



TITLE IV-B CHILD AND FAMILY SERVICES PLAN ANNUAL PROGRESS AND SERVICES REPORT

Submitted To:

U.S. Department of Health and Human Services

June 30, 2021

Resubmitted with revisions

September 1, 2021

This 2022 Annual Progress and Services Report (APSR) is the second annual report related to the Title IV-B Child and Family Services Plan (CFSP) 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.

555 S Kansas Ave, 1st Floor
Topeka, Kansas 66603

Facebook: KansasDCF | Twitter: @dcfkansas | Vimeo: vimeo.com/dcfkansas

Contents

- A. Strengthening Families Through Primary Prevention of Child Maltreatment While Securing Permanency for All Children and Youth 5
 - A.1: Prevention and Protection Programs Administered by DCF 6
 - A.2: Agency Mission: To protect children, strengthen families and promote adult self-sufficiency 8
- B. Overview of the Child and Family Services Plan / Annual Progress and Services Report and the Child and Family Services Review 10
- C. Requirements for the 2022 APSR 10
 - C.1: Collaboration 10
 - C.1.a. Kansas Department for Children and Families 10
 - C.1.b. DCF and the Legal Community: Kansas Bar Association 14
 - C.1.c. Collaboration between DCF and other States: Kansas/Missouri Border Agreement 14
 - C.1.d. Governor’s Behavioral Health Services Planning Council 15
 - C.1.e. Systems Collaboration 15
 - C.1.f. Kansas Department of Corrections – Juvenile Services (KDOC-JS) 17
 - C.1.g. Kansas Early Head Start 20
 - C.1.h. Jobs for America’s Graduates – Kansas 22
 - C.1.i. Community-Based Child Abuse Prevention 23
 - C.1.j. Citizen Review Panels / Children’s Justice Act 24
 - C.1.k. Kansas Court Improvement Program 24
 - C.1.l. Human Trafficking 30
 - C.1.m. Collaboration Against Sexual and Domestic Violence 32
 - C.1.n. Stakeholder Meetings 33
 - C.2. Update to the Assessment of Current Performance in Improving Outcomes 33
 - Safety Outcomes 1 and 2 34
 - Permanency Outcomes 1 and 2 47
 - Well-Being Outcomes 1, 2 and 3 58
 - Current and Planned Activities to Improve Performance on Child and Family Outcomes 66
 - Systemic Factors 81
 - C.3 Update to the Plan for Enacting the Vision of Kansas and Progress Made to Improve Outcomes 105
 - Introduction 105

Vision Item: Strong Workforce	105
Vision Item: Strong Organization.....	108
Vision Item: Strong Outcomes.....	111
C.4 Quality Assurance System.....	114
C.5 Update on the Service Descriptions	117
C.5.a Stephanie Tubbs Jones Child Welfare Services Program, Title IV-B, subpart 1.....	117
C.5.b. MaryLee Allen Promoting Safe and Stable Families, Title IV-B, subpart 2.....	149
C.5.c. Additional Service Information	162
John H Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program) (section 477 of the Act).....	166
C.6. Consultation and Coordination Between States and Tribes.....	189
A. Services Provided by the Tribes through the Child Welfare Grants from the State ...	191
B. Child Protection Services	191
C. Family Preservation Services	193
D. Foster Care Services	193
E. Independent Living Services.....	193
F. Memoranda of Understanding	194
G. Other Collaboration, Coordination and Technical Assistance	196
D. CAPTA State Plan Requirements and Update.....	198
E. Updates to Targeted Plans within the 2020-2024 CFSP.....	202
Foster and Adoptive Parent Diligent Recruitment Plan.....	203
Health Care Oversight and Coordination Plan.....	204
Disaster Plan.....	204
Training Plan.....	204
F. Statistical and Supporting Information	204
CAPTA Annual State Data Report Items	204
I. Information on Child Protective Service Workforce	204
ii. Data on education, qualifications and training.....	205
iii. demographic information of the child protective service personnel;	206
iv. information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor (section 106(d)(10) of CAPTA).....	207
Juvenile Justice Transfers.....	207
Education and Training Vouchers	207

Inter-Country Adoptions.....	208
Monthly Caseworker Visit Data.....	208
G. Financial Information.....	208
G.1.a. Monthly Caseworker Visit Formula Grant and Data.....	208
G.1.b. Financial Information for Title IV-B Subpart 1 & 2.....	208
G.1.c. Chafee Program.....	208
G.2 Current Year Funding.....	208
G.2.a. Re-allotments.....	208
G.2.b. Revisions – Submitting a Revised Part 1.....	208
G.3 FY 2022 Budget Request – CFS-1-1, Parts I and II.....	208
G.4 FY 2019 Title IV-E Expenditure Report – CFS-101, Part III.....	208
G.5 Expenditure Periods and Submission of Standard Form 425 (SF-425) Federal Financial Report.....	208
Attachment Guide.....	209
Acronym Guide.....	212

A. Strengthening Families Through Primary Prevention of Child Maltreatment While Securing Permanency for All Children and Youth

The Kansas Department for Children and Families (DCF) is striving to shift from a child welfare agency to that of Family and Child Well-Being agency and state. Kansas DCF is invested in establishing new and strengthening existing relationships with children, youth, families, community partners and staff to lift up their voices and expertise to achieve a system in which significant and real change can be made to create safer, more nurturing environments for children in our state.

Kansas DCF is comprised of Economic and Employment Services, Prevention and Protection Services, Rehabilitation Services, Child Support Services, and Foster Care and Residential Facility Licensing. Services are provided directly by the agency or through contracted providers and community partnerships. Work encompasses services to children, families with children, caregivers, vulnerable adults or adults who have special needs, and pregnant women using substances.

Services from DCF are managed statewide from the DCF Administration office, located in the capital city of Topeka. They are led by the Secretary through the Deputy Secretary of Family Services. The Deputy Secretary oversees five Directors of Prevention and Protection Services. These five Directors have responsibility for the services outlined within this plan. Directors are assisted by Deputy Directors, Program Administrators and/or Program Managers. Kansas DCF has six regions implementing Prevention and Protection programs. The six DCF regions throughout the state are: Kansas City, Northeast, Southeast, Wichita, Northwest and Southwest. Each region is led by a regional director, an assistant regional director(s) for programs and an administrator for each program area: assessment and protection, foster care, and support services.

See Attachment 1 for Kansas DCF PPS Organizational Chart.

During Fiscal Year 2021, Kansas DCF continued to persevere and thrive through the ongoing, unprecedented pandemic. Strategic use of various federal COVID funding allowed the agency and community partners to increase support to more children and families with basic needs such as housing, food, childcare and utility assistance. In Spring 2021, as the rate of COVID infections decreased, more front-line services returned to face to face or in-home services while following guidance from our state's public health agency, Kansas Department of Health and Environment (KDHE).

DCF used information received by KDHE as a guide for phased implementation steps in the agency's emergency planning and response. Continuity of operations remained in the forefront. Unique and innovative ways of continuing to meet the needs of consumers were supported by the agency. DCF acted in the most effective way to ensure staff and clients remained safe and services remained available.

Kansas DCF thrived during SFY2021 by creating new initiatives and partnerships with collective impact bringing the opportunity to propel our child welfare system towards one of family and child well-being system. In early 2021 Kansas was accepted into round two of the Children's Bureau *Thriving Families, Safer Children: A National Commitment to Well-Being*. Kansas DCF, along with statewide partners Kansas Children's Cabinet and Trust Fund (state lead for Community Based Child Abuse Prevention) and the Kansas Children's Service League (state lead for Prevent Child Abuse America) stand united and committed to significant and real change that creates safer, more nurturing environments for children in

The Indian Child Welfare Act (ICWA) of 1978;
The Fostering Connections to Success and Increasing Adoptions Act of 2008;
The Preventing Sex Trafficking and Strengthening Families Act, 2014;
The Child Abuse Prevention and Treatment Act (CAPTA);
The Comprehensive Addiction and Recover Act of 2016 (CARA);
The Victims of Child Abuse Act Reauthorization Act of 2018;
The Family First Prevention Services Act (FFPSA);
The Consolidated Appropriations Act, 2018;
The Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2019;
and;
The Further Consolidated Appropriations Act, 2020.

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

The current Revised Kansas Code for Care of Children [K.S.A 38-2201et seq.] may be found at:
http://kslegislature.org/li/b2021_22/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/>

Prevention and Protections Services
Department for Children and Families
555 S. Kansas Avenue, 1st Floor
Topeka, KS 66603

DCF Contact: Pam Hahn, Prevention Director
Phone: 785-296-4292 Fax: 785-368-8159
Pamela.Hahn @ks.gov

A.2: Agency Mission: To protect children, strengthen families and promote adult self-sufficiency

The Kansas Department for Children and Families (DCF) initiatives strive to engage children, youth and adults in evidence-based prevention strategies designed to increase the child and family’s safety, stability and well-being. Such strategies focus on the whole family, by providing services at all levels to meet the unique needs of each family served. Prevention and Protection Services (PPS) and community service providers collaborate to ensure families experience timely and effective services and interventions. PPS and its providers work alongside families. Families are at the center is the PPS philosophy. Their participation and feedback drives practice, planning, policy development, and program implementation.

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.

In early 2021, Kansas DCF created four new strategic implementation teams (SITs) to move a revised shared vision and strategies into action. The four SITs’ are: 1. Enhance employee experience, 2. Community Engagement, 3. Diversity, Equity and Inclusion and 4. Measurement. The foundation for this work is represented in the below document, “What We Believe”, that expresses DCF’s values towards our clients and each other within the agency.

Kansas
Department for Children and Families

OUR MISSION:
To protect children, strengthen families and promote adult self-sufficiency.

WHAT WE BELIEVE:

- PEOPLE HAVE THE CAPACITY:**
 - To progress
 - To succeed
 - To grow
 - To do well in life
- PEOPLE ARE THE EXPERTS ON THEIR LIVES AND HAVE:**
 - Voices
 - Choices
 - Needs
 - Strengths
 - Life Stories
- WE VALUE COMMUNITIES AND THE PEOPLE THAT MAKE THEM UNIQUE:**
 - We honor the whole person
 - We rely on each other
 - We are partners, not competitors
 - We all benefit from a collective impact approach
 - Communities bring strength through relationships and resources
- WE LEAD WITH AUTHENTICITY, CURIOSITY, AND RESPECT:**
 - We are innovative
 - We are leaders
 - We are authentic
 - We are diverse
 - We care about each other, our work and the people we serve
 - We share success stories

Integral in the SIT teams and across the agency is the shared vision below intended to guide our daily work:

- ⚙ Innovation Environment and Inclusivity
- ⚙ Strengthening Customer Experience
- ⚙ Maximizing Collaboration and Community Engagement
- ⚙ Cultivating Leaders at All Levels
- ⚙ Capitalizing on Technology
- ⚙ Maximizing Communication and Engagement
- ⚙ Becoming a Holistic and Comprehensive Agency

Along with the foundational values of transparency, walking alongside and honoring families, the six actionable strategies developed includes:

- Build on intentional agency character around Diversity, Equity and Inclusion
- Modernize and enhance the employee experience
- Build cross-functional knowledge
- Cultivate leaders at all levels
- Advance holistic service delivery
- Engage with community

Supporting these strategies are to create, prioritize, build and deploy a comprehensive technology plan and inspire two-way communication. Foundational to these strategies are valuing the voices of clients and employees and being clear about our abilities within federal, state and other mandates.

One example of how Kansas DCF is implementing this shared vision and values is the updated Kansas Practice Model implemented in SFY2020/2021. The Kansas Practice Model



integrates aspects and tools from multiple practice approaches with promising evidence research and best practices to come alongside families, their natural supports and community on a journey toward improved safety and family well-being.

The principles and approaches supported through the Kansas Practice Model all have a common focus of engagement with the family from the start of the relationship. This comprehensive model will be reviewed in more detail in section C.2. Additionally, see Attachment 2 Kansas Practice Model Explainer for an overview.

Kansas strives to emphasize program evaluation by focusing on outcomes, accountability, and fostering a culture of continuous improvement. The vision described in the 2020-2024 Child and Family Services Plan was based on analysis of the number of children in out of home placement on the last day of each month. Early in SFY2020, regions were challenged with using data to determine areas of focus within their counties where strategies could be implemented to reduce the need for foster care in their communities. Project 20 in 2020, in conjunction with changing the landscape of practice with implementation of the Kansas Practice Model, has impacted the need for foster care in Kansas. Statewide, the need for foster care has been reduced by 10% from June 2019 to December 2020. The next phase of this ongoing effort, Project 21 in 2021 continues with each region choosing new areas of focus within their counties to reduce the need for foster care. Please see Section C.2 for explanation of the decision points comprising the out of home numbers in Kansas.

Transparency through data is the driving force behind DCF's continued collaboration with communities in seeking strategies to decrease the number of children in foster care. Over the past twelve months, developing a qualified workforce by training and equipping staff with evidence-based tools, resources and practice approaches has been at the forefront of efforts by the agency to shift the culture to a prevention focused path.

Kansas has continued to implement prevention strategies focused on safely reducing the number of children in foster care. The agency's goal remains to strengthen families, prevent child maltreatment and prevent the unnecessary removal of children from their home. DCF is currently immersed in implementation of building foundational approaches and practices to change the trajectory of the Kansas Family and Child Well-Being system by investing in prevention, emphasizing the importance of family support networks and valuing strong systemic partnerships throughout individual communities, counties and other state organizations.

B. Overview of the Child and Family Services Plan / Annual Progress and Services Report and the Child and Family Services Review

The Kansas Child and Family Services Plan is a five-year strategic plan covering FY 2020-2024, that was submitted June 30, 2019. The first annual update, APSR 2021, was submitted June 30, 2021. The information contained within this annual update outlines activities completed since the APSR 2021 submission and addresses planned activities for FY 2022. Throughout this plan, DCF has responded to ACYF-CB-PI-20-13 as prescribed. Responses provided follow the Program Instruction format and can be found throughout sections C-G.

C. Requirements for the 2022 APSR

C.1: Collaboration

Throughout the Kansas Family and Child Well-Being System exists many avenues of cross partnerships, collaboration, feedback loops and ongoing opportunities to team together for the sake of the families we serve. Daily discussions occur between the Department for Children and Families and our partners, communities and sister agencies. Throughout this state plan, there will be continual references to such occurrences. For purposes of focusing on longstanding collaborations, some examples are provided in this section below. In Kansas, Family and Child Well-Being collaboration continues to evolve and remains fluid, constantly allowing opportunities for new partnerships and connections to begin.

C.1.a. Kansas Department for Children and Families

Prevention and Protection Services (PPS) consistently works alongside other divisions within the agency whose services directly impact families. 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 the four federally recognized Tribes headquartered in Kansas with PPS extending invitations to participate in policy and procedure venues, workgroups and committees. Kansas DCF created a new position in 2021, Tribal Liaison, with the intention to further strengthen collaboration with all Kansas Tribes. It is fortunate that the current Tribal Liaison is an active member of one of the federally recognized Tribes headquartered in Kansas as well as many years of work within the Kansas Family and Child Well-Being system.

All workgroups/committees serve as an opportunity to solicit input, address case review results, Child and Family Services (CFSR) outcomes, 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. This venue provides PPS an opportunity to review outcomes as they relate to safety, permanency, well-being, and review 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.

The Family Preservation Advisory Workgroup meets quarterly to discuss continuous quality improvement for the DCF Family Preservation program. Participants include front-line staff and supervisors from both DCF and the Family and Child Well-Being Case Management Providers (DCCCA, TFI and Cornerstones of Care), and DCF Program Improvement staff. This workgroup is charged with serving as a forum for data review and analysis, identifying trends, monitoring outcomes, reviewing family feedback as provided on the new Client Satisfaction Surveys, and collaborating on policy development and revisions.

The Family Preservation Program Director's Meeting meets monthly to support new Family Preservation contractors with program implementation. Family Preservation Program Directors, Family Preservation agency leadership, and Regional Assessment and Protection Administrators are invited to discuss referral numbers, outcomes, successes and challenges regarding Family Preservation in Kansas.

Early Childhood Directors Meeting occurs every two weeks to collaborate and align initiatives, funding streams and keep each other apprised of what is happening within their respective agencies. Agency partners include Kansas Department of Health and Environment, Kansas Department of Education, DCF and Kansas Children's Cabinet.

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.

Kansas Crossover State Policy Team. This multi-system and multi-agency collaboration at the state level works to identify and ameliorate barriers to addressing crossover in Kansas. The Kansas Crossover State Policy Team fosters a system of care inclusive of Family and Child Well-Being, juvenile justice, education, mental and behavioral health, and legal stakeholders that is comprehensive and adaptable to meet the unique needs of communities. The intentional and genuine partnership among multiple agencies

strengthens the system of care by enabling information sharing, striving for continuous improvement, and purposely incorporating the voices of youth and families into all decisions affecting themselves and their communities. The team meetings on a monthly basis and includes participation among multiple state agencies but more importantly includes at least two individuals with lived experience. These partners include: WY County Court Services, 8th Judicial District Community Corrections, Cornerstones of Care, CASA Johnson & Wyandotte, Judge - 5th Jud. District, DCCCA, Elsworth, DCF PPS Prevention Services, DCF, KDOC, KFAN, KSDE, MCDS, OJA, USD 273, Sedgwick County DA, Family First Grants Manager, DCF Tribal Specialist, Young Adult Consultant, Parent Advocate.

Permanency Advisory Committee is facilitated by PPS. The committee meets approximately four to six times a year to promote coordination between PPS and Family and Child Well-Being stakeholders. Membership on the committee includes: 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, Kansas Tribes, Kansas Family Advisory Network (KFAN), Kansas Foster and Adoptive Parent Association (KFAPA), Wichita State University (WSU) Caregivers Support Association, CWCMP Providers, Child Placing Agencies, 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 2-3 times a year 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 Kansas Adoption Network, as coordinated by AdoptKSKids, meets at least quarterly to review, discuss and provide input on adoption practices and policies to reflect best practice. The goal of the workgroup is to improve the effectiveness, efficiency and permanency outcomes for children with a case plan goal of adoption, as well as work toward standardization of procedures amongst contractors, grantees, and other partners across the state. Members of the workgroup include may include PPS Administration, regional administrators, supervisors, and various CWCMP staff.

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 Health Care Oversight and Coordination Plan, Attachment 3.

Family First Prevention Services Act (FFPSA) and Kansas Strong Interagency Advisory Board
The Interagency Advisory Board (IAB) is a Kansas cross-system multi- agency collaboration that was established to support two statewide implementations: The Family First Prevention Services Act and Kansas Strong for Children and Families. The IAB's overarching goal is to support and activate a comprehensive service array that spans a broad continuum of care for families by: (1) building cross-sector knowledge of needs, gaps, challenges, and best practices; (2) using data and continuous quality improvement to monitor processes and outcomes; and (3) developing and executing action plans to

address service gaps. There is one statewide group that meets quarterly and 6 regional boards that meet at least three times a year. The statewide group is comprised of statewide agency and service representatives across sectors (e.g. Family and Child Well-Being, corrections, public health, health, early childhood, behavioral health, courts and legal systems, etc.). Regional groups, co-led by community and Family and Child Well-Being leaders for each region, are comprised of regional stakeholders across child/family serving sectors. Families are also being recruited to begin participation in the groups beginning July 2021. See Attachment 4 for the IAB Charter.

Family First Case Manager Workgroup- This group meets quarterly to discuss program process, review policy, as well as agency vision and culture. The goal of the workgroup is to improve the statewide capacity of the Family First program and each evidence-based model within the program, promote best practice of the program, and enhance DCF's collaboration and coordination with the providers and community-based services. The group is comprised of Family First case managers, their supervisors, and is hosted by the prevention team.

Kansas Family First Family Council- The Kansas Family First Family Council is an advisory board of Kansans with experience in the Family and Child Well-Being system and/or prevention services as a caregiver or as a youth. The purpose of the group will be to ensure services that support family well-being are designed with families to align with their needs, priorities, and goals. Members will contribute to statewide decision-making in partnership with the Kansas Department for Children and Families, the KU School of Social Welfare, and the KU Center for Public Partnerships and Research. The groups are expected to begin in the summer of 2021.

PPS Kansas Practice Model Statewide Implementation Team (SIT) was developed to create, customize and implement a practice model which integrates different practice approaches as we work alongside families, their natural support and our community partners on the journey toward improved safety and well-being for families. Responsible to provide and respond to continuous feedback on the KPM. Discussion of what is working, identifying barriers, and to serve as the link between implementation and practitioners. It is expected the SIT team will meet four times per year. One (1) 2-day Annual Implementation Planning Meeting and Three (3) 1-day Quarterly Implementation Planning Meeting. SIT members can launch work groups as needed. It is anticipated a portion of the SIT membership will rotate each year to balance the need for stability with the need for refreshed energy, ideas, and representation." Members include: Assistant Regional Directors, Assessment/Prevention Administrator, Child Protection Supervisors, Learning & Development Specialist, Child Protection Specialists, TDM Facilitator, TDM Supervisor, Program Administrator, Child Protection Supervisor, Foster Care Admin, Assessment/Prevention Administrator, TDM State Coordinator/East Region Learning & Development Specialist, Family Finding & Independent Living, Administrator of KPRC, Director of CCWIS, Director of Practice Model and Performance Improvement, Assessment/Prevention Administrator; ICPC Compact Administrator, Curriculum Development Specialist, Professional Development Program Manager, Family Services & State Plan Manager, KanCoach/KS Strong.

Kansas Tribal Collaboration purpose is to discuss policy changes, suggestions for improved procedures and/or communication with DCF and identify any unmet needs and assist with solutions if needed. DCF Tribal Liaison meets with each individual federally recognized Tribe headquartered in Kansas on a monthly basis and all Kansas Tribes meet quarterly. Representatives include: Tribal social service administration, Tribal case workers, Tribal Family and Child Well-Being Specialist, ACYF Children's Bureau Region 7, DCF Tribal Liaison, DCF Foster Care Administrator, DCF State Plan Administrator, additional DCF program staff as specific questions arise.

Kansas Youth Advisory Council (KYAC) meets monthly and serves as the voice of youth and young adults who have experienced foster care custody, Tribal Authority custody, or Kansas Department of Corrections- Juvenile Services custody at age 14 or older. KYAC is designed to empower youth and young adults by having an organized structure for them to share their experiences and provide recommendations concerning the Family and Child Well-Being system in Kansas and on a national level. Youth and young adults ages 14 to 25 may apply to participate in KYAC. Pathway Family Services is the current contractor to facilitate KYAC. Members include: KYAC council members, DCF Independent Living staff, CWCMP Independent Living staff, Tribal Independent Living staff, KDOC-JS staff.

C.1.b. DCF and the Legal Community: Kansas Bar Association

The Kansas Department for Children and Families has identified a connection point of opportunity for development. The social and legal systems hold important roles in establishing safety and moving families forward, yet there was a lack of clear communication regarding system wide updates and changes within our organizations. DCF has changed this and is creating a culture of intentional collaboration with the legal and social systems in Kansas.

Social and legal partners need to communicate and have a clear understanding of the how our systems work and more importantly how the two systems can work together to benefit families. The truth is both systems do important and impactful work, but we both get caught in the trap of working in “crisis mode” and intentional efforts are neglected for the next crisis on the horizon. We are happy to change these norms and are creating new expectations regarding communication and open dialogue between the two entities.

DCF connected with the Kansas Bar Association and authored a series of articles for The Journal of the Kansas Bar Association, which is published six times per year in combined issues and is read by more than 5,000 lawyers, law students, Judges, and paralegals in Kansas. The Journal features legal articles, hot legal news, summaries of recent Kansas Supreme Court and Kansas Court of Appeals opinions, and upcoming information about available continuing legal education. DCF was given the opportunity to draft an article each month to share with the legal community the changes, updates and philosophy changes DCF was administering. These monthly articles allow DCF to include updates about programs and how they are connected to legislation. Additionally, prevention efforts, diversity, equity, and inclusion efforts, and shift in our agency’s priorities are discussed.

DCF co-hosted and co-facilitated multiple Continuing Legal Education (CLE) classes for Judges, Parent Attorneys’ Guardian Ad Litems, and Prosecutors across the state of Kansas in collaboration with the implementation of the Kansas Practice Model.

Additionally, regionally, local staff are meeting with Judges and Prosecutors outlining the new prevention programs through Family First, their county specific data, and ways to best assist families as they navigate through DCF services.

This shift has added a shared understanding of how important continued connections are for the families served by DCF. The hope is to build upon the foundation that has been laid and maximize the relationships being built with legal partners as DCF continues to build shared trust and advocate for healthy families across Kansas.

C.1.c. Collaboration between DCF and other States: Kansas/Missouri Border Agreement

The Kansas Department for Children and Families and the Children’s Division of the Missouri Department of Social Services are operating under a border agreement for the placement of children. Proposed placements must originate from a county bordering the state line and the placement must also be

in a county bordering the state line. Placements made under this agreement shall not exceed 90 days unless an ICPC request has been initiated. Under this agreement, children may be placed closer to their family and support network, even if the placement is in the other state. Please see Attachment 5 Kansas/Missouri Border Agreement.

C.1.d. 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. Additionally, in 2020, DCF added a Director of Medicaid and Children's Mental Health and this Director attends and serves on the committee.

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.

The 2019-2020 Annual report was presented to all Department Secretaries. Please see Attachment 6 2019-2020 Governor's Behavioral Health Subcommittee Annual Report.

C.1.e. Systems Collaboration

In Kansas, programs and services impacting children in 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), the Kansas Department of Education and the Kansas Department of Corrections-Juvenile Services (KDOC-JS). These programs and services include Medicaid (KanCare), Home and Community Based Services (HCBS) waiver service, community mental health centers, intellectual developmental disability services, psychiatric residential treatment facilities (PRTF), state hospitals, juvenile corrections and early childhood education. 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 agency and community organizations has occurred individually and in various workgroups with each of these agencies and DCF for many years. Since 2019, DCF and KDADS share leadership from the same Secretary. This has dramatically increased the communication and

collaboration between these two agencies. Due to COVID-19 restrictions DCF and sister agencies have utilized Microsoft Teams and teleconferences to continue their collaboration on behalf of the youth in foster care.

In previous years, system coordination and collaboration were identified as areas where opportunities for growth were present to improve health care oversight and coordination for children in DCF custody. In Kansas, key system collaboration workgroups exist. A few examples of this coordination/collaboration exist in the following:

Foster Care in KanCare: The workgroup addresses KanCare issues unique to children in DCF custody. The workgroup meets monthly and is comprised of representatives from DCF, KDHE, KDADS, KDOC-JS, Family and Child Well-Being Case Management Providers (CWCMPs), and the three Medicaid Managed Care Organizations (MCOs).

State Agency Foster Care in KanCare: The workgroup is comprised of state agency representatives only. They meet monthly, at a minimum, and at times twice monthly. This workgroup focuses on issues, barriers and state agency coordination specific to children in DCF custody.

Both workgroups include multi-state/community agency participation necessary to support ongoing collaboration to ensure children in foster care receive appropriate medical/mental health services.

PRTF Stakeholders: In SFY 2019, a third workgroup was formed to work on issues related to children in foster care who are receiving or need to receive treatment in a Psychiatric Residential Treatment Facility (PRTF). The “PRTF Stakeholder” group meets quarterly and is coordinated and facilitated by PRTF providers. Participants serving on this group include the PRTFs, KDADS, DCF, KDOC-JS, KDHE, CWCMPs, and the three managed care organizations (MCOs). A couple examples of processes this workgroup was able to implement to reduce the need for PRTF placement and reducing PRTF waitlists are explained in the following:

DCF partners with KDADS and the MCOs to reduce the number of children on the PRTF waitlist by reviewing the status and services provided to each youth. The PRTF Stakeholder group meets with each MCO and reviews the cases of foster care youth on the waitlist. This review occurs every two weeks. For each youth, the review captures 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, this group reaches out to the CWCMP to determine if a referral to services is appropriate and if appropriate services are available in the community where the child resides. Ongoing obstacles are shared with sister agencies and in other groups focused on KanCare issues.

PRTF Referral Process: Referring a youth in foster care to a PRTF is the responsibility of the Family and Child Well-Being Case Management Provider (CWCMP). The Managed Care Organization (MCO) assigned to the child is responsible for requesting a Pre-Authorization Review (PAR). The MCO sends the PAR to the child’s local Community Mental Health Center (CMHC) for review by their Community Based Service Team (CBST). The CMHC returns the CBST findings indicating either approval or PRTF diversion based on their review of the PAR.

When a youth is approved for placement in a PRTF the CWCMP decides which facility the youth will be referred to based-on location, available beds, gender, and individual needs of the youth. The CWCMP considers each facility and the program they operate within to determine the best match. If a facility does not have an opening, the youth is placed on a PRTF waitlist until an appropriate bed becomes available.

The MCO and DCF are included in planning when a youth is ready to be discharged from their PRTF placement. The MCO has the option to convene a “Complex Case Staffing” at any time during the discharge planning process. Communication and input from the MCO, DCF PPS staff, the CWCMP, caregiver(s) of the child, and KDADS all determine if a “Complex Case Staffing” is warranted or necessary. When held, the complex staffing focuses on strategies for discharge and/or appropriate placement options for youth continuing to exhibit high needs.

In FY 2020, DCF added a Treatment Transition rate available to all relative, foster placement, or other caregiver situations regardless of which MCO the youth is assigned to. This rate level allows reimbursement for the cost of being active and present in the youth’s discharge planning. Active participation from the caregiver is important to stabilize and successfully transition the youth back into a family setting in their community. Caregivers must participate in the treatment plan identified by the program being delivered within the facility to qualify for this rate of care. The rate is available to the caregiver for up to 6 months (180 days) while the caregiver engages in the additional services needed to help transition the youth into their care.

Youth who are diverted from PRTF admission are referred for community services.

KDHE has implemented One Care Kansas (OCK), community service coordination program, which will be available for children in foster care who have complex conditions. Community service coordination will be utilized by foster care youth who have been diverted or can be diverted from PRTF admission and after discharge from the PRTF if admission occurs. To qualify for OCK youth must have a diagnosis of Bi-Polar Disorder, Schizophrenia, or asthma with the risk of developing a secondary chronic illness such as diabetes or kidney disease. On average in SFY21, 265 youth in foster care had a diagnosis of Bi-Polar or Schizophrenia based on data from three Kansas MCO’s. This represents approximately 4% of the average total youth in foster care served (265/6709) by all MCO’s.

KDADS has implemented a new policy in SFY 2020 entitled HCBS Access for Individuals in the Custody of DCF. The policy provides clarification on the HCBS-I/DD, PD, TA, and TBI waiver programs and the criteria for the exception process for eligible children in DCF custody. The policy establishes processes and procedures for submitting, managing and determining exception requests for children in foster care. Additionally, the policy ensures access to the waiver program services which best meet the assessed needs of the child.

C.1.f. 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.

In October 2019, Kansas began working with Georgetown University’s Center for Juvenile Justice Reform (CJJR) to implement the Crossover Youth Practice Model (CYPM). The CYPM was established in 2010 and has since been introduced in over 120 jurisdictions across the United States. Research demonstrates the CYPM is effective in reducing out-of-home placements and recidivism while increasing prosocial outcomes among crossover youth, or those young people who are involved with both the juvenile justice child welfare systems. The CYPM has been recognized as a “promising practice” by the California Evidence-Based Clearinghouse and the National Institute of Justice. Three state agencies, the Kansas Department of Corrections (KDOC-JS), the Department for Children and Families and the Office of Judicial Administration (OJA) support the CYPM at a statewide level. These stakeholders under the guidance of CJJR convened the Kansas Crossover State Policy Team (SPT) in the Fall of 2019. In

addition to representatives from KDOC-JS, DCF, OJA, there are representative members on the SPT who are mental health professionals, professionals with expertise in substance abuse treatment, education professionals, courts, prosecutors, defense attorneys, law enforcement, tribes (DCF Tribal Specialist), youth and families with lived system experience, foster care providers and others to assist in identifying solutions for youth and families affected by crossover youth issues. The multi-system and multi-agency SPT members meet via virtual platform monthly. They examine and evaluate state policies that impact the crossover youth population and identify opportunities to change policies and practices to better serve youth and families and encourage cross-system collaboration, review statewide data and make recommendations based on the data. Nationally, each community that implements the CYPM determines a specific target population on which to focus their efforts. The SPT made it a priority to clearly delineate the term “crossover youth” to ensure its use is consistent across the state. The SPT defines Crossover Youth as any young person age 10 and older with any level of concurrent involvement with the child welfare and juvenile justice systems, inclusive of out-of-home placements, probation, Immediate Intervention Programs (IIPs), and voluntary/preventative services (defined as CINC cases that are open for services such as Family Preservation, Family First and Family Services. The definition is being adopted at the local level as well to support consistency across the state and so guidance provided by the SPT is applicable to all jurisdictions focused on crossover youth. The team is working to identify challenges and opportunities regarding cross-county cases including courtesy supervision, communication between foster care providers and Juvenile Intake and Assessment Services (JIAS), and compliance with the Indian Family and Child Well-Being Act. Please see Attachment 7 for SPT meeting minutes.

Five subcommittees have been established to address; Prevention, Information Sharing, Education, Local Policy and Support and Quality and Accessibility (the last two subcommittees will convene at a later date). Each subcommittee meets via a virtual platform on a monthly basis.

The Prevention Workgroup is focused on understanding and improving communication issues between systems and agencies. The group explored avenues to disseminate information on services and resources and is in the process of developing a survey to gather feedback from individuals with direct system experience to better understand what challenges are most pertinent to communication and service coordination barriers. See Attachment 8 for the Prevention Workgroup meeting minutes/updates.

The Information Sharing Group is focused on creating a toolkit with existing statutes and Juvenile Justice/CINC codes related to information sharing. The toolkit serves as a guide for the counties regarding information sharing capacities (e.g., identifying crossover cases, case assessment and planning, etc.). There has been collaboration/discussion regarding Memorandums of Understanding between OJA, KDOC and DCF to allow for and support needed data sharing to improve collection, tracking and analysis of data as relates to populations served by the Family and Child Well-Being and juvenile justice systems. This will help guide and support the agencies in providing appropriate evidence-based programs/practices for youth needing services. Please see Attachment 9 for the Information Sharing Group meeting minutes and updates.

The Education Subcommittee is focused on youth losing credits and maintaining stability, especially youth who have frequent placement moves. Two of the Education Subcommittee members began attending the Educational Stability for Children in Foster Care Workgroup, in February 2021, due to similarities in the workgroup’s content and membership, with the possibility of combining the workgroup and Subcommittee.

To ensure collaboration and consistency across the state, in March of 2020 DCF and KDOC-JS each hired one Crossover Youth Policy and Practice Coordinator (henceforth referred to as

Coordinators) to their staff. OJA hired a Coordinator in March of 2021. The Coordinators meet via virtual platform weekly to share information, discuss upcoming meetings and troubleshoot concerns.

The Coordinators are responsible for the facilitation of the State Policy Team (SPT), as well as providing support, training and technical-assistance for community-level initiatives. Additionally, the Coordinators provide ongoing information to community stakeholders through monthly newsletters, the KDOC-JS Juvenile Justice Web-line and the DCF Prevention in Kansas Newsletter. Please see Attachments 10 and 11 for an example of each newsletter.

There are two pilot counties for implementation of the CYPM—Shawnee and Montgomery. Each county was tasked with forming Leadership and Implementation teams. Each Leadership Team will oversee the direct work and each Implementation Team will design and carry out the work to ensure the CYPM fits the specific needs of the jurisdiction. Leadership teams have been established in each of the pilot counties. Montgomery County opted to have one Leadership/Implementation team and Shawnee County created two separate teams.

Systems assessments were conducted in Shawnee and Montgomery Counties. Following the assessments, recommendations were made for CYPM implementation plans in each county based on the strengths and needs identified in the assessments. Please see Attachments 12 and 13 for recommendations for each county.

Sedgwick County is working on reinvigorating the CYPM. The county started the work back in 2015 but had delayed progress. With new practices and staff in place, the county is regaining momentum. A systems assessment was conducted by Georgetown University. Following the assessment recommendations were made for a CYPM adjustment plan. Please see Attachment 14 for the Sedgwick County adjustment recommendations.

Shawnee and Montgomery Counties began discussing the implementation of listening sessions in December 2020. A Listening session is defined as a safe space for individuals to share their system experiences. Specifically, youth and their families who have lived Family and Child Well-Being and juvenile justice system experience will be invited to participate in the listening sessions. The outcomes of the conversations will be synthesized to inform and identify meaningful actions that can be taken to address and support crossover youth in each community. Involving youth and families as partners in making decisions that affect them increases the likelihood the decisions made will be accepted and those decisions will better meet the needs of constituents. Including constituent voices not only helps them feel valued and connected to their communities but also helps communities and systems to better understand and value the perspectives of children, youth and family's perspective while coordinating and improving services. KDOC-JS reinvestment dollars will be used to compensate youth and families for their participation in the listening sessions.

Throughout the year, representatives from DCF, KDOC-JS, and various other service providers met via virtual platforms to hold case specific Multidisciplinary Teams (MDTs). The joint discussions brought professionals together to educate each other on agency-specific roles and responsibilities and to share perspectives. The group met to identify gaps and areas where the duplication of services may occur while brainstorming ways to jointly address the challenges and needs of specific crossover youth. The use of MDTs is being used more frequently to effectively serve hard to place youth until additional counties can be identified for CYPM implementation. Using an MDT creates enhanced opportunities to establish common goals for case plans, identify appropriate services, and increase accountability and the satisfaction of youth and their family.

Staff from DCF, KDOC-JS and OJA meet on a monthly basis to address issues related to the juvenile justice and child welfare system reform, including, but not limited to, appropriate services and agency initiatives and issues regarding crossover youth. These monthly meetings allow for consistent and authentic communication, brainstorming, sharing of trainings that may impact both juvenile justice and Family and Child Well-Being, and genuine working partnerships amongst agencies.

Georgetown University, DCF, KDOC and OJA attended several stakeholder meetings during FY21 to raise awareness about the CYPM project. Those meetings included the Foster Care Collaborative, the Joint Citizens Review Panel, the January Resident Tribes Meeting, the Statewide Family First and Kansas Strong Interagency Board, the KDOC-JS Technical Assistance Teleconference and the Best Practices in Kansas Child Welfare Law Training. The SPT official flyer was given to participants at each of these meetings. Please see Attachment 16 for the Kansas CYPM Flyer.

C.1.g. Kansas Early Head Start

Kansas Early Head Start (KEHS) is a social service and child development program. This is an initiative providing 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 10 KEHS programs in 39 counties, with 967 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 childcare 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 childcare for infants and toddlers and to increase the quality of childcare for all Kansas children;
- Allows KEHS programs to provide quality training to childcare providers who partner with them;

- Provides childcare through DCF subsidy for parents who are employed, attending school or are in a job training program;
- Supports childcare 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;
- 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 childcare 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 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, Family First 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 in the DCF Policy and Procedure Manual at www.dcf.ks.gov.

The PPS Administration Prevention Team is a standing member of several early education and home visiting leadership workgroups. Participants include Head Starts across the state, DCF Assessment and Protection staff, Family First Grantees, Family Preservation Providers, and Foster Care Providers. The objective is to bridge relationships, share information related to DCF programs and contacts, and to learn more about Head Start programs and processes.

C.1.h. 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.

Since Jobs for America's Graduates- Kansas (JAG-K) started programming in 2013, there have been 110 youth in foster care fully participate in the traditional evidence-based, national program. From Fall 2013 through Spring 2019, 95% percent of those students graduated from high school, far exceeding state and national graduation rates for youth in care. Those students were mostly able to stay in one JAG-K program or transferred to a school that also had JAG-K.

In Spring 2018, DCF partnered with JAG-K to launch Success Academy in Wichita to help Kansas students in foster care have a better chance of realizing positive outcomes. The first cohort of ten students were all academically behind, and none were on track to graduate. At the end of the semester, seven of the students were on track to graduate, and both seniors graduated. Seven of eight seniors graduated (88%) from the pilot, and JAG-K staff continued to work with the non-graduate for 12 months to help that student graduate by May 2020. For the 2018/19 school year, two more areas for services were added to the Success Academy: Kansas City and Topeka. Success Academy served 44 youth in foster care, eight of whom were Seniors. Seven of those Seniors graduated, making a 90% graduation rate. For the 2019/20 school year, JAG-K added a Western Region program. Eighty-three total students were served with 22 seniors, 17 of which graduated, making a 78% graduation rate. In 2020, JAG-K changed the name of the program from Success Academy to Transition Services (TS). The COVID-19 pandemic has affected the overall referral numbers, but it has also enabled JAG-K to institute new creative ways to reach students virtually.

Transition Services has three essential components:

- 1) A TS Career Specialist is dedicated to up to 25 students in a cohort and serves as that student's education advocate regardless of where the student is placed.
- 2) Online credit recovery and core classes are utilized to help students catch up and stay on track regardless of how many times they experienced placement changes in a semester or academic year.
- 3) Students are enrolled in the traditional JAG-K program if one exists and has space available. If a JAG-K program is not an option, the TS Specialist introduces and helps the student master the research-based JAG competencies, which include career development, leadership, and life skills. JAG-K is working with DCF to expand the list of competencies to include those that are specific to the needs of youth in care.

The collaboration between PPS and JAG-K encourages both programs to continuously look for better methods to meet the needs of older youth in foster care.

C.1.i. Community-Based Child Abuse Prevention

The Kansas Children's Cabinet and Trust Fund (KCCTF) is the lead agency responsible for the administration of Community-based Child Abuse Prevention (CBCAP) funds. The 1999 Kansas Legislature created the KCCTF to manage the Children's Initiatives Fund (CIF) with the goal of supporting programs which promote 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, 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 (KUCPPR), to create an accountability framework to assess CIF programs. The framework encompasses a multi-phase process of information gathering, assessment of programs and recommendations.

Two agencies, KCCTF and DCF, work cooperatively together through an inter-agency agreement which establishes 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 Family and Child Well-Being. 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 Family and Child Well-Being system, and Kansas Strengthening Families. Adverse Childhood Experiences research is being used by CBCAP to inform prevention activities.

DCF's Family Preservation Program is partially funded by CIF funds. 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.

In addition to the partnerships fostered through Family Preservation, CBCAP has been a participant in the development of Family First. DCF issued a Request for Proposal for Family First Programs and CBCAP was on the Grant Peer Review Committee to assist in the review and selection of programs in Kansas. Additionally, they are a participant on the Family First Statewide Interagency Advisory Board (IAB) a program serving both Kansas Strong and Family First.

Members from DCF programs serve on the Kansas Early Childhood State Directors Team. This team meets twice a month and boast members from KDHE, Kansas Department of Education, KCSL, DCF and University of Kansas. Members of the team are active participants in strategic planning and making funding decisions related to Early Childhood programs in Kansas. The team also hosts a webinar for stakeholders twice a month.

Additional statewide partnership with CBCAP is further discussed in section C.3.

C.1.j. 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 issuing recommendations to modify and/or improve the child protective services system from intake to petition. Kansas State University facilitated these meetings until the end of December 2020. In February 2021, Mainstream Nonprofit Solutions began as the facilitators of this monthly meeting. Contracted facilitation is funded through the Child Abuse Prevention and Treatment Act (CAPTA).

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 Family and Child Well-Being system from custody to transition. This task force is facilitated by Kansas State University staff and meets monthly. Contracted facilitation is funded through the Child Abuse Prevention and Treatment Act (CAPTA). The task force gathers monthly.

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. This Board is facilitated by a representative of the Office of Attorney General. The Board meets monthly to review cases of child death.

See Attachments 19 and 20 for the Kansas Citizen Review Panel CTT Annual Report 2020 and Intake to Petition CJA Task Force and Attachments 19.1 and 20.1 for Director's Response 2020 Custody to Transition report and Director's Response 2020 Intake to Petition.

C.1.k Kansas Court Improvement Program

Collaboration continues between the Kansas Department for Children and Families (DCF) and the Kansas Judicial Branch through DCF's participation on the Supreme Court Task Force on Permanency Planning (SCTFPP) and court personnel participation on the citizen review panels. There is court system participation on two of the three panels: The Citizen Review Panel: Intake to Petition and the Citizen Review Board: Custody to Transition. The judicial branch does not participate on the third panel, the Kansas State Child Death Review Board. The collaboration continues with current 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 supported by the ongoing involvement on the Kansas Judicial Council Juvenile Offender/Child in Need of Care (JO/CINC) Advisory Committee and other specially appointed Judicial Council Subcommittees and/or Joint Committees when needed. The JO/CINC Advisory Committee includes representatives from the judicial, legislative, and executive branches of government. DCF has a representative member on the Judicial Council JO/CINC Advisory Committee. The Committee addresses multiple issues related to the juvenile offender system, the Family and Child Well-Being system, and "crossover youth" issues related to both systems. The Committee continues to assist with any necessary updates to specific Kansas Judicial Council forms related to 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 best practice.

The implementation of the Family First Prevention Services Act (FFPSA) involved collaboration between the judicial, legislative, and executive branches of government during the 2019 Legislative session. Representatives from each branch met jointly and developed legislation to implement, specifically the

requirements of the Qualified Residential Treatment Programs under the FFPSA. The needed legislation was successfully passed during the 2019 Legislative session and signed into law by the Governor. Kansas Judicial Council and SCTFPP developed the needed court notices and journal entry forms which were approved and posted on www.kansascourts.org. Joint collaboration related to ongoing implementation of FFPSA has continued. Currently, a subcommittee of the Kansas Supreme Court Task Force on Permanency Planning is working on development of an updated Bench Card related to Qualified Residential Treatment Programs (QRTPs).

