertising:** Advertising costs related to the Foster Kansas Kids campaign. *Foster Kansas Kids connects interested families with private agencies that are responsible for providing foster care services including case planning, placement, life skills and training.*

**YAP:** Youth Advocacy Program, (YAP) provides intensive in-home interventions to families at imminent risk of losing their children to out-of-home placement, as well as to help swiftly return children to their home. *Much of the work in this program is focused on supporting the parent(s) in developing effective parenting and life skills, positive community connections, and supporting a healthy attachment and bond with their children. Additional programming is tailored to the developmental needs of the children being served. The programs help to find permanent resources for youth lingering in care without a viable discharge resource. The agency works closely with the youth and referring authority to make positive, permanent connections with extended family or other caring adults from the youth's past.*

**Jul 19 Adoption and FC Conference:** This has not been paid yet, the plan is to spend the remainder of the FFY16 award for this.

Another way PPS utilized Adoption Incentive funds was to explore ways to increase the specialization of adoption from foster care practice and build capacity of agencies and mental health providers who work with adoptive families. This included increasing the reimbursement rate for agencies working with 'adopt only' families. In SFY 2015, DCF established the Adoption Consortium through the expansion of the adoption exchange contract. The Adoption Consortium was a group of child placing agencies (CPAs) who assessed, developed and supported adopt-only families. During SFY 2017, eight CPAs sub-contracted with the adoption exchange provider (Kansas Children's Services League-KCSL) to receive referrals of these families who were interested in adopting a child from foster care, but not interested in becoming a licensed foster family. A total of 56 families were served through consortium agencies: 27 families were added to the Adopt Kansas Kids website, and six others either were matched, had a placement or finalized their adoption. In SFY 2018-2019, the number of CPA's participating in the Consortium decreased significantly as a result of changes in the home study process, reimbursement rate, and workforce shortages. Kansas will be reconsidering the Consortium's role as it relates to the Kansas Adoption Network (KAN). The Kansas Adoption Network meets quarterly to review adoption best practice and policy. KVC Behavioral Health Services (KVC) has initiated an Adopt Only program like Saint Francis Community Services (SFCS). KCSL serves adopt only families as well. The following details the FFY 2017 & 2018 awards (\$365,000 & \$4000) along with possible future expenditures going until end of the SFY 2020:

1. July 19 Adoption and FC Conference refers to the North American Council on Adoptable Children (NACAC) annual conference July 18-20, 2019 (pre-conference session July 17). *NACAC provides a variety of training options to help adoptive and foster parents, child welfare professionals, and child advocates achieve the best possible outcomes for children and families.*
2. FY20 Overages on Caregiver Support Contract with WSU refers to a current contract with Wichita State University. The details surrounding the Caregiver Support Contract states the following: “DCF seeks to strengthen the support provided to relative, foster and kinship families to ensure children in care have a family who best meets their needs. The Caregiver Support Association in Kansas will assist DCF in increasing public awareness in becoming a relative, foster or kinship family. They will work with DCF and Child Placing Agency (CPA) contractors to help build a stronger child welfare system to increase the safety, permanency and well-being for children in care. They will provide one voice for families caring for children in the Secretary’s custody and will make recommendations for DCF for Statewide systemic improvements.”
3. Foster Kansas Kids Printing, possible additional funding for promotional and advertisement materials regarding the Foster Kansas Kids campaign. *Foster Kansas Kids connects interested families with private agencies that are responsible for providing foster care services including case planning, placement, life skills and training.*
4. KAAC grant, refers to The Kansas Adoption Advisory Council (KAAC) and how with possible grant money is purposes to assist the Kansas Department for Children and families to recruit, strengthen, and stabilize adoptive families for children who are free for adoption and age 13 and older and who have significant behavioral and mental health needs.
5. African American Coalition refers to The Kansas African American Foster Care/Adoption Coalition (KAAFAC), which was formed in response to the over-representation of African American children in the foster care and adoption system of the state. The focus is recruitment, education, and development of healthy relationship and family systems. Award money could be granted to the group to help them advance their mission and work.

Any possible projected carry over from the FFY 2017 & 2018 awards (to be used until the end of SFY 2021), will go towards to the Caregiver Support Contract with Wichita State University. It will also go towards staff attendance/participating at future Adoption Conferences. And any other pertinent adoption related items (not otherwise specified right now.)

### C. Monthly Caseworker Visit Formula Grant and Data

Kansas requires at least monthly CWCMP caseworker visits with children in out-of-home placement. These visits provide an opportunity for the caseworker to review case plan activities, assess safety, engage the child in age-appropriate conversations about permanency and ensure the child’s needs are being met. Visits are to be well-planned and focused on issues related to case planning and service delivery.

