Kansas Department for Children and Families
Title IV-B Annual Progress and Services Report

Submitted May 27, 2026

Section A. Requirements for the 2027 APSR and Application for Funding

In accordance with this Program Instruction and its definition of "critical updates," the state incorporates by reference the information and data contained in its prior year APSR as if fully set forth herein. Accordingly, this submission provides only critical updates since the prior year APSR, consistent with the reporting requirements of 45 C.F.R. §1357.16.

Critical Updates

CFSP Plan for Enacting the State's Vision Progress Update: Kansas DCF joined the A Home for Every Child Pilot Program and discontinued participation in the CFSR PIP process. Details of the AHFEC plan can be found in the separate plan posted on the DCF and ACF website.

KansasBRAVE was supported by a federal discretionary grant which has now been terminated. Some projects resulting from this grant are being continued including the Four Questions for Permanency.

CAPTA Plan Updates: There were no substantive changes that would affect Kansas' eligibility for CAPTA. DCF continued funding all CAPTA awards outlined in the 2025 APSR, with the exclusion of the concluded contract for the Wichita Police Community Support Specialist. DCF utilized CAPTA funds in the Kansas City region to partner with Change & Innovation Agency, implementing *ClearPath*. This framework helps CPS swiftly process cases when children have been assessed as safe/low-risk and have no substantiated finding, with a specified ClearPath supervisor, closing cases within 7-14 days of assignment.

Plans of Safe Care: The Comprehensive Addiction Recovery Act workgroup, comprised of members of DCF staff and external partners with expertise in perinatal substance misuse, identified complicated policy may have hindered comprehension in creating Plans of Safe Care. The revised policy's intended goal is to certify requirements for Plans of Safe Care are being understood and met.

Efforts to Track and Prevent Child Maltreatment Deaths: The State Child Death Review Board (SCDRB) serves as the Citizen Review Panel to review child deaths in the state. During the reporting period, the Board reviewed the deaths of 361 children, ages 0-17, who died in Kansas or were residents who died outside of the state. This was a slight decrease from the previous year (389). As an outcome of the report, the Board produced ten public policy recommendations involving DCF.

Data from the SCDRB annual report showed an overall decline in infant deaths from 210 to 197. This included a reduction in sleep related deaths, from 44 to 37. DCF safe sleep instructors continue prioritizing safe sleep training for staff, stakeholders, and families. In SFY26 DCF staff training increased by 58% (156) from the previous year (65), there were 32 crib clinics, and 9 community baby showers.

Populations at Greatest Risk of Maltreatment: DCF regards children under the age of one as one of the most vulnerable populations. In SFY26, DCF updated policy *2116 Requirements for Children Under One*, requiring CPS to engage with a family after a referral for services to ensure an infant's needs are met.

DCF has made updates to training for mandated reporters to help them support families directly in their communities by reducing unnecessary interactions with the agency. A new supplemental mandated reporter training, with the goal to build assurance in the reporting process, was designed for educators. Additionally, Kansas Children's Service League and DCF partnered to co-create training materials for the

Kansas State Department of Education to distribute quarterly. This reserves DCF resources for families and children needing them most. In SFY26, there was both a decrease in reports received (70,303) and the percentage of reports assigned (47.8%), showing a steady decline over the past five years.

Human Trafficking: DCF assigned 156 intakes for human trafficking (141 Sex and 16 Labor). DCF assigns all human trafficking intakes, which is a departure from normal screening procedures for third party perpetrators.

In 2025 Kansas Department for Children and Families; Kansas Law Enforcement Training Center; Kansas Department of Labor; Kansas Department of Corrections; Kansas Attorney General's Office; Kansas Bureau of Investigations conducted eight statewide multidisciplinary trainings with a focus on labor trafficking.

The Immediate Response Teams respond to requests from law enforcement and courts to conduct human trafficking risk assessments and screenings. In 2025 the IRT broadened the response to include requests from any Juvenile Intake and Assessment System and requests from case teams to better identify and serve youth who have been victimized.