OJA conducts two Best Practices in Child Welfare Law Trainings per year (Spring and Fall) in collaboration with DCF. Participants include judges, county/district attorneys, agency attorneys, parents' attorneys, Guardians ad litem (GALs), Court Appointed Special Advocate (CASA) program staff and volunteers, and members of the Citizen Review Panels.

Court Improvement Program (CIP)

Joint Project-Judicial Branch with DCF (Child Welfare Agency): Permanency

Kansas commenced the Child and Family Services Review (CFSR) Round 3 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 at a minimum of every 12 months thereafter (as required by Kansas statute). Stakeholders agreed permanency hearings occur timely, with many occurring as often as every 6 months." However, under the Permanency Statewide Data Indicator Performance, Kansas did not meet the national standard in two areas:

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%. DCF and the Judicial Branch are working jointly to strategically focus on improvement of the performance. DCF data was provided to the Judicial Branch and the four large urban areas in the State which are not meeting the performance standard. Strategies to improve performance have been discussed. Kansas law requires permanency hearings be held every 12 months subsequent to the initial order of removal.

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?" Initially, Kansas did not meet the national standard of 30.3% as the state's performance was 26.3%. Subsequently and prior to completion of the PIP, such standard was met.

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

In the past, the CIP assisted in utilization of the Rapid Permanency Review to decrease the time to finalize adoptions. The review project was facilitated by Casey Family Programs. The goal of the project was to identify the strengths and weaknesses in the process leading up to the filing of a petition for adoption and address through a structured accountability process. This process included monthly meetings between Regional DCF staff and the Child Welfare Case Management Provider (CWCMP)

Supervisors. Casey Family Programs provided support and guidance to establish an executive and system level accountability process known as the Cadence of Accountability. The target population was children in a stable pre-adoptive home and legally free for adoption. The participating counties in the initial implementation of the project were Shawnee, Wyandotte, Saline, Sedgwick, Finney, and Ford. The onsite reviews began in February 2018. 301 cases were reviewed as of June 30, 2019. 78 of said children had achieved permanency through adoption.

Under a new DCF Administration as of January of 2019, it was decided a new cohort would become the focus of the Rapid Permanency Review process. The new cohort relates to reintegration: children who have been placed at home for 90+ days and released from DCF custody. DCF Grantee, Saint Francis Ministries (SFM), concluded the RPR in the West and Wichita regions in November of 2020. Meetings with KVC and SFM began again in March of 2021 to determine where each agency was in terms of progress with their cadence of accountability. KVC and SFM have submitted summary reports to Casey Family and DCF and are currently in the cadence stage at the time of this APSR 2022 submission. Table 1.1 below reflects the results of all reviews completed in SFY21. Next steps will be to assemble one new tool from all the CMP's (KVD, SFM, CoC and TFI) for review by DCF administration in early SFY22. The RPR Tracking Tool is being utilized. Reviews were conducted virtually using TEAMS and there was positive response and participation during the rounds of RPR on this 2nd cohort. See Attachment 20.2 Kansas Reintegration RPR Tracking Tool.

Table 1.1 SFY21 Rapid Permanency Reviews

Region	CMP	Area	Number of Cases Reviewed	Percentages of Cases Reviewed	*Reached Permanency
West	SFM-West	1	19	6%	19
West	SFM-West	2	10	3%	10
East	KVC	3	53	16%	52
East	TFI	4	32	9%	28
Kansas City	COC*	5	22	6%	6
Kansas City	KVC	6	34	10%	29
Wichita	SFM-Wichita	7	151	44%	84
Wichita	TFI	8	20	6%	16



Adoption Tracking Tool

Working together to achieve timely adoptions for Kansas children



In May of 2019, the Capacity Building Center for Courts, University of Kansas (KU), DCF, DCF grantees, OJA, and ACF staff met for two (2) days to identify projects targeted for both the Kansas Strong grant project (KU is the lead) and the court improvement strategic plan. As a result of the discussion about current practices, the team agreed efforts would focus on improving processes to achieve a faster rate of permanency through adoption for children in care who are legally free for adoption and worked to create the Adoption Tracking Tool (ATT). The ATT identifies key benchmarks and data elements of any case for which a child is legally free for adoption and is awaiting adoption. “Legally free” is defined as the parental rights have either been relinquished, accepted, and approved by the DCF Secretary or have been terminated by the court. The Office of Judicial Administration (OJA) created a workgroup consisting of judges, attorneys, DCF staff, OJA staff, and the SCTFPP. This workgroup created and refined the tool. The ATT was later vetted by the Kansas Strong Steering Committee and DCF’s Prevention and Protection Services (PPS) administrative staff. The ATT was piloted in Shawnee, Franklin, Norton, Douglas, Reno and Allen counties from June 1, 2020 through December 31, 2020. Three additional sites, Lyon, Chase and Wyandotte counties, were added to the pilot beginning April 1, 2021. These three additional counties will use the tool through June 30, 2021. University of Kansas staff obtained feedback from pilot participants in the original six counties via surveys and stakeholder focus groups. The feedback on use of the new Tool was primarily positive. CIP staff provided orientation and training related to the ATT to court and legal staff in the pilot counties. See Attachment 21 for details related to the feedback obtained from the surveys and focus groups.

During the Spring of 2021, the final ATT was submitted, along with related policy and instructions, to the DCF Prevention & Protection Services division Policy Workgroup to approve inclusion of such Tool, policy and instructions for use in the DCF PPS Policy & Procedures Manual which will be posted on the DCF public website as of July 1, 2021. In June of 2021, CIP staff will provide orientation and training for court and legal staff in all counties which were not included in the pilot. As the result of joint work and collaboration between KU, OJA, DCF and DCF Grantees, there will be statewide implementation of the ATT on July 1, 2021. Two questions related to the ATT will be added for DCF Case Read/Review process to measure use and effectiveness of the Tool. See Attachment 21.1 Adoption Tracking Tool.



Parent*/Youth Facilitation

Keeping families together

*Or caregiver



This same team which developed the ATT project went on to create the Parent/Youth Facilitation (PYF) Project. This project focuses on older youth with the goal of improving the following two outcomes: 1) reducing the number of youths coming into DCF custody and 2) reducing the number of youths aging out of foster care. The process described below is utilized before the filing of a child in need of care case, in an effort to effectively meet the youth’s and family’s needs by providing appropriate services to

support the resolution of problems. It is being piloted in 2 counties, Wyandotte and Saline. If a youth is 14-17 years old, at risk of removal from the home, and the family resides in the counties where the project is being piloted, the prosecutor may refer the youth to a trained facilitator. The facilitator works with the youth and youth's family to attempt to come to an agreement on how best to address the current issues/problems. The agreement is embodied in writing and a summary report is returned to the prosecutor. The agreement is monitored for effectiveness/success. If successfully completed, the prosecutor is informed. If there is no agreement entered into and/or the plan in the agreement is not successful, the prosecutor is notified. It is then within the prosecutor's discretion to determine how to proceed. OJA recommended that a long-time, certified parent/adolescent mediator provide consultation on the project. KU contracted with the mediator and her work has extended to every piece of the project specifically, designing the facilitation process and training the facilitators. University of Kansas staff, DCF, OJA, Prosecutors, Judges and the P/Y Facilitation consultant collaborated to develop the Fact Sheet, Program Brochure, letters, and forms to be used in connection with this project. See Attachment 22 Parent Youth Facilitation Initial Pilot Summary for additional details of the pilot projects in Wyandotte and Saline counties. Prosecutors in the two pilot counties have referred 36 families, 20 of whom have accepted the P/YF service, for a service acceptance rate of 55.6% from 9/1/2020-8/14/2021. The workgroup will reconvene in September 2021 to identify key successes and barriers, refine implementation to leverage these lessons, and partner with OJA and DCF to select and launch a third site to expand this pilot program to an additional urban community in the Fall of 2021.

Joint Project-Judicial Branch with DCF (Child Welfare Agency): Termination of Parental Rights

Kansas commenced the Child and Family Services Review (CFSR in 2015 and DCF completed the related PIP in June of 2019.) 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 the 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 the stakeholder interviews, individuals suggested there was not a consistent process to ensure timely filing of termination of parental rights.

The judicial branch at such time had a data system, Full Court Juvenile Compliance System, which tracked the filing of the motion for termination of parental rights. The DCF FACTS system tracks the conclusion of termination of parental rights proceedings and when the child is available for adoption. However, Kansas child in need of care law does not require a separate motion for termination of parental rights to be filed when a parent voluntarily relinquishes parental rights nor is it required there be filed documentation, by journal entry or report, when compelling reasons are cited as to why a motion will not be filed. Kansas statute requires "compelling interests" be documented in the IV-E agency's records (DCF records). The judicial branch is in the process of implementing Odyssey, a new statewide case management data system. In configuring this system, OJA worked to implement procedures allowing for additional methods of tracking this information. The new system will track when notices of hearing are issued. However, if notice is provided orally in court (allowable per Kansas law) and no further notice is issued, the new system will not be able to track such oral notice.

CIP and DCF staff agreed to request the Kansas Judicial Council Committee on Child in Need of Care (CINC) and Juvenile Offender (JO) issues review the statutes related to the termination of parental rights and the voluntary relinquishment of parental rights for any suggested revision. The Committee reviewed and did not determine a revision to the statutory language was needed.

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

Kansas commenced the Child and Family Services Review (CFSR) Round 3 in 2015 and related PIP in June of 2019. The CFSR Item 24, Notice of Hearings and Reviews to Caregivers, received a rating of

Area Needing Improvement. Stakeholders at such time reported inconsistency existed in notification of court hearings and noted the ability of caregivers to be heard in court is inconsistent across the state. The findings were based on information obtained during the statewide assessment and stakeholder interviews.

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 subject child if child is 14 years of age or older;
- 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 worked with the Kansas Foster and Adoptive Parents Association to develop a survey. The SCTFPP requested the survey address all types of notices required under statute; did the foster parents attend the hearing; if they did attend, were the foster parents addressed during the hearings, and the use of the foster parent court report form.

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

- Prepare a training for family and child well-being stakeholders concerning the requirement for foster parents to receive notice and their right to be heard during permanency hearings. Completed - Best Practices Trainings and Governor's Conference Training in 2019.
- Edit Foster Parent Report to the Court (DCF Protection & Prevention Services (PPS) Policy and Procedure Manual (PPM), Appendix 3G). Completed.
- Make Foster Parent Report to the Court (PPS PPM, Appendix 3G) available on the DCF website. Completed.
- Review notice statute and language requiring the notice to foster parents included the Foster Parent Report to the Court (Appendix 3G) to determine whether revision is needed. Completed.
- Review documents in "red book" and consider placing information on the next hearing date and contact information for the guardian ad litem. DCF decided not to implement this intervention.

A copy of the survey was disseminated by CIP in collaboration with DCF as well as the results of same which are attached. See Attachment 22 Foster Parent Survey Results. At the time of submission, there are no confirmed plans to complete a subsequent survey.

The Kansas Foster Parents Notice of Hearings and Rights to Be Heard Survey and Results were provided with the APSR submitted on June 30, 2020. The first three interventions above have been completed. For

the fourth intervention, the Supreme Court’s Task Force discussed statutory revisions and determined none were needed at that time. Red book changes were discussed, but there have been numerous staff and process changes in past few years, so PPS Program will continue to seek effective ways to share information with foster parents. The DCF PPS Permanency Team regularly meets with each of the licensed Child Placing Agencies who sponsor family foster homes and continues to seek ways to support foster parents.

An ongoing commitment to collaboration between DCF and the Kansas Judicial Branch creates a climate where the shared value of safety, permanency and well-being of all Kansas children provides the framework for effective delivery of family and child well-being services.

C.1.l. Human Trafficking

Cases assigned to assess Human Trafficking – Labor between 7/1/20-2/28/2021	19
Cases assigned to assess Human Trafficking – Sexual Abuse between 7/1/2020-2/28/2021 ¹	251

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 (per Kansas statute):

- 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. Law enforcement is to then enter such information into the National Crime Information Center and the Kansas bureau of investigation.
- 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.

¹ Source CPSINTAKES_received_assigned, DCF Share Point, Last Modified March 18, 2021.

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 provide assistance and resources. The Program Manager works regularly with the Kansas Attorney General's Office, the three law enforcement associations across the state (Kansas Association of Chiefs of Police, Kansas Sheriff's Association, and the Kansas Peace Officers Association), the Kansas Bureau of Investigation, the Kansas Highway Patrol, and the Exploited and Missing Child Unit in Wichita and the Kansas Department of Corrections.

DCF participated in a statewide multidisciplinary training, specifically for law enforcement, family and child well-being, medical, corrections, and community organizations in the fall of 2019 on the subject of human trafficking. That was a joint venture by the Kansas Attorney General's Office, the three law enforcement associations, Department of Corrections (juvenile), and DCF. DCF also holds a position on the Kansas Attorney General's Human Trafficking Advisory Board (HTAB). The Program Manager is also an active member on the Law Enforcement Committee and the Victim's Service Committee of HTAB. The Human Trafficking Advisory Board (HTAB) meets quarterly. Since 2019 HTAB has meet virtually due to COVID but in the summer of 2021 they began meeting in person again this summer.

The Victims Service Committee (HTAB) created a short-term work group to create a comprehensive plan for children and youth in Kansas who have been victims of human trafficking. DCF was asked to participate in this work group. A detailed document will be created and presented to HTAB in the fall of 2021 that can serve as a road map for the state.

DCF is also participating with a small group from HTAB to complete the National Advisory Committee on the SEX Trafficking of Children and Youth in the United States. The National Advisory Committee on the Sex Trafficking of Children and Youth in the United States was established in January 2017, as authorized by the Preventing Sex Trafficking and Strengthening Families Act of 2014. The Committee advises the Secretary of Health and Human Services (HHS) and the Attorney General on practical and general policies to improve the Nation's response to the sex trafficking of children and youth in the United States. As part of this work, the Committee developed recommendations for states to improve their efforts to combat the sex trafficking of children and youth. The report contains twelve sections with recommendations to address the sex trafficking of children and youth in the United States. HTAB was designated as the lead to complete the survey for Kansas. One of the twelve sections, in the survey, is dedicated to child welfare so DCF is assisting HTAB in completing the survey. So along with the recommendations from the work group of the Victim Service Committee it will give Kansas direction in improving their response to victims across the state.

Most of the Immediate Response requests come from law enforcement across the state, and they have also been affected by COVID-19. Many of the law enforcement agencies are answering only priority calls and much of their proactive work has been suspended due to the pandemic which has resulted in less recoveries. The KBI became a partner with DCF in 2019 in the Immediate Response program. Law enforcement calls the KBI when they have recovered an underage victim of trafficking and the KBI then notifies the provider for the response. The KBI also collects information about the trafficking incident that will help Kansas to have a clearer picture of what trafficking looks like in Kansas.

DCF has partnered with the Kansas Department of Corrections to assist in developing a screening instrument (Kansas JIAS HT Screening Instrument) that will be implemented at JIAS locations across the state sometime in 2021. There had been no screening tool used in JIAS locations across the state to screen for human trafficking. KDOC Juvenile Division is developing the screening tool that will screen all

youth, ages ten and above, that are processed through statewide JIAS locations. They believe this will greatly assist those youth who otherwise may not have been identified through other agencies. Every child/youth (over ten years of age) will be assessed for human trafficking at the time of intake by using the screening tool. If a youth screens positive than either the law enforcement agency that brought the child to JIAS or the law enforcement agency where the JIAS is located will be notified and asked if they want a human trafficking assessment conducted. If law enforcement requests an assessment that agency will notify the KBI who will then contact the appropriate provider's Immediate Response Team who will then conduct an assessment.

DCF will partner with the Department of Homeland Security, US Marshal Service, Homeland Security Investigations, Federal Bureau of Investigations, Kansas Bureau of Investigations, Kansas Highway Patrol, Wichita Police Department, National Center for Missing and Exploited Youth, Child Advocacy Center of Sedgwick County and the Wichita Children's Home (WCH) in June 2021 on Operation Archangel. This operation focused on sex trafficking and locating children who are missing from foster care in the greater Wichita metro area. This operation was initiated by the Department of Homeland Security as part of their efforts to fight domestic minor sex trafficking within the United States and to assist in locating youth who are missing from the nation's foster care systems. DCF participated in 2018 and 2019 as well. There was no operation in 2020 due to COVID.

A total of 30 officers/agents were assigned to the operation from federal, state and local law enforcement agencies who spent three days following leads that were developed through DCF/Provider Special Response Teams for 68 missing youth thought to be in the Wichita area. A total of eight youth in care and missing were recovered in the Wichita area. Another six were recovered outside the Wichita area through leads that were developed during the operation. Those youth were located in El Dorado (Butler County), Topeka (Shawnee County), Pittsburg (Crawford County), Great Bend (Barton County), Kansas City (Wyandotte County) and Dodge City (Ford County). Three of the youth recovered were at high-risk for involvement in human trafficking with one being a previous victim.

C.1.m Collaboration Against Sexual and Domestic Violence



The Kansas Coalition Against Sexual and Domestic Violence, Inc. (KSCDV) is a statewide nonprofit organization with the mission of preventing and eliminating sexual and domestic violence in Kansas. As an organization, KSCDV trains professionals working in an array of disciplines, collaborates on public policy with partners and lawmakers, and increases awareness about sexual and domestic violence.

DCF signed a Memorandum of Understanding with the Kansas Coalition Against Sexual and Domestic Violence, Inc. As of January 1, 2021 KSCDV, is the sole source offering skills-based training in screening, interviewing, assessment, safety and permanency planning and resource referral actions. In 2016, KSCDV was one of twelve (12) sites nationally to be awarded the U.S. Department of Health and Human Services Specialized Services for Abused Parents and Their Children grant. Through this federal family and child well-being project, the past 4 years, the Kansas Coalition Against Sexual and Domestic Violence (KSCDV) has built capacity and trained more than 1,400 family and child well-being professionals on issues related to domestic violence and child maltreatment. KSCDV has created and sustained best practice and leading-edge knowledge management of this specific subject matter on co-occurrence of domestic violence and child abuse and neglect. Their work has distributed over 1,200

family and child well-being domestic violence manuals to DCF practitioners and agencies with DCF provider agreements. DCF wishes to sustain the gains for this project's tools, resource materials for continuity of knowledge management for the family and child well-being workforce.

The federal grant funding period has ended, and continued collaboration and resources are needed for this critical workforce training and development topic of family wellbeing when children are exposed to domestic violence. The purpose of this agreement is to support continuity of KCSDV personnel and operating costs for eight (8) trainings and twelve (12) consultation meetings across a twelve (12) month annual period. The first six (6) month period will support four (4) trainings and six (6) consultation meetings for enrollees who are employees of DCF or employees or volunteers with organizations who are contractors, grantees or have provider agreements with DCF or are other partner collaborators including but not limited to other state agencies, CASA or courts.

C.1.n 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 18th, 2019 in Emporia and June 20th, 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.

Additionally, initial conversations began in Spring 2021 with the national social service advisory organization, ICF, about entering in to a contract for technical assistance to structure the third APSR submission in 2022 with a priority outcome being to develop a robust statewide assessment that meaningfully engages those with lived experience in the Kansas DCF system as well as community partners and stakeholders that affect family and child well-being.

C2. Update to the Assessment of Current Performance in Improving Outcomes

Family and Child Well-Being services often intersect with some of society's most vulnerable populations. Even under the best of circumstances, the decisions made in family and child well-being cases can have profound effects on the children and families touched by the system. Considering this solemn responsibility, Kansas is committed to achieving the highest level of performance and outcomes.

As part of the continuous quality improvement process, Kansas uses qualitative and quantitative data to assess performance and to inform practice and systems change. Kansas collects this data from multiple sources, and the findings have been incorporated into this assessment.

Federal Reviews

The Child and Family Services Reviews (CFSR) assess the state's performance on seven outcomes related to safety, permanency and well-being as well as seven systemic factors affecting outcomes. Kansas completed CFSR Round 3 in May 2015, and the Final Report was received in November 2015. Since completing the CFSR Round 3, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. These reviews have included case-specific interviews with key participants and stakeholders. Kansas successfully achieved implementation of the PIP by April 2019. The fifth and sixth PIP measurement case reviews were completed in 2020.

Quarterly Case Reviews

Outside of the CFSR and PIP measurement reviews, Kansas conducts quarterly case reviews for child protective services (CPS) cases, in-home services cases and out-of-home services cases. The random sample of cases is derived from the respective program case populations and stratified by geographic service area. The CFSR Onsite Review Instrument (OSRI) questions are incorporated into the quarterly reviews. Quarterly case reviews can be found on the DCF public website: <http://www.dcf.ks.gov/services/PPS/Pages/CaseReadResults.aspx>. A review and analysis are conducted after each case read quarter. This occurs at each DCF Region between performance improvement staff and regional staff and contracted providers. Additional review and analysis occur with DCF administration, performance manager and DCF program staff. Highlights or focus areas are also reviewed during the quarterly DCF performance improvement meetings.

CFSR Statewide Data Indicators

The CFSR statewide data indicators provide additional performance information related to the safety and permanency outcomes. The statewide data indicators are calculated from the biannual submission of Kansas Adoption and Foster Care Analysis Reporting System (AFCARS) data and the annual submission of Kansas National Child Abuse and Neglect Data System (NCANDS) data. The AFCARS data is comprised of case-level information for all children in out-of-home foster care and those who have been adopted from foster care. The NCANDS data is comprised of information about reports of child abuse and neglect.

Administrative Data

In addition to the AFCARS and NCANDS data sets, Kansas regularly reviews statewide administrative data reports. Most of the administrative data reports are updated monthly and posted on the agency's public website or internal SharePoint server. Administrative data reports provide information to the agency and stakeholders related to key program measures such as specific contract performance outcomes and success indicators.

Safety Outcomes 1 and 2

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

Responding to child maltreatment reports represent a core function of the agency's child protective services work. When the report indicates potential abuse, neglect or a family possibly in crisis, a timely response is critical.

Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

Kansas timeframes for initial assessment of child maltreatment reports and face-to-face contact with the child(ren) are established in the Prevention and Protection Services (PPS) Policy and Procedure Manual

(PPM). The Kansas Protection Report Center (KPRC) is responsible for initial assessment of the report and determines whether further assessment is warranted. When a report is accepted for further assessment, Child Protection Specialist (CPS) practitioners are responsible for making face-to-face contact with the child(ren). Safety Outcome 1 comprises these measures.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Strength for Item 1 because 98% of the 40 applicable cases were rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through a thorough review of case file documentation and interviews with key case participants.

Item 1: Were the agency’s responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within the time frames established by agency policy or state statutes?		
Review	Period Under Review	Item 1 Performance
CFSR	April 2014 – May 2015	98%
PIP Measurement Period 1	July 2016 – September 2017	90%
PIP Measurement Period 2	January 2017 – March 2018	61%
PIP Measurement Period 3	July 2017 – September 2018	45%
PIP Measurement Period 4	April 2018 – June 2019	46%
PIP Measurement Period 5	January 2019 – March 2020	41%
PIP Measurement Period 6	July 2019 – September 2020	69%

Data Source: Federal Online Monitoring System

Kansas was one of the small number of states to pass Safety Outcome 1 and Item 1. This achievement reflects a dedication to the agency’s mission to protect children and promoting healthy families.

Since the CFSR, the state’s performance has decreased significantly. In the most recently finalized PIP case review measurement period, performance was 69%. See section Current and planned Activities to Improve Performance on Child and Family Outcomes for information on how Kansas is addressing this issue.

Administrative Data

Statewide administrative data provides important contextual information. Once the report is assigned for further assessment, Kansas has historically, consistently and importantly, completed the initial face-to-face contact within established time frames. For more information about the progress toward meeting the 95% standard, see the Kansas Protection Report Center Section below. Administrative data Indicates initial contacts are being made on a timely basis and meeting the 95% standard.

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Timely initial assessment decision <i>Standard: 95%</i>	97%	99%	91%	48%	43%	69%	79%	95%		
Timely initial contact <i>Standard: 95%</i>	97%	96%	97%	97%	96%	96%	95%	95%		

Data Sources: KIPS, FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021
Child maltreatment reports received	65,152	65,631	67,642	67,372	72,683	73,407	66,525	42,521
Child maltreatment reports assigned	35,551	36,611	37,807	37,445	40,623	45,801	37,940	24,234
Assignment rate for child maltreatment reports	55%	56%	56%	56%	56%	62%	57%	57%

Data Source: FACTS

*SFY 2021 data reflects data from July 20 20 through February 2021

Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate

Kansas DCF believes maintaining children in their own homes, whenever safely possible, is fundamental to family and child well-being practice supporting the well-being of children, families and communities. This focus results in better outcomes for children, less trauma and a reduced need for foster care. Even when the best services are provided, unnecessary family disruption can have negative consequences. Promoting community-based programs and strengthening prevention and resiliency networks designed to support families is an important piece of the state’s vision for family and child well-being services.

Item 2: Services to Families to Protect Children in the Home and Prevent Removal and Re-Entry into Foster Care.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 2 due to 88% of the 26 applicable cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 2: 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?		
Review	Period Under Review	Item 2 Performance
CFSR	April 2014 – May 2015	88%
PIP Measurement Period 1 <i>PIP Measurement Goal: 90%</i>	July 2016 – September 2017	77%
PIP Measurement Period 2 <i>PIP Measurement Goal: 90%</i>	January 2017 – March 2018	76%
PIP Measurement Period 3 <i>PIP Measurement Goal: 90%</i>	July 2017 – September 2018	96%
PIP Measurement Period 4 <i>PIP Measurement Goal: 90%</i>	April 2018 – June 2019	100%
PIP Measurement Period 5 <i>PIP Measurement Goal: 90%</i>	January 2019 – March 2020	86%

PIP Measurement Period 6 <i>PIP Measurement Goal: 90%</i>	July 2019 – September 2020	95%
--	----------------------------	-----

Data Source: Federal Online Monitoring System

The state’s performance on Item 2 has generally improved over time during the PIP measurement case reviews. In the cases reviewed, Kansas has improved efforts to prevent unnecessary family disruption. The Kansas Round 3 Program Improvement Plan (PIP) established a goal of 96.5% for Item 2. Kansas achieved this goal during the fourth PIP measurement review period (Technical Bulletin #11 subsequently capped the Item 2 goal—for all states—at 90%).

When services are needed to prevent a child(ren)’s entry into foster care or re-entry after reunification, DCF Prevention Services are considered. All DCF Prevention Services are provided to the entire family and may be accessed through a child protective services assessment, court order or at the request of the family. Participation is voluntary (unless court-ordered), and services are provided without regard to income.

DCF Prevention Services include Family Services, Family Preservation Services and Family First Prevention Services programs. CPS practitioners, in partnership with families, determine the appropriate prevention services based on the family’s feedback and the assessment of family needs.

Family Services

In-home Family Services (FS) may be provided to help families prevent or avoid crisis situations. Family Services are generally provided to families when the risk level is determined low to moderate. Services may be provided for up to 12 months, but the duration of the case is determined by the family’s goals and progress. Case management may be provided by DCF CPS staff or Community Based Family Service providers. The Community Based Family Service program began in SFY 2014 and will conclude services by June 30, 2021. Funds used to support this programming will shift to expanding evidence-based Family First services.

Administrative Data

Outcome Measure	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 during the open Community Based Family Services case. <i>Standard: 90%</i>	94%	96%	99%	97%	97%	95%	98%	95%		
Children will remain safety in their home for 365 days post conclusion of the Community Based Family Services case. <i>Standard: 80%</i>	NA	90%	91%	93%	92%	97%	90%	95%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Family Preservation Services

In-home Family Preservation Services (FP) may be provided to reduce the risk of maltreatment, improve family functioning and prevent children’s entry into foster care. The FP program supports the family’s strengths and resources to resolve crises, safely maintain children in the home and teach families new coping skills. Family Preservation Services are generally provided when a family needs or a circumstance

warrants a higher-level of service intensity and frequency. Family Preservation is provided by child welfare case management providers (CWCMP).

In SFY 2020, new FPS contracts were executed with three case management providers, and services under the new contracts began January 1, 2020. In the new contracts, Kansas implemented sweeping changes to the service delivery model and enhanced the quality of the services available to support families. Instead of a one-size-fits-all approach, two distinct tiers were developed, providing two different levels of service within the program. Models practiced within each level are required to be evidence-based.

- Tier 1 Intensive Family Preservation Services provides high-intensity therapeutic services designed to stabilize the family and prevent children’s entry into foster care. Tier 1 services require an average of 3 to 5 hours of in-person contact with the family by an assigned therapist, with a typical six-week duration.
- Tier 2 Case Management Family Preservation Services provides families with case management services over three to six months. Tier 2 services require a minimum of one hour per week of in-person contact with the family by an assigned case manager.

Administrative Data

Outcome Measures	*SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children referred for family preservation services will remain in their home during the service period or within 30 days of case closure. <i>Tier 1 Standard: 90%</i>	99%	98%		
Children referred for family preservation services will remain in their home during the service period or within 30 days of case closure. <i>Tier 2 Standard: 90%</i>	92%	88%		

Data Source: FACTS

*SFY 2020 data reflects data from January 2020 through June 2020

*SFY 2021 data reflects data from July 2020 through February 2021

Family First Prevention Services

New in SFY 2020, Family First Prevention Services (FFPS) may be provided to help families prevent children’s entry (or re-entry) into foster care. To be eligible, at least one child in the home must be at imminent risk of entering foster care, but the child can safely remain at home or in a kinship placement through provision of the Family First Prevention Services. Pregnant and parenting youth in foster care are also eligible for Family First Prevention Services. Family First Prevention Services are provided through community-based partnerships and services target mental health, substance use, parent skill-building and kinship navigation services. Evidence-based practice models are required.

Administrative Data

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Target children and youth who have reached 12 months from the time of	NA	NA	NA	NA	NA	NA	NA	91%		

service referral remained together at home without the need for foster care. <i>Standard: 90%</i>										
--	--	--	--	--	--	--	--	--	--	--

Data Source: FACTS & ROMSFY2021 data reflects data from July 2020-April 2021

Because referrals for Family First Prevention Services began in October 2019 (SFY2020), the administrative program outcome data measuring prevention of entry into foster care is not available as the children served by the program must have reached 12 months from referral date.

Administrative Data

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	*SFY 2020	**SFY 2021	SFY 2022	SFY 2023
Target children and youth receiving family first services placed in foster care during an open referral (Goal: Less than 10%)	NA	NA	NA	NA	NA	NA	.2%	.3%		

Data Source: FACTS & ROM

*SFY2020 data reflects data from October 2019 – June 2020

**SFY2021 data reflects data from July 2020-April 2021

Post-Permanency Services

Kansas DCF is equally committed to safely maintaining children in their own home after exiting foster care. Specialized aftercare services are provided to strengthen and support families after achieving reunification, permanent custodianship and adoption. Aftercare services are developed, in partnership with families, to ensure transition of services and supports necessary to prevent re-entry into foster care.

Administrative Data

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 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. <i>Standard: 8.3% (lower is better)</i>	NA	NA	7.5%	8%	8.6%	9.3%	10.0%	10.0%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

In October 2019, Kansas implemented changes designed to maximize support to families. Comprehensive aftercare services are now provided for six months after achieving reunification, permanent custodianship, adoption and are available for youth who discharge from care with another planned permanent living arrangement. In addition to available crisis on-call services available twenty-four hours per day and seven days per week, aftercare services now provide more frequent contact between aftercare staff and families.

If ongoing services and supports are necessary to prevent re-entry into foster care, additional time-limited aftercare services may be authorized or DCF Prevention Services may be accessed.

Additional resources and support for kinship and adoptive families is available, without time-limited eligibility requirements, through the Kansas Post Adoption Resource Center (K-PARC) and the Caregiver Association. These services are provided at no cost to families and are made available through funding from Kansas DCF. In July 2021, new contractors will be taking over the contracts and services provided to families through KPARC and Caregivers Association. Both contracts are now with one agency, Foster Adopt Connect, which will be designing and implementing a continuous model of support and services to

families needing assistance. DCF Permanency is working closely with this agency in assisting with the transition of the contracts and providing feedback and guidance on implementation. It is anticipated there will be more useful data available in the next fiscal year as part of this collaboration to better determine usefulness of interventions developed.

Kansas continues to be excited and encouraged with the development and implementation of the Kansas Practice Model (KPM), which was implemented statewide in calendar year 2020. The KPM provides a consistent framework for engagement, safety planning and decision-making using family voice, practitioner skills, tools of defined practice approaches and policy, which begins at the start of the relationship working alongside family, children and youth. In January 2021, DCF began discussion with The Center for States to develop a messaging plan to encourage more family engagement and adherence to the KPM. Currently the plan is being designed and it is anticipated implementation will begin the Summer of 2021 and through the fall.

Administrative Data

Removal Rate and Foster Care Rate

Region	Population ¹	Child Population ²	Average Monthly Removals [*]	Removal Rate per 1,000 in Child Pop. ^{**}	Number of Children in OOH ³	OOH Rate per 1,000 in Child Pop. ^{***}	Average Monthly Ending OOH ^{****}	Ending OOH Rate per 100 in OOH (Note: higher is better)	Average Number Ending OOH per 1 Removal
Kansas City	981,860	263,419	45	2.1	1,482	5.6	48.1	3.2	1.07
Northeast	278,087	78,866	34	5.1	937	11.9	25.9	2.8	0.77
Northwest	330,639	84,399	35	6.9	756	9.0	44.9	5.9	1.29
Southeast	270,436	71,225	33	6.9	897	12.6	38.1	4.3	1.15
Southwest	376,668	101,632	43	6.3	1,140	11.2	58.3	5.1	1.35
Wichita	673,815	188,135	60	4.4	1,667	8.9	59.5	3.6	1.00
Statewide	2,913,314	782,091	250	4.4	6,879	8.8	274.8	4.0	1.10
National	327,167,434	73,285,505		3.7	423,997	5.8			

Data Sources: FACTS, Census Bureau

Data from July 2020 through February 2021

Removals, Exits and Children in Out-Of-Home Placement on the Last Day of the Month

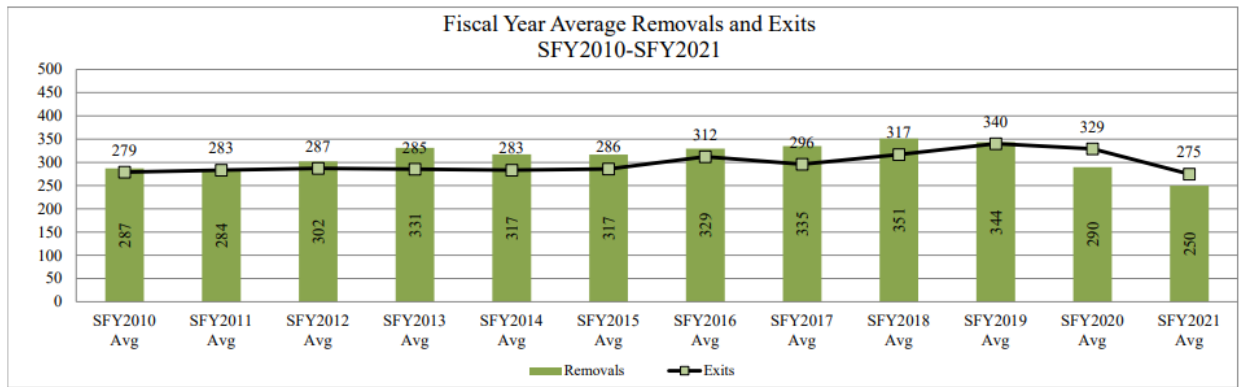
Region	Information	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	*SFY Total	*SFY Avg
KC	Removals	47	52	22	72	34	57	39	38	361	45
KC	Exits	48	65	66	38	42	47	32	47	385	48
KC	OOH Last Day of Mo.	1480	1476	1434	1475	1470	1485	1501	1482		1,475
Northeast	Removals	36	27	45	27	20	41	35	38	269	34
Northeast	Exits	25	31	26	21	36	23	22	23	207	26
Northeast	OOH Last Day of Mo.	889	881	909	912	914	914	926	937		910
Northwest	Removals	40	28	35	30	30	33	51	32	279	35
Northwest	Exits	64	72	45	36	30	37	47	28	359	45
Northwest	OOH Last Day of Mo.	807	756	735	732	738	737	759	756		753
Southeast	Removals	28	36	31	51	40	31	29	20	266	33
Southeast	Exits	67	43	39	40	29	41	25	21	305	38
Southeast	OOH Last Day of Mo.	886	881	875	886	905	891	890	897		889
Southwest	Removals	31	44	35	58	26	38	59	54	345	43
Southwest	Exits	58	78	55	64	67	61	48	35	466	58

Southwest	OOH Last Day of Mo.	1255	1227	1194	1193	1151	1113	1127	1140		1,175
Wichita	Removals	67	58	55	65	58	55	62	58	478	60
Wichita	Exits	64	74	61	72	68	54	38	45	476	60
Wichita	OOH Last Day of Mo.	1668	1659	1659	1653	1645	1640	1662	1667		1,657
State	Removals	249	245	223	303	208	255	275	240	1,998	250
State	Exits	326	363	292	271	272	263	212	199	2,198	275
State	OOH Last Day of Mo.	6985	6880	6806	6851	6823	6780	6865	6879		6,859

Data Source: FACTS

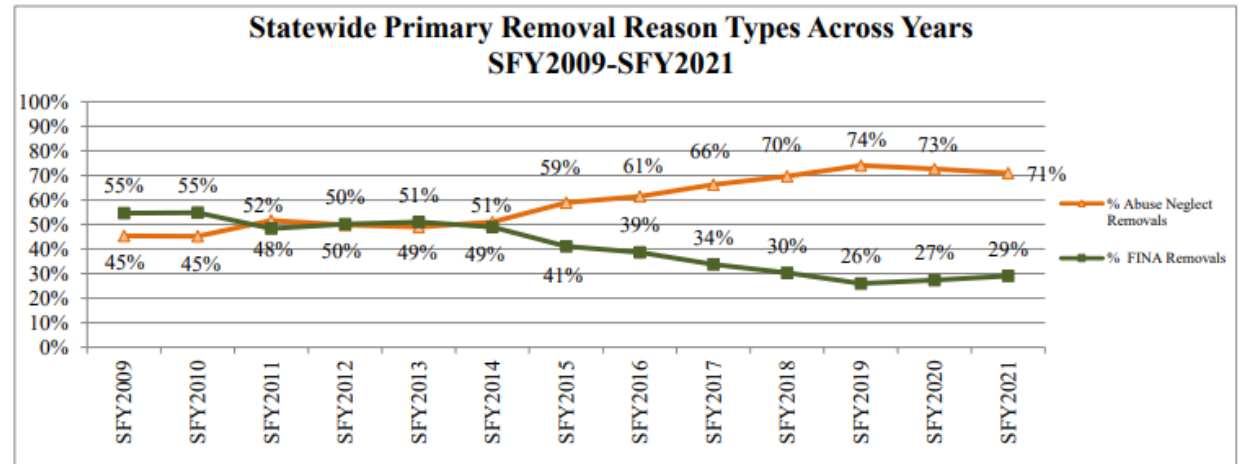
*SFY 2021 data reflects data from July 2020 through February 2021

SFY Average Removals vs Exits



Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021



Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Item 3: Risk Assessment and Safety Management

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 3 due to 78% of the 65 applicable cases rated as a Strength. Since completing the CFSR, Kansas has finalized six

Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 3: Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care?		
Review	Period Under Review	Item 3 Performance
CFSR Round 3	April 2014 – May 2015	78%
PIP Measurement Period 1 <i>PIP Measurement Goal: 84%</i>	July 2016 – September 2017	63%
PIP Measurement Period 2 <i>PIP Measurement Goal: 84%</i>	January 2017 – March 2018	69%
PIP Measurement Period 3 <i>PIP Measurement Goal: 84%</i>	July 2017 – September 2018	71%
PIP Measurement Period 4 <i>PIP Measurement Goal: 84%</i>	April 2018 – June 2019	91%
PIP Measurement Period 5 <i>PIP Measurement Goal: 84%</i>	January 2019 – March 2020	77%
PIP Measurement Period 6 <i>PIP Measurement Goal: 84%</i>	July 2019 – September 2020	82%

Data Source: Federal Online Monitoring System

After an initial drop in performance from the CFSR, performance on Item 3 increased in the third and fourth PIP measurement review periods. The Kansas Round 3 PIP established a goal of 84% for Item 3. Kansas achieved this goal during the fourth PIP measurement review period.

Agency policy requires formal and informal assessment of risk and safety concerns on an ongoing basis and at critical times in the case. Critical points in the case are defined in PPM 3100 but include when there is new allegations of abuse or neglect, changes in family conditions and household composition, changes to visitation, upon reunification and at case closure.

Structured Decision Making

The CFSR Round 3 identified a need for Kansas to utilize standardized assessments when assessing risk and safety concerns. Kansas selected Structured Decision Making (SDM) assessments for implementation (PIP Activity 1.2.2). The SDM assessments are evidence-based assessments utilized at major case decision points and increase the consistency and validity of case decisions.

In August 2019, the KPRC began utilizing SDM, at intake, when assessing child maltreatment reports for case assignment. The SDM assessments helps intake staff make accurate, consistent decisions about which families need further assessment from CPS practitioners and the timeframes to initiate in-person contact.

Kansas DCF identified Johnson, Wyandotte, Cherokee and Crawford Counties to pilot SDM implementation in SFY 2020. CPS practitioners in these four counties began utilizing the SDM safety assessment in their casework during November 2019 and began utilizing the SDM risk assessment during December 2019 (PIP Activity 1.2.5). The four pilot counties piloted the SDM safety and risk assessment for 12 months. A decision was made to not continue with the SDM safety and risk assessment tool due to

implementation of the Kansas Practice model which provides more opportunity for family engagement in the assessment process. In 2020 Kansas began to implement the Kansas Practice Model which integrates aspects and tools from multiple practice approaches with promising evidence research and best practices to come alongside families, their natural supports and community on a journey toward improved safety and family well-being.

DCF worked with Safe Generations to integrate elements of Signs Of Safety (SOS) with the Kansas Practice Model. During November and December 2019, CPS practitioners in the Wichita Region, Harvey County and Reno County completed the two-day exposure training. This training examines the core principles of the Kansas Practice Model approach and reviews the disciplines essential for the effective use of the assessment and planning tools. Practitioners build skill and competency to begin incorporating the tools in their work with families. CPS practitioners in the West Region completed the exposure training in January and March 2020.

Due to the extraordinary circumstances related to the COVID-19 pandemic and nationwide public health emergency, the Kansas Practice Model training was delivered virtually for East Region and Kansas City Region staff throughout the summer of 2020. In SFY21, virtual training continues for ongoing KPM learning. See Attachment 24 DCF Training Plan 2021 for more details.

The CWCMPs provide family preservation and foster care case management services in Kansas utilize a variety of evidence-based tools to assess risk and safety concerns (PIP Activity 1.2.6). While the services are required to be trauma-informed and evidence-based, services are not limited to any one practice model. This flexibility allows each CWCMP to select a practice model and evidence-based assessments recommended with, most conducive to or integrated within the model. At this time DCF is not considering a universal risk and safety tool as the focus has been to insure consistent worker/child visits are taking place by assigned case worker so that risk and safety can be informally assessed by observation and conversation with children who are verbal. The risk and safety tools used by each CWCMP in SFY21 are shown in Table 1.2 below.

Table 1.2

CWCMP's	Tools used to assess risk and safety concerns
KVC	Structured Decision Making
TFI	DCF PPS 2035 Family Risk & Safety Assessment and NCFAS-G+R tool
St. Francis Ministry	Individual child and family tools created by the agency that assesses for mental health, substance use, intellectual disability disorders, fetal alcohol syndrome disorder, nutrition, pain, suicide, human trafficking, trauma exposure and intimate partner violence.
Cornerstones of Care	DCF PPS 2030B, 2030C and 2030D

Team Decision Making


With assistance from the Annie E. Casey Foundation (AECF), Kansas implemented Team Decision Making (TDM) in Johnson, Wyandotte, Cherokee and Crawford Counties in November 2019. In July 2020, TDM was implemented in the remaining Southeast Region counties. In August 2020, TDM was implemented in the Northwest, Southwest and Wichita Region. In October 2020, TDM was implemented in the Northeast Region and remaining counties in the Kansas City Region. In SFY2021, TDM has been implemented statewide.

TDM's a collaborative practice which includes family members and kin in the conversation and decision making when critical decisions about where a child can safely reside. Kansas is utilizing TDM when a parent or caregiver's behavior places a child at-risk for separation from parent/caregiver. This approach recognizes families as the experts of their lives and partners with them to develop resolutions which engage the family's strengths and resources.

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

Communication with community stakeholders is key to the success of TDM as a practice approach. A communication plan was developed to bring the voices of courts, communities, service providers, families and law enforcement to the front of planning efforts.