In March 2019, the state was notified by the Administration for Children and Families (ACF) that Kansas’ Federal Fiscal Year (FFY) 2018 calculated Monthly Caseworker Visits (MCV) performance of 90 percent was five percent less than the 95 percent performance standard. Kansas’ FFY 2018 calculated Visits in the Home (VIH) performance was 83 percent (33 percent more than the 50 percent performance

standard). Because the Kansas fell short of the MCV performance threshold, the Federal Financial Participation (FFP) rate for title IV-B Child Welfare Services program funding for FFY 2019 will be reduced by one percent (from 75 percent to 74 percent).

Beginning October 2019, the monthly visits must be completed by the child’s assigned caseworker. In the past, visits were sometimes completed by para-professionals or other caseworkers with a child placed in the same home. This change is expected to improve the frequency and quality of monthly caseworker visits.

The Monthly Caseworker Visits Grant is used, generally, to help recruit, train and support foster care staff. However, staffing the child welfare workforce necessary to ensure more manageable caseworker caseload sizes remains a challenge. Kansas has found some success paying to post vacancy listings on popular employment-related search engines. Kansas has also invested in attracting high-quality practicum students, with an interest in child welfare, from the state’s colleges and universities.

**E. Financial Information for Title IV-B Subpart 1 & 2**

See attachment 18, CFS -101 Parts I, II, III in an excel workbook.  
 See attachment 19, CFS -101 Parts I, II, III in pdf.

**Section G (1): Payment Limitations – Title IV-B, Subpart 1**

**FFY 2005 Title IV-B, Subpart I & State Match Expenditures**

The Title IV-B, Subpart 1, payment limitations are identified below.

<b>Category</b>	<b>Title IV-B</b>	<b>State Match</b>	<b>All Funds</b>
Child Care	0	0	0
Foster Care	439,792	146,597	586,389
Adoption Assistance	95,070	31,690	126,760
<b>Total FFY 2005 Expenditures</b>	<b>534,862</b>	<b>178,287</b>	<b>713,149</b>

**Section G (2): Payment Limitations - Title IV-B, Subpart 2**

**FFY 1992 Title IV-B, Subpart 2, Supplantation Requirements Per Section 432(a)(7)(A)**

The 1992 base year and 2017 actual expenditures are identified below.

<b>Category</b>	<b>1992</b>	<b>2017</b>
Family Services	\$ 1,661	\$ 1,863,861
Family Preservation	\$ -	\$ 2,014,413
Time Limited Reunification	\$ 27,424,568	\$ 87,631,612
Adoption promotion & support	\$ 1,072,510	\$ 6,427,739
<b>Total</b>	<b>\$ 28,498,739</b>	<b>\$ 97,937,525</b>

## Attachment Guide

1. Kansas DCF PPS Organizational Chart
2. Foster Parent Survey Results
3. PPS CPS and CPI Training Requirements and Recommendations
4. FY 2019 Training Report – Saint Francis Ministries
5. FY 2019 Training Report – KVC
6. KCWPTP Caseworker Core Course Descriptions
7. KCWPTP Assessor Tier I and Tier II Descriptions.
8. Title IV-B, subpart 1 Assurances for States
9. Diligent Recruitment Plan
10. Diligent Recruitment Brochure
11. Annual Reporting of Education and Training Vouchers Award
12. ETV Certification
13. Health Care Oversight and Coordination Plan
14. DCF Safety, Security and Emergency Operations Manual
15. SFM Safety of the Environment Plan
16. KVC Kansas Emergency Response Manual 2019
17. DCF Training Plan
18. CFS -101, in an excel workbook.
19. CFS -101, in pdf.