Title IV-B, Subpart 2 Kinship Navigator Funds: Since implementation began, KCSL has transitioned from start-up activities into active service delivery for kinship families. Kinship Navigator Case Management staff are now serving families by providing individualized support, resource navigation, and case management services to kinship caregivers. In addition, staff have participated in Team Decision Making meetings with the Wichita DCF office to support kinship placements, advocate for caregiver needs, and strengthen collaboration with the child welfare system. Case management staff and the program supervisor have remained focused on fidelity to the Washington State Kinship Navigator model through ongoing training on best practices in documentation, as well as regular supervisor file reviews to ensure quality service delivery and adherence to the model. To expand awareness and increase referrals, presentations have been provided to community partners, local schools, and agencies. Outreach efforts continue to connect more kinship families to available supports. The Kinship Navigator program is also accessible through 1-800-CHILDREN by phone, website, or mobile app.

Data pulled from 10/1/2025 - 5/1/2026				
KS Counties Served	Sedgwick	Butler	Cowley	Sumner
# of families Served	56	2	3	1
Children Served	80	3	6	4

Kansas Family Mobile Crisis Helpline: On May 1, 2026, HealthSource Integrated Services was awarded the Kansas Family Mobile Crisis Helpline contract to operate a centralized crisis helpline and coordinate the provider network under the Kansas Mobile Response Stabilization Service model.

Juvenile Crisis Intervention Centers: During the 2026 legislative season, Juvenile Crisis Intervention Centers were transitioned to Juvenile Stabilization Centers. During 2025 O'Connell Children's Shelter and The Villages were the first to receive state funding to develop and implement programs for short-term assessment treatment, case planning, and referral of youth in behavioral health crisis based on current and prior legislative frameworks.

Case Planning Tool: DCF has created and implemented an updated case planning tool for both foster care and preservation services which is intended to improve family engagement and is aligned to the Kansas Practice Model (KPM). The case planning tool had not had significant updates in 30 years. This represents a large practice shift for case management providers and DCF staff. Feedback from children, parents, community partners, and others has been positive. DCF is implementing a case planning reflection process to continue to review implementation and success of the new tool.

Missing from Care: In FY 2025 the Kansas Department for Children and Families Special Response Teams conducted three multidisciplinary operations (Kansas City; Wichita; Topeka) involving local, state, and federal law enforcement agencies; local non-profits; and local Child Advocacy Centers. The operations focused on high-risk youth that were missing from care that had a history of human trafficking or was at high-risk of trafficking.

The Special Response Team presented at the Kansas Governor's Conference on Child Abuse and Neglect on "Working with High-Risk Missing Youth to Prevent Adverse Outcomes."

The Kansas Settlement Connection was created to include congregate care providers, child placing agencies, child welfare case management agencies, and DCF in discussing outcomes of the McIntyre v. Howard lawsuit. This meeting is well attended by a cross section of providers and while focused on settlement outcomes, these outcomes relate directly to child welfare outcomes. This group discusses root causes, processes, and strategies for improvement. This group has also folded in the members of the Leading for Results workgroup to avoid duplication of efforts.

The Crossover Youth State Policy Team is an oversight committee for the Crossover Youth Practice Model (CYPM) and prioritizes presentations on initiatives addressing educational or placement instability and services across the state. Shawnee, Montgomery, and Sedgwick counties were fully implemented in the fall of 2024. Each county continues to meet on a regular basis to discuss a variety of topics including but not limited to, CYPM protocol, data collection, and model sustainability. In November of 2025, three new counties; Franklin, Saline, and Atchison, were oriented to the CYPM, and began their implementation. The goal is to have these three counties fully implemented no later than early 2027.