Administrative Data

 TDM YTD Report - Statewide Summary July 1, 2020 - February 28, 2021		
Section I. PPS FACTS & TDM Application Data		
1a. Reports assigned for Further Assessment*	TBD**	
Reports assigned for Further Assessment with a TDM Meeting (subset of 1a)	TBD**	TBD**
1b. Children/Youth Removals	1662	
Children/Youth Removals by Law Enforcement (PPC) (subset of 1b)	696	42%
Children/Youth Removals with a TDM (subset of 1b)	956	58%
Section II. Characteristics of TDM Meetings - TDM Application Data		
	# Meetings	% Meetings
2a. TDM Meetings	1016	
2b. TDM with Suspected/Confirmed Domestic Violence	151	15%
2c. Attendance at Meetings	# Meetings	% Meetings
DCF Worker	1004	99%
DCF Supervisor	1013	100%
Other DCF Staff (not assigned worker/supervisor)	106	10%
Mother	812	80%
Father	560	55%
Children/Youth	197	19%
Caregivers	38	4%
Family Members and Friends	670	66%
Contract Agency Staff	203	20%
Neighborhood / Community Representatives	23	2%
Service providers / Other supports	378	37%
Section III: Summary of Children/Youth Identified with a TDM Meeting		
	# Children	% Children
3a. Children/Youth with a TDM Meeting (ages 0-17 yrs)***	1824	
3b. Youth ages 12+ with a TDM Meeting	489	27%
3c. Children ages 0-11 with a TDM Meeting	1338	73%
Section IV. Child/Youth Placement & Recommendation		
	# Children	% Children
4a. Child/Youth Location at Time of TDM (subset of 3a)		
In Home	784	43%
Separated	980	54%
Removed by Law Enforcement (subset of "Separated")	878	90%
4b. Recommendation for Custody & Care (subset of 3a)	# Children	% Children
Maintain Child/Youth in own home, no court involvement	429	24%
File for court intervention not involving out of home placement	251	14%
Immediately return Child/Youth to own home, no court involvement	189	10%
Place Child/Youth with relative, no court involvement	214	12%
File for any type of custody that includes out of home placement (OOH)	741	41%
4c. Placement Recommendations for Child/Youth Placed Out of Home (subset of "OOH")	# Children	% Children
Place with a Relative	421	57%
Place with Unrelated person, not Foster Parent	37	5%
Place in Foster Home	269	36%
Place in Group Home	6	1%
Place in Residential Treatment	7	1%
Place in Independent Living	1	0%

The TDM report above contains some significant strengths in Kansas when compared to TDM sites in other jurisdictions. Particularly in the areas of fathers, family/friends and service providers attendance at TDM's. Evident change research from active TDM sites across the nation show an average of 48% of fathers attend meetings, however Kansas has a higher rate of 55% of father's in attendance. Kansas has 66% family/friends in attendance at TDM's while nationally the average is 38%. Additionally, Kansas has a slightly higher percentage of service providers in attendance than compared nationally, 37% in Kansas to 36% nationally. We are very proud of the attendance at TDM and continue to grow in skills, both CPS and TDM Facilitators.

Kansas Practice Model

The Kansas Practice Model provides a consistent and customized framework to support engagement, safety planning and decision-making to guide our work alongside families, children and youth. With family voice and practice approaches, practitioners use their skills to engage the family and assist with needed services to support family safety and well-being.

The KPM approach involves “mapping” conversations with the family to inform the assessment and plan together with the family. This assessment incorporates the child’s voice, integrates the family perspective and identifies the strengths demonstrated as safety. Co-authoring the assessment with the family provides depth to the information, enhances engagement and promotes shared understanding. See Attachment 2 KPM Explainer.

Administrative Data

When family preservation or foster care services are provided, Kansas measures the rate of recurring maltreatment. This data is used to ensure agency services and interventions are appropriately addressing safety concerns and effectively reducing the risk for maltreatment.

Outcome Measure	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 365 days of referral to Community Based Family Services <i>Standard: 85%</i>	NA	98%	98%	97%	93%	95%	96%	98%		
Families will not experience substantiated or affirmed abuse or neglect within the first 90 days of Family Preservation <i>Standard: 95%</i>	99%	99%	99%	99%	99%	99%	99%	NA	NA	NA
Families will not experience substantiated or affirmed abuse or neglect within the first 365 days of Family Preservation <i>Standard: 95%</i>	NA	96%	95%	95%	93%	94%	94%	NA	NA	NA
Families will not experience substantiated or affirmed abuse or neglect between referral and case closure. Tier 1 <i>Standard: 95%</i>	NA	NA	NA	NA	NA	NA	99%	99.5%		
Families will not experience substantiated or affirmed abuse or neglect between referral and case closure. Tier 2 <i>Standard: 95%</i>	NA	NA	NA	NA	NA	NA	97%	96.5%		
Children in foster care will not experience substantiated or affirmed abuse or neglect within a 12-month period <i>Standard: 8.5 (lower is better)</i>	NA	NA	4	4.9	5.6	4.7	3.8	3.7		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children who were a victim of a subsequent affirmed or substantiated maltreatment within 12 months of the initial affirmed or substantiated finding. <i>Standard: 9.5% (lower is better)</i>	NA	NA	4.5%	4.7%	6.4%	6.3%	6.3%	4.7%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Permanency Outcomes 1 and 2

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

Despite the agency's renewed focus on prevention and enhanced network of prevention services, a system providing temporary foster care will always be necessary. For the children and youth in foster care, Kansas is committed to achieving permanency.

Item 4: Stability of Foster Care Placement

Several studies have revealed the relationship between stability of foster care placement and permanency. This connection makes enhancing placement stability part of the state's focus on achieving permanency.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 4 due to 70% of the 40 applicable foster cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 4: 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)?		
Review	Period Under Review	Item 4 Performance
CFSR Round 3	April 2014 – May 2015	70%
PIP Measurement Period 1 <i>PIP Measurement Goal: 79%</i>	July 2016 – September 2017	69%
PIP Measurement Period 2 <i>PIP Measurement Goal: 79%</i>	January 2017 – March 2018	73%
PIP Measurement Period 3 <i>PIP Measurement Goal: 79%</i>	July 2017 – September 2018	73%
PIP Measurement Period 4 <i>PIP Measurement Goal: 79%</i>	April 2018 – June 2019	75%
PIP Measurement Period 5 <i>PIP Measurement Goal: 79%</i>	January 2019 – March 2020	60%
PIP Measurement Period 6 <i>PIP Measurement Goal: 79%</i>	July 2019 – September 2020	82%

Data Source: Federal Online Monitoring System

The Kansas Round 3 PIP established a goal of 79% for Item 4. Kansas achieved this goal during the sixth PIP measurement review period.

Administrative Data

The CFSR Round 3 introduced a new data indicator for measuring placement stability. This measure calculates the rate of moves per 1,000 days for children entering foster care. Kansas began utilizing this measure in SFY 2016.

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Placement Stability: Rate of moves per 1,000 days in Foster Care <i>Standard: 4.44 (lower is better)</i>	NA	NA	6.6	7.1	8.9	9.7	8.6	5.4		
Children in foster care placed in a family-like setting <i>Standard: 90%</i>	95%	95%	94%	93%	92%	91%	91%	92%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Each month, Kansas also examines placement stability for the 12-month cohort of children entering foster care. In February 2021, over 64% of the cohort experienced 4.4 or fewer moves. Over 23% of the cohort experienced 8.6 or more moves. A further analysis will begin in the Summer of 2021 to analyze those situations in which children have fewer moves compared to those children with significantly higher rate of moves. This work will be enhanced by having technical assistance from Capacity Building Center for States. The plan is to review rate of moves data from three different years, SFY 2019, 2020 and 2021.

Rate of Moves	Number of Children	Percent of Children
4.4 or fewer	1765	64.4%
4.5 – 5.5	86	3.1%
5.6 – 6.5	77	2.8%
6.6 – 7.5	87	3.2%
7.6 – 8.5	68	2.5%
8.6 or greater	656	23.9%

Data Source: FACTS

SFY 2020 Foster Care Placement Settings

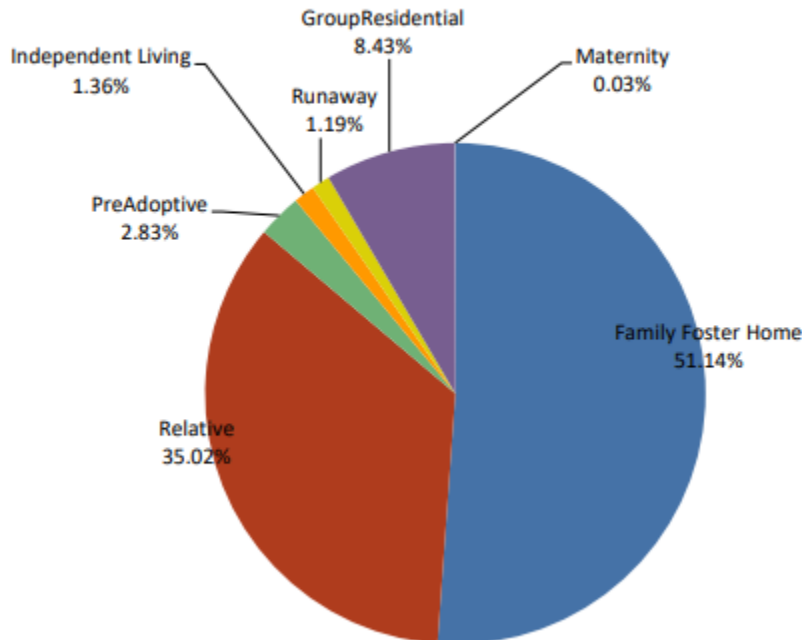
Foster Care placement by placement type is available July 1, 2020- through February 2021 on our public website.

Statewide

	<u>JUL</u>	<u>AUG</u>	<u>SEP</u>	<u>OCT</u>	<u>NOV</u>	<u>DEC</u>	<u>JAN</u>	<u>FEB</u>	<u>MAR</u>	<u>APR</u>	<u>MAY</u>	<u>JUN</u>	<u>Avg</u>
Family Foster Home	3,551	3,517	3,486	3,467	3,503	3,472	3,538	3,524	0	0	0	0	3,507
Relative	2,411	2,408	2,341	2,387	2,392	2,410	2,431	2,434	0	0	0	0	2,402
PreAdoptive	268	207	212	225	164	142	155	182	0	0	0	0	194
Independent Living	93	98	101	92	97	90	89	85	0	0	0	0	93
Runaway	77	75	85	91	88	95	75	68	0	0	0	0	82
GroupResidential	582	574	579	588	578	569	573	584	0	0	0	0	578
Maternity	3	1	2	1	1	2	4	2	0	0	0	0	2
Total	6,985	6,880	6,806	6,851	6,823	6,780	6,865	6,879					

Data Source: FACTS

*Pie Chart showing Placement Setting by percentage.



Item 5: Permanency Goal for the child

Permanency goals, and concurrent permanency goals, guide the overall case direction and development of the service plan. Kansas establishes a permanency goal for all children in foster care. Agency policy requires each case plan to include the permanency goal. The initial case plan goal is established at the first case planning conference, which is held within 30 days of entry or re-entry into foster care. Progress toward the goal is regularly monitored, and the permanency goal may be changed when it is apparent the current goal cannot be met within a reasonable time frame.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 5 due to 65% of the 40 applicable cases rated as a Strength. The PIP established a goal of 74%. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews.

Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

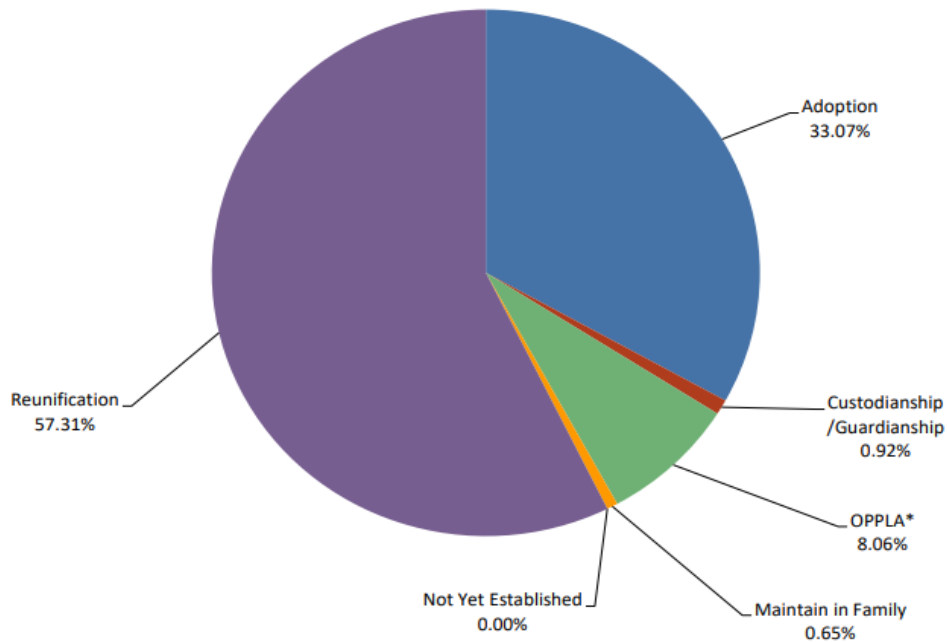
Item 5: Did the agency establish appropriate permanency goals for the child in a timely manner?		
Review	Period Under Review	Item 5 Performance
CFSR Round 3	April 2014 – May 2015	65%
PIP Measurement Period 1 <i>PIP Measurement Goal: 74%</i>	July 2016 – September 2017	78%
PIP Measurement Period 2 <i>PIP Measurement Goal: 74%</i>	January 2017 – March 2018	56%
PIP Measurement Period 3 <i>PIP Measurement Goal: 74%</i>	July 2017 – September 2018	73%
PIP Measurement Period 4 <i>PIP Measurement Goal: 74%</i>	April 2018 – June 2019	70%
PIP Measurement Period 5 <i>PIP Measurement Goal: 74%</i>	January 2019 – March 2020	80%
PIP Measurement Period 6 <i>PIP Measurement Goal: 74%</i>	July 2019 – September 2020	74%

Data Source: Federal Online Monitoring System

Kansas achieved the PIP measurement goal during PIP Review 1. Data reflects this level of performance has not been sustained over time.

Administrative Data

Children in Foster Care by Permanency Goal



Data Source: FACTS

Item 6: Achieving Reunification, Guardianship, Adoption or Another Planned Permanent Living Arrangement

Kansas sees foster care as a temporary support to families and the state believes all children in foster care deserve permanency in their lives. The agency envisions a foster care system in which children aren't spending one day more in care than necessary.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 6 due to 63% of the 40 applicable foster care cases rated as a Strength. The PIP established a goal of 72%. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 6: Did the agency make concerted efforts to achieve reunification, guardianship, adoption or another planned permanent living arrangement for the child?		
Review	Period Under Review	Item 6 Performance
CFSR Round 3	April 2014 – May 2015	63%
PIP Measurement Period 1 <i>PIP Measurement Goal: 72%</i>	July 2016 – September 2017	44%
PIP Measurement Period 2 <i>PIP Measurement Goal: 72%</i>	January 2017 – March 2018	48%
PIP Measurement Period 3 <i>PIP Measurement Goal: 72%</i>	July 2017 – September 2018	48%
PIP Measurement Period 4 <i>PIP Measurement Goal: 72%</i>	April 2018 – June 2019	50%
PIP Measurement Period 5 <i>PIP Measurement Goal: 72%</i>	January 2019 – March 2020	50%
PIP Measurement Period 6 <i>PIP Measurement Goal: 72%</i>	July 2019 – September 2020	59%

Data Source: Federal Online Monitoring System

Ensuring permanency goals are achieved within the timeframes suggested in the federal reviews has remained a challenge. Kansas supplements case review findings with administrative data. The administrative data broadens understanding and can help identify, clarify and define barriers to improved outcomes.

Administrative Data

Kansas uses several measures to monitor permanency and the length of time before permanency is achieved for children in foster care. Several of the measures mirror CFSR Round 3 statewide permanency indicators.

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children who enter foster care, discharged to a permanent home within 12 months of their date of entry into foster care and before turning 18 <i>Standard: 40.5%</i>	NA	NA	40%	38%	37%	36%	36%	36%		

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children in foster care between 12 and 23 months, discharged to a permanent home within 12 months from the first day of the reporting period and before turning 18 <i>Standard: 43.6%</i>	NA	NA	41%	40%	37%	40%	41%	39%		
Children in foster care 24 months and longer, discharged to a permanent home within 12 months from the first day of the reporting period and before turning 18 <i>Standard: 30.3%</i>	NA	NA	31%	35%	29%	36%	38%	32%		
Children who became legally free for adoption in the 12 months prior, discharged to a finalized adoption in less than 12 months from becoming legally free <i>Standard: 45.8%</i>	45%	43%	42%	40%	29%	39%	44%	42%		
Children discharged from custody for reason of adoption, released from custody in less than 24 months from removal into care <i>Standard: 26.8%</i>	33%	26%	23%	22%	18%	17%	19%	15%		
Children discharged from foster care who were legally free for adoption at the time of discharge and will be discharged to a permanent home before turning 18 <i>Standard: 96.8%</i>	90%	91%	91%	89%	88%	92%	92%	89%		
Children discharged from foster care for reason of emancipation, or who reached age 18 while in foster care, who were in care 3 years or longer <i>Standard: 47.8% (lower is better)</i>	33%	33%	36%	32%	31%	34%	29%	33%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Average months in foster care for children discharged to reunification <i>Suggested Timeframe: 12 months</i>	8	9	9	10	10	10	10	12		
Average months in foster care for children discharged to custodianship/guardianship <i>Suggested Timeframe: 18 months</i>	18	19	18	19	20	19	19	26		
Average months in foster care for children discharged to emancipation <i>Suggested Timeframe: NA</i>	34	38	39	37	38	36	38	39		

Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Average months in foster care for children discharged to adoption <i>Suggested Timeframe: 24 months</i>	32	33	35	36	38	39	39	39		
Adoptions finalized <i>Standard: NA</i>	666	765	755	758	766	1210	998	548		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Based on this data, Kansas has the opportunity to improve outcomes for children and families by ensuring concerted efforts are made to achieve permanency in a timely manner. This is particularly crucial when the permanency goal is adoption.

When a child is reunified with their family, reunification occurs, on average, 12 months after the child’s entry into foster care. This is within the 12-month suggested timeframe for achievement. When a child exits to custodianship/guardianship, permanency is achieved, on average, within 26 months of the child’s entry into foster care. This is outside the 18-month suggested timeframe for achievement.

When a child exits to adoption, permanency through adoption occurs, on average, 39 months after the child’s entry into foster care. This average has increased in recent years. The suggested timeframe for achieving adoption is 24 months. Just 15% of the children, exiting to adoption in SFY 2021 (July 2020 through February 2021), achieved permanency within 24 months. And only 42% of the children, who became legally free for adoption, had exited to adoption 12 months later.

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children

Kansas recognizes foster care as a support and not a substitute for families. Bonds with family and community are often critical to minimizing trauma and maintaining a sense of identity after children enter foster care. Kansas preserves these family relationships and meaningful connections for children.

Item 7: Placement with Siblings

Kansas DCF policy (PPM 5237) requires siblings be placed together in foster care whenever possible and appropriate.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Strength for Item 7 due to 100% of the 14 applicable foster care rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 7: Did the agency make concerted efforts to ensure siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?		
Review	Period Under Review	Item 7 Performance
CFSR Round 3	April 2014 – May 2015	100%
PIP Measurement Period 1	July 2016 – September 2017	86%
PIP Measurement Period 2	January 2017 – March 2018	82%

PIP Measurement Period 3	July 2017 – September 2018	76%
PIP Measurement Period 4	April 2018 – June 2019	77%
PIP Measurement Period 5	January 2019 – March 2020	73%
PIP Measurement Period 6	July 2019 – September 2020	90%

Data Source: Federal Online Monitoring System

Administrative Data

When a child has one or more siblings in foster care, Kansas measures whether the child is placed together with at least one sibling.

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children in foster care, with siblings in foster care, placed with at least one sibling <i>Standard: 78%</i>	79%	78%	79%	77%	74%	73%	74%	76%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Item 8: Visiting with Parents and Siblings in Foster Care

Kansas DCF policy (PPM 3237) supports the philosophy of visitations with parents, and siblings also in foster care, promotes the continuity of family relationships for children in care. Kansas encourages visitations be as frequent as possible, in the least restrictive environment, and appropriate to the circumstances of the case. The agency prohibits using the opportunity for visitation as either a consequence or reward for parents or for children.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 8 due to 85% of the 26 applicable foster care cases rated as a Strength. These findings revealed performance ensuring the frequency and quality of visits between a child and his or her siblings in foster care was lower than visits between a child and his or her parents. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 8: 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?		
Review	Period Under Review	Item 8 Performance
CFSR Round 3	April 2014 – May 2015	85%
PIP Measurement Period 1	July 2016 – September 2017	62%
PIP Measurement Period 2	January 2017 – March 2018	81%
PIP Measurement Period 3	July 2017 – September 2018	66%

PIP Measurement Period 4	April 2018 – June 2019	74%
PIP Measurement Period 5	January 2019 – March 2020	80%
PIP Measurement Period 6	July 2019 – September 2020	90%

Data Source: Federal Online Monitoring System

Item 9: Preserving Connections

In addition to preserving relationships with close family members, Kansas maintains meaningful connections a child may have with his or her neighborhood, community, faith, extended family, Tribe, school and friends.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 9 due to 83% of the 40 applicable foster care cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 9: Did the agency make concerted efforts to preserve the child’s connections to his neighborhood, community, faith, extended family, Tribe, school and friends?		
Review	Period Under Review	Item 9 Performance
CFSR Round 3	April 2014 – May 2015	83%
PIP Measurement Period 1	July 2016 – September 2017	76%
PIP Measurement Period 2	January 2017 – March 2018	77%
PIP Measurement Period 3	July 2017 – September 2018	80%
PIP Measurement Period 4	April 2018 – June 2019	85%
PIP Measurement Period 5	January 2019 – March 2020	85%
PIP Measurement Period 6	July 2019 – September 2020	97%

Data Source: Federal Online Monitoring System

Administrative Data

Kansas administrative data measures whether children continue to attend their same school after entry into foster care. Kansas also measures whether a lifelong connection has been developed and maintained for youth exiting custody to adulthood.

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children age 6 and older attending the same school after removal <i>Standard: 25%</i>	15%	16%	15%	15%	16%	17%	18%	18%		

Youth emancipating from custody with an identified lifelong Connection for Success <i>Standard: NA</i>	-	54.6%	59.9%	75.6%	81.2%	79%	79%	85%		
---	---	-------	-------	-------	-------	-----	-----	-----	--	--

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

Item 10: Relative Placement

When a child must be removed from the home, placement with relatives can ease the transition into foster care and maintain the child’s connections with his or her family. Kansas gives preference to the child’s relatives for placement.

For placement, Kansas defines a relative as:

- A person who can trace a blood tie to a child. Persons related by blood may include a parent, grandparent, sibling, great-grandparent, uncle or aunt, nephew or niece, great-great grandparent, great uncle or aunt, first cousin, great-great-great grandparent, great-great uncle or aunt, or a first cousin once removed (the child of a first cousin). Termination of parental rights does not alter or eliminate the blood relationship to other relatives.
- A person who is or was related to the child through marriage or previous marriage (terminated by death or divorce). This includes, but is not limited to, stepparents, step grandparents, step aunts and step uncles to the first degree.
- Legally adoptive parents and other relatives of adoptive parents.
- Birth parents and grandparents of siblings and birth parents of half-siblings.
- Adoptive parents and grandparents of siblings or half-siblings.
- A court-appointed guardian or permanent custodian of a sibling or half-sibling.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 10 due to 86% of the 37 applicable foster care cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 10: Did the agency make concerted efforts to place the child with relatives when appropriate?		
Review	Period Under Review	Item 10 Performance
CFSR Round 3	April 2014 – May 2015	86%
PIP Measurement Period 1	July 2016 – September 2017	89%
PIP Measurement Period 2	January 2017 – March 2018	80%
PIP Measurement Period 3	July 2017 – September 2018	93%
PIP Measurement Period 4	April 2018 – June 2019	92%
PIP Measurement Period 5	January 2019 – March 2020	85%
PIP Measurement Period 6	July 2019 – September 2020	89%

Data Source: Federal Online Monitoring System

Administrative Data

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	*SFY 2021	SFY 2022	SFY 2023
Children in foster care live with relatives or non-related kin <i>Standard: 50%</i>	31%	32%	33%	33%	32%	33%	34%	40%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

In SFY 2021, non-related kin were added to the outcome measure and the standard was raised from 29% to 50%.

Item 11: Relationship of Child in Care with Parents

In the past are the days when it was believed social workers “saved” children by removing them from families in crisis. Today much more is known about the crucial role families play in caring for their children in foster care.

In recent years, Kansas has made meaningful strides toward becoming a family and child well-being system centered around shared parenting by the child’s parents and foster care placement. Kansas has shifted from simply encouraging opportunities for parents to be involved in the child’s life to expecting parents be provided these opportunities.

Aside from regular visitation, parents are provided opportunities to participate in the child’s school activities and teacher conferences, to attend medical appointments with the child and to engage in the child’s after-school or sports activities. Additionally, foster parents are encouraged to mentor and support the child’s parents and to help nurture the relationships between the child and his or her parents.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 11 due to 79% of the 24 applicable foster care 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.

Since completing the CFSR, Kansas has finalized -six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 11: 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 just arranging for visitation?		
Review	Period Under Review	Item 11 Performance
CFSR Round 3	April 2014 – May 2015	79%
PIP Measurement Period 1	July 2016 – September 2017	77%
PIP Measurement Period 2	January 2017 – March 2018	73%

PIP Measurement Period 3	July 2017 – September 2018	63%
PIP Measurement Period 4	April 2018 – June 2019	60%
PIP Measurement Period 5	January 2019 – March 2020	95%
PIP Measurement Period 6	July 2019 – September 2020	88%

Data Source: Federal Online Monitoring System

There is continued discussion with all Child Placing Agencies (CPA) regarding the use of Icebreaker conversations and encouraging advocacy for foster parents and biological parents. Additionally, the Family Finding model is being used by Case Management Providers (CMP). In January 2021, DCF began discussion with the Capacity Building Center for States to develop a messaging plan to encourage more family engagement and adherence to the KPM. Currently the plan is being designed and is anticipated to be implemented starting in the Summer of 2021 and through the fall.

Well-Being Outcomes 1, 2 and 3

Well-Being Outcome 1: Families Have Enhanced Capacity to provide for their children's needs

Strengthening families is essential to the agency's mission and critical to the state's vision for family and child well-being services. Agency programs and interventions are inherently time-limited, and services are designed to strengthen families and build skill and capacity for families to provide for their children's needs.

Item 12: Needs and Services of Child, Parents and Foster Parents

Kansas utilizes formal and informal assessments to assess the needs of children, parents and foster parents, both initially and on an ongoing basis, to identify needs and the services necessary to achieve goals.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 12 due to 58% of the 65 cases rated as a Strength. Item 12 was rated as a Strength in 63% of the 40 applicable foster care cases and 52% of the 25 applicable in-home service cases. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 12: 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?		
Review	Period Under Review	Item 12 Performance
CFSR Round 3	April 2014 – May 2015	58%
PIP Measurement Period 1 <i>PIP Measurement Goal: 66%</i>	July 2016 – September 2017	57%
PIP Measurement Period 2 <i>PIP Measurement Goal: 66%</i>	January 2017 – March 2018	- 45%
PIP Measurement Period 3 <i>PIP Measurement Goal: 66%</i>	July 2017 – September 2018	55%

PIP Measurement Period 4 <i>PIP Measurement Goal: 66%</i>	April 2018 – June 2019	62%
PIP Measurement Period 5 <i>PIP Measurement Goal: 66%</i>	January 2019 – March 2020	66%
PIP Measurement Period 6 <i>PIP Measurement Goal: 66%</i>	July 2019 – September 2020	72%

Data Source: Federal Online Monitoring System

Sub-Item 12A: Did the agency make concerted efforts to assess the needs of and provide services to <u>children</u> to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family?		
Review	Period Under Review	Item 12A Performance
CFSR Round 3	April 2014 – May 2015	85%
PIP Measurement Period 1	July 2016 – September 2017	79%
PIP Measurement Period 2	January 2017 – March 2018	80%
PIP Measurement Period 3	July 2017 – September 2018	82%
PIP Measurement Period 4	April 2018 – June 2019	92%
PIP Measurement Period 5	January 2019 – March 2020	85%
PIP Measurement Period 6	July 2019 – September 2020	92%

Data Source: Federal Online Monitoring System

Sub-Item 12B: Did the agency make concerted efforts to assess the needs of and provide services to <u>parents</u> to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency’s involvement with the family?		
Review	Period Under Review	Item 12B Performance
CFSR Round 3	April 2014 – May 2015	61%
PIP Measurement Period 1	July 2016 – September 2017	61%
PIP Measurement Period 2	January 2017 – March 2018	46%
PIP Measurement Period 3	July 2017 – September 2018	56%
PIP Measurement Period 4	April 2018 – June 2019	60%
PIP Measurement Period 5	January 2019 – March 2020	75%
PIP Measurement Period 6	July 2019 – September 2020	71%

Data Source: Federal Online Monitoring System

Sub-Item 12C: Did the agency make concerted efforts to assess the needs of and provide services to 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?		
Review	Period Under Review	Item 12C Performance
CFSR Round 3	April 2014 – May 2015	86%
PIP Measurement Period 1	July 2016 – September 2017	81%
PIP Measurement Period 2	January 2017 – March 2018	76%
PIP Measurement Period 3	July 2017 – September 2018	86%
PIP Measurement Period 4	April 2018 – June 2019	81%
PIP Measurement Period 5	January 2019 – March 2020	85%
PIP Measurement Period 6	July 2019 – September 2020	100%

Data Source: Federal Online Monitoring System

The Kansas Round 3 PIP established a goal of 66% for Item 12. Kansas achieved this goal during the fifth PIP measurement review period.

Item 13: Child and Family Involvement in Case Planning

Kansas holds regular case planning conferences with families both initially, after the case is opened, and periodically throughout the case. Case planning conferences are designated times set aside to identify strength and needs, identify services and service providers, establish goals in the case plan, evaluate progress toward goals and discuss the case plan. Case planning activities also occur during contacts with children and families between conference dates.

The case plan is a cooperative agreement developed in partnership with the child, family, the family’s identified supports, the agency and service providers. Case planning is based on family-centered practice, and Kansas actively involves the child and family in the case planning process.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 13 due to 65% of the 63 applicable cases rated as a Strength. Item 13 was rated as a Strength in 68% of the 38 applicable foster care cases and 60% of the 25 applicable in-home service cases. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 13: Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?		
Review	Period Under Review	Item 13 Performance
CFSR Round 3	April 2014 – May 2015	65%

PIP Measurement Period 1 <i>PIP Measurement Goal: 72%</i>	July 2016 – September 2017	70%
PIP Measurement Period 2 <i>PIP Measurement Goal: 72%</i>	January 2017 – March 2018	62%
PIP Measurement Period 3 <i>PIP Measurement Goal: 72%</i>	July 2017 – September 2018	58%
PIP Measurement Period 4 <i>PIP Measurement Goal: 72%</i>	April 2018 – June 2019	73%
PIP Measurement Period 5 <i>PIP Measurement Goal: 72%</i>	January 2019 – March 2020	81%
PIP Measurement Period 6 <i>PIP Measurement Goal: 72%</i>	July 2019 – September 2020	70%

Data Source: Federal Online Monitoring System

Kansas met the PIP measurement goal for Item 13 during the fourth review period. Case review findings suggest strengthening efforts to actively involving children and fathers is an area of opportunity to improve outcomes.

Item 14: Caseworker Visits with the Child

Regular visits between caseworkers and children are essential to good casework practice. These visits help:

- Ensure the safety, permanency and well-being of the child
- Promote achievement of case goals
- Ensure the child’s needs are met
- Ensure the child’s important connections are maintained

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 14 due to 78% of the 65 cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 14: 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?		
Review	Period Under Review	Item 14 Performance
CFSR Round 3	April 2014 – May 2015	78%
PIP Measurement Period 1 <i>PIP Measurement Goal: 85%</i>	July 2016 – September 2017	69%
PIP Measurement Period 2 <i>PIP Measurement Goal: 85%</i>	January 2017 – March 2018	65%
PIP Measurement Period 3 <i>PIP Measurement Goal: 85%</i>	July 2017 – September 2018	78%
PIP Measurement Period 4 <i>PIP Measurement Goal: 85%</i>	April 2018 – June 2019	89%

PIP Measurement Period 5 <i>PIP Measurement Goal: 85%</i>	January 2019 – March 2020	78%
PIP Measurement Period 6 <i>PIP Measurement Goal: 85%</i>	July 2019 – September 2020	82%

Data Source: Federal Online Monitoring System

Kansas met the PIP measurement goal for Item 14 during the fourth review period. Case review findings suggest strengthening the frequency and quality of visits between caseworkers and children is an area of opportunity to improve outcomes. As of August 9th, YTD Federal Measurement of worker/child visits made on a monthly basis report, DCF has significantly improved to 97% with the goal being 95%. Similar success is seen when looking at the measurement for visits made in residence. As of August 9th, DCF exceeds the goal of 50% by currently having a rate of 86%.

Administrative Data

Section 424(f) of the Social Security Act established performance standards for completing monthly caseworker visits with children in foster care. States are required to meet the following performance standards:

- **Monthly Caseworker Visits (MCV):** The total number of visits made by caseworkers on a monthly basis to children in foster care during the federal fiscal year (FFY) must not be less than 95% of the total number of such visits that would occur if each child were visited once every month while in care.
- **Visits In-Home (VIH):** At least 50 percent of the total number of monthly visits made by caseworkers to children in foster care during the FFY must occur in the child’s residence.

As detailed in Program Instruction ACYF-CB-PI-12-01, Kansas collects data and reports caseworker visit data for each FFY. The state had consistently surpassed the standard for the number of monthly caseworker visits occurring in the child’s residence. In FY 2018-2020, data reflects Kansas declined in the performance standard for monthly caseworker visits. In FY 2021, system issues were corrected, communication between DCF and Case Management Providers has improved, and Kansas’ ratings have increased for FY 2021 (data from October 2020 through February 2021). DCF will continue to address any system issues and work with the Case Management Providers to ensure outcomes are met for FY 2021.

Outcome Measure	FFY 2014	FFY 2015	FFY 2016	FFY 2017	FFY 2018	FFY 2019	FFY 2020	*FFY 2021	FFY 2022	FFY 2023
Monthly Caseworker Visits <i>Standard: 95%</i>	97%	98%	97%	95%	90%	74%	89%	95%		
Visits In Home <i>Standard: 50%</i>	80%	81%	83%	83%	83%	85%	76%	83%		

Data Source: SCRIPTS

*SFY 2021 data reflects data from October 2020 through February 2021

Item 15: Caseworker Visits with Parents

Regular visits between caseworkers and parents help ensure safety, permanency, and well-being of the child and promote achievement of case goals.

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 15 due to 55% of the 56 applicable cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 15: 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?		
Review	Period Under Review	Item 15 Performance
CFSR Round 3	April 2014 – May 2015	55%
PIP Measurement Period 1 <i>PIP Measurement Goal: 63%</i>	July 2016 – September 2017	70%
PIP Measurement Period 2 <i>PIP Measurement Goal: 63%</i>	January 2017 – March 2018	55%
PIP Measurement Period 3 <i>PIP Measurement Goal: 63%</i>	July 2017 – September 2018	62%
PIP Measurement Period 4 <i>PIP Measurement Goal: 63%</i>	April 2018 – June 2019	77%
PIP Measurement Period 5 <i>PIP Measurement Goal: 63%</i>	January 2019 – March 2020	65%
PIP Measurement Period 6 <i>PIP Measurement Goal: 63%</i>	July 2019 – September 2020	74%

Data Source: Federal Online Monitoring System

Kansas met the PIP measurement goal for Item 15 during the first review period and the fourth review period. Case review findings suggest strengthening the frequency and quality of visits between caseworkers and fathers is an area of opportunity to improve outcomes. This area is in process of being discussed during the quarterly performance improvement meetings being held in August 2021 with DCF regional staff and all CWCMP’s in order to focus on involvement of fathers in relation to assessments, services and visits.

Well-Being Outcome 2: Children receive appropriate services to meet their educational needs

The family and child well-being practice of supporting the overall well-being of children ensures educational needs are assessed and children receive appropriate services to meet identified needs.

Item 16: Educational Needs of the Child

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 16 due to 91% of the 47 applicable cases rated as a Strength. Item 16 was rated as a Strength in 94% of the 35

applicable foster care cases and 83% of the 12 applicable in-home service cases. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 16: Did the agency make concerted efforts to assess children’s educational needs, and appropriately address identified needs in case planning and case management activities?		
Review	Period Under Review	Item 16 Performance
CFSR Round 3	April 2014 – May 2015	91%
PIP Measurement Period 1	July 2016 – September 2017	89%
PIP Measurement Period 2	January 2017 – March 2018	78%
PIP Measurement Period 3	July 2017 – September 2018	80%
PIP Measurement Period 4	April 2018 – June 2019	93%
PIP Measurement Period 5	January 2019 – March 2020	76%
PIP Measurement Period 6	July 2019 – September 2020	98%

Data Source: Federal Online Monitoring System

Administrative Data

Outcome Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Children in foster care for 365 days or longer that progress to the next grade level <i>Standard: 70%</i>	70%	36%	83%	86%	99%	78%	69%	**		
Youth exiting custody to emancipation or runaway that have completed grade 12 <i>Standard: NA</i>	43%	52%	46%	51%	68%	39%	31%	*35%		

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

DCF will continue to review performance of educational progression and completion of 12th grade for children/youth in foster care.

**Data for SFY2021 is not complete at the time of submission of this APSR as data is only valid at the completion of an SFY. In January 2021, DCF began discussion with the Capacity Building Center for States to develop a messaging plan to encourage more family engagement and adherence to the KPM. Currently the plan is being designed and it is anticipated implementation will begin during the Summer of 2021 and through the fall.

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs

Family and Child Well-Being practice supporting the well-being of children also ensures children receive appropriate services to meet their physical and mental health needs.

Item 17: Physical Health of the Child

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 17 due to 81% of the 48 applicable cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 17: Did the agency address the physical health needs of children, including dental health needs?		
Review	Period Under Review	Item 17 Performance
CFSR Round 3	April 2014 – May 2015	81%
PIP Measurement Period 1	July 2016 – September 2017	75%
PIP Measurement Period 2	January 2017 – March 2018	76%
PIP Measurement Period 3	July 2017 – September 2018	68%
PIP Measurement Period 4	April 2018 – June 2019	91%
PIP Measurement Period 5	January 2019 – March 2020	76%
PIP Measurement Period 6	July 2019 – September 2020	84%

Data Source: Federal Online Monitoring System

Much of the same work done around improving services to meet the mental health needs of children has also contributed to the increase in meeting health needs for children in care. In addition, the internal audit by DCF Audits helped bring more awareness to documentation requirements.

Item 18: Mental/Behavioral Health of the Child

Federal Reviews

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 18 due to 78% of the 54 applicable cases rated as a Strength. Since completing the CFSR, Kansas has finalized six Program Improvement Plan (PIP) measurement case reviews. Performance ratings are based on information gathered through thorough review of case file documentation and interviews with key case participants.

Item 18: Did the agency address the mental/behavioral health needs of children?		
Review	Period Under Review	Item 18 Performance
CFSR Round 3	April 2014 – May 2015	78%
PIP Measurement Period 1	July 2016 – September 2017	74%
PIP Measurement Period 2	January 2017 – March 2018	74%
PIP Measurement Period 3	July 2017 – September 2018	64%

PIP Measurement Period 4	April 2018 – June 2019	82%
PIP Measurement Period 5	January 2019 – March 2020	72%
PIP Measurement Period 6	July 2019 – September 2020	87%

Data Source: Federal Online Monitoring System

In late 2018 and 2019, DCF promoted Mental Health in Schools. A lot of work has been done with KAPP, which has resulted in a standardized trauma informed assessment which leads to children receiving individualized mental health services to meet their needs. Education about trauma and its impact continues to drive the work we do with children. In addition, the internal audit by DCF Audits helped bring more awareness to documentation requirements. See Attachment 15 and 15.1 for the two audits completed.

In SFY2021, DCF issued a Request for Proposal (RFP) for the management of a centralized behavioral health crisis hotline, screening and mobile response stabilization services to promote coordination and access of community-based services as a deterrent from hospitalization or other out-of-home placements. In January 2021, the contract was awarded to Beacon Health Options Inc. This 3-year contract is intended to create a crisis continuum of care that deescalates and ameliorates a crisis before more restrictive or institutional interventions become necessary and to ensure connection to needed supports and services for children and youth. For additional information, see Attachment 15 Kansas Family Crisis Response Services.

Current and Planned Activities to Improve Performance on Child and Family Outcomes

Kansas is committed to achieving the highest standards in safety, permanency and well-being. As an agency, DCF is dedicated to perpetual learning and continuous quality improvement. Kansas actively pursues opportunities to improve family and child well-being practice and outcomes for children and families.

Safety

Kansas is dedicated to achieving the highest standards for safety, prevention and reducing the need for foster care. Of the 38 states completing reviews in the first three years of CFSR Round 3, Kansas was one of only three states to achieve substantial conformity for Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect. None of the 38 states achieved substantial conformity for Safety Outcome 2: Children are safety maintained in their homes whenever possible and appropriate.

In SFY 2021, Kansas made profound systemic and practice improvements to become a family and child well-being system focused on safety and prevention. Kansas has continued efforts to ensure child maltreatment reports were assessed timely. To prevent children’s entry into foster care, Kansas overhauled the service delivery model for in-home family preservation services, forged new partnerships to begin offering Family First Prevention Services and developed targeted prevention strategies through the Kansas Strong project. Kansas enhanced safety and risk assessment through incorporating TDM meetings and implementing the Kansas Practice Model.

Kansas Protection Report Center

Although Kansas achieved substantial conformity for Safety Outcome 1 during the CFSR, performance in the subsequent PIP measurement review periods has decreased. Kansas has continued to make timely face-to-face contact with the children identified in child maltreatment reports at a high rate, assessing

reports for assignment within the time frames established by agency policy remains an opportunity for improvement.

Kansas responded to an assessment by the Annie E. Casey Foundation in 2018, by implementing sweeping changes to the KPRC. These changes streamlined workflow processes and helped to increase the number of timely initial assessments. During SFY 2020, Kansas has continued efforts to improve staffing at the KPRC and provide further professional development opportunities to supervisors and practitioners.

In July 2019, another independent review of the KPRC completed and findings were presented to Kansas DCF. Kansas utilized these findings to guide improvement activities in SFY 2020. Kansas refined recruitment strategies to include broadening the audience receiving notice of job posting and shortening the time from application to interview of qualified applicants.

In SFY 2021 leadership within the Kansas Protection Reporter Center (KPRC) completed a review of the errors for the timely initial assessment decision.

During March, April and May 2020 the percentage for timeliness was below the 95% performance standard despite the low number of reports received.

March 72.5%

April 82.5%

May 93.3%

The KPRC timely initial assessment percentage has been below the performance standard over the last few years; SFY 2020 78.5%, SFY 2019 69.4% and SFY 2018 43.4%. Despite the gradual improvement KPRC has been unable to meet the 95%. Further analysis was completed on reports that did not have timely initial assessment. The KPRC pulls weekly data on which reports did not have the timely initial assessment. A review of a four weeks (5/3 - 5/9/20, 5/10 - 5/16/20, 6/7 - 6/13/20 and 6/14 - 6/20/20) was done by analyzing each report to determine the reason for the late assessment. A total of 342 reports were reviewed and trends were identified in the following categories:

Total	Percentage	Category	Explanation
157	45%	Late for no reason	This report was left under review by the worker for extended period of time or late with no explanation.
81	23%	Supervisor Review	The case was sent through supervisor review during the Quality Assurance Review process OR the report was from a new worker needing additional guidance
50	14%	Preliminary Inquiry info missing	The worker did not complete the 1002 Preliminary Inquiry documentation
34	10%	Duplicate Report	The report was late due to the duplication process
30	8%	Incorrect date or time	The worker entered the incorrect date or time of the screening decision
352			

Following the review of the errors, KPRC created a Wildly Important Goal (WIG) focused on raising the timely initial assessment to 95%. The following will provide information about steps taken to increase timely initial assessments. Data continues to be reviewed weekly to monitor performance.

Late for no reason

- The KPRC holds regular all staff meetings during the year. During the summer 2020 meeting information on the review of timely initial assessment errors was presented to staff. The impact of KPRC not making timely initial assessment was discussed.
- Supervisors brought the timely initial assessment WIG to their unit meetings to discuss ways to improve timeliness.
- Patterns were seen in the data regarding reports being left in “Under Review” status for extended periods of time. Under Review status means a KPRC staff person has started to make the initial assessment decision but did not complete within two hours of starting. Supervisors are working to identify barriers preventing KPRC staff at completing timely.

Supervisor Review

- New Worker Review

During the training period for new employees they were using the live environment with Kansas Intake/Investigation Protection System (KIPS). While in training new employees are having their reports reviewed by a supervisor before they are approved for assignment. Due to the review needed by a supervisor it was causing a delay in the assignment.

- Work was done in the KIPS training environment for new staff to start learning and practicing through there.
- Supervisors still review new worker reports in the training environment and are able to provide the same meaningful feedback.