## Acronym Guide

1. ACE - Adverse Childhood Experience
2. AECF – Annie E. Casey Foundation
3. AFCARS - Adoption and Foster Care Analysis Reporting System
4. AKK – Adopt Kansas Kids
5. AP – Assessment and Prevention
6. APA – Adoptive Placement Agreement
7. APPLA – Another Planned Permanent Living Arrangement
8. APSR – Annual Progress and Services Reports
9. AUK – Adopt US Kids
10. BIS – Best Interest Staffing
11. CAK – Children’s Alliance of Kansas
12. CAP – Corrective Action Plan
13. CAPTA - Child Abuse Prevention and Treatment Act
14. CAT - Mobile Response Crisis Assessment Tool
15. CBC – Capacity Building Center
16. CBCAP – Community-based Child Abuse Prevention
17. CCWIS – Comprehensive Child Welfare Information System
18. CFCIP - John H. Chafee Foster Care Independence Program
19. CFP - Casey Family Programs
20. CIF – Children’s Initiatives Fund
21. CINC - Child in Need of Care
22. CJA - Children Justice Act
23. CFSP – Child and Family Services Plan
24. CFSR – Child and Family Services Review
25. CMHC – Community Mental Health Center
26. COC – Cornerstones of Care
27. CPA – Child Placing Agency
28. CPI - Continuous Performance Improvement
29. CPS - Child Protective Services
30. CRA - Central Reporting Application
31. CSS - Child Support Services
32. CWCMP - Child Welfare Case Management Providers
33. DCF - Department for Children and Families
34. DCU - Data Compliance Utility
35. DQU - Data Quality Utility
36. DR – Diligent Recruitment
37. EES - Economic and Employment Services
38. EHS – Early Head Start
39. ESSA – Every Student Succeeds Act
40. ETV - Education and Training Voucher
41. FACTS: Family and Child Tracking System
42. FC – Foster Care
43. FCSOC - Family Centered Systems of Care
44. FFPSA – Family First Prevention Services Act
45. FFY - Federal Fiscal Year
46. FINA – Family in Need of Assessment
47. FPS – Family Preservation Services
48. FS – Family Services
49. GBHSPC - Governor’s Behavioral Health Services Planning Council
50. HCBS – Home and Community Based Services
51. HTAB - Human Trafficking Advisory Board
52. ICP – Individualized Crisis Plan
53. ICPC – Interstate Compact on the Placement of Children
54. IFP – Initial Family Meeting
55. IL – Independent Living
56. IPS – Intake Protection Specialist
57. IRP - Individualized Recruitment Plan
58. JAG- K - Jobs for America’s Graduates – Kansas
59. JCIC - Juvenile Crisis Intervention Centers
60. JJOC - Juvenile Justice Oversight Committee
61. KAN – Kansas Adoption Network
62. KCCTF – Kansas Children’s Cabinet and Trust Fund
63. KCRP-CT - Kansas Citizen Review Panel – Custody to Transition
64. KCWPTP - Kansas Child Welfare Professional Training Program
65. KCWQIC - Kansas Child Welfare Quality Improvement Council
66. KDADS – Kansas Department for Aging and Disability Services
67. KDOC-JS – Kansas Department of Corrections – Juvenile Services
68. KDHE – Kansas Department of Health and Environment
69. KEES – Kansas Eligibility Enforcement System
70. KEESM – Kansas Economic and Employment Services Manual
71. KEHS - Kansas Early Head Start
72. KEHS-CCP – Kansas Early Head Start Child Care Partnerships

73. KEHS-HV – Kansas Early Head Start Home Visitation
74. KEY - Kansas Endowment for Youth
75. KFAN – Kansas Family Advisory Network
76. KFAPA – Kansas Foster and Adoptive Parent Association
77. KIDS - Kansas Initiative Decision Support
78. KIPS - Kansas Intake/Investigation Protection System
79. KKGU - Kansas Kids at GEAR UP
80. KPARC – Kansas Post Adoption Resource Center
81. K-PMTO – Kansas Parent Management Training Oregon Model
82. KPRC – Kansas Protection Report Center
83. KSA – Kansas Statutes Annotated
84. KSDE – Kansas State Department of Education
85. KSSAF - Kansas Serves Substance Affected Families
86. KUSSW – University of Kansas School of Social Welfare
87. KVC - KVC Behavioral Health Services
88. KYAC- Kansas Youth Advisory Council
89. LGBTQI - lesbian, gay, bisexual, transgender, queer (or questioning), and intersex
90. MCO – Managed Care Organization
91. MOU – Memorandum of Understanding
92. MRSS- Mobile Response and Stabilization Services
93. NCANDS - National Child Abuse and Neglect Data System
94. NCCD – National Council on Crime and Delinquency
95. NDRU - NYTD Data Review Utility
96. NRCDR - National Resource Center for Diligent Recruitment
97. NRK – Non-related Kin
98. NYTD - National Youth in Transition Database
99. OSRI - On Site Review Instrument
- 100.PCS – Permanent Custodianship Subsidy
- 101.PIP – Program Improvement Plan
- 102.PPS – Policy and Procedure Manual
- 103.PPS - Prevention and Protection Services
- 104.PRT – Parental Rights Termination
- 105.PRTF – Psychiatric Residential Treatment Facility
- 106.PSSF - Promoting Safe and Stable Families
- 107.PWS – Pregnant Woman Using Substances
- 108.QRTP – Qualified Residential Treatment Program
- 109.RFP – Request for Proposal
- 110.RPR – Rapid Permanency Review
- 111.RS - Rehabilitation Services
- 112.RYAC – Regional Youth Advisory Council
- 113.SACWIS – Statewide Automated Child Welfare Information System
- 114.S. B. – Senate Bill
- 115.SCRIPTS Statewide Contractor Reimbursement Information and Payment Tracking System
- 116.SDM – Structured Decision Making
- 117.SFM - Saint Francis Ministries
- 118.SFY – State Fiscal Year
- 119.SPC - Strategic Planning Conference
- 120.SSA - Social Security Survivors Benefits
- 121.SSDI – Social Security Disability Insurance
- 122.SUD – Substance Use Disorder
- 123.TB – Tuberculin
- 124.TBRI – Trust-Based Relational Intervention
- 125.TDM – Team Decision Making
- 126.TFI – TFI Family Services
- 127.TIPS-MAPP - Trauma Informed Partnering for Safety and Permanence Model Approach to Partnerships in Parenting
- 128.USPS – United States Postal Service
- 129.WSU – Wichita State University
- 130.YRC – Youth Residential Center