Statewide Best Interest Staffing Review Team: DCF in partnership with the case management providers, Office of the Child Advocate, and Children's Alliance of Kansas has created a Statewide Best Interest Staffing Review Team. In the past reviews of Best Interest Staffings were completed within the agency who did the best interest staffing. This created the appearance that an agency was reviewing their own work and created worries for the community. The team includes both the involved case management provider and region are involved as well as representatives of other regions and case management providers and DCF Administration to increase confidence that the review is impartial and that the concerns are being adequately considered.

Youth Services and Independent Living (IL): The IL program is continuing implementation of KPM with a focus on belonging and partnership for young people as well as their lasting success and immediate safety. Ongoing training, form updates, shifts in the narrative about the program, Group Learning Consultations, use of technology through a guided practice application, and a Belonging Workshop are all part of the effort to implement KPM alongside the work of a statewide implementation team comprised of DCF IL and CWCMP staff.

The 2026 Annual Youth Summer Conference will be held June 11, 2026, in Wichita. The theme of this year's conference is Your Voice. Your Path. Your Future.

We Kan Drive serves 275 active program participants and has another 37 inactive participants. This program assists young people with driver's education courses and insurance. DCF has worked with the Kansas Department of Revenue (KDOR) to expand the age range for obtaining a free ID or driver's license through a partnership where DCF covers photograph costs and KDOR waives other associated costs.

NYTD: As part of the NYTD Review in November 2024 it was determined that the paper survey needed updates to compliant with federal requirements and DCF used this opportunity to make other edits to increase engagement. Kansas Youth Advisory Council (KYAC) feedback was sought before finalization. DCF continues to work through known NYTD issues prior to issuance of a final report.

FYI (Foster Youth Independence) vouchers continue to be utilized in areas where they are established and DCF continues to partner with public housing authorities in multiple areas of the state to expand availability.

Psychotropic Medication Workgroup: Bimonthly workgroup with statewide partners - including pharmacists, physicians, and child psychiatrists who review psychotropic medication data to identify educational opportunities and develop educational materials including:

- Psychotropic Medication Policy
- Caregiver's Guide (English and Spanish)
- Utilization Guidelines for providers
- Educational Flyer on principles and prescribing parameters (distributed to Kansas pediatric prescribers)
- Practice Wise Blue Menu of evidence-based psychosocial interventions for youth

Governor's Behavioral Health Services Planning Council: Quarterly meetings advising state government on behavioral health needs. The Children's Mental Health Subcommittee participated in development of the Autism Coalition to coordinate funding and multidisciplinary training for autism identification, testing and diagnosis.

Foster Care in KanCare: Monthly virtual meetings with state agencies, child welfare providers, and KanCare MCOs addressed gaps in care for youth in out-of-home placement. Key outcomes included:

- Launch of SCRIPTS report to track placement changes for care coordination
- Team Decision Making process with MCO, family, and provider participation
- New KanCare contracts with Healthy Blue, Sunflower Health Plan, and UnitedHealthcare
- Implementation of MCO care coordination, including assigned coordinators, assessments, and 48-hour post-placement home visits.

Kansas Community Mental Health Centers: The Participating Agreement between Kansas Department for Aging and Disability Services and the Community Mental Health Centers of Kansas requires foster youth to receive an initial mental health evaluation within 1 business day and begin identified services within 10 business days.

Psychiatric Residential Treatment Facility Stakeholders Meeting: Bi-monthly meetings with PRTF providers and state agencies. In SFY 2026, developed aftercare follow-up and programs requiring guardian consent and engagement in treatment and post-discharge parenting.

Court Improvement Plan: DCF continues to collaborate with Kansas courts through the Court Improvement Plan (CIP). CIP five-year Strategic Plan projects will be determined and approved this summer.

Section B. Financial Information

CFS-101s are attached to the 2027 APSR.

Section C. Instructions for the Submission of the 2027 APSR for States

This APSR services as the 2027 APSR to address activities completed since the submission of the 2025-2029 CFSP and the second installment of the five-year plan. DCF has responded to ACYF-CB-PI-26-03 as prescribed.