- Quality Assurance Review

During the Quality Assurance Review process a report can be identified as needing a review by a supervisor. If the supervisor determines an initial assessment decision was incorrect and requires the report to be screened in, the date and time of assignment are changed to reflect the date of decision.

- KPRC continues to review this process but has not implemented any changes to practice at this time.

Preliminary Inquire information missing

- When it is determined the report is showing untimely due to the preliminary inquiry information not being entered into KIPS, these corrections are made, and the report no longer reflects as untimely.

Duplicate Reports

- KPRC continues to review this process but has not implemented any changes to practice at this time.

Incorrect date or time

- When it is determined the report is showing untimely due to data entry regarding the date or time in KIPS, corrections are made, and the report no longer reflects as untimely.

The table below provides data collected from reviews of the error reports for timely initial assessments during the months of October 2020-January 2021. During this four-month period the anticipated number of errors was expected to be over 1,300 had action not been taken to increase the timely initial assessments. The total number of errors is less than twice what was seen during the four-week review.

Total	Percentage	Category	Explanation
385	62%	Late for no reason	This report was left under review by the worker for extended period of time or late with no explanation.
92	15%	Supervisor Review	The case was sent through supervisor review during the Quality Assurance Review process OR the report was from a new worker needing additional guidance
24	4%	Preliminary Inquiry info missing	The worker did not complete the 1002 Preliminary Inquiry documentation
39	6%	Duplicate Report	The report was late due to the duplication process
71	12%	Incorrect date or time	The worker entered the incorrect date or time of the screening decision
611			

Further analysis of the “Late for no reason” category is currently, as of August 2021, underway to break that category down in order to understand what area to focus on. The new areas will allow the KPRC team to know if the reports are received outside of normal business hours, put in to an incorrect queue and those pulled within 15 minutes of the time they are due. Additionally, KPRC team has completed a process review on different roles to assure timeliness. From that review, a small group of team leads has developed a training for new and existing team leads on strategies to encourage other team members on how to incorporate timely assessments into their daily work.

During the months of October 2020- January 2021 KPRC has seen an improvement of the overall timely initial assessment and during two of those months was over the 95% performance standard.

October 2020 95.9%

November 2020 96.5%

December 2020 94.7%

January 2021 93.6%

KPRC Leadership has also partnered with DCF Information Technology and WellSky (KIPS vendor) to discuss areas the system is causing duplication, inefficient data entry or errors. A series of five meetings were held in January and February to allow KPRC to present the workflow related to the current intake process. At a follow up meeting on 3/16/2021 WellSky presented a list of proposed improvements for both internal DCF and WellSky. The DCF KPRC team chose the following five areas of focus: 1. Document workflow that will combine numerous small assessments forms in to a single, consolidate assessment form., 2. Create an updated workflow automation, 3. Explore a WellSky-led review of the Welfare check process and integration into the KIPS workflow, 4. Comprehensive review/refinement of KIPS roles and 5. Explore the possible creation of workflow wizards to guide workers through post-

interview process. It is acknowledged that these areas may take several years to be developed, finalized and tested.

The KPRC Leadership continues to review the timely assessment error reports and analyze trends. Plans for SFY 2022 include implementing suggested system changes, further in-depth analysis related to reports late for no reason and reevaluating internal processes.

Family First Prevention Services

The Family First Prevention Services Act, signed into law in February 2018, has provided an exciting opportunity for states to focus resources to prevent children's entry into foster care. Kansas launched an array of Family First Prevention Services (FFPS) in October 2019, making Kansas one of the first states to adopt this new model of family and child well-being services financing and implement new prevention services.

Kansas awarded grants to 14 community-based organizations around the state. These grants build capacity within communities to provide evidence-based services specializing in mental health, substance use, parent skill-building and kinship navigation services. These new programs add to the State's array and continuum of prevention services.

As of March 31, 2021, a total of 1,113 families had been referred to one of the new FFPS programs. This included:

- 565 referrals for mental health services;
- 71 referrals for substance use services;
- 327 referrals for parent skill-building services; and
- 150 referrals for kinship navigation services

Kansas Strong for Children and Families (Parent/Youth Facilitation)

The Kansas Strong for Children and Families (Kansas Strong) project is a statewide public-private partnership between the University of Kansas (KU) School of Social Welfare, Kansas DCF, and the state's private providers of foster care and family preservation case management services. This project was made possible through the Strengthening Child Welfare Systems to Achieve Expected Child and Family Outcomes grant funding awarded by the Children's Bureau.

Through Kansas Strong, the state has developed, and is implementing and evaluating six strategies: KanCoach, Parent-Youth Facilitation (PYF), Adoption Tracking Tool (ATT) and Interagency Advisory Board (IAB), Youth Voices from Foster Care and Change the WORLD (identifying policies and procedures to support anti-racist practice). After a comprehensive review of available data, these strategies were identified to improve Safety Outcome 2 and Permanency Outcome 1.

Parent-Youth Facilitation is a two-pronged approach to preventing entry into foster care by older youth through: (1) Using a facilitation process to help families arrive at appropriate decisions best fitting their unique needs, and (2) Connecting families to community-based prevention services and supports. This strategy will complement efforts to maintain children in their homes whenever possible and appropriate.

Pilot testing of Parent-Youth Facilitation is ongoing in Wyandotte and Saline Counties during SFY 2021. After successfully piloting, Kansas Strong plans to scale Parent-Youth Facilitation in additional Kansas counties.

As of August 2021, the KU Evaluation team is pleased with the strength of the program and referral pipeline in Saline County, providing initial evidence of the need and potential impact of this program. Conversely, program launch in Wyandotte County has struggled, despite continuous and robust efforts to

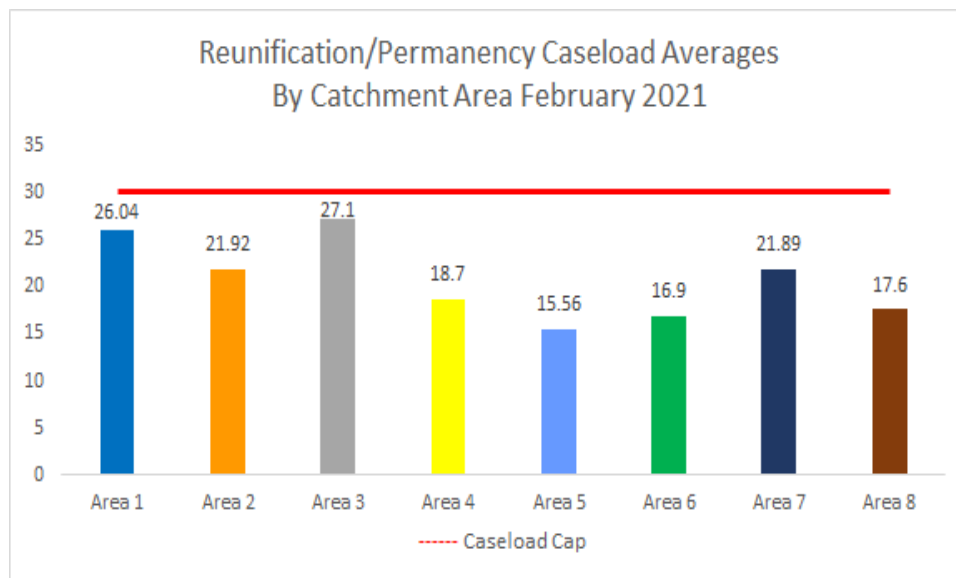
conduct outreach and education about P/YF and establish the service as a resource in the community. Some key difference among sites include the following:

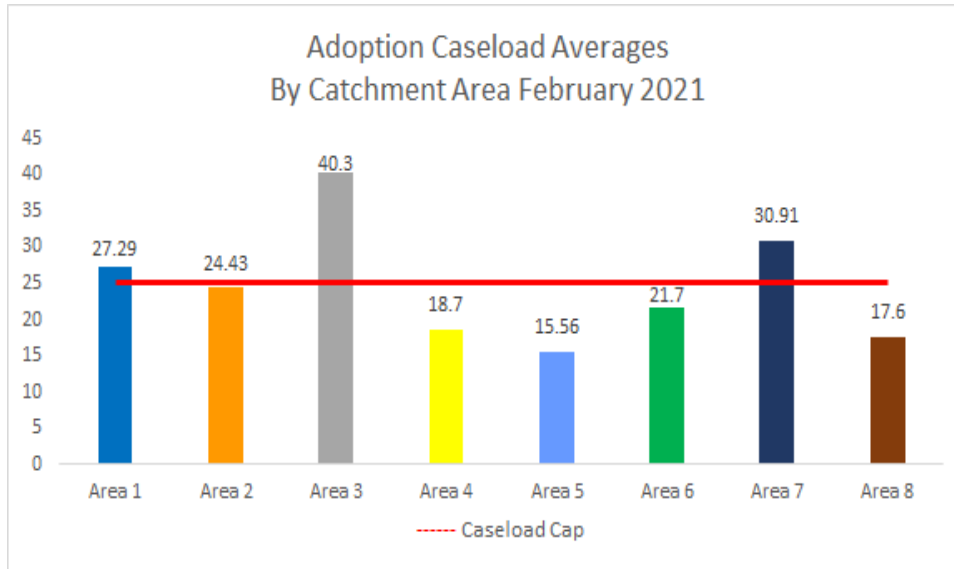
- The Saline County program is housed within a long-established program well-known in the community. The Wyandotte program is not housed within a community-based brick and mortar organization.
- The Saline Coordinator is a service provider within the community. The coordinator for the Wyandotte program is a service provider in an adjacent community.
- The Salina school district (from which the majority of referrals were received) was operating in person throughout the entire initial launch year, whereas USD 500, the primary district in Wyandotte County, operated fully virtually for nearly the entirety of the 2020-2021 school year, reducing face time and access between school staff and youth, and between program staff and school staff.

Despite the challenges present currently in Wyandotte County, the evaluation team assesses the initial implementation of P/YF to demonstrate initial success. The workgroup will reconvene in September 2021 to identify key successes and barriers, refine implementation to leverage these lessons, and partner with OJA and DCF to select and launch a third site to expand this pilot program to an additional urban community in the Fall of 2021.

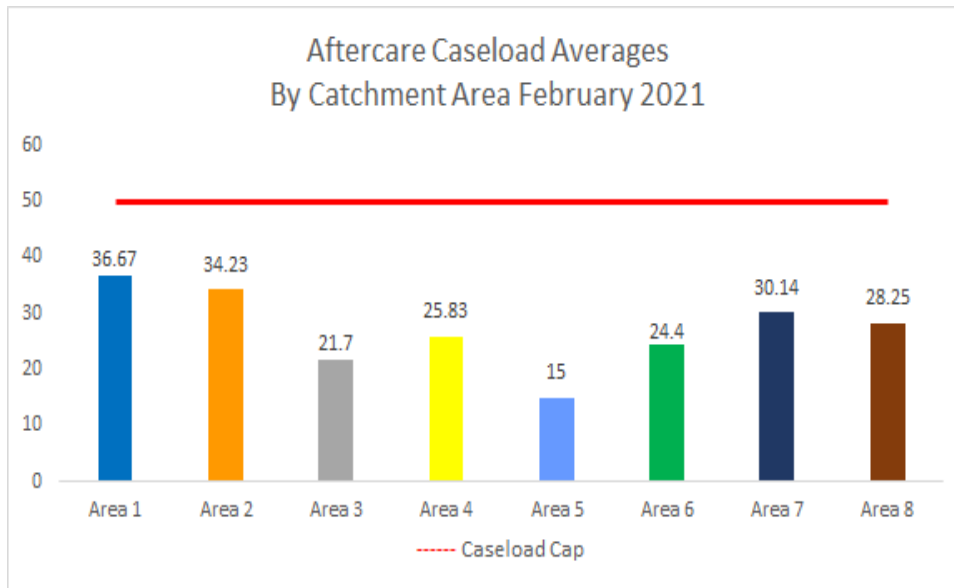
Caseload Size

Kansas has continued to assess and adjust caseload sizes in SFY 2020 (PIP Activity 1.3.2). In October 2019, new caseload caps were established for foster care cases. The maximum caseloads permitted are 30 children per reunification caseworker, 25 children per adoption caseworker and 50 children per aftercare caseworker. Providers report caseload data on a monthly basis. February 2021 caseload data is summarized below:





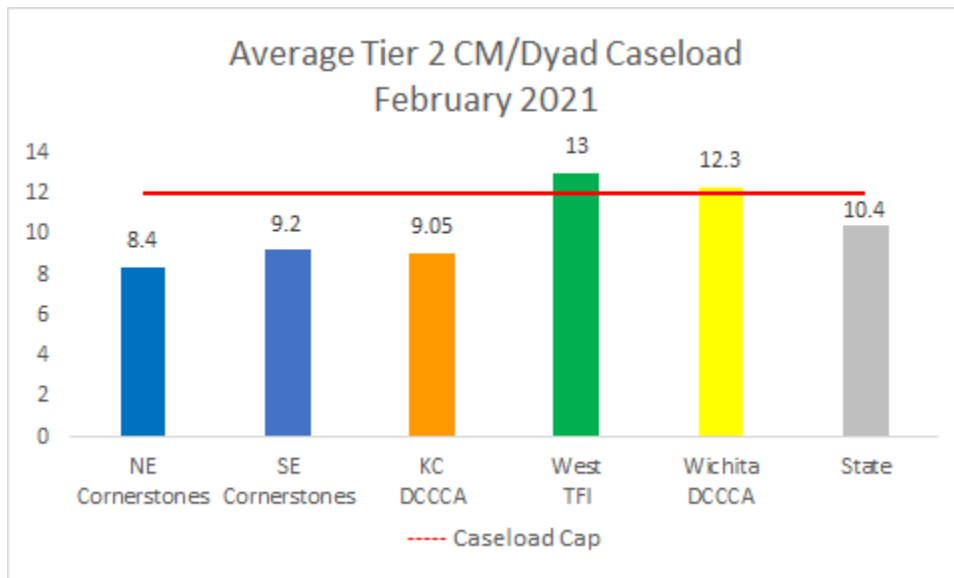
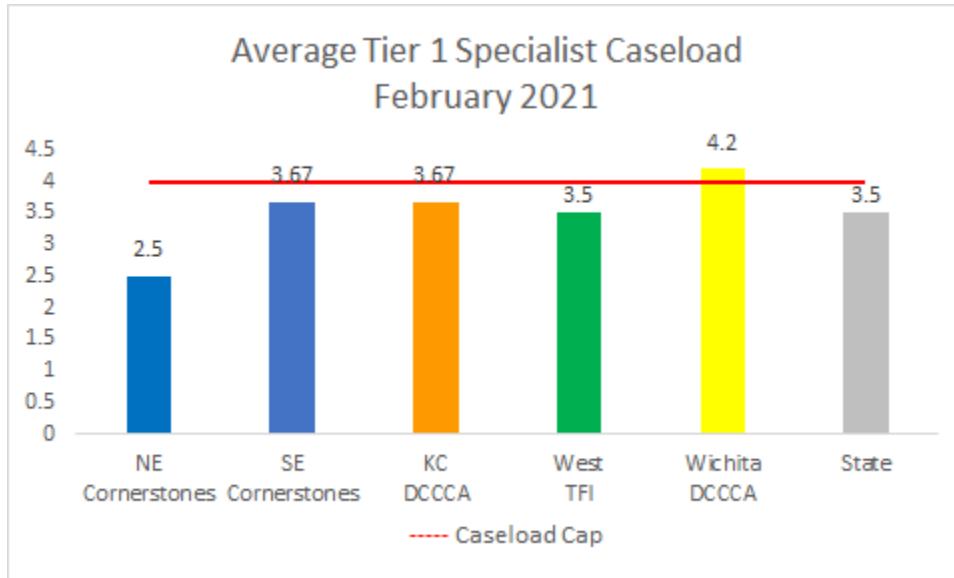
Case Management Providers submit monthly caseload data to DCF. Caseloads reported on the APSR are from February 2021, where three areas were over the caseload size for Adoption cases. This information is submitted monthly which allows for ongoing communication about caseload sizes.



Catchment Areas were new in SFY 2020. Providers continue to adjust and “right size” workforce teams. In SFY 2021, Kansas will continue working with foster care case management providers to ensure caseload sizes, particularly adoption caseload sizes, allow staff to provide quality services.

Under the new Family Preservation contracts, case load limits were included in the contract for the first time. Therapists providing Tier 1 services may have a caseload maximum of four families. Worker dyads providing Tier 2 services may have a caseload of up to twelve families. This was done to increase the quality of work provided and promote a strong, healthy, child welfare workforce. The caseload

requirements for Tier 2 were temporarily relaxed in order to accommodate for the ending of our Community Based Family Services grants. Until 12/31/2021, Tier 2 dyads are allowed up to 15 cases. February 2021 caseload data is summarized below:



Given the intense work with families in the new family preservation model, maintaining low caseloads is critically important for achieving positive outcomes for children and families. In SFY 2021, Kansas will continue monitoring caseload sizes for family preservation services staff.

Permanency

For nearly a decade, Kansas has experienced increasing numbers of children in foster care. This trend has not only strained resources and agency capacity, but also negatively affected permanency outcomes for

children and families. New prevention services have the potential to reduce entry into foster care and Kansas is also committed to expediting permanency for children when foster care services are necessary.

Placement Stability Summit

Kansas planned to hold a placement stability summit in March 2020 with leadership from around the state. The summit was organized as an opportunity to analyze placement data, explore strategies promoting placement stability and gather commitment to achieve real results. Unfortunately, this summit was postponed due to the extraordinary circumstances related to the COVID-19 pandemic. However, a virtual summit, *Leading for Results: Placement Stability Summit*, was held on July 30th, 2020. This group will continue work on stability for children/youth in out of home care.

Kansas continues to improve on placement stability for children/youth in out of home care. Kansas' performance for the Rate of Moves per 1,000 in care was at 5.4 for April 2021. DCF along with CMPs continue to focus on relative placements, including initial placements with relatives. CMPs have made many strides in reducing the number of children staying overnight in offices and one day stays. In comparing SFY20 to SFY21, there is a 61% decrease in overnight office stays.

CareMatch

In October 2019, DCF deployed new placement management software known as CareMatch. CareMatch uses sophisticated algorithms to match a child to an available placement, based on location, child attributes, and placement preferences. Prior to CareMatch, sponsoring agencies functioned as gatekeepers to available resource families. Resources were underutilized and placement decisions were not always informed. Today, CareMatch can produce a list of the best matched, least restrictive placement options available and customized to a child's individual needs. CareMatch is one tool Kansas is utilizing to increase the likelihood of a child's first placement sustaining until permanency is achieved

Placement stability has steadily improved across the state. All catchment areas have achieved improvements in placement stability except area 3. CareMatch may be a factor in the decrease of placement changes for children in care as it was implemented with the goal of improving placement stability for children at the time of first placement and in the event of a need for subsequent placements. All potential placements are found in the CareMatch system regardless of CPA sponsorship. The system sees and searches for the best placement based on specific criteria directly related to the child

Family Finding

In the Fall of 2019, Kansas DCF partnered with Aetna Better Health for Kansas to bring Kevin Campbell with Family Finding to Kansas to provide two bootcamps for DCF, case management providers, CASAs Child Placing Agencies, and Juvenile Justice staff. Small Teams were utilized during the bootcamps for an actual immersion in the practice of Family Finding for children and youth who are in out-of-home care or whose families are new to child welfare or juvenile justice systems. The four-day immersion was focused on learning the philosophy, framework and skills of Family Finding practice. The first bootcamp was held in November of 2019, with the second bootcamp held in February 2020. Family Finding Leads were identified throughout the State and several agencies to serve as the Leads for this practice continuing and building on this practice approach statewide.

Increasing placement with relatives is one strategy for increasing placement stability and improving permanency outcomes. During SFY 2020, Kansas increased targets for relative placement to 50%.

Icebreaker Conversations

When kinship care is not possible, Icebreaker Conversations promote continuity of relationships when a child is placed in a traditional foster home. In partnership with the Capacity Building Center for States,

Kansas piloted Icebreakers in SFY 2019. The Icebreakers model was developed by the Annie E. Casey Foundation. The Icebreaker is an informal, facilitated conversation which 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 implicitly and/or explicitly discouraged. And when birth parents and foster parents do not know each other, they often make assumptions about each other based on very limited information. However new thinking in family and child well-being shows building alliances between birth parents and foster parents can be crucial to the well-being of 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. Icebreakers are a small investment with profound possibilities. 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 permanency outcomes.

During SFY 2020, Kansas finished implementing Icebreaker Conversations statewide. To accomplish this, the Icebreakers model was infused into agency training (PIP Activity 2.4.5). Icebreakers was previously incorporated into training for all new foster parents in Fall 2018. In SFY 2019, a web-based Icebreakers training was developed. This training is now available to all existing foster parents, and the training satisfies some of the annual training hours required to maintain a foster home license. Icebreakers is also a required training for all foster care case management staff. This 3.5-hour training introduces the Icebreakers model and prepares participants to facilitate Icebreaker Conversations. By July 2019, all foster care case management staff had received the Icebreakers facilitator training. Kansas added two additional foster care case management providers in October 2019, requiring additional trainings for new staff.

In July 2019, Icebreakers was added to agency policy (PIP Activity 2.4.6). This policy (PPM 5224) was developed by the Icebreakers implementation team and incorporated recommendations informed by the pilot. The Icebreakers policy clarifies when Icebreaker Conversations are required and encourages fidelity to the Icebreakers model.

In October 2019, Kansas presented about Icebreaker Conversations at the 43rd Annual Governor's Conference for the Prevention of Child Abuse & Neglect. This workshop described how Kansas incorporated Icebreakers into practice to provide continuity of relationships, enhance placement stability and support permanency. The workshop included a panel discussion with facilitators and foster parents who have experienced Icebreaker Conversations.

One facilitator described a situation in which the child in foster care had to be moved to a new foster home because the child's mother lodged so many complaints about the child's care. During the Icebreaker Conversation with the new foster parent, the mother had the opportunity to meet and learn about the person caring for the child. This seemed to ease the mother's anxiety about the child's care, and the agency has not received any new complaints about the child's placement.

One of the foster parents was brand new to fostering. She had just accepted her first placement, a newborn, and was asked to meet the birth mother at the Icebreaker Conversation. This foster parent reported others had cautioned her against sharing her phone number with birth parents. But after meeting the mother at the Icebreaker, phone numbers were exchanged. The foster parent said they have continued communication after the Icebreaker, and the foster parent frequently texts updates, notes when developmental milestones are reached, and photos of the child to the birth mother.

The other foster parent was a very experienced, long-time foster parent. She had never shared her contact information with birth families before. Again, contact information was shared at the Icebreaker. This foster parent reported this has opened the door for video calls, allowing the father to watch as the child practices the violin in the foster home.

With the deployment of CareMatch in October 2019, Kansas incorporated method for Icebreakers data collection (PIP Activity 2.4.5). The CareMatch software tracks all new foster care placements and requires an Icebreakers eligibility determination every time a placement is made. And when an Icebreaker is required, this task is placed on a follow-up dashboard within the system. The task remains on this dashboard until the Icebreaker is entered in the system. In SFY 2021, Kansas plans to enhance the Icebreakers data collected by CareMatch. Enhancements include alternative data collection when an Icebreaker does not occur or does not occur within the timeframes established in policy. This data will help with tracking Icebreakers and identifying the barriers to these critically important conversations.

The Icebreakers model is specifically designed for placement in foster families who are not known to the bio family. However, there is nothing to prohibit such a meeting if the case management team believes it would be beneficial. The current Prevention & Protection Services (PPS) Policy and Procedure Manual (PPM) allows for an Icebreaker Conversation to not be required if placement is somewhere other than a foster home. Icebreakers are encouraged for any placement that is non-temporary. Currently DCF is working with the Capacity Building Center to make these more successful.

DCF continues to work with The Center, CMPs, CPAs and other agency partners through spring and summer 2021 to strengthen the model and continue to raise the need for this conversation to occur. DCF has submitted a work order to the CareMatch developer 5Points to change the data points to be collected and reports provided for IBCs. This is currently in production at the time of the 2022 APSR submission. The Center and DCF is also working on the development of an online survey for CMP and CPA staff to utilize at the end of an Icebreaker Conversation to capture data/satisfaction via “real time.” This survey is in development at the time of this 2022 APSR submission.

Rapid Permanency Reviews

Kansas identified Rapid Permanent Reviews (RPRs) as one strategy to help children in foster care reach permanency. RPRs placed a focus on children close to permanency. The RPR process begins with onsite reviews. The reviews are brief, 30 minutes or less per case, and are focused on the steps to permanency. RPRs are not a Permanency Roundtable or other type of review Kansas has utilized in the past. RPRs don't require a deep archeological dig into the case history of the child's entire time in care. Instead, RPRs work from the steps and timeframes to permanency. RPRs are designed to identify systemic barriers and shine a light on “bright spots.” Removing these barriers and replicating bright spots allows the family and child well-being system to function effectively and efficiently for all children in care. Barrier busting is a team effort and is completed using the Cadence of Accountability process. This on-going process allows participants of the RPRs to share their findings and to work alongside case managers, supervisors and high-level management in a continued effort to bust through barriers preventing children from reaching permanency.

In partnership with Casey Family Programs (CFP), Kansas utilized RPR with a cohort of adoption cases in 2018. Kansas also used the RPR findings to streamline adoption policy and practice.

In SFY 2020, Kansas again partnered with Casey Family Programs (CFP), this time to implement RPR in a cohort of reunification/aftercare cases (PIP Activity 3.2). Whereas DCF staff comprised the primary implementers in 2018, primary implementation roles shifted to the four foster care case management agencies in SFY 2020. DCF has continued to coordinate RPR activities statewide. A review of the

reunification/aftercare process began in September 2019, and a statewide kickoff event was held in December 2019. Implementation teams from the foster care agencies came together in January 2020 for an implementation training and in February 2020 for a process design meeting.

The second round of onsite reviews were scheduled to begin, April 2020 and wrap up in May 2020; however, due to the extraordinary circumstances related to the COVID-19 pandemic and statewide public health emergency the schedule was disrupted. In September 2020, Kansas opted to pilot virtual RPRs beginning with two of the four CMPs covering 5 areas. The RPRs were finished in November 2020. The virtual RPRs received favorable feedback from the participants as the RPR allowed for the availability of participants as well as others who wanted to observe without travel time or expense. Kansas is scheduled to complete RPRs with the last two CMPs in May 2021.

Adoption Accelerators

In SFY 2020, DCF provided additional grant funding for five “adoption accelerator” positions through the foster care case management providers. Providers were given latitude to utilize these new positions differently; however, the positions are not permitted to carry a caseload. These adoption accelerator positions were created to reduce the length of time for children waiting for adoption. Providers report using adoption accelerators for tasks such as streamlining internal administrative processes and tackling both systemic and case-specific barriers to timely permanency through adoption.

The Adoption Accelerator overall job duties include:

- Facilitate Case Staffing
- Identify case level barriers
- Help find solutions for cases heading to adoption.
- Help achieve finalized adoptions
- Help gather and compute documents needed in preparation of the home assessments
- Help complete child social histories
- Develop tracking tools and gather case data
- Hold workshops and trainings with staff
- Advocate and help promote quality adoption work.

Since October 2019, the TFI Family Services Adoption Accelerator has also attended trainings and participated in recruitment activities. The Cornerstones of Care Adoption Accelerator has developed adoption tracking tools and reports, helped workers organize packets, helped facilitate transfer staffing and participated as a scribe in a Best Interest Staffing. The KVC Adoption Accelerator has shadowed home study writers and worked with children’s outpatient providers, and ICPC cases. At Saint Francis Ministries, the Adoption Accelerator has also worked on subsidy referrals, in addition to the other previously mentioned tasks.

Well-Being

The family and child well-being system must do more than ensure children are surviving. Practice must also ensure children are thriving in their environments. This requires a focus on well-being.

Kansas Strong for Children and Families (KanCoach)

The Kansas Strong for Children and Families (Kansas Strong) project developed KanCoach as a strategy they will be implementing and evaluating. After a comprehensive review of available data, KanCoach was identified as a solid strategy toward improving Safety Outcome 2 and Permanency Outcome 1.

KanCoach is a skills-based coaching program focused on developing and strengthening supervisory capacity and skills to promote quality frontline practice and improve outcomes. Priority topics for the

program include safety/risk assessment and case planning, family engagement, relative/kin connections and secondary traumatic stress, and anti-racist practice. KanCoach is expected to impact safety, permanency and well-being outcomes.

The goal of KanCoach is to support and strengthen coaching skills in supervisors and assisting them in learning how to incorporate coaching strategies in their supervision of staff. Anticipated benefits of include:

- supervisors learning and practicing effective strategies to create a collaborative, strength-based culture to support family and child well-being staff;
- as supervisors use coaching skills in supervision, this will boost confidence, morale, and foster critical thinking skills among staff;
- supervisors will create opportunities for their staff to practice important skills, specifically on priority topics of engaging parents and youth, risk and safety assessment, family-centered assessment and case planning, and relative/kin connections; and
- supporting professional development of family and child well-being supervisors and staff.

With support from the Kansas Family Advisory Network (KFAN), the Kansas Strong parent survey was administered in July and August 2019. KFAN staff administered the survey to 305 parents/caregivers at local foster care agencies across the state. The survey gathered parent/caregiver responses to three main topics: service array, caseworker/agency practices and court/legal practices.

Regarding caseworker/agency practices, the following survey items received higher scores from parents/caregivers:

My worker speaks the language most appropriate for me and my family.	3.7
The agency or my worker has told me my rights.	3.5
My worker is clear about what she/he expects of me.	3.5
My worker respects my right to privacy.	3.5
My worker cares about my kids.	3.5
My worker’s expectations of me are reasonable.	3.5
My worker encourages me to discuss when things were better in my family.	3.5
My worker speaks up for me with other professionals involved in my case.	3.4
When my worker says she/he will do something, she/he does it.	3.4
My worker listens to my side of the story.	3.4
The services and resources recommended will help get my child(ren) back.	3.4
My worker is helping me to address the safety concerns that brought my child into foster care.	3.4
My worker respects my social/cultural background.	3.4
I felt comfortable talking with my worker about what my culture and race have to do with my situation.	3.4

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

Regarding caseworker/agency practices, the following survey items received lower scores from parents/caregivers:

When my worker makes a mistake, she/he admits it and tries to correct the situation.	3.3
My worker devotes enough time to my case.	3.3
My worker tells me who I can contact for help when she/he is gone for more than a day or two.	3.3
My worker returns my calls.	3.3
My worker has experience helping with the kids of problems that my family and I are having.	3.3
I am involved in decisions made about my case.	3.3
My worker includes me in decision-making.	3.3
My worker tells me what she/he plans to recommend in court—both negative and positive.	3.3
My worker tries to understand what it's like to get your children taken away.	3.2
My right to make decisions about my children is respected while they are in foster care.	3.2
My worker gets me necessary services in a timely manner.	3.2
My worker calms my fears about what might happen to my children and me.	3.2
I know who to call if my rights were ignored.	3.2

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

Kansas used the survey findings to develop the KanCoach priority topics and enhance engagement with families (PIP Activity 2.2.5). Kansas will also seek feedback and insight on the four KanCoach priority topics from parents who have experienced the family and child well-being system.

Thus far there have been 213 participants engaged in the KanCoach project; 147 participants are provider employees and 66 are DCF employees. 86% of initial participants are actively engaged at this time.

Case Planning

In SFY 2020, Kansas implemented Initial Family Meetings (IFM) when families are referred for foster care or family preservation services. The IFM is scheduled in consultation with the family but is generally required within two days of a referral for family preservation services or within 3 days of a referral for foster care case management services. The IFM initiates partnership between the family, Kansas DCF and service providers. The Initial Service Plan (ISP) is also developed with the family at the IFM. The ISP outlines immediate tasks or activities to be completed pending completion of the case plan. The ISP was created in response to requests for tangible and immediate guidance for families.

The Kansas Assessment Permanency Project (KAPP) wrapped up in SFY 2019. This grant-funded project envisioned a family and child well-being system as trauma-informed, using evidence-based assessments and interventions with children and families, and promoting social-emotional well-being, family functioning, safety, and permanency.

KAPP targeted assessments for children in the family and child well-being system with mental health needs and trauma histories. KAPP identified specific tools to assess the child's history of trauma, social-emotional functioning and behavioral health functioning. Although this project focused primarily on the

foster care population, Family Preservation Services began utilizing several of the KAPP assessments as part of the case planning process.

In SFY 2020, the KAPP assessments were incorporated into agency policy and practice to help inform and guide case planning.

Services for Children with High Needs

Kansas is committed to meeting the needs of children in care. In October 2019, Kansas added Qualified Residential Treatment Programs (QRTP) as a new level of service for children in foster care. QRTPs provide an integrated treatment model designed to address the clinical needs of children with serious emotional or behavioral disorders. The treatment program involves the child's family and siblings as much as possible. The program also provides discharge planning, a family-based aftercare support, and placement within a QRTP facility is not meant to be long-term. DCF contracts with HealthSource to conduct the Child and Adolescent Functional Assessment Scale (CAFAS) for QRTP eligibility.

Kansas also established new placement standards and rates. The rates are determined by the child's level of care, but providers caring for children with high needs generally receive a higher daily rate under the new rate structure. Kansas implemented tiered rates for relatives providing care. Prior to this change, all relatives were provided the same amount of financial support when caring for a child in foster care. Under the current structure, payments for relatives and kin increase based on the child's needs and level of care. Placement standards were also revised. Specifically, agencies providing support to foster homes are now expected to make more frequent visits when foster parents are caring for children with high needs.

Each Case Management Provider is to identify or develop and utilize a tool to assess children and youth for their Level of Care. Saint Francis Ministries, Cornerstones of Care and KVC all use the same tools. Saint Francis Ministries developed the Child Screening Tool (CST) and Caregiver Response Tool (CRT) and revised it with KVC later. They have since shared it with Cornerstones of Care. They use a Client Assessment Tool to assess youth and a Caregiver Assessment Tool to assess placements. The Client Assessment Tool is used when a child is first placed into care to determine the Level of Care needed. As the child remains in a placement, continued assessment is done every 180 days in which the child and caregiver are given assessment tools to determine if a change in Level of Care is needed. The ongoing assessment is done with 40% of the child's score and 60% of the caregiver's score is considered if a Level of Care change is warranted as a child continues to remain in a home. TFI Family Services uses a different Level of Care tool for their youth. TFI is using a tool which is part of Every Child a Priority, developed internally and validated by KU School of Social Welfare in their extensive research a few years ago. It was originally called the "Appropriate Placement Level Indicator" or "APLI" but TFI has since switched to calling it the client assessment. They also do not use a caregiver scoring tool in their client assessments like the other 3 CMP's.

Kansas continues to partner with Wichita State University's GEAR UP program to help address educational needs of children in care. GEAR UP provides services to help participants prepare for postsecondary education. Services include college exploration and visits, academic skill building, mentoring, like skill building, ACT/SAT workshops, financial literacy, tutoring and academic credit recovery. At any given time, GEAR UP is actively working with over 2,000 students. These students are currently in foster care or recently returned home.

In SFY 2020, a partnership between school districts and community mental health centers was expanded to a total of 171 schools in 28 school districts. This program provides school-based mental health services to children in foster care. Treatment is provided by a behavioral health intervention team including a

school liaison, clinician and mental health case manager. Providing services to children in the school setting has increased access to mental health services for children in care.

Systemic Factors

Statewide Information System

Item 19: Statewide Information System. How well is the statewide information system functioning statewide to ensure, 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 utilizes four systems to track family and child well-being data and information in lieu of a SACWIS/CCWIS system:

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

FACTS is the primary system of record for DCF, the State's IV-E agency. The FACTS system contains data from the point of intake through permanency and post-permanency services. The FACTS 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. It was created to collect and maintain information about children, families and providers with involvement in the family and child well-being system. Information in the system is accessible by agency and case management provider staff across the state. 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 family and child well-being system. The system allows timely data reporting and analysis key to monitoring outcomes and identifying areas of opportunity. Through FACTS, Kansas collects and reports Adoption and Foster Care Analysis and Reporting System (AFCARS), National Child Abuse and Neglect Data System (NCANDS) and National Youth in Transition Database (NYTD) data.

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 or have received in-home services 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. The FACTS system also houses the State Central Child Abuse/Neglect Registry, containing the names of substantiated perpetrators of child abuse and neglect. Data collected in the system is consistent across geographic areas statewide and across all populations served.

The FACTS system 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 within the internal AFCARS Case Read Review and questions included in other case read protocols help to monitor the accuracy of information entered in the system. Case Read results suggest the data in FACTS is consistently and highly accurate. 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.

Administrative QA Data

Measure	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%	100%	98%	100%		
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%	93%	96%	96%		
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%	91%	94%	93%		
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%	89%	66%	83%		
Does all placement history information in FACTS accurately reflect the placement history information on all PPS 5120 documents?	100%	96%	97%	96%	95%	85%	90%	94%		
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%	91%	94%	94%		
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%	78%	85%	85%		
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%	96%	96%	82%		
If the child's out of home placement has ended, does FACTS accurately reflect the Out Of Home End Date and Reason as indicated in the case file?	98%	97%	98%	96%	100%	95%	90%	100%		
If the child was discharged from custody, does FACTS accurately reflect the date and reason of discharge?	97%	97%	97%	97%	100%	100%	75%	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%	100%	90%	80%		

Measure	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	SFY 2023
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%	89%	82%	82%		
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%	100%	100%	89%		
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%	73%	0%	92%		

Data Source: QA Case Reviews

Each CWCMP uses a management information system independent from the state systems. This requires a close working relationship between DCF and the Child Welfare Case Management Providers (CWCMP) to ensure data quality and reliability. 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 forms to DCF Regional staff for data entry into FACTS. Policy provides instructions and timeframes for submitting information to DCF for data entry. Once information is received by the DCF Regional office, staff have five days for data entry into FACTS.

In SFY 2014, case management contract changes prompted Kansas administration staff to facilitate a series of data quality and reconciliation meetings with regional staff and CWCMPs. 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 reconciling data across information systems. 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. In May 2020, DCF reviewed the data collection and reconciliation process with all case management providers.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 19: Statewide Information System. FACTS is functioning to ensure, 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 minimum expectations for functioning of this systemic factor.

Kansas has continued routine comparative analyses of the information within FACTS with information contained in case files using a statewide sample of cases. These analyses have consistently provided a high validation rate for the required information.

In 2019, Kansas formed a new project planning team to begin studying the feasibility of acquiring a CCWIS-compliant information system. The project planning team has reviewed CCWIS requirements and begun a self-assessment of the agency's current data systems. The project team will continue planning and exploring potential options in SFY 2021.

In SFY21, two measurements that showed a decrease are related to the information in FACTS accurately reflecting information found in the case file related to the child's current permanency goal and date of the mother's termination of parental rights which were 82% and 80% respectively. While the most recent case review (10/1/2020-3/31/2021) shows moderate improvements for each, 88% and 90% respectively, the DCF performance improvement team is currently in process of conducting further analysis into this decrease.

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 that is developed jointly with the child's parent(s) and includes the required provisions?

DCF policy, per Kansas statutes, requires each child in DCF custody, including those who are part of a sibling group who are also in custody, have an individual case plan. All providers use DCF case plan forms. Case plan forms are in the PPS Policy and Procedure Manual and comply with applicable federal case plan requirements. Case plans are reviewed and approved by DCF Child Protection Specialists to assure requirements are met. The first case planning meeting is required to be held within 30 days of the child's entry into foster care. Subsequent case planning meetings are conducted at least every 170 days (and within 30 days of permanency goal change).

The CWCMP submits a copy of applicable documents from the PPS 3050 form 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 to the CWCMP. If necessary, the CWCMP makes corrections to the PPS 3050 series documents. 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 and regional FACTS entry staff.

In SFY 2020, DCF implemented Initial Family Meetings. Initial Family Meetings replaced Initial Team meetings. The Initial Family Meeting is required within three days of a referral to foster care services and within two days of a referral to in-home family preservation services. The Initial Family Meeting provides an opportunity for the team to build partnership from the very beginning of the service case, clarify roles, continue assessment activities and draft the Initial Service Plan. The Initial Service Plan is drafted by the team and provides immediate guidance for any tasks or activities pending the first case plan.

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 20: Written Case Plan. Written case plans were found to be timely, and in foster care cases, concerted efforts were made to involve parents in case planning activities. However, it was not clear how families were involved in developing the written plan. The agency has since updated case plan forms to explicitly document the family's input in the development and review of the case plan.

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. After the first case plan meeting, subsequent case plan review meetings are conducted with the family at least every 170 days (and within 30 days of permanency goal change). DCF staff are invited to all case planning meetings, and all case plans must be reviewed and approved by DCF.

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 administrative periodic reviews for each child occurs no less frequently than once every six months. Kansas statutes require courts hold permanency hearings a minimum of every 12 months. Most Courts hold reviews every six months, but sometimes as frequent as every 30 or 90 days.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 21: Periodic Reviews. 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 the functioning of this systemic factor item. In interviews, stakeholders consistently reported periodic reviews were routinely occurring across the state. The courts are generally 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 Full Court- Juvenile Compliance System, FACTS system, and contractors' individual tracking systems which provide tickler or advance information for planning purposes. Most capture the date of periodic reviews.

Kansas does create a monthly report tracking all cases coming due for a periodic administrative review. However, there is no statewide data system to track and report all 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 the court authorized the child's removal from the home and not less frequently than every 12 months thereafter.

Reports may be generated, by DCF, as requested, regarding permanency/no reasonable efforts by DCF on a quarterly basis to the Office of judicial Administration (OJA). This report includes cases that do not have reasonable efforts clause in the initial journal entry and cases that do not have reasonable efforts documented in the journal entry at required permanency hearings every twelve months.

There is 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 such federal law, specific reporting requirement, DCF data indicates as follows:

- Of all children who entered care SFY 2018 who were in care for at least 12 months, 87% had their first permanency hearing within 12 months of removal. Of all children who entered care SFY 2018 who were in care for at least 24 months, 61% had their second permanency hearing within 12 months of their first permanency hearing.
- 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 who were in care for at least 24 months, 62% had their second permanency hearing within 12 months of their first permanency hearing.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 22: Permanency Hearings. Findings were determined based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Kansas provided data on a cohort of children demonstrating most children had permanency hearing in the first year and subsequently within the next twelve months.

Stakeholders agreed permanency hearings occur timely, with most occurring every six months. Stakeholders also indicated some regions use journal entries to track whether permanency hearings happen within 365 days and notify judges when such information is missing.

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

The Adoption and Safe Families Act (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 a permanent custodian might be in the best interests of the child, the county or district attorney or the county or district attorney’s designee shall file a motion to terminate parental rights or a motion to appoint a permanent custodian within 30 days and the court shall set a hearing on such motion within 90 days of the filing of such motion.”

In Kansas, 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. Kansas statute does not require 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 allow, 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 a parent relinquishes parental rights, there is no necessity for a hearing on a motion/petition for termination of parental rights.

Federal Reviews

Notably, Item 5F was only applicable to a total of 125 cases across all 6 reviews, and 79 cases were rated as a Strength.

Item 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	Period Under Review	Item 5F Performance
CFSR Round 3	April 2014 – May 2015	58%
PIP Measurement Period 1	July 2016 – September 2017	90%
PIP Measurement Period 2	January 2017 – March 2018	78%
PIP Measurement Period 3	July 2017 – September 2018	74%
PIP Measurement Period 4	April 2018 – June 2019	67%
PIP Measurement Period 5	January 2019 – March 2020	83%
PIP Measurement Period 6	July 2019 – September 2020	64%

Data Source: Federal Online Monitoring System

Administrative Data

Measure	*SFY 2021
For children who became legally free in SFY 2021, average days between removal and date legally free	725.6

Data Source: FACTS

*SFY 2021 data reflects data from July 2020 through February 2021

This data reveals a period of nearly 24 months between removal and when the child became legally free for adoption (date of last parent to have rights terminated or relinquished and approved). However, FACTS does not track when motions to terminate parental rights are filed by the county or district attorney.

The Office of Judicial Administration (OJA) and the DCF liaison to OJA met regularly during the CFSR process and since the Program Improvement Plan (PIP) was approved, to collaborate and develop a plan to track the filing of Termination of Parental Rights (TPR) and/or request for filing. FACTS data was shared, under the applicable confidentiality provisions in the CINC Code, with the Kansas Office of Judicial Administration data staff to compare with 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

The SFY 2017 data supports the conclusion of the average number of months between the petition/request for mother and for fathers would be within the timeframes established by Kansas statute.

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 23: Termination of Parental Rights. 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 has implemented administrative desk reviews as another way to support compliance with state and federal requirements. The PPS 3056 Permanency Plan desk review is required when a child has been in foster care for 15 of the most recent 22 months. This review documents whether any exceptions to the termination of parental rights requirement are applicable. If applicable, the review also requires documentation of the compelling reason for determining termination of parental rights would not be in the best interests of the child. The desk review is completed by the CWCMP case manager and supervisor and provided to DCF and the county or district attorney.

Item 24: Notice of Hearings and Reviews to Caregivers. How well is the case review system functioning statewide to ensure 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, and manner of service, to all parties and interested parties as defined in the Kansas Child in Need of Care Code by the court clerks. When notice is provided by mail, the court receives a certificate of delivery confirming the notice was received. Statute also allows for notice to be given verbally during one hearing of the next court hearings. Verbal notice is documented in individual case files.

Foster parents, pre-adoptive parents and relative caregivers of children in foster care have a right to be heard in court. PPS Appendix 3G Foster Parent Report to Court may be used to submit a written report. PPM 3383 requires foster parents be informed of their right to submit a report directly to the Court. The PPS Appendix 3G Foster Parent Report to Court was developed in collaboration with the Kansas Supreme Court Task Force on Permanency Planning SCTFPP as one way for Foster Parents to have a voice in Court.

During CFSR Round 3, 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 the 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 regarding the foster parent's court notifications. Stakeholders also reported caregivers' ability to be heard is dependent on the judge overseeing the case.

DCF, the Supreme Court Task Force on Permanency Planning (SCTFPP) and court improvement program (CIP) staff met to review 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 a permanency hearing cannot proceed if the individuals listed in K.S.A. 38-2265 are not provided notice. The SCTFPP was hesitant to recommend revisions to statute due to the lack of data on notices and decided to establish a project between CIP and DCF to address this issue.

CIP and DCF developed a survey to be sent out to foster parents. The SCTFPP requested the survey address all types of notices required under statute, if the foster parents attended the hearing, 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 results and approved the following interventions (*updates are noted in italics*):

- Prepare training for family and child well-being stakeholders concerning the requirement for foster parents to receive notice and be heard during permanency hearings. *This has been completed via an OJA Best Practices Training.*

- Edit Foster Parent Report to the Court (Policy and Procedure Manual, Appendix 3G)-Completed. *This has now been completed.*
- Consider making the Foster Parent Report to the Court (Policy and Procedure Manual, Appendix 3G) available on the DCF placement management system. *The Report remains posted as an Appendix on the PPS PPM.*
- 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. *This was reviewed and SCTFPP determined statutory changes were not needed.*
- Review documents in "red book" and consider placing information on the next hearing date and contact information for the guardian ad litem. *This was discussed by SCTFPP but was not pursued.*

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.

Permanency Team has met with all CPAs on an individual basis and discussed an array of topics May-July 2020. The survey has informed the work being done with the CPAs. Support for Foster Parents has been discussed in terms of placement stability, and many CPAs have reached out to DCF regarding this struggle.

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 22 Foster Parent Survey Results.

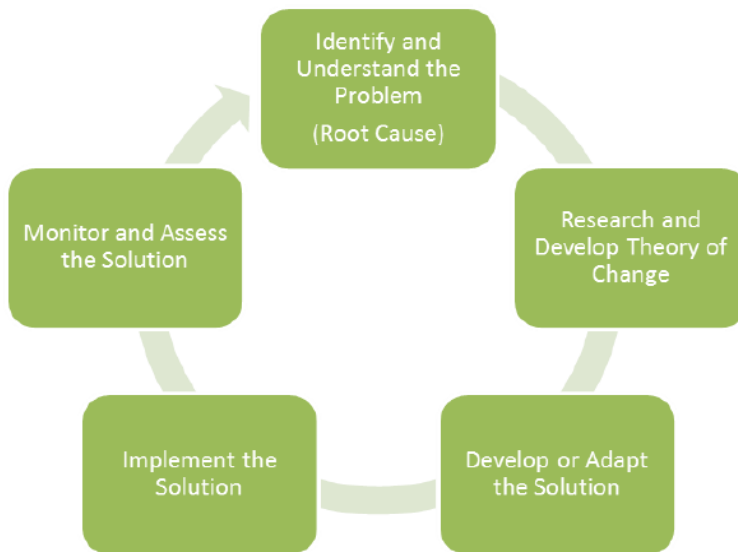
Quality Assurance System

Item 25: Quality Assurance System. How well is the quality assurance system functioning statewide to ensure it is (1) operating in the jurisdictions where the 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 that protect 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?

During CFSR Round 3, Kansas received an overall rating of Strength for Item 25: Quality Assurance System. In the statewide assessment, Kansas provided data and information on CPI confirming the state's quality assurance process is 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 which include the two components of in-home family and child well-being cases (family preservation and, family services), out-of-home cases, and review of the Adoption and Foster Care Analysis and Reporting System. Case reviews are also conducted for Intake and Assessment and Title IV-E. 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 meetings, and Citizen Review Panel meetings.

Kansas has maintained an established QA and Continuous Performance Improvement (CPI) process. 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. Dedicated CPI staff are responsible for providing support and accountability for the structure, methodologies and administration of quality assurance and continuous performance improvement activities.



The 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 entire state. Additionally, each region in the state has a dedicated CPI team. Administrative data is collected from every case in the state to measure performance and contract outcomes. 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 and 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.

Quarterly case read review samples are also pulled from a statewide population. 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 a Region is achieved. Case read instruments are standardized for use across the agency and a consistent data entry process is employed using a Case Read Application.

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

Kansas standards used to ensure children in foster care are provided quality services which protect their safety and health were developed based on requirements from statute, regulations, policies and best practices. Standards, outcomes and success indicators are used to monitor performance and ensure quality

service delivery to all children and families who have contact with the family and child well-being system.

The QA system identifies strengths and needs of the service delivery system.

Identifying strengths and needs of the services delivery system is essential to the CPI process. Strengths and needs are used in the CPI cycle to understand root causes and inform improvement activities. Kansas utilizes the performance standards and seven child and family outcomes to identify strengths and areas needing improvement within the service delivery system.

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 and 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, and discharges from foster care are analyzed to identify trends over time. These reports provide 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, rates based on demographic characteristics and a Disproportionality Metric. Additional analysis is conducted related to removal, discharge and 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.

Kansas conducts several data quality monitoring activities which lends to our confidence in the quality of our data. Established processes are in place to identify and address data quality issues including a PPS error and reporting correction process, case read questions measuring the accuracy of AFCARS elements in FACTS, and tools used by local offices to correct potential data entry errors. Kansas conducts monthly reconciliation of data between FACTS and the provider management information systems. This process helps ensure accuracy of data in FACTS.

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 where the sample size provides a reliable confidence interval, may be generalized to the entire population. Case reads where 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. 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 meetings. Reader consistency reports are generated and reviewed for each outcome/question in each instrument as part of the case reader training process. Beginning in April 2021, Kansas DCF began a new training format for reader reliability and consistency. Prior to the training, the case readers complete a mock case review, reviewing the same cases. The case read results are then compiled, identifying any differences or inconsistencies.

The focus of the training is based on the identified differences or inconsistencies and resolving those differences by providing additional guidance and instructions that can be utilized for future reads.

The QA system provides relevant reports.

Kansas produces many reports which are updated on a regular schedule. Most of these reports are made available on the agency's public website. Internal data is available to DCF and provider staff on a secure site.

Outcome and Volume Indicator Reports and Reports with additional types of analysis are produced on a recurring basis using data in FACTS. 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 CRA for selected quarters going back to SFY 2008, and can display statewide data, 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.

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

The DCF public website provides reports with case read data, volume indicators and outcome data. Reports are generally updated monthly. Reports are formatted for accessibility by visually impaired stakeholders. Historical data reports are also available on the site.

The PPS SharePoint site is a secure website where case read data, volume indicators and outcome data are 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). Reports are generally updated monthly. 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 SharePoint site has been in use since 2013. Another internal site was used prior to 2013.

The QA system evaluates identified program improvement measures.

Monitoring and assessing improvement solutions is an important part of the CPI cycle. Once solutions have been implemented, ongoing monitoring and assessment is necessary to ensure the solution is effective. If the identified solution result in expected improvement, the CPI cycle may repeat with another identified solution.

Because Kansas operates the QA system continuously, it is often possible to evaluate identified program improvement measures within routine data collection and case review activities. However, Kansas is also capable of producing ad hoc reports and conducting targeted case reads as needed.

DCF administration and regional staff meet quarterly with Child Welfare Case Management Providers (CWCMP) to review outcome data from the State's information system, case reads, and stakeholder input. Current data and trend-over-time reports are reviewed. Statewide and regional performance improvement activities, celebrating areas of success and prioritizing areas of opportunity for future improvement activities are topics of focus during these meetings and discussions. The Performance Improvement team has been working on enhancing data sharing and reporting with DCF and Case Management Providers.

Staff and Provider Training

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) includes the basic skills and knowledge required for their positions?

Pre-service and pre-caseload training requirements are detailed in the DCF Training Plan 2021, Attachment 24.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 26: Initial Staff Training. Kansas has maintained a comprehensive program for planning and delivering high-quality training for new staff. The Training Plan details established curriculum and timeframes for initial staff training. The Training Plan also includes an established process and functional learning management system to track all trainings. Kansas monitors individual training plans to ensure initial training is provided to staff.

Item 27: Ongoing Staff Training

How well is the staff and provider training system functioning statewide to ensure ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

As an agency dedicated to ongoing learning and continuous quality improvement, Kansas supports ongoing staff training and professional development. Kansas provides numerous opportunities for staff to gain new skills and competencies or advance mastery of existing skills and competencies.

Ongoing training and coaching opportunities are detailed in the DCF Training Plan 2021, Attachment 24.

All DCF CPS Specialists and CWCMP case managers are required to complete a minimum of 40 hours of continuing education, including 3 hours of ethics training bi-annually. Licensed child welfare staff must continue to meet the Kansas Behavioral Science Regulatory Board (BSRB) standards for licensure within their profession. Additionally, CWCMPs are required to be accredited through a national Child Welfare organization. Maintaining accreditation helps ensure rigorous training standards are met.

In SFY 2021, Kansas continued to provide several training opportunities such as Safe Sleep, Kansas Practice Model Overview, SDM for Protection Report Center staff, TDM, Family Finding, and Domestic Violence workshops. These trainings will be provided on an ongoing basis, and several advanced-level training opportunities are also available in these topic areas.

Each year, DCF co-sponsors the Governor's Conference for the Prevention of Child Abuse & Neglect. Due to COVID restriction, the conference was held on a virtual platform. The agency generally presents several training workshops at the conference. Many DCF and provider staff attend the conference as trainees. The Governor's Conference allows staff to hear from national experts in the field and learn about new practices and research. At the 44th Governor's Conference during SFY 2021, the keynote presentations included Dr. Bruce Perry.

In SFY 2022, Kansas will ensure staff around the state have access to the ongoing trainings developed this year. Many of these opportunities allow staff to develop new skills and even new approaches to family engagement.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 27: Ongoing Staff Training. The Training Plan details established continuing education requirements for staff and the generous number of ongoing training opportunities available. As with initial staff trainings, ongoing trainings are tracked within the learning management system.

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 (that care for children receiving foster care or adoption assistance under title IV-E) addresses the skills and knowledge needed to carry out their duties with regard to foster and adopted children?

Kansas utilizes the Trauma-Informed Partnering for Safety and Permanency - Model Approach to Partnerships in Parenting (TIPS-MAPP) curriculum for prospective foster parents, prospective adoptive parents and interested relative caregivers. Children cannot be placed in foster or adoptive home until the training is complete. Exceptions are allowed for relatives and nonrelated kin. DCF ensures training is occurring statewide through the licensing process. Annual training requirements for licensed foster parents are monitored by DCF and the sponsoring child placing agency.

Participants Completing Training	SFY 2014	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020*	SFY 2021	SFY 2022	SFY 2023
TIPS-MAPP	1012	1145	1018	1053	1431	1526	1117	755*		
TIPS-Deciding Together	751	773	720	676	547	534	607	1009		

*(TIPS-MAPP: 491) + (NTDC: 264) = 755

Foster and adoptive parent training is detailed in the Training Plan. See Attachment 24, DCF Training Plan 2021.

All residential and group home facilities are required to be licensed through DCF Foster Care and Residential Facility Licensing (FCRFL). If the residential or group home facility provides placement for children in foster care, the facility must also meet PPS placement standards established in the Child Welfare Handbook of Client Purchases. Initial and ongoing training requirements for facility staff are established in Kansas statute and agency placement standards. Training requirements are monitored by DCF FCRFL.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 28: Foster and Adoptive Parent Training. Kansas has ensured training is occurring statewide pursuant to established requirements for initial and ongoing training. Kansas utilizes a nationally recognized pre-service curriculum (and requires ongoing training) addresses the knowledge and skills needed to foster and adopt children.

Service Array and Resource Development

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

Geographically, Kansas is a large and diverse state. DCF divides the 105 counties into four regions and eight catchment areas for foster care services. Beginning July 1, 2020, the state divided into 6 regions, but catchment areas will remain the same. DCF services are available in all 105 counties. Sister state agencies ensure a network of community mental health centers (CMHC) and community developmental disability organizations (CDDO) are also serving every corner of the state.

In CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 29 Array of Services. Kansas indicated 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 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 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.

With support from the Kansas Family Advisory Network (KFAN), the Kansas Strong parent survey was administered in July and August 2019. KFAN staff administered the survey to 305 parents/caregivers at local foster care agencies across the state. The survey gathered parent/caregiver responses to three main topics: service array, caseworker/agency practices and court/legal practices.

Survey Sample Characteristic: Caregiver Relationship to Child(ren)	N	%
Mother	146	48%
Father	71	23%
Relative	65	21%
Non-Relative	23	8%

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

Survey Sample Characteristic: DCF Region	N	%
East	81	26%
Kansas City	61	20%
West	100	33%
Wichita	27	9%
Unknown	36	12%

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

Service Access Survey Item	Average	Std. Deviation	N
I can usually find services in my community that can help me with things my family and/or I need.	3.6	1.1	301
It is easy to access services in my community when my family and/or I need them.	3.5	1.1	299
Once I find the service my family and/or I need, I can usually receive the service quickly.	3.4	1.1	300

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

The survey results were also examined by the caregiver’s relationship and DCF Region. Interestingly, respondents in the West Region reported some of the highest scores for service access. Results from Mothers and Fathers were nearly the same.

Service Access Survey Item	State	East	KC	West	Wichita	Unk
I can usually find services in my community that can help me with things my family and/or I need.	3.6	3.7	3.4	3.7	3.3	3.7
It is easy to access services in my community when my family and/or I need them.	3.5	3.7	3.2	3.6	3.0	3.5
Once I find the service my family and/or I need, I can usually receive the service quickly.	3.4	3.6	3.0	3.7	3.1	3.5

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

Service Access Survey Item	State	Mother	Father	Relative	Non-Relative
I can usually find services in my community that can help me with things my family and/or I need.	3.6	3.7	3.7	3.5	3.1
It is easy to access services in my community when my family and/or I need them.	3.5	3.5	3.4	3.4	3.2
Once I find the service my family and/or I need, I can usually receive the service quickly.	3.4	3.5	3.5	3.4	2.9

Data Source: Kansas Strong Summary Results on Service Access and Caseworker and Agency Practices

Kansas added to the array of accessible services in SFY 2020 through implementation of Family First Prevention Services, utilization of Qualified Residential Treatment Programs and accessible mental health services in local schools.

In SFY 2021, Kansas will strengthen resource development through regional and state-level interagency advisory boards. Creation of an Interagency Advisory Boards (IAB) is a strategy identified by Kansas Strong to improve statewide service array. This strategy establishes a cross-system interagency advisory board of leaders to identify and address service needs and gaps. A local IAB will be created within each DCF Region. The local advisory boards will communicate and share information with a statewide IAB. State IAB will meet at least quarterly and regional will meet three times a year.

Item 30: Individualizing Services

How well is the service array and resource development system functioning statewide to ensure 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 to address safety, permanency and well-being. Case plans are expected to draw on the child’s/family’s unique strengths and tailored to meet the individual needs of each child/family.

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 30: Individualizing Services. Kansas did not provide quantitative or substantive qualitative information for this systemic factor item demonstrating function. 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 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 has since improved customization of services through implementation of new assessment tools like Signs of Safety and KAPP. Using trauma-informed, evidence-based assessments help guide interventions for children and families, promotes social-emotional well-being, family functioning, safety, and permanency. Comprehensive assessments help to uncover and unravel individualized needs and create deeper understanding of impacts from trauma, adverse childhood experiences and parental stress.

Notably, in the Kansas Strong survey described earlier, parents rated caseworker/agency practices regarding individualizing services, higher than most other survey items. Parents indicated the services and resources provided were helpful and their cultural and racial backgrounds were respected.

In SFY 2021, Kansas will continue to improve individualizing services through implementation of KanCoach. One of three priority topics for the coaching program includes family-centered assessment and case planning. KanCoach will build capacity and advance skill sets in supervisors translating to guidance to practitioners toward completing comprehensive assessments and ensuring service decisions are made with the family and individualized to meet their unique needs.

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 engages in ongoing consultation with a wide variety of stakeholders: children, youth, families, kin, Tribal representatives, Child Welfare Case Management Providers (CWCMP), other state agencies, courts, community-based service providers, and foster and adoptive families.

Kansas collects input from stakeholders through two Kansas Citizen Review Panels. The federal Child Abuse Prevention and Treatment Act (CAPTA) requires states to establish Citizen Review Panels comprised of volunteer members who broadly represent the state. Kansas has three Citizen Review Panels, each tasked with reviewing specific program areas: The Intake to Petition panel focuses on areas of child abuse/neglect investigations, family services and family preservation; the Custody to Transition panel focuses on the processes from petition through permanency; and the Child Death Review Board analyzes child deaths in Kansas.

The panels are required to meet every three months, except the State Child Death Review Board meets monthly. Each panel or board is responsible for reviewing policies, procedures and practices of the state’s child welfare system and circumstance related to child deaths. Each panel prepares an annual report summarizing panel activities and makes recommendations to improve child welfare services in the state. Panel membership consists of a broad array of representatives to include law enforcement, judges, District Attorney, defense/prosecuting attorneys, 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, Kansas Bureau of Investigations, coroners, school nursing staff, and tribal representatives.

Collaboration with OJA occurs through the Citizen Review Panels. DCF collaborates with OJA on the Court Improvement Project. Regional offices also collaborate locally with court personnel including judges and county attorneys regarding jurisdiction specific concerns.

DCF participates in statewide meetings with all federally recognized tribes headquartered in Kansas at least four times per year. 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 Family and Child Well-Being programs and to offer technical assistance. The site visits also provide context to the tribes for input and review of the state plan.

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

In addition to utilizing already established workgroups and venues outlined in Section C.1, Collaboration, 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 two DCF Spring Stakeholder Meetings June 18th, 2019 in Emporia and June 20th, 2019 in Garden City. Remote sites in Hiawatha, KC, Pittsburg, Hays and Wichita also participated.

During CFSR Round 3, Kansas received an overall rating of Strength on Item 31: State Engagement and Consultation with Stakeholders Pursuant to CFSP and APSR. Kansas described consultation and coordination with a wide variety of stakeholders. Information collected from stakeholders during interviews confirmed the state agency collaborates with a variety of entities and 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 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), Kansas Department of Education (KSDE), Children's Cabinet 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 ensure 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 co-locate 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 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. These reports are shared daily.

Detailed information regarding consultation with stakeholders is provided in Section 2.1 Collaboration.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 32: Coordination of CFSP Services with Other Federal Programs. 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.

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 state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds?

DCF completes a redetermination 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 is done a minimum of once every twelve months. Reviewing all placements annually ensures standards are applied equally.

Only fully licensed foster homes and childcare 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 are not claimed for these homes unless all licensing requirements are met. Relative homes who 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 also completed within twenty (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 licensing standards are applied equally and consistently. The 2017 review had no findings related to licensing.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 33: Standards Applied Equally. Results from the 2011, 2014 and 2017 federal title IV-E foster care eligibility reviews contained no significant findings regarding meeting licensing standards. Similarly, stakeholders reported standards are applied equally to all licensed foster homes and childcare institutions are monitored by trained staff using standardized survey tools designed for each facility type. Citations are issued and corrective action plan is developed for infractions.

Item 34: Requirements for Criminal Background Checks

How well is the foster and adoptive parent licensing, recruitment and retention system functioning statewide to ensure 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 within DCF, effective July 1, 2015. Within Foster Care and Residential Facility Licensing, the Office of Background Investigations manages all background related services for the agency. This includes Child Abuse/Neglect Central Registry, Adult Abuse/Neglect/Exploitation Central Registry, Adam Walsh Act requests, and fingerprinting requirements.

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 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 completed and clear; 1) a name-based criminal history check through the Kansas Bureau of Investigation (KBI), 2) a Child Abuse/Neglect Central Registry check, and 3) a national Sex Offender Registry check.

A DCF Licensing Surveyor completes 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 through 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 thirty (30) days of placement. The temporary permit remains in effect for ninety (90) days. Non-related kin comply with all licensing requirements prior to a full license being issued.

During CFSR Round 3, Kansas received an overall rating of Strength for Item 34: Requirements for Criminal Background Checks. Kansas provided information from the 2011 and 2014 federal IV-E reviews, which contained no significant findings regarding criminal background clearances. The state

noted 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 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 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 three (3) goals which have remained a constant in subsequent DR plans. 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.

During CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 35: Diligent Recruitment of Foster and Adoptive Homes. While the child placing agencies developed plans for general, targeted and child-specific recruitment, no such statewide recruitment plan existed at the time.

With technical assistance from the Center for Capacity Building for States (CBC), Kansas developed and provides updates to the state's Diligent Recruitment Plan (see Attachments 25, 25.1, 25.2 and 25.3 regarding the Diligent Recruitment Plans). Diligent Recruitment meetings with stakeholders were initially held twice each year, but the meetings are now held quarterly. Key stakeholders are invited to these meetings 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), DCF Foster Care and Residential Facility Licensing, Children's Alliance of Kansas (CAK), child placing agencies, foster care case management providers, KCSL Adopt Kansas Kids (adoption exchange) and regional DCF staff. The work with the Capacity Building Center concluded in March of 2020. However, ongoing promotion and maintenance of the Diligent Recruitment Plan will be provided by Adopt Kansas Kids as of July 1, 2021.

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

DCF's contract with Kansas Children's Service League to administer the adoption exchange will conclude as of June 30, 2021. In July 2021, Foster Adopt Connect will be administering the adoption exchange. As of April 2021, 487 children were on the exchange. These children are legally free for adoption and are without an identified adoptive resource.

Administrative Data

Adoption Exchange Demographic Snapshot	Number
Male	305
Female	180
Average Age	12
Caucasian	285
African American	96
Bi-racial	57
Native American/Alaskan	9
Other	1
Hispanic	37
Member of a Sibling Group	187

Data Source: KCSL Adopt Kansas Kids as of 3/31/2021

Number of Inquiries to Adoption Exchange

SFY 2019	6,086
SFY 2020	11,285
SFY 2021*	4048

Data Source: KCSL Adopt Kansas Kids

*SFY 2021 data reflects data from July 2020 through April 2021

While there is no specific data related to the exact number of follow-ups to the inquiries on the Adoption Exchange, practice indicates that many inquiries continue with additional line of questioning and support via email.

During SFY 2021, Kansas plans to reinvest efforts and resources in Foster Kansas Kids. Foster Kansas Kids is a single point of entry for inquiries about foster parenting.

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 the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Kansas seeks 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.

DCF meets 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 sixty (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 CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements. Findings were determined based on information from the statewide assessment and stakeholder interviews. In the statewide assessment, Kansas described the process for identifying adoptive resources for children using the Kansas Adoption Exchange and AdoptUSKids. During interviews, stakeholders generally reported the use of cross-jurisdiction placements was not consistent statewide. They cited difficulties in working with other states and the effort required for workers with full caseloads as reasons.

Kansas initiated new contracts for foster care services during SFY 2020, and responsibilities for ICPC home studies and monitoring placements in Kansas transitioned to the foster care case management providers in October 2019. The providers now have staff dedicated to ICPC cases. Together, the Kansas ICPC office and CWCMP ICPC staff form the ICPC Workgroup. Efforts from this workgroup focus on resolving issues with other states, streamlining Kansas ICPC processes and promoting statewide consistency. During SFY 2021 this workgroup collaborated to revise and improve the Kansas Home Study Outline and developed a new form for preliminary home studies.

Kansas implemented the National Electronic Interstate Compact Enterprise (NEICE) in October 2018. The 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. As of March 2021, a total of 38 states are utilizing the NEICE. The NEICE reduces the time children spend awaiting placement. Kansas joined the AAICPC Interstate NEICE data workgroup to improve reports available in the NEICE. The NEICE will be launching NEICE 2.0 in July 2021.

Analysis of the data available in the NEICE since Kansas joined in October 2018 indicates Kansas sends more home studies out than we receive requests for placements in Kansas (Incoming). Data, shown below, provides some preliminary information Kansas can begin to use to improve timeliness of home studies. Results for incoming home studies for SFY 2021, while not representing the full SFY are showing a decrease in timeliness at 56.7%. The ICPC Workgroup has had discussions on barriers and opportunities for improving the timeliness of home studies. While COVID may have had an impact on timeliness, the workgroup identified the need to ensure the licensing process begins at the onset of the home study process and ensure the licensing worker and home study writer are collaborating throughout the process. In addition, the new form and clarification of the preliminary home study may also help to increase timeliness.

Kansas NEICE Administrative Data

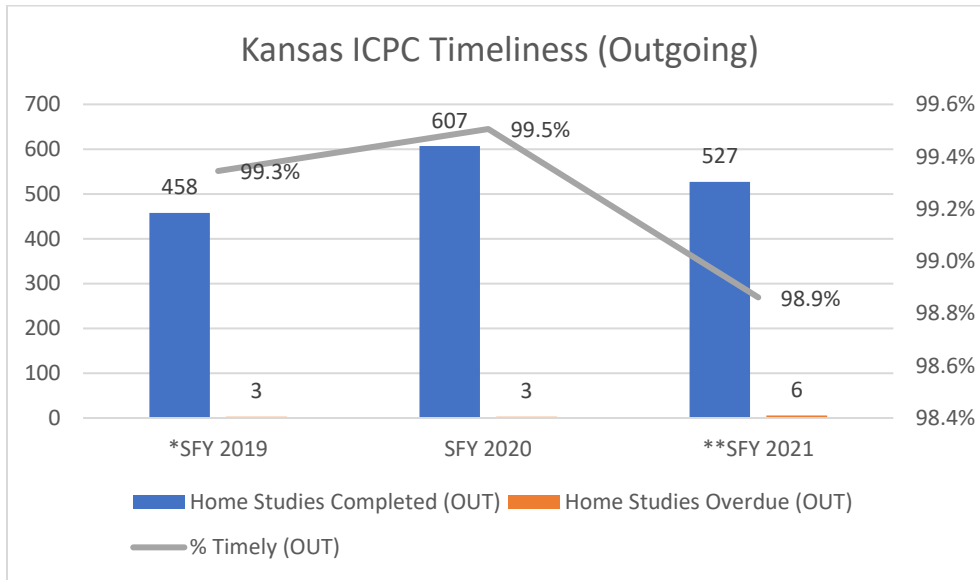
	*SFY 2019	SFY 2020	**SFY 2021
Home Study Requests IN	349	438	346
Home Study Requests OUT	666	684	531
Placements IN	72	114	104
Placements OUT	106	130	137
Private Adoptions IN	50	65	18

Private Adoptions OUT	84	105	73
Residential Requests IN	31	60	31
Residential Requests OUT	40	54	29

Resource: National Electronic Interstate Compact Enterprise (NEICE)

*Since Kansas joined the NEICE October 1, 2018 the data for SFY 19 is from October 1, 2018 to June 30, 2019

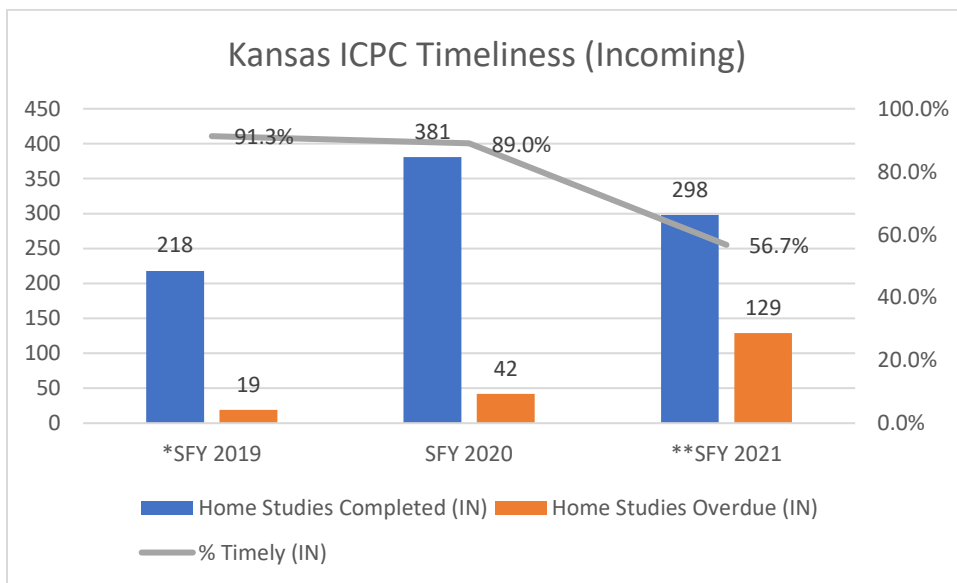
** Data for SFY is from July 1, 2020 to March 31, 2021



Resource: National Electronic Interstate Compact Enterprise (NEICE)

*Since Kansas joined the NEICE October 1, 2018 the data for SFY 19 is from October 1, 2018 to June 30, 2019

** Data for SFY is from July 1, 2020 to March 31, 2021



Resource: National Electronic Interstate Compact Enterprise (NEICE)

*Since Kansas joined the NEICE October 1, 2018 the data for SFY 19 is from October 1, 2018 to June 30, 2019

** Data for SFY is from July 1, 2020 to March 31, 2021

Kansas was awarded a discretionary grant from the Children’s Bureau in the amount of \$400,000 to enhance the state’s ICPC data and reporting. The project timeframe is 9/30/2019 to 9/29/2022. This project will allow Kansas to develop customized reports on ICPC cases by worker, supervisor, office, county and region providing the ability for Kansas to dive deeper into our outcomes for continuous performance improvement. It is anticipated with the development and implementation of the NEICE enhancements, Kansas will streamline ICPC administrative processes and be more effective in avoiding unnecessary administrative delays for children who would benefit from an interstate placement across ICPC jurisdictions and ensure timely monitoring and supervision of children placed in Kansas through ICPC.

The AAICPC provided weekly updates regarding COVID-19 practices from each state. Kansas ICPC state office staff had already started to tele-work prior to the onset of COVID-19, so ICPC staff were able to continue to process cases while working from home. The NEICE allows for cases to be processed electronically which has benefitted ICPC during COVID.

C.3 Update to the Plan for Enacting the Vision of Kansas and Progress Made to Improve Outcomes

Introduction

DCF believes “*a Strong Workforce with a Strong Organization leads to Strong Outcomes.*” DCF began rebuilding our workforce in SFY19. Since this time DCF has continued to analyze and build on strategies aimed at modernizing and enhancing an employee’s experience with the agency. Our goal is to empower employees to lead from where they are. Employees who feel supported and knowledgeable of the agency mission recognize the positive impact they can have when serving children and families.

In SFY2021, one of the newly created strategic implementation teams focus will be on recruitment and retention of employees. The “Employee Experience” SIT team has a vision to modernize and enhance employee experience. See Attachment 26 DCF SIT Employee Experience Charter.

As mentioned in Section A.2: Agency Mission: To protect children, strengthen families and promote adult self-sufficiency. Over the past fiscal year, DCF has implemented the Kansas Practice Model (KPM). This model encompasses tools, strategies and a practice approach to guide practitioners in their work alongside families.

In SFY 21, DCF saw a decrease in the number of children entering out of home placement. In part, this can be attributed to increased utilization of prevention services available throughout the state and an increase in practitioners exposed to the KPM. In addition, there has been an increase in instances of cross-division and cross agency planning with families.

Vision Item: Strong Workforce

Recruitment and retention will be a long-standing approach to creating a strong workforce. Making sure our staff continue to receive the message of their value within the agency and in the lives of the families we serve is a priority.

Goal 1: Implement Prevention Practice Approach

Improving the prevention practice skills of current, new and future practitioners. Practitioners are trained with tools to develop, support or enhance their skillset. Providing our family and child well-being workforce with a fulfilling career is believed to ultimately shift practice culture.

Objectives/Stages – SFY2021 Progress:

Measuring success in SFY2021 using the strategies outlined in this goal.

1. decrease in agency vacancy rates

a. SFY2020: Data reflects from SFY19 to SFY20 we increased the number of field staff by 2.5% and at the same time decreased vacancy rates by 11.5%. This demonstrates lower vacancy rates overall even though there are more positions to be filled.

2. decrease in case load sizes (PIP roll over activity 1.3.2)

a. SFY2021: Successful reduction in caseload size is evident as of Feb. 28, 2021 as the average maximum caseload size for a Child Protective Specialist is 17.5 which is a 19% decrease from SFY2020 average maximum caseload size of 21.

3. decrease in staff to supervisor ratio

a. SFY2021: Thus far in SFY2021, Feb.2021, the CPS staff to supervisor ratio has decreased by 15% (4.2 to 3.6).

4. increase in timely initial assessments

a. SFY2021: As of February 2021, 93% of reports assigned for Same Day and 72 Hours contact with Victim/Family were made timely.

b. SFY2021: Kansas continues to show improvement and as of February 2021, 92% of all reports received by the KPRC have initial assessment decisions completed timely.

5. decrease in number of children removed from their homes

a. SFY2021: Kansas continues to reduce the need for foster care, with an 8% decrease in out of home placement comparing February 2020 (7,465) to February 2021 (6,879).

b. SFY2021: 2,547 children were removed (July 2020 – April 2021) which is a 17% decrease when comparing SFY2020 data for the same timeframe. SFY 2020 (July 2019 – April 2020) 3,054 children were removed from their homes.

In SFY2021 DCF continues to promote recruitment by advertising position vacancies on job websites, social media, and through professional recruiters. Efforts to retain staff have included providing continuing education and licensure reimbursement for practitioners. The budget for SFY2021 designates \$250,000 towards supporting this effort.

As DCF and our providers recruit professionals from domains outside of social work but within the human services profession, we have developed a family and child well-being specific training to support them as part of their initial training plan.

DCF continues the “Project and Student Trainee Practicum Administrator” position. This position is focused on reaching out to universities to provide information, presentation and education to would be practitioners and educators of human services programs. The Administrator of this position facilitates placement for practicum students throughout the DCF regions within Kansas. Practicum students are given the opportunity to build a portfolio of experience with child protection and other positions throughout the PPS department. As of May 2021, 40% (23/58) of the practicum students have been hired as staff within our child protective services division. See Attachment 27 DCF Recruitment flyer.

In SFY2021 DCF continued telework with staff throughout the regions and in administration. DCF began piloting telework in SFY19 as a strategy for employee recruitment and retention. Having this telework policy and staff participating in it already in place, positioned DCF to naturally ensure the safety of staff

when the Covid-19 pandemic came to Kansas. During this time DCF created the ability for employees to work from home full-time. This involved quickly setting up all technical logistics for any employee who had not previously taken advantage of the telework opportunity. As the state is moving through the various stages of reopening, DCF is taking a well thought out approach and closely following the Governor's direction. DCF staff who have teleworked were able to provide continuity of services to families despite the pandemic. In June 2021, a new DCF TeleWork policy was created to achieve administrative efficiencies, reduce transportation costs, support continuity of operations plans through hiring and retention of highly qualified workforce by enhancing work/life balance.

In SFY2020 Kansas began to implement the Kansas Practice Model (KPM) which integrates aspects and tools from multiple practice approaches with promising evidence research and best practices to come alongside families, their natural supports and community on a journey toward improved safety and family well-being. *Please see Section C.2 Update to the Assessment of Current Performance in Improving Outcomes for more information regarding KPM.*

The selected practice approaches and tools from Team Decision Making, Family Finding, Signs of Safety, Solution Focused Questions and the Resolutions Approach comprise the foundation of the KPM. These practice approaches along with practitioners committed to using these new tools, are moving us forward in working alongside families to improve safety and family well-being.

In SFY2021, Kansas expanded TDM to include Placement Stability (PS) TDM statewide to CWCMP's. Kansas continues to partner with Evident Change, formerly the National Center for Crime and Delinquency (NCCD) Children's Division, to grow & cultivate the practice of TDM. KVC, Cornerstones of Care (COC), TFI, and Saint Francis Ministries (SFM) will incorporate PS TDM into their current policy and procedures and will utilize their own trained facilitators to lead PS TDM meetings. Kansas is the first jurisdiction to pilot the use of private agency facilitators. Similar to Initial TDM, PS TDM will be launching in phases throughout SFY2022. See Attachment 24 DCF Training Plan 2021 for additional information.

Family Finding was introduced through the first bootcamp which was held in November of 2019, with the second bootcamp held in February of 2020. Two additional bootcamps are planned for the spring and summer of 2021. In late spring of 2020, Kansas took the approach to develop a customized practice model for Kansas. SDM for assessment and prevention was discontinued in the four pilot counties in the Fall of 2020, as Kansas moved to developing a customized practice model. The Kansas Practice Model (KPM) provides a consistent and customized framework to support engagement, safety planning and decision-making to guide our work alongside families, children and youth. With family voice and practice approaches, practitioners use their skills to engage the family and assist with needed services to support family safety and well-being. The KPM integrates aspects and tools from multiple practice approaches with promising evidence research and best practices to come alongside families, their natural supports and community on a journey toward improved safety and family well-being.

Throughout SFY2021, policies and procedures for KPRC and child protection have been reviewed and evaluated for efficiencies. For example, if a policy or procedure required duplicative efforts on the part of the practitioner, it is reviewed to find where the procedure can be revised to eliminate unnecessary steps or actions. Information and changes have been informed through feedback from staff implementing policies and procedures and through independent reviews.

KPRC supervisors and staff completed training through a collaboration between DCF and the Kansas Strong project in SFY2021. The training tool is KanCoach which includes materials from *The Resilience Alliance*. These training and materials are focused on helping the family and child well-being

practitioners promote resilience and reduce secondary trauma among themselves. *(For further information regarding KanCoach, please see Section C.2 Update to the Assessment of Current Performance in Improving Outcomes).*

Vision Item: Strong Organization

DCF has continued to work diligently over fiscal year 2021 with our local communities throughout the state to understand and make positive changes in perception and operations of family and child well-being services in Kansas. These changes have included remaining fiscally responsible by ensuring we are meeting deadlines and approvals allowing for federal match and claiming. We have also utilized our federal partners to help broaden our perspective to family and child well-being in other states. DCF has focused throughout the year to bring voices from our communities to the forefront of our agency and our policy and practice decisions. Our work in family and child well-being has placed emphasis on building stronger relationships with families we serve.

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

DCF's sustaining philosophy throughout SFY2021 and in the coming years is by strengthening our safety net and early childhood programs we can positively affect the likelihood of decreasing the need for a child to be placed in a Psychiatric Residential Treatment Facility (PRTF) when they are older. Taking a concurrent approach to addressing the barriers and disproportionality within our youth population who qualify for placement in a PRTF while simultaneously building a strong safety net and early childhood programs, we can make an impact on future needs for psychiatric services.

Objectives/Stages – SFY2021 Progress:

Measuring success in SFY2021 using the strategies outlined in this goal.

1. Decrease in PRTF waitlists

a. SFY2021: A reduction in the average number of children in foster care awaiting a bed in a PRTF has decreased. From May 2020 to May 2021 there has been an average of 23 children in foster care awaiting a bed in a PRTF. That is a significant reduction considering in May of 2019, there were 41 foster children awaiting a bed in a PRTF.

The amount of time a child in foster care remains on the PRTF waitlist is closely monitored during bi-weekly case reviews with each Managed Care Organization (MCO). Kansas Department of Aging and Disability facilitates these bi-weekly meetings which are attended by Kansas Dept. of Health and Environment, DCF and all three MCO's. In SFY22, DCF plans to ask each MCO to include the initial authorization date so that a more formal report on length of wait time can be created. Anecdotal information gathered from DCF that regularly attend these meetings state that in the past year a wait time more than 2 months is rare.

2. Decrease number of children placed in out of home

a. SFY2021: Kansas continues to reduce the need for foster care, with an 8% decrease in out of home placement comparing February 2020 (7,465) to February 2021 (6,879).

b. SFY2021: 2,466 children were removed from their homes (July 2020 – April 2021) which is a 21% decrease when comparing SFY2020 data for the same timeframe. In SFY2020 (July 2019 – April 2020) 3,054 children were removed from their homes.

3. Increased placement stability

a. SFY2021: Kansas continues to move towards meeting the federal performance standard of 4.4 moves per 1,000 days in foster care, with performance at 5.1 moves for February 2021 (*Data*

Source: FACTS – reflects data from July 2020 to February 2021 - This measure calculates the rate of moves per 1,000 days for children entering foster care.)

4. Increased family engagement

a. This outcome area continues to work towards a solution to align data logic issues within two different data systems in order to achieve a specified outcome for measuring family engagement. A solution is expected by the end of SFY2021.

5. Increased service array measured through general stakeholder interviews or surveys

a. A parent survey was administered in August of 2019. Based on this feedback Kansas was able to strengthen service array in the noted areas through implementation of Family First, Qualified Residential Treatment Programs and increasing access to mental health services in school. Ongoing communication with stakeholders began SFY2020 in the form of Interagency Advisory Boards (IAB). A revised parent survey is currently being updated through the IAB's and Kansas Strong initiatives with intent to distribute in SFY22. *(Please see C.2 for additional information regarding the IABs.)*

Kansas implemented Family First in October 2019. As part of this implementation, DCF awarded grants increasing parent skills building, substance use disorder and mental health services throughout the state. During this process Kansas used the voice of its citizens to target service and geographic areas where gaps were prevalent. As prevention partners have made their way into communities formerly lacking services, DCF has witnessed the strength of these partnerships. Service providers have successfully built sustainable relationships enabling them to meet the needs of the families they serve and respond to the community. Prevention providers have been active in identifying and voicing where they see gaps in services for future planning. Prevention providers communicate with each other with the common goal of ensuring families are receiving the right services specific to what they need. All providers have been willing participants in helping DCF connect and bridge to our local communities and build the prevention network they have been asking for.

In SFY2020, DCF was able to secure residential facilities comprising of 143 beds which met the Qualified Residential Treatment Program (QRTP) requirements. In SFY2021 the number of beds increased to 207. In addition, there are approximately 76 beds currently in pre-QRTP status are expected to become available in SFY2021. In October 2019, DCF partnered with KDADS in contracting with an agency to serve as the Independent Assessor related to QRTP placement. KDADS was awarded the contract and DCF was able to include the “added service” of an independent assessment to the contract.

DCF awarded a grant to the University of Kansas for the evaluation of Family First programs. This grantee will evaluate Family First programs per the Kansas approved evaluation plan and facilitate regional and statewide Interagency Advisory Boards (IAB). See section C.1.a for more information about the progress of IAB's in SFY2021.

Kansas has continued to support Healthy Families America 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.

DCF is collaborating with local law enforcement to develop strategies to provide earlier intervention toward the outcome of reducing reoccurrence of child maltreatment and child deaths in Kansas. Through an award received by DCF, a cooperative agreement was developed with the Office for Victims of Crime to reduce child fatalities and recurring child injuries caused by crime victimization. Sedgwick County was identified as the initial implementation site. Year one (SFY 2020) was committed to planning and

assessment and included an evaluation of the processes and implementation of community support specialists as early intervention. Community Support Specialists (CSS) were hired and are employed by the Wichita Police Department and the Sedgwick County Sheriff's Office. CSSs have begun working with local partners and DCF to engage families in safe preventative services.

Trained CSSs engage families utilizing motivational interviewing. They visit the families in their homes and assists with connecting them to services and supports through case management.

DCF and law enforcement have partnered together to implement a process allowing law enforcement to access information in the Kansas Protection Report Center Systems. They will now have access to crucial information needed to assist law enforcement in completing an informed and thorough assessment of a family in crisis. The system provides information regarding previous intakes, reason for assessment, and identifies all family members, including children in the home. DCF implemented sharing of information in Sedgwick County. DCF continues to evaluate the process for statewide implementation.

Youth with acute behavioral needs are the most challenging for health care coordination. Strategies related to increasing the timeliness of services to these youth and their families is constantly in the forefront of service provision considerations and decisions.

In SFY2021, Kansas deepened collaboration with existing partners and forged new partnerships across the state. These partnerships advance the desire of Kansas to becoming a state of family and child well-being.

In SFY2021, Kansas was selected as a cohort in the 100 Days of Learning collaborative facilitated by Casey Family Programs. This led to examining alternative paths to connect families to services prior to reports of abuse and neglect and identifying challenges in our desire to transform to a family and child well-being system. DCF identified a design challenge question and goal for KS--How might we develop a system that doesn't require a family to have a formal investigation by DCF to get help?

This design question led to DCF applying for and being awarded technical assistance from the National Governors Association Child and Family Well-Being (NGA). A pilot project with KS State Dept of Education (KSDE), KS Children's Services League (KCSL) and the Emporia School district working to partner together and focus on front end reform, connecting families to services prior to abuse/neglect reports. Collaborative meetings with these and other community-based partners began in the Spring of 2021. The project, *Communities Supporting Families*, has the goal to support and assist families prior to their involvement with DCF.

In early 2021 DCF was honored to learn they were one of twelve jurisdictions nationwide chosen to participate in "Thriving Families, Safer Children: A National Commitment to Well-Being – Round Two". DCF partners with two other state agencies: Kansas Children's Cabinet and Trust Fund (state lead for Community Based Child Abuse Prevention) and Kansas Children's Service League (state lead for Prevent Child Abuse America). Additional expertise from those with lived experience will be integral to the design, operation and improvement of this project. Among the priorities will be to analyze and uncover systemic barriers to racial disparities in the child welfare system by identifying policies and practices that may or may not inadvertently lead to disproportionate or unnecessary removal of children from their families. State agencies, and the commitment to include those with lived experience, stand committed to significant and real change that creates safer, more nurturing environments for children in our state. This work will focus on redesigning systems, practices, and mindset to sharpen the states focus on equitable and holistic family and child well-being in Kansas.

In SFY2021, DCF will continue a partnership with FosterAdopt Connect to serve youth in the Kansas City areas with Extreme Family Finding. In SFY2020, FosterAdopt Connect received a grant from the Adoption Exchange Association to serve children within the KVC grants in the Kansas City and Northeast DCF regions as a pilot project. The pilot was deemed successful as 70% (7/10) of participants were matched with a permanency resource as of May 2021. Extreme Family Finding will continue to serve Kansas children via the Adoption Exchange contract.

DCF has sustainable working groups charged with addressing ongoing issues related to PRTF waitlists. These groups constantly evaluate the process. Kansas collaborated with Missouri to expand the border agreement to expedite acute behavioral services to support placement stability and meet need of youth without requiring an Interstate Compact on the Placement of Children agreement. Youth can now stay in either state in these facilities for up to 90 days. Please see Attachment 5 Kansas/Missouri Border Agreement.

Kansas Strong is initiating the Parent-Youth mediation pilot in Wyandotte and Saline counties within Kansas. Please see Attachment 28 Parent-Youth Facilitation Fact Sheet for more information regarding this initiative.

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 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

Kansas is determined to reduce childhood trauma by making decisions based on safety and providing services to address risks. If there is a need for foster care, practitioners understand the impact removal has on a child. DCF practitioners actively advocate for a child to remain in their homes whenever safely possible and if there is a need for foster care, timely permanency is the goal. Each objective below is seen as having a strong impact on decreasing trauma in children who experience placement outside of their homes.

Objectives/Stages – SFY2021 Progress

Measuring success in SFY2021 using the strategies outlined in this goal. Goal 3 is monitored utilizing reports measuring timely permanency and placement stability.

(Data Source: FACTS – SFY 2021 reflects data from July 2020-February 2021)

1. Increase placement stability

a. SFY2021: Kansas continues to move towards meeting the federal performance standard of 4.4 moves per 1,000 days in foster care, with performance at 5.1 moves for February 2021. *(Data Source: FACTS – reflects data from July 2020 to February 2021 - This measure calculates the rate of moves per 1,000 days for children entering foster care.)*

2. decrease in the number of children in out of home care

a. SFY2021: The need for foster care in Kansas has decreased from 7,228 children in SFY2020 to a fiscal year 2021 average of 6,864 children as of April 26, 2021.

3. decrease in number of months a child is in out of home care

- a. Children discharged from foster care for reason of reunification, the number of months in care in SFY2020 remained consistent with SFY19. On average children were in care for 10 months. In SFY2021, all children/youth who ended out of home placement for reason of reunification spent an average of 12 months in care.
 - b. Children discharged from foster care for reason of custodianship/guardianship months in care in SFY2020 remained consistent with SFY19. On average children were in care for 19 months. In SFY2021, all children/youth who ended out of home placement for reason of Custodianship/Guardianship spent an average of 24 months in care.
 - c. Children discharged from foster care for reason of emancipation months in care in SFY2020 increased to 38 months compared to 36 months in SFY19. In SFY2021, all children/youth who ended out of home placement for reason of Emancipation spent an average of 39 months in care.
 - d. Children discharged from foster care for reason of adoption, the number of months in care in SFY2020 decreased to 38 months compared to 39 months in SFY19. In SFY2021, all children/youth who ended out of home placement for reason of Adoption spent an average of 39 months in care.
- 4. increase in number of children placed with a relative**
- a. In SFY2020 the number of children in foster care in Kansas placed with a relative increased to 34% compared to 33% in SFY19. As of February 2021, 39.5% of all children live with relatives or non-related kin.

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

Originally developed by the Annie E. Casey Foundation, Icebreakers is a model DCF has implemented to improve the connection between birth and foster parents. Icebreakers was piloted in SFY18 and was implemented as part of the new foster care grants which began in October 2019. Each CWCMP is responsible for training their staff to use the Icebreaker model. The Icebreaker model has been infused into agency training and is included in PS-MAPP Foster Parent Pre-service training. An Icebreaker workshop and panel discussion was offered at the Governor’s Conference for the Prevention of Child Abuse and Neglect in Topeka in October 2019.

Placement stability, timely reunification and evidence of concerted efforts to support and promote relationships with parents, are monitored as measures of the effectiveness of Icebreaker. Monitoring occurs through automated aggregate reports, case reads and stakeholder interviews. *(Please see Sections C.2, C.5 and C.6 for more information regarding Icebreakers.)*

October 1, 2019, DCF also launched CareMatch, a first time ever Placement Matching System. This system is designed for accessing placements for children who have been removed from their families. CareMatch has a built-in component for tracking Icebreaker meetings. Data collection has yet to be fully implemented and institutionalized. Icebreaker policies and procedures have been implemented within CareMatch. SFY 2021 evaluation will include assessment of data collection methods and broadly accepted practices which promote timely, meaningful and quality Icebreakers. Measures have been agreed upon method by all CWCMPs. Icebreakers is a standing agenda item when DCF and CWCMPs meet. *(Please see Sections C.2 for more information regarding CareMatch.)*

Kansas Strong continues to build momentum and is proud to have CIP (Court Improvement Project) as a close collaborator on the Parent/youth relationship facilitation program. See Attachment 28 Parent-Youth Relationship Facilitation Fact Sheet. Steering committee and stake holder meetings are held weekly and

members from KU, DCF, and community stakeholders attended grantee meetings held in DC in the fall and spring. The development of goals and plans have been a truly collaborative effort.

Kansas Strong partnered with Family First to create an Interagency Advisory Board charged with advocating for children and families involved with the family and child well-being system who need services and supports. Their first meeting was held virtually in May 2020. *(Please see section C.5.a. for more information on this initiative)*

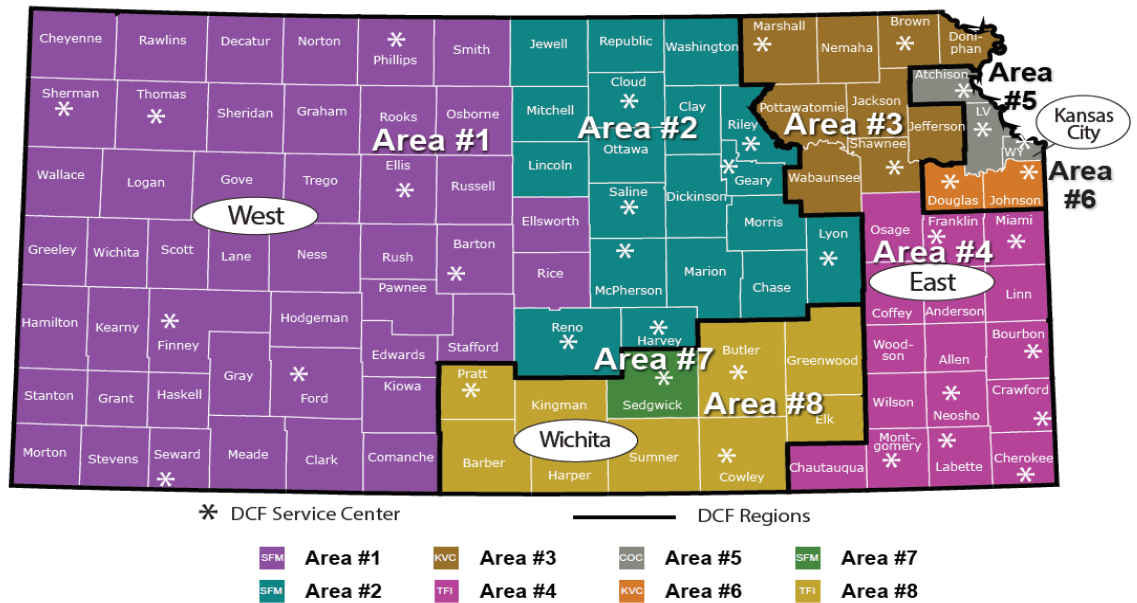
DCF continues to explore and implement family-centered practice models to directly impact placement stability, decrease the need for foster care, and promote timely permanency. CWCMPs have been asked to commit to a goal of 50% of children placed out of home being placed with relatives. As of April 2021, that rate was 35%.

DCF continues to partner with Kevin Campbell for Family Finding. A Family Finding and Participatory Practice: Leaders Day in Kansas, was held on April 23, 2021. This introduction to Family Finding served as the “kick off” to the Family Finding Bootcamps scheduled for May 24-26th, 2021 and August 16-18, 2021. Family Finding Boot Camps are a three-day immersion for staff, supervisors and managers in learning the philosophy, framework and skills of Family Finding practice. Participants from DCF, our grantees and other stakeholders work together in small and medium sized teams, practicing Family Finding for actual children and youth in out-of-home care or supporting families to child welfare. In past boot camps, participants have typically learned to, and have successfully completed, the Discovery and initial Engagement steps of Family Finding in fewer than four hours of work. The goal for the teams by day five of the training is to have found 40 or more relatives and other connections, identified family members with functional strengths, engaged two lead family members, and invited 12 or more adults to a Preparation and Planning Meeting to be held within two weeks of the training. Participants leave the immersion experience having learned and practiced the skills of Family Finding, developed a sense of confidence in their use of the skills, and most importantly gained the understanding Family Finding for most youth and families, takes less than 20 hours and can be completed in weeks rather than months.

As mentioned above the CareMatch system deployed in October 2019. This system allows CWCMPs access to statewide placement options. The system matches child attributes with foster home placements most equipped to meet the child’s needs. CareMatch increases the ability to access data regarding moves in populations by age, goal and geography used to inform practice and identify barriers in processes.

In October 2019 new grants were awarded for case management responsibilities to newly organized catchment areas throughout the state. Each of the four regions were divided into two catchment areas to equal eight catchment areas in Kansas. As of July 1, 2020, Kansas was divided into six regions, but catchment areas did not change. Changes involved dividing the West region into two creating Southwest and Northwest regions. The East region was also divided north to south as well creating the Northeast and Southeast regions. *(Please see Section A for an updated state map with new regional structure.)* Below you will see the state, catchment areas and regions.

DCF Regions and Catchment Areas



Kansas developed and launched a standardized rate structure for agencies and home providing placement for children in foster care. This structure has been updated once since the initial release. See Attachment 29 Foster Care Rate Structure.

The Caregiver’s Association, a contract which was awarded to Wichita State University (WSU), continues to work toward their goals of the contract as it ends June 30, 2021. Currently they have scheduled meetings for the remainder of the fiscal year. During their time as the contractor they launched their website, Twitter, and Facebook accounts titled Kansas Caregivers Support Network. The contract will be transferring over to FosterAdopt Connect as of July 1, 2021 and will be in effect until June 30, 2023. FosterAdopt Connect was awarded three different contracts to begin July 1, 2021, including The Adoption Exchange (Adopt KS Kids), Kansas Post Adoption Resource Center (KPARC), and The Caregiver’s Association. As part of all this, FosterAdopt Connect has envisioned a continuum of services being offered to caregivers across the state by providing advocacy, support groups, educational opportunities and other resources.

During the Spring of 2021, the final Adoption Tracking Tool (ATT) was finalized and will be posted on the DCF public website as of July 1, 2021. In June of 2021, CIP staff will provide orientation and training for court and legal staff in all counties which were not included in the pilot. As the result of joint work and collaboration between KU, OJA, DCF and DCF Grantees, there will be statewide implementation of the ATT on July 1, 2021. Two questions related to the ATT will be added for DCF Case Read/Review process to measure use and effectiveness of the Tool. See Attachment 21 Adoption Tracking Tool.

C.4 Quality Assurance System

For assessment of the Kansas QA/CPI system as a systemic factor in the CFSR, see Item 25. Kansas believes work with vulnerable children and families demands a family and child well-being system which realizes the highest standards of performance. To reach these goals and achieve positive outcomes for children and families in safety, permanency and well-being, Kansas established a system of Continuous Performance Improvement (CPI). The Kansas 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. CPI is foundational to understanding how the family and child well-being system is currently functioning and facilitating systemic change and improvement.



Functional Components

The Kansas CPI system essentially shares the same functional components outlined in Information Memorandum ACYF-CB-IM-12-07.

Foundational Administrative Structure

Kansas has established a culture and structure which promotes continuous quality improvement. The agency has developed capacity, infrastructure and processes to support improvement efforts and system change. Dedicated CPI teams are located within every region of the state and locally within each child welfare case management provider (CWCMP). Overall improvement efforts are coordinated by a CPI team within DCF Administration.

Although dedicated CPI staff are largely responsible for providing support and accountability for the structure and administration, staff at all levels within the family and child well-being systems are truly responsible for continuous performance improvement. The CPI process depends on a commitment to quality services from the caseworker meeting with families all the way up to the agency director.

Quality Data Collection

Kansas utilizes four systems to track child welfare data and information in lieu of a SACWIS/CCWIS system:

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

The FACTS is the State's primary system of record. It contains data from point of intake through permanency and post-permanency services. FACTS is a statewide mainframe-based information system. The FACTS was created to collect and maintain information about children, families and providers with involvement in the family and child well-being system. Information in the system is accessible by agency and case management provider staff across the state. 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 Family and Child Well-Being system. The system allows timely data reporting and analysis key to monitoring outcomes and identifying areas of opportunity. Through the FACTS, Kansas collects and reports Adoption and Foster Care Analysis and Reporting System (AFCARS), National Child Abuse and Neglect Data System (NCANDS) and National Youth in Transition Database (NYTD) data. The system complies with all internal and external data quality standards.

Case Record Review Data and Process

Kansas conducts quarterly case record reviews. The case read sample for each program is derived from a sample of active cases meeting each program case review criteria. 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.

Case read instruments are standardized for use across the agency and a consistent data entry process is employed using a Case Read Application. The in-home services and foster care case read instruments essentially replicate the CFSR Onsite Review Instrument (OSRI). Other instruments include questions/outcomes concerning procedures and practices with a focus on safety, permanency and well-being.

Analysis and Dissemination of Quality Data

Kansas routinely analyzes and publishes quality data reports. Reports include both regional and statewide analysis. Most data reports are updated monthly and are available on the agency's public website. Internal data is posted to a secure SharePoint site and is available to agency and provider staff. 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.

Feedback to Stakeholders and Decision Makers and Adjustment of Programs and Process

Case read data and outcome data from the State's information system is reviewed during regional meetings and 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.

Data is reviewed with external stakeholders with the Citizen Review Panels, policy, program and interagency workgroups.

When areas of opportunity are identified, CPI staff facilitate the CPI process with stakeholders, decision makers and subject matter experts. After a root cause analysis defines the issue, the theory of change is described, and a solution is developed and implemented. Once the solution has been implemented, it is monitored and assessed to determine effectiveness. The CPI process, itself, is a cycle. There is no beginning and no end because the process is designed to constantly improve the system.

Enhancements

Kansas DCF is in the process of obtaining a new web-based case review system through Rushmore. The new system is being tested at the time of submission of the APSR 2022. It is expected to be implemented

for the October 2021 case reads. The new case review system includes many improvements such as: timely results, "real time" reports, ad hoc reports, and secondary reviews. In addition, CWCMP staff will be able to utilize the system for case reviews.

The new case review system includes many improvements such as: timely results, "real time" reports, ad hoc reports, and secondary reviews. In addition, CWCMP staff will be able to utilize the system for case reviews.

Kansas DCF began pursuing Comprehensive Child Welfare Information System (CCWIS) in 2018, and the 2018 and 2019 legislatures appropriated funding for the first of three phases of the project, the planning phase. DCF is working with Public Consulting Group, LLC to complete this planning project by June 2022. DCF is exploring how a CCWIS can benefit frontline workers and create business process efficiencies while transforming how quality data is collected and shared. These substantial changes will ultimately lead to improved outcomes for children and families within the state. At the time of this APSR 2022 submission, DCF is at the last stage of the planning phase and will enter the second phase of the project in early SFY2022.

C.5 Update on the Service Descriptions

C.5.a Stephanie Tubbs Jones Child Welfare Services Program, Title IV-B, subpart 1

Programs funded under the Stephanie Tubbs Jones and MaryLee Allen Child Welfare Services Programs will only have descriptions included in Title IV-B, subpart 1 along with an update towards the use of CARES Act award. Additionally, some programs not funded by subparts 1 and 2 are included in the descriptions below in order to illustrate the full family and child well-being service array.

Kansas Protection Report Center

Estimated Number of Individuals and Families to be Served	73,000 Intake Reports Received
Population to be Served	Reporters calling with concerns for Kansas families. When the reporter does not speak English, translation services are available.
Geographic Areas where the Services are Available	Reports are assigned for all counties in Kansas

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 remote with a few staff working from the Topeka and Wichita offices. The KPRC transitioned to a web-based phone services, Amazon Connect, in April 2020 allowing all calls to be answered through the computer. A single, toll-free number is utilized, and during regular business hours, calls are routed to a single queue at the KPRC. 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.

Within KPRC staff, Intake Protection Specialists (IPS) and Protection Specialists receive a report by mail, phone, fax or online web and complete all intake and initial assessment steps related to the report to inform an assignment decision.

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. Based on the DCF PPS Policy and Procedure Manual (PPM) section 1330, timeframe for Initial Assessment, 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. The DCF PPS Policy and Procedure Manual can be found on the public website, www.dcf.ks.gov.



Timely Initial Assessment SFY2021

Performance Standard is 95.0%
July 2020 - June 2021

	Reporting Month	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Average YTD
Statewide	# of Events Assessed Timely	4,979	5,013	5,942	6,531	5,412	5,413	5,670	5,832	6,304				5,677
	Total # of Events	5,176	5,179	6,220	6,811	5,607	5,718	6,057	6,309	6,826				5,989
	% of Timely Initial Assessments for reporting month	96.2%	96.8%	95.5%	95.9%	96.5%	94.7%	93.6%	92.4%	92.4%				94.8%

*Note: This report contains both child and adult events taken by the Kansas Protection Report Center.

Numerator: The number of events taken in a reporting month with an initial assessment completed per policy PPM 1330, excluding events on a Preliminary Inquiry status.
Denominator: Total number of events taken in a reporting month, excluding events with a Preliminary Inquiry status.

Data Source: KIPS
Date: April 8, 2021

IPS and Protection Specialists 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. The KPRC Protection Specialists are required to complete 40 hours of continuing education every two years to maintain their social work license. If the Protection Specialist is unlicensed, they are still required to complete 40 hours of continuing education every two years. The KPRC Supervisors are participating in the KanCoach program.

In June 2020 the KPRC leadership team started presenting mandated reporter training in a virtual setting. The training has been presented to various stakeholders over a series of nine dates, with an audience of more than 900 participants. In addition, KPRC leadership has provided virtual training to individual agencies including: Southeast Kansas (SEK) Birth to Three Program, Wyandotte County Health Department, Advent Health, Cornerstones of Care, Kansas Department of Health and Environment,

Community Action, Inc., Aetna Health, KVC Foster Parents, Sedgwick County Fire Department, Wichita Fire Department, Sedgwick County Dept of Corrections, Community in Schools (CIS) of Mid-America, Avery Village, Fort Riley Military Base (Family Advocacy Program) FAP, Lansing Special Education Department, Lansing High Schools, Pittsburg Elementary schools, DCCCA Foster Parents, Kansas School for the Deaf and more. Through individual agency trainings more than 1,000 additional mandated reporters have participated. In July 2020 a recording of the mandated reporter training was provided to the Department of Education to distribute amongst counselors and social workers within the school districts.

A survey was sent to over 1,200 mandated reporters in Kansas receiving almost 600 responses. This resulted in efforts to re-design the mandated reporter training and the Guide for Mandated Reporters with a new focus on poverty versus neglect. In December 2020 DCF collaborated with the Department of Education and Kansas Children’s Service League (KCSL) to review the mandated reporter training. Revisions to the training made to include the Kansas Practice Model, family centered focus, community supporting families and impact of poverty in family and child well-being. The revised mandated reporter training was presented starting January 2021. DCF will continue to provide the mandated reporter training in virtual manner throughout 2021. The trainings will have a smaller number of participants to allow more discussion and engagement.

With the support of state Prevent Child Abuse chapter (Kansas Children’s Service League - KCSL) and cross agency collaborations, the Kansas Surge Protection Team emerged from the unplanned early end to the 2020 school year due to COVID-19. This work resulted in intentional communication and resources for supporting family wellbeing and promoting KCSL Parent Helpline/1-800-Children line. The KPRC Leadership continue to participate in the Hotline/Intake/Screening Managers (HISM) quarterly calls through the Children’s Bureau to hear of trends, resources and other tools states are utilizing.

Family Services

Estimated Number of Individuals and Families to be Served	100
Population to be Served	Families in need of services with a lower level risk. Candidacy of Care is not required.
Geographic Areas where the Services are Available	Statewide

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.

The estimated number of families to be served has decreased over the past two years due to the West Region discontinuing Community Service Family Service Grants in SFY20 and the additional services available through FFPSA providers. As of March 31, 2021, there have been 158 Family Service Cases initiated.

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 family and child well-being

system. FS 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. FS are family centered, culturally informed, and build on the strengths of the family. FS 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. FS or flex funds may be utilized to alleviate a family crisis that may put a child at risk of maltreatment.

FS may be provided by DCF through direct PPS case management, PPS may enter into Client Purchase Agreements (CPA) 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.

Community Family Service grants were previously awarded to three providers serving four of the six regions in Kansas. The following providers are currently serving Kansas’ children and families: Northeast and Southeast Region, The Children’s Shelter; Kansas City Region, Cornerstones of Care; and Wichita Region, Mental Health Association of South-Central Kansas. A provider was not selected for the Western regions. The West Regions may enter into a CPA with community service providers to purchase services for children and families. The Community Service Family Service Grants will conclude June 30th, 2021. Family Services will continue by DCF through direct PPS case management or CPA’s.

Family Preservation

Estimated Number of Individuals and Families to be Served:	1500 Families
Populations to be Served	Families with at least one child at risk for foster care
Geographic Areas where the Services are Available	Statewide (All 105 Kansas counties)

Family Preservation Services provide voluntary services alongside families to build on family strengths and reduce the risk of children being placed in foster care.

Families must meet the following eligibility requirements to participate in Family Preservation:

- Reside in Kansas,
- be at risk for having children placed in foster care,
- have a parent/caregiver available to protect the children, and
- be willing and able to participate in Family Preservation services.

Family Preservation may also be offered to pregnant women using substances, to help connect the family with substance use treatment and prenatal medical services.

Fiscal Year 2021 has been the first full year of services under the most recent contract. New Family Preservation contracts were awarded in September and became effective January 1, 2020. The contracts are in place through June 30, 2024, with the option to renew for one additional two-year period. DCCCA was awarded the Family Preservation contract in the Kansas City and Wichita regions. TFI Family Services was awarded the contract in the West region. Cornerstones of Care was awarded the East region contract.

The Family Preservation contracts offer families and PPS practitioners a choice between two tiers of services. Tier 1 is intensive in-home Family Preservation, provided by a master’s level therapist for four to six weeks. Tier 2 is short-term Family Preservation case management, provided by a worker dyad consisting of an assigned case manager and a family support worker.

PPS practitioners have been provided education around the tiers and the evidence-based model each FPS providers is using within each tier. The assigned worker assesses the family for existing risk and emergent safety issues then initiates services to stabilize and support the family. Families are referred to Family Preservation by DCF. DCF may make a referral at any point during the assessment and investigation. The PPS practitioner, the Family Preservation case manager and the family work together using ongoing assessments throughout the service period, to ensure the family is receiving the best services to meet their needs. A referral to Family Preservation and a different tier can be made if it is determined a family requires a different level of service than initial assessments indicated.

Please see Attachment 30 Family Preservation Tiers for additional information.

Each contract agency selected Evidence Based Models for Family Preservation. These practices are designed to strengthen families, prevent unnecessary family disruption, reduce family and child trauma, interrupt intergenerational cycles of maltreatment, and build a well-functioning family and child well-being system. The following chart illustrates which Evidence Based Model has been implemented by each provider:

Family Preservation Contractor	Evidence-Based Model	California Evidence- Based Clearinghouse for Child Welfare Rating¹	IV-E Prevention Clearinghouse Rating²
TFI Family Services Tier 1	Trauma Focused Cognitive Behavioral Therapy	Well-Supported	Promising
TFI Family Services Tier 2	Alternatives for Families	Promising	Not rated
Cornerstones of Care	Solution-Based Casework	Promising	Does not currently meet criteria
DCCCA Tier 1 and Tier 2	Family Centered Treatment	Promising	Does not currently meet criteria
DCCCA Tier 2 with Substance Use Concerns	Sobriety Treatment and Recovery Teams	Promising	Promising

The COVID-19 pandemic has continued to change the human services environment, but providers have adapted well. One example is from Cornerstones of Care³:

“Cornerstones of Care has continued to lay eyes on children throughout the pandemic. We understand how important it is to see and speak to the children, and we have continued this practice despite obvious challenges presented by COVID-19. Through the use of video technology, as well as continued in person visits, families have remained engaged in the program. Cornerstones of Care has provided clear guidance on staying healthy and utilizing personal protective gear, such as masks. For in person visits, staff are following all social distancing guidelines as provided by Cornerstones of Care, and the county in which they work. We have

seen a higher number of families who need masks. We are now providing masks to families at each visit, to ensure their continued safety.”

Family Preservation focuses on prevention by strengthening families and preventing the unnecessary removal of children from their homes and communities. Starting January 1, 2020 Family Preservation contractors are measured on the following four outcomes to show prevention success. The data below represents the most recent available for time period July 2020-March 2021, which can be found on the DCF public website.

1. 95% of children are safe from future maltreatment as defined by affirmed or substantiated abuse and/or neglect, in Tier 1 and Tier 2 Services.

Performance as of March 2021:

Tier 1: 99.3%

Tier 2: 96.8%

2. 90% of children are maintained safely at home with family, in Tier 1 and Tier 2 Services

Performance as of March 2021:

Tier 1: 93%

Tier 2: 88.4%

3. 90% of babies are born substance free to pregnant women using non-opioid substances

No data to report as there have been no referrals of pregnant women using non-opioid substances who have given birth while participating in either Tier 1 or Tier 2. While there have been 10 referrals of pregnant women to Tier 2, those women did not give birth while receiving services.

4. 90% of women using opioids during pregnancy will be referred for medication assisted treatment.

Performance as of March 2021:

Tier 1: 0%

Tier 2: *No data to report as no referrals met data definition.*

There has been 1 family referred to Family Preservation services Tier 1 for reason of opioid use during pregnancy. That family was already receiving medication assisted treatment and therefore did not need to be referred.

In reviewing outcomes for FY 2020 and FY 2021, DCF noted the very low number of pregnant women using substances referrals to Family Preservation. DCF developed a promotional podcast designed to educate staff of the benefits to services for these families and the skills FPS staff have in working with prenatal families. An informal analysis believes that new staff members may not be fully aware of the available Family Preservation services to pregnant women using substances, thus the podcast was created to engage new staff in better understanding the services in order to increase referrals. Data from SFY22 will be reviewed to determine if this approach was successful. Additionally, the Prevention in Kansas newsletter featured an article promoting referrals to FPS when working with pregnant women using substances.

Family and Child Well-Being Practice that Supports the Well-Being of Children and Families, and Communities

Kansas understands adverse childhood experiences from trauma have been linked to adult onset of chronic disease, mental illness, violence, and being a victim of violence. Family Preservation practitioners work for the well-being of children, families, and communities. In the West Region, TFI Family Services has chosen to focus specifically on providing in-home Trauma-Focused Cognitive Behavioral Therapy to address these needs. Statewide, Family Preservation Tier 1 and Tier 2 have averaged a 91% success rate (July 2020-March 2021) at maintaining children at home and preventing trauma caused by removal into foster care.

Community-Based, Collaborative Programs Supporting Families

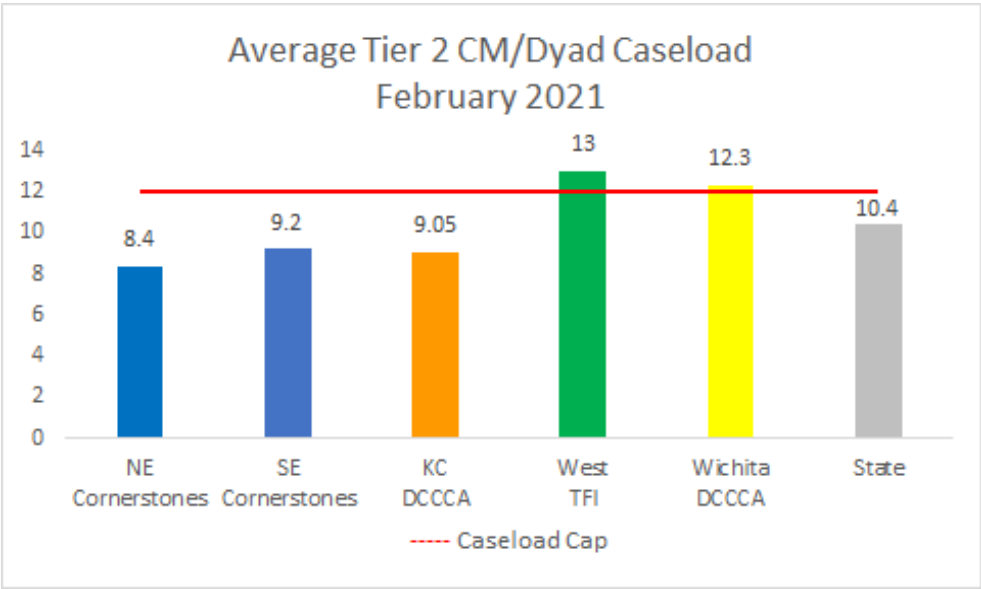
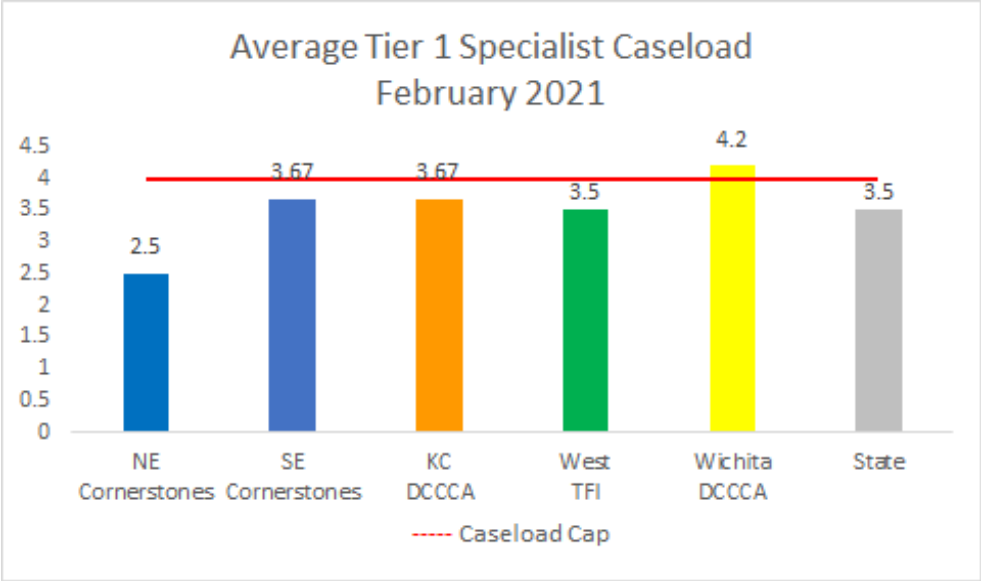
Family Preservation is available in all 105 counties in Kansas and services are primarily provided in the family home. If the assigned FPS practitioner does not speak the language the family is most comfortable speaking, the family and child well-being agency access interpreting services. Should tribal social welfare practitioners request FPS, DCF collaborates with the tribe to refer the family to services. Kansas understands the link between poverty and child abuse and neglect. Through Family Preservation, each family may access \$500 in assistance for concrete goods and services to improve family functioning. If the family's need is greater, the provider and the state family and child well-being agency collaborate to meet the family's additional needs.

Family Preservation practitioners, supervisors, and administration have also worked closely with the new Family First grantees in Kansas. Practitioners are familiar with the Family First services available within the regions they serve. If a child in the family remains at risk for removal when they have completed their referral service period, the family may consider a Family First service to further meet their needs. For example, if a family with young children participate in Family Centered Treatment through Family Preservation and complete the program, they could then be considered for a Healthy Families or Kansas Parents are Teachers referral for long term services. Kansans now have more options for services meeting their needs and preventing the need for foster care, with the expansion of prevention services through Family First.

To gain more community input, Family Preservation added an email box for suggestions for policy and program improvement in November of 2020. At this time of the 2022 APSR submission, there had been no suggestions received. Please see Attachment 31 Family Preservation Policy Suggestion Flyer explaining and advertising the new method of communication. This flyer was distributed to all internal PPS staff and Family Preservation contractors.

A Strong, Healthy Family and Child Well-Being Workforce to Achieve Better Outcomes

Under the new Family Preservation contracts, case load limits were included in the contract for the first time. Therapists providing Tier 1 services may have a caseload maximum of four families. Worker dyads providing Tier 2 services may have a caseload of up to twelve families. This was done to increase the quality of work provided and promote a strong, healthy, family and child well-being workforce. The caseload requirements for Tier 2 were temporarily relaxed in order to accommodate for the ending of our Community Based Family Services grants. Until 12/31/2021, Tier 2 dyads are allowed up to 15 cases.



As the broader prevention service array is being utilized, it is exciting to see the need for foster care decreasing.

Family First Prevention Services Act

Estimated Number of Individuals and Families to be Served	Approximately 1120 families
Population to be Served	Families with children at risk of being removed from their homes
Geographic Areas where the Services are Available	Variety of services available statewide, services vary by county

Kansas implemented the Family First Prevention Services Act (FFPSA) program on October 1, 2019. Seventeen grants were awarded to nonprofit, not-for-profit, and/or for-profit family and child well-being agencies offering evidence-based, trauma-informed programs in the required categories of mental health, substance use disorder services, parent-skill building programs, and kinship navigation (See Attachment 32 for the complete list of FFPSA providers). These programs target candidates for care, children at risk from being removed from the home and entering foster care and seek to strengthen families.

In SFY2021, DCF was allotted a total of 8 Family First case managers (FFPSA CM) to support regions with the new program. Funded with state general funds, the Northwest, Southwest, Northeast and Southeast received one case manager per region, and the Wichita and Kansas City region received two positions per region. These new positions are the experts on the Family First evidence-based programs available in the region. They are knowledgeable about other DCF programs, such as Economic and Employment Services, and aware of other unique regional community-based services. These FFPSA CMs have also been integral to help DCF to develop a “prevention culture” and promote referrals. One of the Family First Case Manager explained part of her duties by saying, “I do a lot of case management for the CPS workers in my region. For example, if they are needing a specific resource for a family, assistance on a Team Decision Making meeting to discuss Family First services, or research other community programs that may be of assistance (to the family).”

The FFPSA CMs collaborate with the service providers and the agency to support the family and are the point person if questions arise. When checking on a family enrolled in the Parent-Child Interaction Therapy (PCIT) the stepmother reported to her case manager, “we were very pleased with the Family First case manager, the (PCIT) therapist and support worker for their great support and encouragement.” FFPSA CMs also help input Family First data into the Family And Child Tracking System (FACTS).

When a call is received by the Kansas Protection Report Center and meets the criteria for a Family in need of assessment (FINA), or an abuse/neglect assignment, a local DCF Child Protection Specialist (CPS) will visit and assess the family. Assessing the family includes determining if there is a child(ren) in the family who is a candidate for care. If a candidate is identified, CPS works alongside the family to identify prevention services available to them. If the CPS needs assistance explaining the Family First services to the family, they can contact their region’s FFPSA CM to help consult with the family about the program or assist in identifying appropriate or eligible programs for families. DCF believes all services are based on family-centered practice and referrals to ongoing services are based on the CPS family assessments and family choice.

Within PPS, there are three prevention tracks a CPS and family consider for services. The path the family and CPS chooses determines both the level and type of services. The three tracks include Family Services, Family First Prevention Services and Family Preservation Services (view Attachment 33, Prevention Service Track for an illustrated representation of the process flow and description). In addition to these state prevention programs, community-based service providers are essential considerations for strengthening families, increasing protective factors, and promoting social connection as well as prevention for foster care. Community-based service providers can provide support to the family if children do not meet the candidacy of care definition or when families step down from Family First or Family Preservation prevention programs. In SFY 22, DCF will not be renewing the Family Services contracts to shift funding toward evidence-based services.

During this year of COVID-19, Family First providers conducted both in-person and virtual services for families. Providers continually monitored the coronavirus outbreak data in the counties they served as well as using screening questions for their staff and families to determine exposure threats. For more details about how providers served families during COVID-19.

The Prevention Team continues to create and distribute the monthly collaborative newsletter, *Prevention in Kansas*. These newsletters can be found on the DCF public website: <http://www.dcf.ks.gov/services/PPS/Pages/Newsletters.aspx>. Recipients include providers, DCF PPS staff, family and child well-being stakeholders, court personnel, and other interested parties. The newsletter informs and engages readers about a variety of services at DCF and throughout Kansas. The newsletter highlights programs and agency staff throughout Kansas who offer prevention services and who have a role in the broader vision of improving outcomes for children and families

In SFY 2021, the Prevention Team presented the Family First program in a variety of venues and participated in various work groups and learning collaboratives. For a full list of presentations and workgroups, refer to Attachment 34 FFPSA Presentations and workshops.

The following table demonstrates the number of referrals DCF have made to the new available programs for State Fiscal Year 2021. As DCF staff have become familiar with the program, referral numbers have increased this year.

Provider / FFPSA Evidence-Based Program	Counties Served	Target Age	Families referred to FFPSA services for FY2021 (Jul20-Mar21)
DCCCA/ Adolescent Community Reinforcement Approach (A-CRA)	Crawford, Bourbon, Cherokee, Neosho, Labette, Montgomery, Allen	12 - 18 years	3
Kansas Children's Service League / Parent Child Assistance Program (PCAP)	Shawnee;	Prenatal to 1 year	16
Saint Francis Ministries/ Seeking Safety (SS)	Finney; Seward; Thomas; Saline; Barton; Wichita; Sedgwick	0 - 17 years	52
Saint Francis Ministries / Family Centered Treatment (FCT)	Barton; Chase; Cheyenne; Clark; Clay; Cloud; Comanche; Decatur; Dickinson; Edwards; Ellis; Ellsworth; Finney; Ford County; Geary; Gove; Graham; Grant; Gray; Greeley; Hamilton; Harvey; Haskell; Hodgeman; Jewell; Kearny; Kiowa; Lane; Lincoln; Logan; Lyon; Marion; McPherson; Meade; Mitchell; Morris; Morton; Ness; Norton; Osborne; Ottawa; Pawnee; Phillips; Rawlins; Reno; Republic; Rice; Riley; Rooks; Rush; Russell; Saline; Scott; Seward; Sheridan; Sherman; Smith; Stafford; Stanton; Stevens; Thomas; Trego; Wallace; Washington; Wichita; Barber; Butler; Cowley; Elk; Greenwood; Harper; Kingman; Pratt; Sedgwick; Sumner	0 - 17 years	220
Cornerstones of Care/ Functional Family Therapy (FFT)	Wyandotte; Atchison; Leavenworth; Johnson; Douglas	11 - 18 years	115
Horizons Mental Health/ Parent Child Interaction Therapy (PCIT)	Reno; Barber; Kingman; Pratt; Harper	2 - 7 years	4

Provider / FFPSA Evidence-Based Program	Counties Served	Target Age	Families referred to FFPSA services for FY2021 (Jul20-Mar21)
TFI Family Services / Parent Child Interaction Therapy (PCIT)	Allen; Anderson; Bourbon; Chautauqua; Cherokee; Coffey; Crawford; Franklin; Labette; Linn; Miami; Montgomery; Neosho; Osage; Shawnee; Wilson; Woodson; Elk; Greenwood; Butler; Finney; Riley	2-7 years	64
Community Solutions Inc/ Multi-Systemic Therapy (MST)	Atchison; Leavenworth; Wyandotte; Allen; Crawford; Labette; Montgomery; Neosho; Shawnee; Butler; Cowley; Sedgwick; Barton; Ellsworth; Harvey; Reno; McPherson; Saline	12 - 17 years	162
Kansas Legal Services / Kinship Interdisciplinary Navigation Technologically Advanced Model (KIN-TECH)	Statewide	0 - 18 years	150
Project Eagle /Attachment and Biobehavioral Catch-Up (ABC)	Wyandotte, Douglas, Leavenworth; Cheyenne, Rawlins, Sherman, Thomas, Wallace, Logan, Decatur, Norton, Sheridan, Graham, Gove, Trego, Phillips, Smith, Rooks, Osborne, Ellis, Russell	6 months to 4 years	12
Child Advocacy & Parenting Services /Family Mentoring Program - (NPP)	Saline, Ottawa	0-17 years	38
FosterAdopt Connect /Fostering Prevention (NPP)	Johnson, Wyandotte	6-16 years	26
Provider / FFPSA Evidence-Based Program	Counties Served	Target Age	Families referred to FFPSA services for FY2021 (Jul20-Mar21)
Great Circle /Healthy Families America (HFA)	Chautauqua; Woodson; Coffey; Anderson; Linn; Franklin; Osage; Waubaussee; Pottawatomie; Jackson; Marshall; Nemaha; Brown; Doniphan; Douglas, Atchison	Prenatal to 3 years	56
Kansas Children's Service League /Healthy Families America (HFA)	Sedgwick, Allen, Neosho, Wilson		55
Lawrence Douglas County Health Dept & Success by 6 /Healthy Families America (HFA)	Douglas		0
Parents as Teachers (PAT)	Statewide	Prenatal to 3 years	140

At the start of implementation, it was normal for many providers to have low referrals as DCF staff became acclimated to the Family First program process and the criteria for each evidence-based program. With time, many programs had increased referrals, however, there are some providers still experiencing slow growth. Identified below are the programs experiencing low referrals and DCF's next steps to encourage growth.

- **DCCCA, A-CRA** (*state general funds*)- Data reviews and meetings were held due to low referrals since starting A-CRA. In the counties served by A-CRA, data showed very few youths had been placed into foster care for contributing factors of child substance usage. Additionally, a low number of intakes were assigned due to child substance usage. This same data highlighted a need for substance use services for pre- and post-natal services. Therefore, DCF and DCCCA intend to amend the current grant for SFY22 to provide Seeking Safety to pregnant mothers and mothers with children under the age of 5.
- **Horizons Mental Health Center, PCIT**- Kansas has two PCIT programs serving different counties. Both PCIT programs reflected slow growth initially but are currently seeing an increase in

referrals. PCIT serves children ages 2-7. This evidence-based model is intensive and families that were first enrolled are now starting to successfully graduate. DCF is still working to build staff awareness and understanding of this program.

- **Project Eagle, ABC** (*state general funds*)- Serving families with children ages 6-48 months, the in-home service has had a slow start, but is seeing slow growth of referrals. Families first enrolled are now starting to graduate the service and with continued success. DCF is still working to build staff awareness of this program.
- **Lawrence-Douglas County Health Dept & Success by 6, HFA**- Douglas county is rich in early childhood and parenting resources serving families with children who are within the age range served by HFA. This provider was previously enrolling families prenatally to 3 months, in line with the HFA model. In February 2021, the provider took steps to expand and offer the Child Welfare Adaption of HFA. This change in the model allows for enrollment of prenatal families and families with children up to 24 months of age. Douglas County is part of the Kansas City DCF Region. Kansas City Region and this provider have collaborated to create educational presentations. These presentations will be shared with our foster care case management providers to promote awareness of the program and its potential to serve pregnant/parenting foster care youth. Ongoing education to DCF staff continues.

The DCF Prevention Team, DCF regional staff and prevention providers continue to promote connections between families in need and prevention services available

Kansas contracted with an independent evaluator to conduct a well-designed and rigorous evaluation of the Family First program. The University of Kansas (KU) School of Social Welfare and KU Center for Public Partnerships and Research (KUCPPR) has been conducting evaluations for all Kansas Family First Prevention Service providers and service interventions. The evaluation plan is guided by a utilization-focused approach that includes two major components: (1) a process evaluation, and (2) an outcomes evaluation. The evaluation team also assists with the regional and statewide Interagency Advisory Board, or IAB, (discussed in Section II, Collaboration and Coordination) meetings, which bring community partners as well as Kansas prevention provider grantees and contractors to the table to discuss all aspects of the new FFPSA program. During these IAB meetings, the University of Kansas Center for Public Partnership and Research introduced the Our Tomorrows project. This partner project with KUCPPR and the Kansas Children's Cabinet and Trust Fund, is a story collection effort to amplify the voices of real Kansas families. The Our Tomorrows team will transform lived-experience stories into data to highlight the challenges and triumphs Kansas families faced during the COVID-19 crisis. Using the data from the stories allows a collaborative agency approach to identify potential barriers within the system which became more apparent during the pandemic and work toward ameliorating through policy/process changes.

Qualified Residential Treatment Programs

Improving services within congregate care placements when children cannot remain safely with their parents is one of the goals of the Family First program. The introduction of qualified residential treatment programs (QRTPs) is one way the Act intends to do this. QRTP beds available (see Attachment 35 Kansas Bed Numbers for QRTP Facilities). For a child to be placed in a QRTP, there must be an independent assessment completed to determine a need for this level of services. The independent assessment is completed by an individual who is not employed by the state, CWCMPs or by QRTP staff. HealthSource Integrated Solutions was granted the independent assessor role for Kansas. The Topeka based not-for-profit LLC was formed in 2007. Over 90% of the Kansas Community Mental Health Centers have a trusted relationship with HealthSource. They specialize in crisis intervention screening and assessments, information technology managed services, clinical call center and after-hours services. The company has worked with the Kansas Department for Disability and Aging Services since 2015 on

various projects. As the independent assessor, Healthsource will be conducting the federally required assessment of children placed in the accredited QRTP facilities. They use the Child and Adolescent Functional Assessment tool (CAFAS) to assess a youth’s day-to-day functioning and for tracking changes in functioning over time. Their assessment will inform decisions about type and intensity of treatment, placement and need for referral to services. Assessments are completed within 30 days of placement. HealthSource provides documentation supporting their recommendations on whether the child qualifies for placement in a QRTP.

QRTP Placements as of February 28, 2021 (SFY2021)		
Placement Locations/#of Youth/Percentages of QRTP Population		
Placement	#	%
AAHN'S PLACE	10	6.2%
AGAPE Center of Hope	9	5.6%
Avery's Village	10	6.2%
Cornerstones of Care	2	1.2%
Emberhope, Inc	21	13.0%
KIDS TLC	10	6.2%
KVC	11	6.8%
LAKESIDE ACADEMY	34	21.1%
O'Connell Youth Ranch	3	1.9%
Pathway Family Services, Inc.	11	6.8%
Questville Services	12	7.5%
Saint Francis Ministries	17	10.6%
Successful Dreams Support	5	3.1%
Youngblood Youth Development Homes, LLC	6	3.7%
Total	161	100.0%

Adoption Promotion and Support

Estimated Number of Individuals and Families to be Served	Goal is 21% of total state adoptions initially inquired through Adopt KS Kids.
Population to be Served	Children in state’s custody birth to age 18.
Geographic Areas where the Services are Available	Statewide adoption services & ICPC Adoptions.

Percentage of total state adoptions initially inquired through Adopt KS Kids.				
QTR 1 (July - Sept. 2020)	QTR 2 (Oct. - Dec 2020)	QTR 3 (Jan - March 2021)	QTR 4 (April - June 2021)	YTD21
12.50% (23/184)	12.40% (12/97)	27.00% (34/126)	TBD	17.00% (69/407)

Thus far in SFY2021 (July 2020-March 2021) approximately 97.3 percent of the adoptions finalized were by the children’s relatives or the foster parent(s.)

Adoptive Parent Relationship

	Kansas City Region		Northeast Region		Northwest Region		Southeast Region		Southwest Region		Wichita Region		Statewide	
	#	%	#	%	#	%	#	%	#	%	#	%	#	%
Foster Parent	64	57.7%	23	62.2%	43	67.2%	55	78.6%	60	40.3%	64	54.7%	309	56.4%
Other	0	0.0%	1	2.7%	2	3.1%	1	1.4%	5	3.4%	6	5.1%	15	2.7%
Relative	47	42.3%	13	35.1%	19	29.7%	14	20.0%	84	56.4%	47	40.2%	224	40.9%
Step Parent	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	111	100.0%	37	100.0%	64	100.0%	70	100.0%	149	100.0%	117	100.0%	548	100.0%

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

http://www.dcf.ks.gov/services/PPS/Documents/FY2021DataReports/FCAD_Summary/adoptions_finalizedFY2021.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 re-entry (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 2020. Of the 12,777 finalized adoptions, 16.3% percent (n=2081) have experienced subsequent re-entry into foster care. Of those families with a re-entry, the majority (80.3 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 for the child; one that can best parent and serve 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 (<https://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 March 2021, there were 485 total children listed on the Adopt Kansas Kids (AKK) website. This number has increased over the year from 471 (March 2020.) The average age of the child listed on AKK is 12 years old. The racial demographics for the children are as follows: Caucasian – 285 (58.76%), African American – 96 (19.79%); Bi-racial (AA/Caucasian) – 57 (11.75%), Hispanic – 37 (7.63%),

Indian/Alaskan - 9 (1.86%); and 1 child considered “Other”, (.21%.) Of the 485 children listed on the Adoption Kansas Kids; 61 children are also listed on the AdoptUSKids Exchange.

In SFY 2021 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. See Attachment 36 for the Adopt Kansas Kids State Report.

Children’s Alliance of Kansas

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 by utilizing and being guided by Children’s Alliance of Kansas. 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. For families who are unable to attend an in-class session, there is an alternative, called Deciding Together. This format covers equivalent material of TIPS-MAPP; however, a Leader meets with the family on a one-on-one basis for a period of 8-weeks. This alternative class allows CWCMPs and CPAs additional flexibility in training and preparing foster and adoptive families.

Children’s Alliance of Kansas (CAK) has adopted 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 condense classes to span either a 5-week period or two weekends allowing families access to the same information with less time constraints. CAK continues to adapt the curriculum and research other methodologies to delivery this training. Currently, CAK is researching and pursuing different Learning Management Systems (LMS) to help develop more integrated systems for online delivery of trainings, including pieces of the TIPS-MAPP training.

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.

Through efforts with CAK, Kansas is one of eight states selected to be part of the National Training and Development Curriculum for Foster and Adoptive Parents (NTDC) project to develop a training with three components of self-assessment, classroom-based training, and “right-time” training. For this project, the counties which will be used for comparison are to be Sedgwick, Reno, Butler, Sumner, and Harvey. The pilot counties for this project will be Franklin, Douglas, Shawnee, Osage, Wyandotte, Johnson, Miami. Once the project starts, data will be collected from these counties for a total of 18 month. The end goal is for CAK to work in tandem with the CWCMPs and CPAs to training a minimum of 70 families in both the comparison and pilot counties. This project was slated to begin in June 2020; however, it has been pushed back until at least September 2020 in response to the COVID-19 pandemic prohibiting travel and classroom-style gatherings. During the time of COVID-19 crisis though, CAK has worked closely with DCF, CWCMPs and CPAs ensuring foster and adoptive families receive training by

developing online delivery of many of the trainings, such as CPR and First Aid classes. Additionally, CAK has provided technical support to agencies to deliver the Deciding Together training to families to ensure physical distancing can be adhered to while developing new foster and adoptive families. CAK has also started monthly support calls with trainers in both KS and other contracted states to provide support, share ideas, and troubleshoot situations as the workforce navigates an online support and training format. DCF and CAK intend for these efforts of virtual formats to be phased out as possible in the future. See Attachments 25.1, 25.2, 25.3 and 25.4 for Case Management Providers Recruitment Plans.

Adoption Home Studies

DCF wants to promote best practice regarding adoption work and has encouraged the state's numerous Child Placing Agencies (CPAs) to support their families through the adoption process (if applicable.) The reasoning behind that is each agency's family has its' own worker and that worker goes to the home monthly. Additionally, it is that worker who knows the family the best and has assessed them (and continues to assess them) throughout their work with them over time. With that in mind, it doesn't make sense to have another agency come in and assess them again and have the responsibility of writing their home study. The CPA should be the one to write their families home studies. They should also be the ones to provide the array of adoption services to the family (in cooperation with the child's CMP) through permanency. DCF is allowing them to charge for the home study and adoptive services in the amount of \$3000.00 upon completion of the home study and accompanying documentation requirements needed for BIS and finalization.

In addition, DCF wants to encourage the CMPs in their CPA role to work with adopt-only non-licensed families to adopt. DCF also wants to encourage agencies to work together in the adoption of children regardless of their CMP. If an agency has a family who is wanting to adopt a child who is assigned to a different CMP, then we want to encourage the CMPs to work together in completing the adoption. In both of these instances they are eligible for the \$3000 upon completion of the home study and obtaining the accompanying documentation as well.

The following 12 Child Placing Agencies have provided adoptions services (including home assessments) to families since the start of this initiative, (in late 2019) to present, (May, 2021): KVC, TFI, St. Francis Ministries, Cornerstones of Care, KCSL, CALM, Restoration Family Services, DCCCA, Salvation Army, Children's Shelter, EmberHope & Eckerd.

Adoption Accelerators

In June 2019, DCF utilized adoption incentive funds to create a position designed to augment/sustain the Case Management Providers' work regarding adoption. These positions are called 'adoption accelerators' and are non-case carrying positions for each grant area. These positions engage activities critical to identify, track and monitor children and youth with a goal of adoption experiencing a barrier to legal permanency. The accelerator initiates relevant tasks or coordination to remove the barrier to adoption permanency including but not limited to data management reporting and tracking to identify children with barrier; initiating or completing home studies; initiating, gathering or completing other required documents or procedures associated with adoption; and similar or related tasks to support case management teams toward adoption finalization. These positions use technology, databases and any systems as needed.

July 1, 2019, the 4 grantees started the hiring process for the position so they could begin their work in the transition months prior to Oct. 1, 2019 contract changes.

Adoption Accelerators were funded with adoption incentive funds up to June 30, 2020. DCF then integrated funding for future grant amendments and case management.

St. Francis Ministries employees two adoption accelerators who serve grant areas 1, 2, and 7. TFI, Cornerstones and KVC each employ one adoption accelerator who serve their grant area(s). TFI, Cornerstones of Care and KVC each received 1 adoption accelerator for their entire grantee area(s).

Adoption Policies

Important policies implemented in the past year are highlighted below:

- Jan. 1st, 2021: 5360 Procedures Related to Signing the Adoption Placement Agreement

This policy addresses the signing of the adoption placement agreement (APA.) It points to items DCF is required to do for the adoptive family in association with the signing of the APA. Traditionally it has been stressed DCF shall provide the family with an opportunity to review the child’s file. However, considering the vital importance of reading the file, we changed it to something that will be a required thing for the family to do rather than simply an opportunity. The file presents the full picture of a child’s history, which includes their familial connections, health history, trauma and resiliency.

To reference policy 5360 Procedures Related to Signing the Adoption Placement Agreement, please see Attachment 37.

- July 1st, 2021: PPS 5400 The Adoption Tracking Tool

When a child has adoption as the case plan goal and parental rights have been terminated by the court or terminated as the result of a parent relinquishing rights and agency accepted and approved such relinquishment, the Adoption Tracking Tool (PPS 5400 form) shall be used to compile all relevant information related to moving the matter forward to adoption and provided to the court. It may also be attached to the court report form if one is being filed at the same time. Please see Attachment 21 Adoption Tracking Tool.

Adoptions from foster care in Kansas from SFY 2012 – SFY 2021 (July 2019-March 2021)

	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- Jun. 19	SFY 2020 Jul. 19- June 20	SFY 2021 Jul. 20- Mar. 21
Statewide Finalized Adoptions	777	620	666	765	755	758	766	1210	998	628

A significant decrease in adoptions in both SFY20 & SFY21 is attributed to the challenges the court system faced during the pandemic. Court services were not able to process the typical quantity of adoption finalizations which was a factor in the decrease. Additional court services that is believed to have impacted the decrease of adoptions was longer time it took to schedule and complete termination appeals.

Once an adoption is finalized, support to the adopted child and family continues. 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.

Permanent Custodianship

Estimated Number of Individuals and Families to be Served	146 children are receiving a Permanent Custodianship Subsidy as of March 2021.
Population to be Served	Children over the age of 14, or part of a sibling group where at least one sibling is 14 years of age or older, or children who have received an exception to receive a Permanent Custodianship.
Geographic Areas where the Services are Available	Entire state of KS or whatever state /country the child resides with the Permanent Custodian.

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 March 2021, 146 children are 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
4. Protection Services or designee 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:

- Social Security Survivors Benefits (SSA);
- Social Security Disability Insurance (SSDI);
- Child Support;
- Income for the child from a trust or annuity
- 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) 2020, 154 children exited custody into a permanent custodianship; and in SFY 2021, as of March 31, 2021, that number was 119.

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/ppls/robohelp/PPMGenerate/>, effective July 2016, to address overpayments.

Relative and Kinship Care

Estimated Number of Individuals and Families to be Served	2600 children in care
Population to be Served	Relative and families providing care to children in custody
Geographic Areas where the Services are Available	Statewide

Relative and kinship placements are more likely to take sibling groups and the children are more likely to experience greater placement stability. Placement in a relative or kin setting may also be less traumatic for children. Consistent with federal and state law, relatives and kin are considered first when placement is need for a child. DCF and CWCMP staff are required to make concerted efforts to identify, locate, inform and evaluate maternal and paternal relatives as potential placements both at initial placement and throughout the time the child is placed in foster care. In Kansas, 35.08% of children in foster care are placed with a relative, and the CWCMPs have a threshold to reach 50% of the children they serve are to be placed with relatives.

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, and similar. 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 stepparents, 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 eleven and sixty-one dollars per day (per child) based on the child’s level of care assessment. Specific CWCMP staff help support and maintain relative placements. If relatives choose to become licensed, they must meet the same regulatory safety standards and requirements as other licensed family foster homes. DCF has recently began messaging and encouraging relatives to become licensed though, as this open up more supports for the family including sponsorship by a Child Placing Agency and a higher foster care subsidy rate. As part of this effort to become a Kin First State, DCF is able to waive some non-

compliance items if it is non-safety related in nature. A relative who becomes a licensed foster home will essentially double their foster care subsidy rate.

Non-related kin must obtain licensure. However, agency policy allows children to be placed with non-related kin prior to the completion of pre-service foster parent training. Non-related kin are issued a temporary license within 30 days of 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 has begun to see an increase the percentage of relative and kinship placements. Kansas continues to invest in prevention services available to serve relatives and kin caregivers to support sustaining the child in their home. As an example, DCF entered into a separate contract with the Children’s Alliance of Kansas to develop curriculum specific to meet the needs of relative caregivers. This curriculum will be a parallel model to the other preservice training offered to foster and adoptive families across the state (TIPS-MAPP and TIPS-Deciding Together). It is projected piloting this curriculum will begin in the Summer of 2021. Additionally, it is anticipated with the implementation of TDM positions within the CWCMPs starting July 2021, the utilization of relatives and kin will continue to increase.

Independent Living (IL) Services

Estimated Number of Individuals and Families to be Served	900 individuals
Population to be Served	Adults age 18-21, or until age 26 if enrolled in post-secondary education who have been released from DCF custody
Geographic Areas where the Services are Available	Statewide

Independent Living (IL) Services are available to young 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 young adults may receive services in all 105 counties in Kansas. Adults ages 18 to 26 complete the Kansas Independent Living Self-Sufficiency Matrix and develop a formal Self-Sufficiency Services case plan with the Regional IL Coordinator. This plan is young adult-driven and identifies the individual’s 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 care, completion of high school/General Equivalency Diploma, post-secondary education or training, mentors, career planning, resources for pregnancy and parenting, assistance with checking and correcting credit reports, life skills, and other services, as identified by the young adult.

The Kansas Foster Child Education Assistance Act, which began July 1, 2006, requires that tuition and fees be waived by educational institutions for youth who experienced DCF custody and 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 or older, until the month of their 26th birthday. The young adult does not have to participate in any other

services to be eligible for the Aged Out Medical Card. (See Attachments 42.1- 42.3 for KS FY 20 Baseline, KS FY14-18 Data Snapshot and KS FY20 Served)

Another Planned Permanent Living Arrangements (APPLA)

Estimated Number of Individuals and Families to be Served	601
Population to be Served	Youth age 16 or older with a compelling reason to believe no other permanency options are available
Geographic Areas where the Services are Available	Statewide

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 making 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 April 30, 2021, 8.7 percent (n=601) 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, 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.

Adoption Assistance

Estimated Number of Individuals and Families to be Served	8455 open cases for Adoption Assistance as March 2021.
Population to be Served	Average age 11.68 years old as of March 2021.
Geographic Areas where the Services are Available	Adoption Subsidies can follow the child to any state and country.

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 March 2021, the average subsidy payment was \$448.62, which is up from the average of \$442.50 from March 2020 and \$349 a month at the end April 2019. This represents an increase of approximately 1.383 percent from March 2020 and 28.544 percent increase from April 2019. At the end of March 2021, there were 8,455 open adoption assistance cases. This represents an increase of 2.696 percent from March 2020 (8,233.)

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.

Historically, policy work 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.

Changes to Adoption Policy took place on Oct. 1, 2019. One specific area of importance addressed in this round was the Policies and Procedure Manual (PPM), Prevention and Protection Services (PPS) Policy 6210 Eligibility Requirements for Adoption Assistance. This policy looks at the conditional factors for adopted children that are taken into consideration in order for their families to qualify for Adoption Assistance. Previously the required qualifications regarding the “Age of Child” was the child needed to be 12 years of age. It was changed to 6 years of age in order to open-up the possibility of Adoption Assistance and support being available to additional families. To reference policy in its entirety, please see Attachment 38.

PPM PPS Adoption Subsidy forms, PPS 5343 Adoptive Placement Agreement, PPS 6115 Eligibility for Adoption Assistance, PPS 6140 Non-Recurring Adoption Assistance Agreement and PPS 6130, Adoption Assistance Agreement have all been translated into Spanish and will be ready for posting with the new July 1st, 2021 policy updates.

Kansas is exploring the possibility of utilizing an Adoption Subsidy Payment Tiers System as opposed to the current singular method of employing negotiation in determining subsidies. We are researching the financial impact and feasibility of the possibility to do so. Many states assistance rates are equal or close to family foster care rates. While in comparison some state’s adoption assistance payments are significantly lower than the foster care rate.

In April 2019, several DCF Adoption and Foster Care PPS and Regional staff attended the Capacity Building, Center for States’ webinar entitled: “Negotiating Adoption Subsidy: State Adoption Managers Webinar.” Several professionals presented information concerning their own state’s practices in providing Adoption Subsidies to adoptive families and the efforts in overall reducing the financial obstacles to adoption. Furthermore, there was discussion about encouraging adoption from foster care and the best way to help families obtain adoption assistance and other financial supports for which children may be eligible. Trends show the more support families have can effectively reduce the number of overall adoption disruptions that occur.

DCF staff attended the Adoption Call to Action in October 2020 to meet with federal and other state partners. As part of this, DCF ensured the Adoption Exchange for KS was also in attendance and able to participate in the development of a goal. The identified goal was to utilize the Family Finding model for youth referred to the Adoption Exchange and were without an identified resource. As per DCF policies, youth whose parental rights are terminated and are without an identified resource are to be referred to The Adoption Exchange within five days of the termination of rights. From there staff at the exchange are to handle recruitment for youth. To go beyond traditional recruitment efforts, The Adoption Exchange staff noted the ways the Family Finding model would benefit older youth who have been removed and isolated from biological family and other supports by engaging and connecting these youths when possible. DCF has encouraged The Adoption Exchange to utilize Family Finding to pursue permanency for youth referred to them. Additionally, DCF staff set the goal of utilizing this model to help other youth identify and reengage with their support network. Efforts to use this model for youth with terminated parental rights in group homes, PRTFs, QRTPs, and other agencies are underway though a coaching model to help staff undertake this approach. DCF continues to implement this model at every level and work with an implementation team to ensure success.

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.

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:

- 1) 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.

As of April 2021, DCF has approximately 8 children in custody who were previously adopted internationally. SFM reported 1, KVC reported 5, Cornerstones of Care reported 2 & TFI reported none.

The following is additional information on the 8 children:

Case Management Entity / Date of Referral	Child's original country of origin	Original agency who handled the Adoption	Permanency Plan for the Child	Reason for the disruption or dissolution
KVC child 1 (July 2020)	Nigeria	Unknown	Reintegration with adoptive parent.	Child's behavior and mental health struggles.
KVC child 2 (Sept. 2018)	Russia	Catholic Charities in Asheville, NC	APPLA: Working with youth on graduating and developing a transition plan.	Parents refused to pick youth up from acute upon discharge. Allegations of emotional abuse and mom reported youth threatened to kill them and they did not feel safe having youth come home along with some other concerning homicidal statements.
KVC child 3 (Sept. 2019)	Vietnam	Florida Home Studies and Adoption/ Adoption and Beyond	Reintegration with adoptive parents.	Parents refused to pick youth up after having been in PRTF at TLC for over a year. Parents reported significant mental health concerns,

				and dangerous behaviors beyond their control.
KVC child 4 (Nov. 2019)	China	Unknown	APPLA (previously was reintegration with adoptive mother.)	Youth was removed through JV case due to mom not allowing youth to come home from JDC.
KVC child 5 (Nov. 2018)	Guatemala	Special Additions, Inc.	Adoption	The youth was removed due to mental health needs and behaviors.
SFM child 1 (March 2016)	Peru	Villa Hope	APPLA (previously adoption)	The adoption dissolved due to physical abuse by the adoptive parents.
Cornerstones child 1 (2020)	Haiti	Unknown	Reintegration currently but is expected to change soon.	The adoptive parents are career military. They just dropped him off in Atchison and took his twin sister to France when they were stationed in Naples.
Cornerstones child 2 (2020)	Bulgaria	European Adoption Consultants	The adoptive parents are working on relinquishing their rights and refuse all contact with the child.	The adoptive parents left the child with a family friend in Kansas, then left the state.

Services for Children Under the Age of Five

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 2021, PPS continues to work 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.

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 has a developmental or emotional/behavioral need, the CWCMP refers a childbirth to age 2 years to the Infant-Toddler or Tiny-K program for further assessment. Children 3 years and above are referred to their local school district's IDEA Preschool Program. Head Start/Early Head Start programs have policies which 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 Kansas statewide data system, FACTS.

Statewide	SFY 2015	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021
	Jul. 14 - Jun. 15	Jul. 15- Jun. 16	Jul. 16- Jun 17	Jul. 17- Jun 18	Jul. 18-Jun 19	Jul.19- Mar 20	Jul. 20- April 21
Percentage of children in out of home placement under the age of 5	32%	30%	30%	30%	29%	28%	33%
Of those the percentage placed with relatives	40%	38%	39%	38%	38%	40%	44%
Of those the percentage with 2 or fewer moves while in care.	97%	96%	95%	94%	76%	78%	98%
Percentage of children awaiting adoption under the age of 5	26%	23%	23%	23%	20%	17%	19%
Percentage of children on the AdoptKSKids website under the age of 5	2%	0%	4%	4%	5%	2%	4.5%

Kansas DCF has prioritized placement stability for all children in out of home care. The Placement Stability Summit was held in late July and will have another meeting in late August to further define action steps related to achieving stability for children. Data analysis is on-going, looking at demographics and rate of moves and will be further defined through the Placement Stability group. It is expected to see a decline in the percentage of children on the AdoptKSKids website will show a decrease as the percentage of children awaiting adoption decreases.

CAK, through a contract with DCF, provides and supports ongoing training for foster parents. Some of the training topics available for foster parents 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



In SFY 2019, the University of Kansas School of Social Welfare partnered with the DCF, Haskell University, SFM, 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. KSNAF (Kansas Serves Native American Families) will continue for another two years. KSNAF is in operation on all four federally recognized reservations in Kansas. This includes Prairie Band Pottawatomie Nation, Sac and Fox Nation of Missouri in Kansas and Nebraska, Iowa Tribe of Kansas and Nebraska, Kansas Kickapoo Tribe. Currently, KVC Behavioral Healthcare is overseeing this program and assisting with the continued implementation. Prior to COVID-19, KVC was developing a working relationship with another reservation, and developing a group in Lawrence apart from the Haskell Indian Nations University Campus. KVC was working with the Kansas City Indian Center. It is anticipated these efforts will resume in the future as restrictions are lifted.

In SFY 2020, DCF developed policy stating any child under the age of one, who is identified in a maltreatment or family in need of assessment report, shall be referred to a Parent Skill Building program. Parent Skill Building programs include but are not limited to Infant-Toddler Services or Home Visitor programs. The PPS practitioner shares information with the parent regarding parent skill building programs in the community. A referral is made to the program the parent chooses. The referral is made due to the age of the child. The child does not have to be an alleged victim of abuse/neglect for a referral to be made.



In fiscal year 2021, 19 DCF staff attended the 2-day Safe Sleep Instructor (SSI) training hosted by the Kansas Infant Death and SIDS Network (KIDS). The goal of the training was to educate instructors on SIDS and other causes of sleep-related infant death, the recommendations of the American Academy of Pediatrics (AAP), and how to address challenges to implementing safe sleep (such as cultural standards). Once trained, SSIs are prepared to present Safe Sleep

Community Outreach Training, how to facilitate a Community Baby Shower/Crib Clinic, access safe sleep resources, and collaborate with other SSIs.

The Safe Sleep curriculum educates anyone who has contact with infants about unsafe sleep environments which lead to suffocation, strangulation, entrapment, or Sudden Infant Death Syndrome (SIDS). Sleep-related deaths are the third leading cause of infant death in Kansas.

The new DCF Safe Sleep instructors now educate other professionals and hold community baby showers to promote sleep safe practices for infants across the state.

At the end of fiscal year 2021, DCF will have a total of 39 active SSIs. Through combined efforts of the SSI's, 1,809 professionals at DCF, CWCMP staff, and other community partners across the state have completed a two-hour virtual course on safe sleep and reducing sleep related infant deaths. The goal of the agency is to train all DCF staff in Safe Sleep practices and partner with other community agencies to host Community Baby Showers for expectant mothers and their family members.

DCF	Cornerstones of Care	DCCCA	KVC	Saint Francis Ministries	TFI Family Services	Total
1409	22	50	76	88	164	1809

See Attachment 24 DCF Training Plan 2021 for more information about Safe Sleep training.

Kansas also implemented Family First October 2019, many of the selected programs serve children under the age of five. See Attachment 32 for list of providers who serve children under the age of five.

Efforts to Track and Prevent Child Maltreatment Deaths

The FFPSA amended requirements 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 reported to NCANDS.

Kansas Department for Children and Families (DCF) Critical Incident Protocol is a process for reporting, reviewing and documenting the Division's response to immediate significant events involving a child. The purpose of this process is to take a closer look at circumstances surrounding critical incidents, including the Division's initial response to the critical incident and prior Division involvement with the impacted family, with the goal of identifying systemic issues, agency practices, or areas of need which, if addressed through policy or practice, may improve the Division's effectiveness moving forward.

In July 2019, a revised policy of Critical Incident Response Protocol and information triage team was implemented. Regarding fatalities, when a child death occurs in Kansas and DCF either becomes actively involved in the event or had contact with the family within the last three years, the Critical Incident review process is initiated.

As set forth in policy, the DCF Administration Critical Incident team receives initial notice of child fatalities through the Kansas Protection Report Center or regional practitioners who become aware of a fatality. The Critical Incident team receiving initial notice are comprised of a dozen Program Administrators and Deputy Directors with significant family and child well-being experience. The team reviews the initial notification of the child death event and the agency's critical event administrator initiates a triage request.

Within one half workday of the initial notice, a triage approach is activated, and preliminary assessment report completed by a designated staff and provided to the Secretary, Director of Communications and General Counsel. The purpose of the preliminary assessment triage is to provide information on family history known to the agency to determine if further review is warranted or would be helpful for continuous improvement. Factors influencing a decision for further review set forth in policy include but are not limited to manner of death, agency history, and request of the Secretary.

If circumstances indicate further review is warranted, the critical event administrator contacts the assigned front-line practitioner and supervisor for their experience. This step of review informs systemic change by supporting and obtaining the perspective of child protection staff who have worked with, and have knowledge of, the family. The child protection staff share their experience with the trauma of a child death, how agency practices impacted their work and offer feedback to in the process to assist with future policy review and development. In addition to the conversations with staff, the event reviewer provides their own observations as a reviewer gained regarding impact or implications to policy, practice or partner engagement.

The information gathered during review the review including conversations with affected practitioners is shared with Secretary Howard and other members of DCF Administration. These conversations have led to implementation of program assistance and regional support to help child protection staff and their supervisors serve alongside families. One example of continuous improvement gained from these reviews

was the need to support awareness of safe sleep. Our efforts to support safe sleep prompted partnership with KDHE Kansas Infant Death and SIDS Network (KID&S), the certification of 25 DCF employees as safe sleep instructors in September 2019. In September 2020, 13 DCF staff attended a two-day Safe Sleep Instructor (SSI) training hosted by the Kansas Infant Death and SIDS Network (KIDS). Seven additional DCF staff will complete SSI training in May 2021. A recent contract to procure and keep in ready stock KDHE endorsed Cribs For Kids® bedding for families with infants served by DCF. In addition, insights gained from the review process informed a policy to refer all families with infants to an appropriate DCF or community service tailored for parent skill building or infant services.

Kansas uses data from FACTS to report fatalities to NCANDS. Maltreatment findings recorded in FACTS regarding child fatalities are made from joint investigations with law enforcement. The investigation from law enforcement and any report from a 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 establish citizen review panels in order to receive funding for child abuse prevention services. The State Child Death Review Board (SCDRB) serves in the capacity as one of three Citizen Review Panels in the State. The SCDRB 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, DCF records, school records, media reports, obituaries, and other relevant documents. The SCDRB meets monthly. The board members consist of members from the Attorney General's Office, Kansas Bureau of Investigation, DCF, KDHE, Commissioner of Education, State Board of Healing Arts, Attorney General advocacy groups and Kansas County District Attorney Association.

Since 1964, the SCDRB has reviewed 11,666 child deaths in Kansas. In 2018, Kansas had 414 child fatalities. The SCDRB completes an annual report providing recommendations to the state of Kansas to prevent child deaths. Please see Attachment 39 for the State Child Death Review Board Annual Report 2019. See Attachment 39.1 Director's Response SCDRB 2020.

Child fatalities reported to NCANDS are child deaths as a result of maltreatment. The SCDRB completes a review after all 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 SCDRB.

The SCDRB 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 SCDRB reports indicate a need for services in the prevention of Sudden Death Syndrome and sleep related deaths, an increase and access to affordable, high-quality childcare, and enhanced training and access to appropriate information for family and child well-being professionals. Contributing factors for prevention indicated the need for prenatal care, services for

substance use including drugs, alcohol and nicotine. Education and knowledge for proper supervision, safe environments for safe sleep, were recommended regarding sleep related deaths.

Kansas child protection policies include provisions or categories of families in need of assessment which creates a challenge in understanding the impact of caregiver behavior on predicting occurrence or recurrence of serious injury and fatality.

DCF began a Safe Sleep campaign in SFY2020. Please see previous section, Services for Children Under the Age of Five, for an explanation of the Safe Sleep initiative in Kansas.

In its most recent report the State Child Death Review Board, on page 66 of Attachment 39, encourages enhanced training and appropriate information for family and child well-being professionals. There was a concern noted regarding the flow of all information to all necessary persons, specifically how all available information should be reviewed in its entirety for repeated reports of similar behavior. History searches are required in the policy and procedure manual. The purpose of the history search is to inform comprehensive assessments, case decisions and worker safety. The history may inform risk and safety decisions for the child, decisions for controlling safety interventions, protective actions and services for the child and family.

When a report has been assigned as abuse or neglect, excluding non-family/unregulated caregiver and facility assignments, PPS staff shall complete a search for DCF, criminal, and sex offense history of all care givers and the alleged perpetrator. Documentation of history searches shall clearly state the name of the person searched, the date the search was conducted, the database or website searched and what the search yielded, including if no history is found. Prior to conducting interviews, the assigned CPS specialist shall review the history searches for indications of safety and risk concerns for the child. The CPS specialist shall determine if the history is potentially relevant to the current situation or if the history presents ongoing risk/safety, such as, a developmental disability or long-term pattern of domestic violence or substance abuse which needs further assessment. The CPS specialist shall include potentially relevant history, in the current investigation and assessment activities (interviews, observations, etc.) to gather information from the child and family regarding how the family is currently functioning/dealing with the risk/safety concerns identified. History which presents ongoing risk/safety concerns shall be reassessed in the current safety/risk assessment.

Kansas is working on ways to assist law enforcement in obtaining information from DCF when responding to a home involving children, domestic violence, or any situation putting children risk. As a part of an Interagency Agreement with law enforcement in Wichita, DCF has developed a sharing of systems to give officers current and past knowledge of cases allowing for a more thorough assessment of a situation requiring emergency response.

The Interagency Agreement between DCF and Wichita Police Department and Sedgwick County Sheriff's Office provides funding to implement three Community Support Specialist positions in Sedgwick County Kansas. The Community Support Specialists coordinate with officers, receive referrals for families and provide education on community and public health programs, safe sleep education, parent skill building, mental health and/or substance use services and similar safety network supports.

Wichita Coalition for Child Abuse Prevention The Wichita Child Abuse Fatalities Community Response Team, now known as the Wichita Coalition for Child Abuse Prevention (WCCAP), was formed to create and carry out prevention initiatives as a community response to the cluster of eight child abuse fatalities in Wichita identified by the Wichita Eagle newspaper in 2008. Their mission is to empower organizations in Wichita

to create an effective system to prevent child abuse and neglect. Work groups were formed to develop strategies to address issues identified in data related to the fatalities which was compiled by the Wichita Police Department.

CAPTA funds are utilized in this collective impact group. The group has 130 representatives from 60 organizations representing a broad array of sectors. Representatives include government agencies, social service agencies, law enforcement, universities, school districts, neighborhood associations, faith-based agencies, businesses, funders, hospitals and community and family representatives involved in the child abuse prevention network. In FY2020, DCF increased funding for WCCAP to form new workgroup on Child Care Availability. This group was formed to address the need for affordable, high-quality childcare in response to incidents of child abuse and child deaths when children are left in the care of persons who are unprepared or unable to care for them. This group continues to work toward identified objectives in SFY2021.

In May 2021, The Kansas Legislature passed House Bill 2158, commonly known as Adiran's Law. This bill includes establishment of the Legislature's joint committee on child welfare system oversight, granted confidentiality of state child death review board documents and exempted the caregiver of a child in out-of-home foster care from the state's 20-hour-per-week work requirement.

As of this writing, DCF does not have a written comprehensive plan for the prevention of child maltreatment deaths, but the implementation of the Kansas Practice Model is designed to enhance the response, assessment and safety of all children who come to the attention of DCF.

Kansas continues to be excited and encouraged with the development and implementation of the Kansas Practice Model (KPM), which was implemented statewide in calendar year 2020. The KPM provides a consistent framework for engagement, safety planning and decision-making using family voice, practitioner skills, tools of defined practice approaches and policy, which begins at the start of the relationship working alongside family, children and youth. In January 2021, DCF began discussion with The Center for States to develop a messaging plan to encourage more family engagement and adherence to the KPM. Currently the plan is being designed and it is anticipated implementation will begin the Summer of 2021 and through the fall.

In SFY 2020, Kansas made profound systemic and practice improvements to become a family and child well-being system focused on safety and prevention. Kansas has continued efforts to ensure child maltreatment reports were assessed timely. To prevent children's entry into foster care, Kansas overhauled the service delivery model for in-home family preservation services, forged new partnerships to begin offering Family First Prevention Services and developed targeted prevention strategies through the Kansas Strong project. Kansas enhanced safety and risk assessment through incorporating TDM meetings and implementing Kansas Practice Model.

CARES Act Funding

The Kansas Department for Children and Families (DCF) is utilizing funding allotted as under the CARES Act for:

- Partnering with child placing agencies, residential facilities and child welfare case management providers to cover costs for supplies and/or services purchased to support your agency and/or those children and families you serve in ongoing efforts to further prevent, prepare for, and respond to the coronavirus pandemic.

- Purchasing computer equipment and software to allow for DCF staff to safely work from home during the pandemic.
- Virtual Training Equipment

C.5.b. MaryLee Allen Promoting Safe and Stable Families, Title IV-B, subpart 2 Service Decision-Making process for Family Support Services

DCF utilizes Promoting Safe and Stable Families (PSSF) funds for prevention, family support, time-limited family reunification and adoption support programs. 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 family and child well-being 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 family and child well-being agencies when choosing service providers. When selecting a family and child well-being agency to provide family support services, the review team includes both regional and administrative staff. The proposals are evaluated for: 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 23%. Please refer to the Attachment 45 CFS101 IVB subpart 2 for estimated expenditures.

Title IV-B, subpart 2, Promoting Safe and Stable Families 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 CWCMPs 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.

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 CPAs to provide these services. In October 2019, DCF began 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. This was an increase in two additional agencies providing services, as compared to just two agencies in the last fiscal year.

The four contracted agencies, also known as CWCMPs include KVC Kansas (KVC), Saint Francis Ministries (SFM), Cornerstones of Care 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. DCF recently increased the goal for the CWCMPs for FY21 to strive to have 50% or more of children in out of home care be placed with a relative. The SFY20 goal was 29%, so that is a 21% increase in the performance goal.

In addition to these four contracted agencies, DCF entered into grants for each CPA in Kansas who provides sponsorship and support of foster homes throughout the state. This was done to ensure all agencies had a standard payment agreement and process as DCF took over the reimbursement of costs for foster families. DCF developed a standardized rate structure all agencies follow and provides updates as necessary. This process has further strengthened DCF's relationships with the CPAs in supporting foster families and sharing the goal of timely reunification.

DCF has developed several policies to help further the goal of reunification and engagement between the biological family and foster family. One example is the Initial Family Meeting (IFM) which 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 IFM Service Plan was also developed, in consultation with the family, so reintegration efforts may begin without delay.

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. During the COVID-19 crisis, DCF worked alongside the CWCMPs to ensure Icebreaker Conversations continue virtually either through video or phone contact to ensure physical distancing can be adhered too while beginning the initial work of reintegration. Additionally, CWCMPs were encouraged to train new onboarding staff during the same period to have virtual training on Icebreaker Conversations so new staff are familiar with the processes.

In March 2021, Kansas began working with the Capacity Building Center for States to receive support and resources in enhancing the focus on family and prioritize engagement and empowerment of children

and their families when involved throughout the family and child well-being continuum. Currently a small re-implementation workgroup has been developed, which will meet on a more frequent basis to strategize ways to reduce barriers, capture better data and other pertinent items needed in ensuring Icebreaker Conversations continue as intended and needed throughout the state. This smaller workgroup will then take items back to the larger monthly workgroup to share information, solicit feedback and help message solutions identified to all agency stakeholders.

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 moved forward with 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. In September 2020, Kansas opted to pilot virtual RPRs beginning with two of the four CMPs covering 5 areas. The RPRs were finished in November 2020. The virtual RPRs received favorable feedback from the participants as the RPR allowed for the availability of participants as well as others who wanted to observe without travel time or expense. Kansas is scheduled to complete RPRs with the last two CMPs in May 2021.

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 (56.7%) or relatives (40.8%). 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.

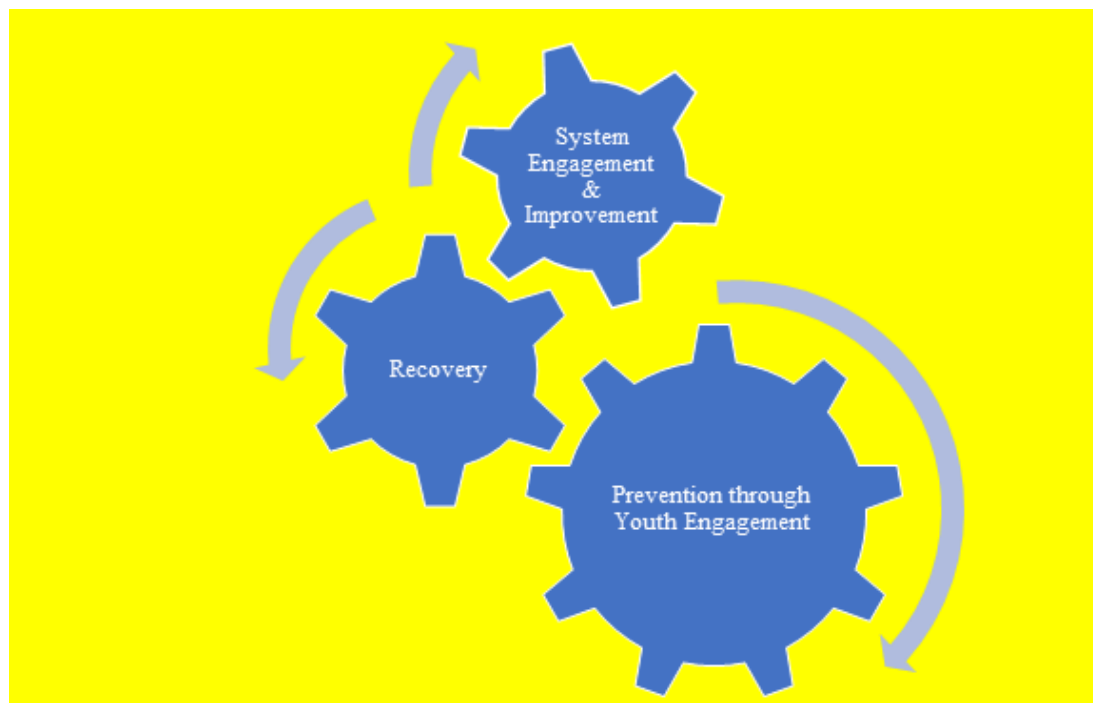
The CWCMP provides case management and permanency services throughout the duration of the case. Aftercare supports, and services are also provided to families for six months when children achieve permanency through reintegration, adoption, permanent custodianship or APPLA. Aftercare services are designed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

DCF continues to focus on placement stability rates and work closely with the CWCMPs and CPAs to reduce this rate to at or below the federal standard. As part of these efforts, DCF continues to work on implementing Family Finding efforts and are seeking out ways to incorporate this model into all levels of practice. Currently there are two virtual bootcamps scheduled over the summer of 2021. Additionally, all CWCMPs have Family Finding trainings for their staff. This effort paired with the implementation of TDM positions with each CWCMP, it is anticipated the placement stability will continue to improve while the rate of children brought into out of home care decreases as well.

Special Response Team

The newly formed Special Response Team (SRT) within Prevention and Protection Services (PPS) is a part of the Youth Programs unit that includes the Chafee Foster Care Program for Successful Transition to Adulthood and the Education and Training Voucher (ETV) Program, Crossover Youth, Human Trafficking Prevention and Initiatives, and the SRT. This newer subdivision has assisted the agency in creating a stronger youth services array. The SRT assists with the recovery of youth who have run away from foster care or are absent from their placement without permission; the prevention of runaways; and system engagement and improvement. The Response Team Specialists (hereafter referred to as Specialists) are comprised of DCF and foster care provider staff. These dedicated positions are non-case carrying and are located across the state. DCF Administration and each foster care

provider have assigned Specialists that comprise a team of twelve. Two additional members were added for enhanced coverage in Wichita and Western portions of the state during State Fiscal Year (SFY) 2021.



Recovery Process

The risks of running away and missing from placement are extremely high for youth placed in foster care. The agency recognizes every effort must be taken to ensure the youth is recovered as swiftly as possible to mitigate the dangers of being on the run. At the backbone of operations is a firmly held value that one youth on the run is one too many.

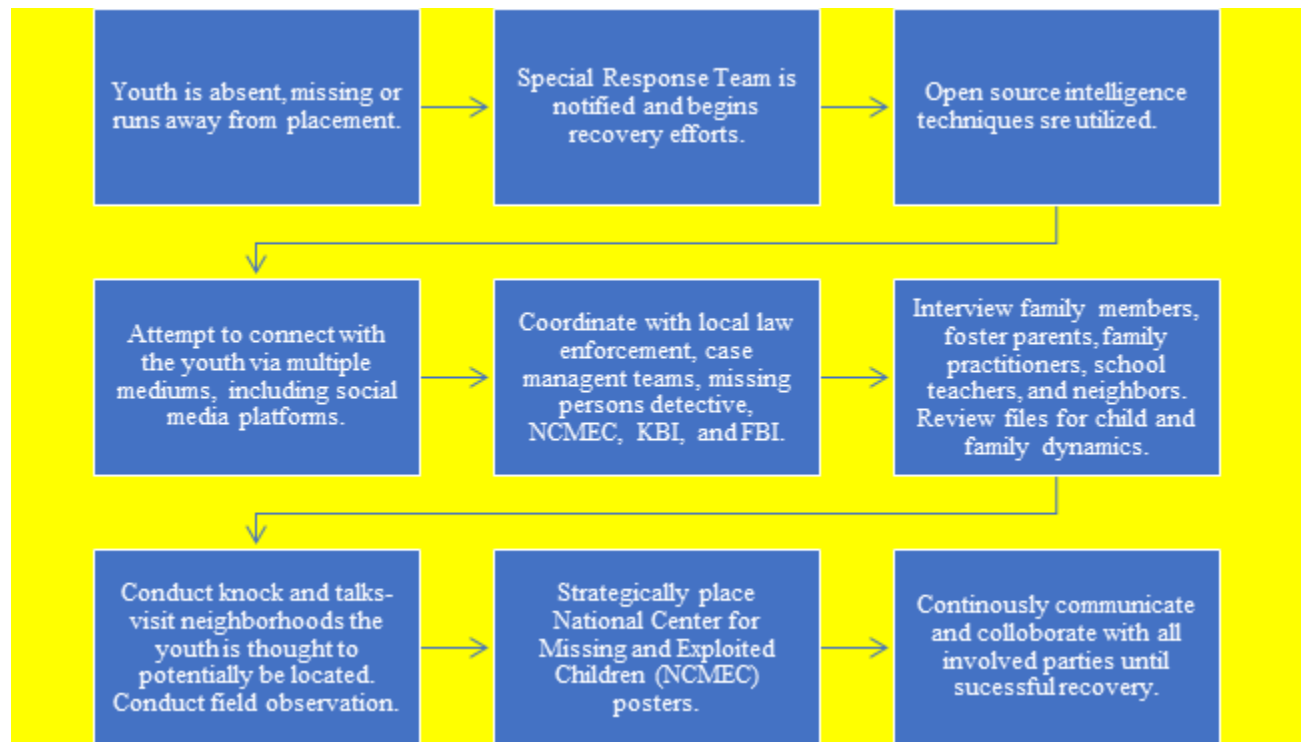
When a child in the custody of the Secretary is missing from an out of home placement due to running away, being abducted, or missing for an unknown reason, the foster care provider shall report the missing child to the SRT by sending an email to DCF.SpecialResponseTeam@ks.gov within two hours of being missing or absent. These notifications are received by the entire team, triggering recovery efforts. Recovery efforts occur as a collaborative and collective statewide team, with foster care providers taking the lead for youth from their catchment areas.

At the core of the team's work is the provision of relational support and development of a youth's lifetime network of supportive connections. Upon notification of a run/absence, the Specialist immediately reaches out to the youth via text or phone call, if applicable. A search for the youth's social media profiles is completed on Snapchat, Facebook, Twitter, Instagram, and other lesser used platforms. Attempts are made to establish a line of communication with the youth. If one team member struggles to establish this connection, other team members are pulled in to intensify efforts. When communication is established, Specialists approach connection in a supportive and empathic manner, attempting to garner details of what prompted the running episode while utilizing strategies learned from Motivational Interviewing (MI) and Cognitive Interaction Skills (CIS). Many youths are running to something or someone and/or running away from situations. Staff authentically engage youth on the youth's level, listening and offering support. After

trust has been established, Specialists work with the youth to explore past relationships or connections that made the youth feel loved and safe, and brainstorm possible placements will better meet their needs while supporting their well-being. Specialists have been trained to evaluate potential placements, conduct walkthroughs, complete needed paperwork for background checks and make recommendations to essential parties for placement.

Coordinated Efforts

Weekly statewide staffing occurs involving the entire SRT, DCF, Regional and Provider leadership, DCF Regional Foster Care Administrators, Foster Care Liaisons, Case Management teams, Child Protection Specialists, and the Anti-Human Trafficking Program Manager. These staffing’s assist in ensuring multiple service delivery lines are communicating ongoing efforts and sharing vital information. This allows for a free flow of ideas and brainstorming of new efforts and suggestions.



External Collaboration

The Response Team Specialists collaborate with vital community partners such as local law enforcement, the Kansas Bureau of Investigation (KBI), Federal Bureau of Investigation (FBI), Kansas Sheriffs’ Association, Kansas Association of Chiefs of Police, Kansas Peace Officers Association, Wichita Children’s Home Street Outreach Services (SOS), National Safe Streets Network, and National Center for Missing and Exploited Children (NCMEC). Recovery of Kansas children has focused on utilizing multiple social media strategies, open source intelligence, effective partnerships with the law enforcement community, and strong fact-finding skills.

During SFY 2021, DCF Youth Programs connected with NCMEC’s newly formed Child Sex Trafficking Recovery Services Team (RST). The RST is being created to assist family and child well-being professionals, law enforcement, and other multidisciplinary team members in developing intentional, victim-centered, and trauma-informed recovery plans for children missing from care who are suspected or

confirmed to be victims of child sex trafficking (CST). The team will consist of four Resource Specialists who will be assigned to a multi-state area of responsibility and become experts in all of the CST-related laws, policies, and resources in their states. A CST Resource Specialist has been assigned to Kansas and began active collaboration efforts in March 2021. The partnership has resulted in the NCMEC RST joining efforts with Kansas to further develop Kansas' Recovery Plan for youth with recurring running behaviors and will assist with improving services for children at risk of or involved in human trafficking (HT).

The DCF Deputy Director of Youth Programs and the Anti-Human Trafficking Program Manager are both members of the Kansas Attorney General's Human Trafficking Advisory Board (HTAB). The HTAB was established in January 2010 to explore the issues of HT in the state of Kansas. In 2013, the Kansas Legislature recognized the Board as the state's official Human Trafficking Advisory Board. This team of advisors is composed of law enforcement personnel, prosecutors, court personnel, advocates, victims of human trafficking and other pertinent parties who have expertise in this field. The HTAB meets monthly in a virtual capacity.

The DCF Youth Programs unit has been invited to join the Adult and Youth Services Workgroups, both sub-committees of the Kansas Attorney General's HTAB. The committee met bi-weekly during SFY 2021 to discuss improvement of services in Kansas for adult and child survivors of HT. The sub-committees met bi-weekly to develop recommendations addressing areas of opportunity for improvement in Kansas.

The DCF and KVC Special Response Teams were asked to present to the Kansas Attorney General's HTAB during SFY 2021. Program highlights were shared alongside recovery and prevention work.



Vital Lifetime Networks of Connection

Prevention of youth’s running behaviors has concentrated on building supportive relationships with the youth and assisting with development of a lifetime network of connections. Team members focus on authentic youth engagement and forming supportive partnerships with the youth. The SRT has focused on continued connection with recovered youth and consistently being available to them while filling system and relational gaps.

After recovery, Specialists help advocate for youth to become connected to their families, schools, and communities and to experience the normalcy of daily living while placed in care. A youth’s activities, sports, hobbies, communities of faith, volunteering, and creative outlets further develop the youth’s network of connections while enhancing their resiliency. Specialists have utilized calendaring, mobility mapping, connectedness maps, life trajectory techniques, and eco mapping as tools for network development.

Prevention

Specialists continue to provide relational support and advocacy for youth after recovery. This includes celebrating small successes and maintaining regular contact until additional connections are established. Specialists model appropriate behavior for youth and refer youth to community resources.

The team has been implementing the Let’s Talk: Runaway Prevention Curriculum. The curriculum is evidence-based with 14 modules intended to educate youth about alternatives to running away and to build life skills so youth can resolve problems without resorting to running away or unsafe behavior. The materials are intended for use with youth ages 10 to 20. The Specialists have focused on initial

implementation of Module 6: Runaway Reality, Module 7: National Safe Connections, and Module 12: Sexuality and Sexual Orientation.

All team members received virtual training in Mental Health First Aid for Youth during SFY 2021. This curriculum assists the Specialists in responding more comfortably to managing crisis situations and builds mental health literacy, helping to identify, understand and respond to signs of mental illness more effectively in a trauma-informed manner.

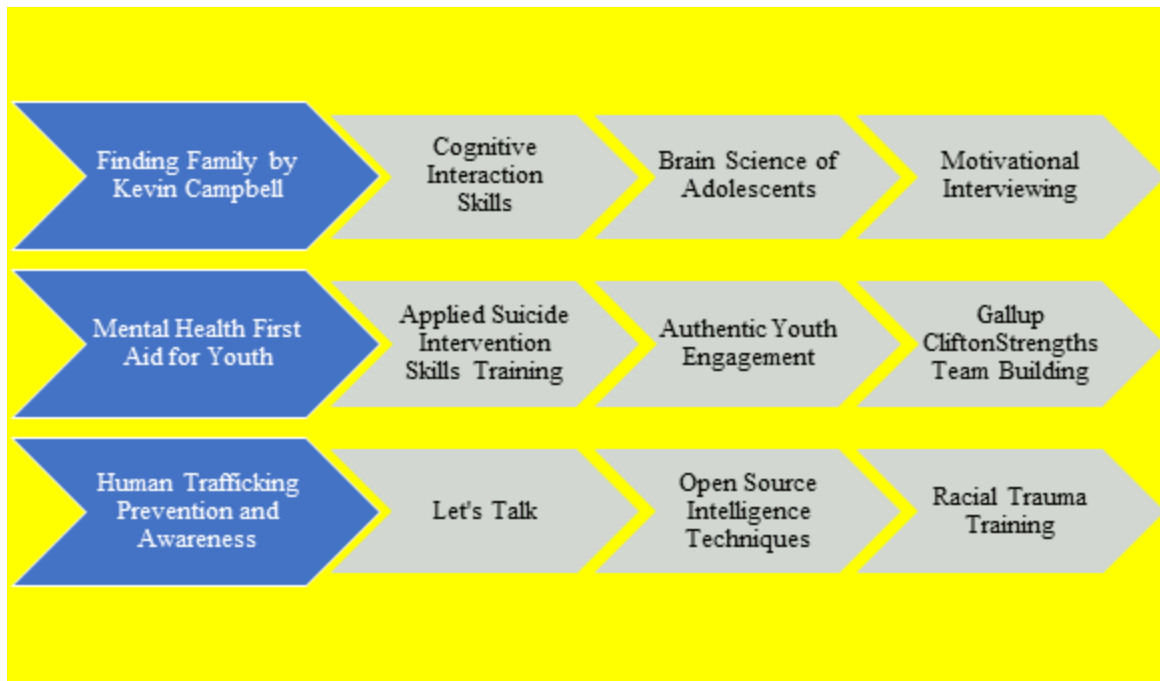
The DCF Administration Response Team Specialists collect demographic information, various identified risk factors and additional data components feed into the DCF Youth Recovery Report SFY 2021, Attachment 40. These data components are being utilized to analyze trends related to youth on the run or absent from placement. The identified trends will help the agency build a methodical, data-driven prevention effort; develop future runaway risk assessments; and develop new program services. This data will also be used to identify areas of opportunity for system improvement.

Training

The program is utilizing strategies from Family Finding by Kevin Campbell, Motivational Interviewing, Let's Talk, Mental Health First Aid for Youth, Cognitive Interaction Skills, Human Trafficking Prevention and Awareness, KBI Open Source Intelligence (OSINT), Clifton Strength's Team building, and Brain Science of Adolescents trainings to improve outcomes for Kansas youth.

On March 9, 2021, over 60 staff across the state attended "Death By A Thousand Nicks- Healing the Wounds of Racial Trauma." This training was identified as safe space and focused on education and exercises about racial trauma and equity. Several DCF staff members bravely shared their personal stories about racial trauma they have experienced. The discussions through the training were heavily focused on intergenerational trauma DCF consumers may experience and tools staff can use to identify this. Another topic discussed was the uncomfortable conversations about race that DCF staff may need to have with foster families, when necessary. The training assisted staff in being able to identify techniques of how to have these conversations in a productive, trauma-informed manner.

The program's training plan will continue to be developed during the upcoming year. Currently, the team meets for ongoing statewide meetings and utilizes seminars, webinars, and guest trainers for further program and professional development.



Immediate Response Team and Human Trafficking Assessments

During SFY 2021 the Anti-Human Trafficking Program Manager was realigned into the Youth Program’s unit. This realignment will improve service coordination and fits well into the unit’s work scope. The Anti-Human Human Trafficking Program Manager oversees the work surrounding Human Trafficking Prevention and Initiatives to include the Immediate Response Team.

In 2014, the Kansas legislature passed the first human trafficking statute in the state, K.S.A. 21-5426. The legislature also passed K.S.A. 38-2287, which requires the Secretary of DCF to conduct a special assessment when a child is in the custody of DCF and has been subjected to human trafficking or commercial sexual exploitation. Statute K.S.A. 38-2287(a) states when a child is in the custody of the Secretary, and the court believes the child was subjected to human trafficking, the court may request an assessment be conducted to make appropriate treatment and service recommendations to the court. Statute K.S.A. 38-2287(b) requires any law enforcement officer who takes into custody any child who they believe to be a victim of human trafficking, to contact DCF to begin an assessment to determine immediate safety, placement and treatment needs. To comply with these statutes, DCF, along with foster care providers Saint Francis Ministries (SFM) and KVC, formed the first Rapid Response Teams (RRT) and developed the Rapid Response Assessment. DCF, together with the Kansas Attorney General’s Office, developed the Kansas Law Enforcement Protocol as a guide for Kansas law enforcement on how to request an assessment from DCF.

In 2019, DCF and foster care providers SFM, KVC, TFI and Cornerstones of Care (COC) decided to evaluate and revise the assessment. They renamed the teams the Immediate Response Team (IRT) and added the additional two teams for the new providers, TFI and COC. The Immediate Response Assessment was revised, and a decision was made to develop a new Court Ordered Assessment that is required by K.S.A. 38-2287(a) and was designed to address the long-term treatment and service needs of children who the court believed had been involved in human trafficking. This assessment was required by statute to be a research-based tool; however, before 2019 there was not a tool available that had been researched-based or validated. The teams were able to identify an evidence-based and validated

identification tool from the Westcoast Children’s Clinic in California; the Commercial Sexual Exploitation – Identification Tool (CSE-IT) which was validated in 2019. The Immediate Response Teams decided to use the CSE-IT, in conjunction with their Immediate Response Assessment and the newly developed Court Ordered Assessment.

Human Trafficking Screening Tools

The Kansas Department of Corrections- Juvenile Services (KDOC-JS) has been developing a HT screening tool, the Kansas Juvenile Intake and Assessment Services (JIAS) Screening Instrument, will be used in JIAS throughout the state. DCF has partnered with KDOC-JS in the development of this tool will be given to each child over the age of 10 who is processed through a Kansas JIAS. The tool is presently being evaluated in Shawnee and Johnson Counties, with a plan to expand statewide during Summer 2021. A final version of the tool is not yet available to be included in this APSR, however, a copy of the tool will be attached to the 2023 APSR. DCF will be involved in the implementation and training of this tool to JIAS workers. Once implemented, any positive screens will be followed with an Immediate Response Assessment from the provider in the service area of the JIAS.

Prevention and Human Trafficking Initiatives

The Youth Programs unit has been collaborating with the Human Trafficking Capacity Building Center during SFY 21. Discussion has centered around the need for centralized data collection, evidence-based human trafficking screenings, and assessments. Youth Programs has also joined the National Compendium of State-Run Anti-Trafficking Initiatives and the National Child Welfare Anti-Trafficking Collaborative.

Human Trafficking Training

The Anti-Human Trafficking Program Manager is developing a training curriculum for case management teams on Effective Model for Case Management for Victims of Human Trafficking to include child welfare case management providers, foster care liaisons, SRT and IRT members. This will involve case management specifically related to human trafficking investigations, to include understanding the dynamics of trafficking and assessing and providing appropriate services and advocacy in a trauma-informed environment. This training is planned for SFY 2022.

The Anti-Human Trafficking Program Manager has been developing a training curriculum for foster care grantee TFI, on HT 101 will be provided on June 3, 2021. TFI has requested training surrounding the need of understanding the dynamics of trafficking. This training will be conducted virtually and will be open to any TFI worker.

During SFY 2022, additional training shall be developed to update the HT online training in the PPS Academy.

Training was provided to the Kansas Protection Report Center intake personnel during the summer of SFY 2021 on understanding the dynamics of human trafficking, identification of victims through the intake process from mandatory reporters and the public, understanding the connection between family and child well-being and trafficking, and DCF’s mission statement and response.

Populations at Greatest Risk of Maltreatment

Kansas has used the following information to identify 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, 61 child fatalities occurred between 2013 and 2018 per the U.S. Department of Health & Human Services Children's Bureau (2019), Child Maltreatment 2018 report.
- Children under the age of 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, family and child well-being 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 focus on children under one, involving making referrals to available services and education and information on safe sleep.

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.

Data available from the Kansas Child Death Review Board indicated Sedgwick County has experienced 14 child abuse fatalities since 2014. To amplify collective impact and achieve no child abuse fatalities, Sedgwick County created 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 has implemented Family First and is utilizing funds to provide evidence-based services in Kansas to provide early intervention for children and families with a focus on serving all counties in rural and urban areas.

Kinship Navigator Funding



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 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 family and child well-being agencies than foster families.

Kansas Family Advisory Network is currently using the Ohio Kinship Support Intervention Navigator Model. Ohio has given KFAN all the documents from the Ohio Kinship Model including all forms, training and manuals and has given KFAN the permission to utilize the program and adapt the program for Kansas with the request that fidelity of the program remain intact. KFAN has now transformed the Ohio Program to the Kansas Kinship Navigator Program. A benefit of this program is the forms, assessments and manuals are established and included but so is the required training for supervisors and staff, as well as a Kinship Support Manual for caregivers. In SFY2021, KFAN researched all available local resources to include in the KFAN Kansas Kinship Navigator Resource Guide. See Attachment 41 for KFAN Kansas Kinship Navigator Resource Guide. This guide lists all community services in each county that provide educational, legal, food, clothing, financial assistance, housing assistance, disability services, local DCF offices, and other supports. Families have used the guide tell KFAN it has been useful in finding resources more effectively and in understanding more about how the family and child well-being process works.

The Kinship Navigator's website is <http://www.kfan.org/kinship-navigator-program>. Furthermore, the program's information is located on the United Way 211 website for outreach and referral purposes. The Kinship Navigator program is also listed on the Grandfamilies.org website under Kansas as well.

The current statistics and information regarding the children and kinship families being served under the program as of May 2021:

- A total of 53 families and 124 children received services.
- There are currently 41 active kinship families with 89 children receiving services.
- Currently 40 families are receiving case management services.
- 1 family from Richardson, Texas is consulting with KFAN regarding a relative in Kansas.
- Kinship families have/are receiving services in the following counties: Adams, Barton, Brown, Butler, Douglass, Ford, Labette, McPherson, Montgomery, Reno, Saline, Sedgwick, and Shawnee.
- Referrals were as follows: KFAN staff, TFI, Retired Judge, SWKAAA, Website, Tiny K Early Intervention, Kansas Appleseed, Saint Francis Ministry, by a Friend, Johnson County Mental

Health, DCF, WSU Practicum Student, a Family Member, KFAN Brochure, and self-referrals.

- Kinship families participated in the program's Kansas Kinship Advisory Council, support groups, received free items from the Resource Clothing Closets and Juanita Alexander Food Pantry, and KFAN home and group parent training as well.
- KFAN has two therapists to support the kinship families with in-home therapeutic services. These therapists are TBRI practitioners, and under supervision with Drexel University for the Attachment Based Family Therapy certification and PMTO.

Monthly Caseworker Visit Formula Grants and Standards for Caseworker Visits

Monthly Worker/Child visits are required per Kansas policy and are a part of the contracts with the Child Welfare Case Management Providers (CWCMPs). Worker/Child visits are required for in-home family service and family preservation cases in addition to out-of-home foster care cases. Worker/Child visits start the month the child is referred. For example, if a child is referred in May there shall be a worker/child visit documented in May. The initial Worker/Child visit may occur at the Temporary Custody Hearing or the initial meeting.

The relationship between the CWCMP and child is critical and ensures the child's continued safety at home or in out-of-home placement, ensures developmental needs are met, and the child is maintaining optimal connections with birth family, relatives/non-related kin, foster family and the community. The CWCMP case manager works with the child, birth and foster family on scheduling visits and interactions. The CWCMP case manager gives the child, on a developmental and age appropriate level, information as it affects the child's life. Visits are noted on CWCMP forms which document the quality of the visit, including time spent alone with the child.

At every visit, the CWCMP case manager provides the child, his/her contact information and listens to the child's perspective of how well visits and interactions are going and the child's assessment of how the goals of the case plan are being met. The CWCMP case manager observes the child's reactions to information presented and assesses safety or failure of the child to achieve developmental progress. From these visits, the CWCMP determines when modifications to the case plan are warranted.

Responding to the threat of COVID-19 in Kansas had required some flexibility in worker-child visit requirements (PPM 3237). Specifically, permission was given for many of the worker-child visits to occur "virtually." CWCMPs were informed of a specific code to utilize (WC_VIST) code for visits which occurred via video conferencing when submitting the encounter data to DCF. CWCMPs were also instructed this code was not to be used if a worker-child visit occurred only through phone or audio call. If the visit was unable to be completed in-person or through video conferencing, the reasons and/or circumstances were to be documented in the case file.

To measure frequency, the CWCMPs report each out-of-home monthly case manager visit(s) through encounter codes. Two codes are available: one to indicate the visit took place in the child's residence and one to indicate the visit took place elsewhere. No distinction is made between in state and out-of-state visits, as these both have the same requirement for at least monthly visits. The encounter codes are entered by the CWCMP responsible for management of the case, and each month the results are reviewed for trends and improvements.

Kansas continues to monitor monthly caseworker visits and work with CWCMPs to identify effective strategies to increase performance outcomes.

To ensure the monthly caseworker data is reaching the 95% threshold each month, the Foster Care Program Manager reviews the data monthly and shares with each corresponding CWCMP and

the regional DCF staff. It has been noted recently that initial data pulls show two of the CWCMPs, Saint Francis Ministries and KVC Behavioral Healthcare are experiencing technical difficulties in ensuring data is uploaded correctly upon the first encounter data being received. DCF continues to work closely with these CWCMPs to work through the difficulties and identify errors promptly.

As indicated on the chart below, currently Kansas has a rate of 97% of the monthly caseworker data. Support is being provided to the one Catchment Area, East 3 (KVC), that has not yet met the 95% goal to identify barriers and create strategies to meet or exceed the goal of 95%.

Worker/Child Visit Report

FY-2021	Federal Measurement of Visits made on Monthly Basis - YTD										97%	Goal	95%	
Catchment Area	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep		
West 1 (SFM)	98%	97%	96%	97%	96%	95%	98%	98%	98%	95%				
West 2 (SFM)	97%	97%	97%	98%	96%	96%	98%	97%	98%	97%				
East 3 (KVC)	94%	93%	93%	93%	97%	96%	98%	99%	95%	94%				
East 4 (TFI)	97%	95%	97%	97%	98%	98%	98%	97%	97%	98%				
KC 5 (COC)	94%	96%	98%	96%	98%	96%	98%	95%	97%	95%				
KC 6 (KVC)	97%	98%	97%	97%	97%	98%	98%	99%	99%	96%				
Wichita 7 (SFM)	96%	95%	96%	96%	95%	97%	96%	97%	96%	95%				
Wichita 8 (TFI)	96%	99%	100%	99%	99%	98%	99%	98%	98%	95%				

**C.5.c. Additional Service Information
Adoption and Legal Guardianship Incentive Payments**

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.

DCF received an award in FFY2017 award for 365,000 which was budgeted to spend in SFY 2020. It was then used to fund the Adoption Accelerator positions in a grant with the Child Welfare Case Management providers. The entire focus of these positions is to identify and eliminate barriers in the adoption process for children in foster care.

Below is the breakdown on the FFY2017 award amount of \$365,000 and how it is being allocated/spent on the following items:

Adoption Accelerator grants \$285,950

Family Finding Trainings \$136,474

Family Finding Manual \$33,280

Please note the total cumulative amount exceeds the \$365,000 award for FFY17 along with the FFY18 award for \$4,000. DCF also received a FFY19 award for \$1,710,000 from which funds will be drawn as well.

The Family Finding model was developed by Kevin Campbell as an integral component in the approach to working with children in the family and child well-being System. The model supports Signs of Safety, Early Help, Team Based Decision Making and Family Based Care initiatives are proven to be important in working with children, youth and families. The approach provides critical search and engagement tools which both build and strengthen vital and personal connections for a child and their

family. The hope being the more a family is empowered and able to build support and resilience within their own network, the greater the likelihood service will be shorter and more effective. The Family Finding approach encourages families and their supports to take the lead in making decisions for themselves as well as for a child and youth’s safety, well-being and permanence.

DCF has purchased the Family Finding manual, which is intended as a collection of tools, strategies and other materials to support professionals in their efforts to strengthen youth, family and community engagement and participation in situations that involve Family and Child Well-Being, Juvenile Justice and Children’s Mental Health Systems.

Kansas continues to spend the FFY19 award and has received the FFY20 award in the amount of \$2,533,500. The table below details our current spending plans and estimates for these funds.

Adoption Incentive Spending Estimates	SFY 2021	SFY 2022	SFY 2023
Travel and Training	5,000.00	5,000.00	5,000.00
Contracts/Grants	520,926.75	737,706.85	339,766.00
<i>Family Finding Activities</i>	0	150,000.00	150,000.00
<i>Connect Our Kids</i>	5,000.00	10,000.00	10,000.00
<i>Care Portal Expansion</i>	65,000.00	65,000.00	65,000.00
<i>KCSDV Contract</i>	43,230.00	88,966.00	88,966.00
<i>CAK Limited Time Contract</i>	122,104.75	345,040.85	0.00
<i>Kevin Campbell Virtual Bootcamps</i>	50,000.00	50,000.00	0.00
<i>CLARIS Upgrade</i>	221,242.00	0.00	0.00
<i>Fostering Play Training</i>		28,700.00	25,800.00
<i>Placement Stability Innovation Grant Expenses</i>	0.00	500,000.00	500,000.00
Totals	525,926.75	1,242,706.85	844,766.00

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 family and child well-being activities. Kansas chooses to utilize the same Adoption Savings calculation method and procedures for the current FFY as used in its last 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.

In April 2021 the contract for K-PARC was awarded to Foster, Adopt, Connect, Inc. for the service period of July 1st, 2021-June 30th, 2025.

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.

Family Preservation Services

Family Preservation is a service to prevent foster care and is provided to families at risk of foster care. These services are provided through contracts with a Child Welfare Case Management Provider. During SFY2020, new contracts were implemented and the providers each selected evidence-based programming to serve families. Family Preservation works with each family to develop individual case plans and to meet the family's needs. Supports and services are also offered to pregnant women using substances and to families.

State Funded Family First Prevention Grants

Family First provides evidence-based, trauma-informed programs in the required categories of mental health, substance use disorder services, parent-skill building programs, and kinship navigation. These programs seek to strengthen families and prevent children at risk from being removed from their home and entering foster care. Seventeen grants were awarded to nonprofit, not-for-profit, and/or for-profit child welfare agencies.

Estimated Timetable for spending unused savings calculated for previous years.

The table below indicates DCF is behind in spending but will spend more than saved beginning in FY22. 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	\$2,716,146
MOE Expenditures by Year *	0	278,750	374,459	1,586,744	1,165,838
Unexpended Adoption Savings	649,090	752,506	1,337,210	502,215	1,550,308
Cumulative MOE Deficit	649,090	1,401,596	2,738,806	3,241,022	4,791,330

STATE FUNDS

Description	FFY 20	FFY 21	FFY 22	FFY 23	FFY 24
Adoption Support Savings	\$3,944,314	\$4,050,810	\$4,152,081	\$4,255,883	\$4,362,280
MOE Expenditures by Year *	3,600,972	3,125,641	6,800,740	6,800,740	6,800,740
Unexpended Adoption Savings	343,342	925,169	(2,648,660)	(2,544,858)	(2,438,460)
Cumulative MOE Deficit	5,134,672	6,059,841	3,411,182	866,324	(1,572,136)

Challenges in accessing and spending the funds.

The identification and development of applicable programs and projects took time to implement in Kansas. Now 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.

Family First Transition Act Funds

DCF Kansas received Family First Transition Act Funds in the amount of \$4,837,702. As of May 2021, \$163,140 of this award has been spent. The table below are the initiatives we plan to spend these funds on within SFY2021 and in to SFY2022.

Initiatives	FY21	FY22
Mobile Response team	\$0	\$1,462,180
TDM with Evident Change	\$63,140	\$625,090
KU Daisy system for Family First	\$100,000	\$200,000
Cover FFPSA Grants	\$0	\$1,000,000
Total	\$163,140	\$3,287,270

A portion of the Family First Transition Act Funds went to two areas for the Family First evaluation team to improve data and enhance the intentions of the Family First Prevention Services Act by including the voice of lived experience.

DAISEY, which stands for Data Application and Integration Solutions for the Early Years, is a shared measurement system designed to help communities see the difference they are making in the lives of at-

risk children, youth and families. It is utilized as a ‘front-end’ system for providers to enter identified data elements required by the rigorous evaluation.

In recognition of the importance of including essential family and youth voice as a central component of Family First implementation and evaluation, the Family First evaluation team is forming a Family First Family Council. Family Council representatives and co-chairs will be compensated accordingly from the Family First Evaluation budget, which is streamed from the Family First Transition Act monies.

The overarching purpose of the proposed Family Council is to structurally integrate family and youth voice into the Family First initiative to ensure authentic engagement across the spectrum of decision making, including: service planning, delivery, and evaluation. The primary goal of this initiative is to ensure programs and services are designed with, and not for, children, youth, and families in Kansas, thus accounting for their needs, priorities, and goals. In order to achieve the intended purpose of the Family Council, this body must be integrated into Family First and family and child well-being program planning and improvement efforts.

The Family Council will be comprised of two parent/caregiver representatives, at least one of whom holds lived experience as a caregiver with children involved with the family and child well-being system (e.g. foster care, family preservation, family services), and one youth or adult representative with lived experience with the family and child well-being system as a youth, per region, for a total of three representatives per region, or 18 representatives statewide. The Family Council will be led by two co-chairs with professional experience as family and child well-being advocates. Co-chairs may be drawn from any region.

Finally, Family Council co-chairs will serve as liaisons to the Kansas Department of Health and Environment Family Advisory Council (FAC) Family Leadership Team, a team comprised of work group chairs, state agency designees, and other key stakeholders whose goal, like the Family Council, is to assure the needs of families and consumers are central to programming. Family Council co-chairs will represent the Family Council as part of the FAC Leadership Team, providing a line of reporting to the Kansas Children’s Cabinet intended to elevate barriers, concerns, and weigh in on decisions related to child and family services.

Family First Transition Act funds also support the development of the new initiative, Kansas Family Crisis Response Services. As described in Item 18, the contract for this program was awarded to Beacon Health Options Inc. to provide management of a centralized behavioral health crisis hotline, screening and mobile response stabilization services to promote coordination and access of community-based services as a deterrent from hospitalization or other out-of-home placements. See Attachment 15 Kansas Family Crisis Response Services.

Team Decision Making (TDM) was able to be expanded to include Placement Stability (PS) TDM statewide due to the financial support received from Family First Transition Act funds. Kansas partners with Evident Change to grow and cultivate the practice of TDM. See Attachment 24 DCF Training Plan 2021 for more information about the phased approach to expand PS TDM to all CWCMP’s statewide.

John H Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program) (section 477 of the Act)

Prevention and Protection Services (PPS) is a division of the Kansas Department for Children and Families (DCF) and is responsible for administering the State’s Family and Child Well-Being 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 youth ages 14 and older in the custody of DCF and the DCF Independent Living (IL) Program serves young adults ages 18 to 26 who were in the custody of DCF, Kansas Department of Corrections-Juvenile Services (KDOC-JS) or Tribal Authority as they transition to adulthood.

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 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, the 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, resource families, 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 DCF Independent Living Leadership Team 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 ages 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 IL and the youth while preparing for the transition from foster care services to self-sufficiency and works to ensure 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 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 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, 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 checking and savings accounts, 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 or the Foster Youth to Independence housing program, 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).

The PPS 3059 My Plan for Successful Adulthood 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 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. The exit interview is used as a method to verify 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 healthcare power of attorney, healthcare 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, healthcare, education, etc. upon leaving the custody of the Secretary of DCF. 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, and the Regional IL email addresses, which youth can contact for IL services anytime until their 21st birthday, or until their 26th birthday for the ETV Program, or for help in finding other resources if they are not eligible to participate in the IL Program.

CWCMPs run annual credit checks for youth ages 14 and older in foster care using the Equifax, Experian, and TransUnion online portals. The DCF IL Program provides credit check training to designated CWCMP staff and assists with resolving credit discrepancies, as needed.

Beginning October 2020, each CWCMP provides up to six months of voluntary Aftercare Services for young adults who transition from foster care custody at age 18 or older. Service provisions vary by provider but may include referrals to the DCF IL Program and other community agencies, access to 24/7 crisis services, and limited access to hard goods. Please see Attachment 42, CWCMP IL Activities SFY 2021 for information on specific initiatives, including Aftercare Services for Aged Out Youth. During SFY 2022, CWCMPs will complete a quarterly report with aggregate data on Aftercare Services. These reports will be submitted to the DCF Foster Care Program Manager and will be shared with the DCF IL Program.

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 agencies, 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 2022 to 2024, the DCF IL Program will continue focusing on developing resources for youth living in rural areas of Kansas, including housing and mentoring opportunities.

The IL Program serves youth and young adults who were in an eligible out of home placement in the custody of DCF, KDOC-JS or Tribal Authority for any length of time on or after their 14th birthday. Eligible youth may receive services 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 PPS 7030 Kansas Independent Living Self-Sufficiency Matrix and develop a PPS 7000 Self-Sufficiency Services Case Plan with the Regional IL Coordinator. This plan is driven by the young person and identifies their 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. 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. See Attachments 42.1, 42.2 and 42.3 for all National Youth in Transition reports.

The Deputy Director of Youth Programs and the IL Program Manager met with the DCF Family First Prevention Services team in March 2021 to discuss how to increase accessibility of Family First parenting supports for young adults participating in the DCF IL Program. Approximately 20% of the almost 750 young adults served by the Independent Living Program are pregnant and/or parenting. Family First intakes are currently processed through the Kansas Protection Report Center. This process can deter young adults with lived experience in the foster care system from engaging in supports that are associated

with foster care. The group discussed the possibility of DCF IL staff making direct referrals to the Family First case managers as a trauma-informed way to explain the process to young adults and connect them with supportive parenting resources. The Family First team will gather feedback on this process and reconvene with the group for further discussion.

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 youth who has exited custody 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.

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 You thrive, 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. You thrive is a mentoring and financial literacy program available to youth and young adults ages 16 to 21 in Johnson, Wyandotte, Douglas and Shawnee Counties.

The Kansas Foster Child Educational Assistance Act, also known as the Tuition Waiver, began in July 2006 and 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 26th 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. Program services include Basic Chafee to assist with youth's daily living needs; Start-Up funds to assist with housing deposits and procurement of household goods; IL Subsidy to support youth's ongoing room and board expenses; Vehicle Repair and Maintenance; and ETV to support youth's post-secondary education goals. Young adults ages 18 to 21 who are participating in DCF IL services may be referred to Kansas Legal Services, under the DCF contract, for determination of SSI benefits.

Please see Attachment 43, DCF Independent Living Regional Activities SFY 2021, for information on Regional partnerships and service delivery.

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. 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 2022, 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, 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.

During SFY 2021, the DCF IL Program began working with Microsoft to develop a Teams mobile app to enhance communication between DCF IL Program participants and their IL Coordinators. Preliminary design elements include virtual meeting and text messaging functions, a “help” button for young adults to access crisis health and mental health supports, the ability for IL staff to post messages and share information with their caseloads, administration of NYTD surveys, and collaboration with KYAC and RYAC. Development of the app will continue during SFY 2022.

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 four to five assigned Regional IL Coordinators. During the last quarter of SFY 2021, DCF will hire eight IL Coordinators across the State to assist with implementation of Division X of the Consolidated Appropriations Act and to support existing efforts of the IL Program. DCF IL Administration staff includes the IL Program Manager, IL Assistant Program Manager, and National Youth in Transition Database Coordinator. The DCF IL team is part of the PPS Youth Programs division.

All reports published by DCF that provide data about the State’s KCPSTA are detailed by region.

The SFY 2020 Independent Living/Self-Sufficiency Services Annual Report (See Attachment 43.1) provides data by region, age and gender about the number of youths 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 ETV assistance in SFY 2020. The Kansas City Region served the largest percentage of young adults receiving IL Subsidy in SFY 2020.

The Independent Living Demographic Report (See Attachment 43.2) 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.

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, Justice Involved Youth and Adults Committee, 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 Family and Child Tracking System (FACTS) and the Self-Sufficiency Information System (SSIS) that collects payments and benefits to youth in the IL Program. Reports are published monthly and annually include demographic, service, and program participation information. The data is available to DCF and CWCMP staff through PPS’ SharePoint site. The reports are reviewed with youth through the Kansas Youth Advisory Council and serve to inform KYAC’s development of their work plan and annual youth conference agenda.

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 family and child well-being system in Kansas and on a national level. Chafee-eligible youth ages 14 to 20 (eligibility ends when a young adult turns 21) are offered the opportunity and encouraged to participate in RYAC and KYAC events. The councils are supported by federal Chafee funds. KYAC and RYACs are facilitated by Pathway Family Services through a contract with DCF.

DCF IL Administration and Regional staff work to 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. Youth and young adults ages 14 to 20 may participate on the RYACs, and youth and young adults ages 14 to 25 may participate on the KYAC.

During SFY 2021, KYAC and RYACs met virtually via the Zoom videoconferencing platform. RYACs currently meet as a statewide group twice per month for Wellness Wednesday and Life Skills Saturday. Wellness Wednesday topics have included New Year's Goals, Mindfulness, Yoga, Healthy Relationships, and Creating a Healthy Lifestyle. Life Skills Saturday topics have included Independent Living Resources, How to Get a Job, All About Money, How to Be Successful at Work, and Cooking and Shopping on a Budget. KYAC meets monthly via Zoom to make space for self-care, to provide the opportunity for councilmembers to check in with one another, and to continue work on their five-year work plan. The council also maintains regular contact with each other, DCF IL Administration staff, and Pathway Family Services staff via social media. Once in-person gatherings are permitted, KYAC and RYACs will transition to meeting in-person with the option to join via videoconference.

KYAC's current five-year work plan includes the council's goals and tasks from 2018 to 2022. Please see Attachment 44, KYAC Work Plan 2018-2022. 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. During SFY 2021, KYAC focused on making changes to Placement Books, Life Books, and the Foster Youth Bill of Rights. DCF continues to collaborate with KYAC in efforts to implement these recommendations. KYAC members also participated regularly in virtual Model Approach to Partnerships in Parenting trainings to provide prospective foster parents with the perspective of a young person who has experienced foster care.

Due to the COVID-19 pandemic, KYAC was unable to facilitate their 2020 Strategic Planning Conference and the 2020 Summer Conference. KYAC will participate in a Strategic Planning Conference in Fall 2021, either via videoconference or in-person, depending on State and agency regulations surrounding the pandemic.

KYAC will host a virtual Summer Conference on June 22 and June 23, 2021 for up to 175 youth and young adults ages 14 to 20 who have experienced out of home placement in DCF, KDOC-JS, or Tribal Authority custody. The theme of this year's conference will be "Masks on for the Masquerade," focusing on themes of resilience and strategic sharing. The conference will include keynote speakers, workshops focused on life skills training, and opportunities for youth and young adults to connect with one another. Conference participants will receive care packages with conference-themed t-shirts, coloring books and markers, fidget spinners, snacks, face masks, and KYAC merchandise. Attendees will also

receive self-sufficiency items after the conference, including backpacks, portable cell phone chargers, and other items.

During SFY 2020, KYAC began their collaboration with Kansas Strong for Children and Families (Kansas Strong). Kansas Strong is a research partnership between DCF, the University of Kansas (KU) School of Social Welfare, and private agencies providing foster care services that aims to improve family and child well-being practice. Youth Voices from Foster Care (Youth Voices) is an arts-based digital storytelling project and one initiative of Kansas Strong. Kansas Strong has partnered with DCF IL staff and KYAC to build knowledge around older youth's (ages 14 to 26) lived experiences in family and child well-being, and to use this project to better understand the needs, hopes, and aspirations of youth in foster care. This information will be used to inform the other six strategies of Kansas Strong and will be disseminated broadly to professionals who are responsible for developing effective services that meet the needs of children, youth, and families in Kansas and across the country. These objectives come from the call to action from the Children's Bureau to honor and prioritize the voices of youth and families, and to enhance the capacity of the workforce to hear and act on the voices of youth and families.

With trauma-informed support from KU and DCF Youth Programs staff, KYAC members took the lead in selecting and defining the details of the project. They designed the digital storytelling project as a versatile and inclusive art project, where youth participants are invited to share their experiences in foster care through the creation of individual and/or collective artwork. Each participant chooses what kind of art project they make, whether that is drawing, photography, writing, or some other form of creative expression. KYAC members, DCF IL staff, and KU co-developed five questions, or prompts, to serve as ideas or inspiration for the art project. These questions are:

What supports do I need to thrive?

What did I appreciate about a caseworker who helped, impacted or supported me?

What advice would I give to others about how to communicate with me?

What information is most helpful for me to have?

What insights do I wish my foster parents or placement provider had?

In addition to designing the project, KYAC members also created artwork and several relational poems in a process called Poetry Inquiry. In the process, youth participants first wrote individual poems using one or more of the prompts listed above. Next, each person read their poem out loud and then the group worked together to weave lines from each of their poems into one collective poem. KYAC members have also been involved in the planning to expand Youth Voices across the State and involve as many Kansas youth in foster care as possible in this project.

KYAC co-presented this project with KU and Youth Programs staff at the 2020 Governor's Conference for the Prevention of Child Abuse and Neglect. Additionally, KU and Youth Programs staff co-presented findings at the 2021 ResilienceCon Conference, an international conference that focuses on strengths-based approaches for research, prevention, and intervention on violence and other adversities. In partnership with KYAC and the Kansas Strong Steering Committee, future dissemination efforts may include policy and practice recommendations.

During Spring and Summer 2021, the DCF IL Program plans to issue Requests for Proposal for the implementation of the We Kan Drive Program and the Service Advocate Program. The We Kan Drive Program will pilot in DCF's East Region. We Kan Drive will support older youth and young adults

receiving foster care or DCF IL services in obtaining their lawful driver's license in the state of Kansas. This includes, but is not limited to, assisting, educating, and paying for anything related to successfully obtaining a driver's permit or license, completing driver's education, and obtaining auto insurance. This will also include educating older youth and young adults on maintaining vehicles and the financial options when purchasing. In addition, the program will include a matched savings program for youth and young adults to purchase a vehicle.

DCF IL Administration staff participate in the quarterly Driving Program for Youth in Foster Care conference calls with representatives from Florida's Keys 2 Independence Program and other States that have established or are working to establish a driver's education program for the Chafee-eligible population. This group has served as an invaluable resource as DCF has drafted plans for the We Kan Drive initiative. DCF introduced a bill for the We Kan Drive Program into the Kansas House of Representatives Children and Seniors Committee during the 2021 legislative session. The bill fell below the line, but the Kansas legislature plans to approve a portion of funding for We Kan Drive in the SFY 2022 budget for DCF. The program title, "We Kan Drive" was created by the Kansas Youth Advisory Council.

The Service Advocate Program will support young adults participating in the DCF IL Program as they transition to self-sufficiency. Service Advocates will be young adults with lived experience in the Kansas family and child well-being system who are at least 25 years old and demonstrate strong leadership qualities. Service Advocates will work to empower, educate, and advocate and develop supportive networks for young adults with lived family and child well-being experience. Service Advocates will work alongside DCF IL Coordinators to support youth with self-sufficiency-related tasks such as applying for jobs, obtaining identifying documentation, and referral to community resources. IL Program participants will have at least weekly contact with their Service Advocate. This program will also be piloted in DCF's East Region. In preparation for this initiative, DCF IL Administration and Regional staff met with representatives from Allegheny County's Youth Support Partners Program and FosterAdopt Connect's Community Connections Youth Project.

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 youth in foster care and the PPS 7000 Self-Sufficiency Plan for youth participating in the DCF IL Program, youth and young adults are encouraged to utilize their strengths, assess their needs, and engage with healthy supports and resources within their families and communities. Youth and young adults are invited to participate in leadership and advocacy training and opportunities through RYACs, KYAC, and attendance at statewide and national family and child well-being 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. Kansas sponsored one FosterClub All-Star in Summer 2019, one in Summer 2020, and will sponsor two in Summer 2021. The All-Star from 2019 currently serves as a Young Adult Consultant for the Capacity Building Center for States. The All-Star from 2020 is working with FosterClub on a short-term project related to Division X of the Consolidated Appropriations Act of 2021. In April 2021, the DCF National Youth in Transition Database Coordinator was also hired to serve as a Young Adult Consultant for the Capacity Building Center for States.

A team from Kansas applied and was chosen to participate in the virtual Activating Youth Engagement Summit hosted by the Annie E. Casey Foundation in August 2020. The team includes the DCF Director

of Permanency, DCF Deputy Director of Youth Services, DCF IL Program Manager, Youthrive Executive Director, Child Welfare and Juvenile Court Judge for Douglas County, DCF NYTD Coordinator/Youth Advocate, and three Youth Advocates. Prior to the Summit, the team participated in two Emergent Learning sessions with representatives from the Annie E. Casey Foundation. During the Summit, team members participated in workshops and collaborative discussions to develop a workplan related to youth engagement and racial equity within the Kansas family and child well-being system.

Since the Summit, the Youth Engagement Team has met regularly to implement the workplan. The team has developed several action items related to learning from other states and programs, creating training opportunities for legal professionals, exploring curricula on human trafficking prevention/intervention, establishing Peer Navigator positions, and incorporating DCF's Diversity, Equity, and Inclusion work within the youth and young adult populations. Please see Attachment 46, Kansas Youth Engagement Team Action Plan 2021. The team has also expanded membership to include Youth Leaders in Kansas (YLINK) Advisors from the Kansas Department of Aging and Disability Services and the Crossover Youth Coordinators from DCF, KDOC-JS, and the Office of Judicial Administration. The Youth Engagement Team will continue to develop and implement their workplan during SFY 2022.

In July 2020, two young adults with lived experience in the Kansas foster care system participated in the Region 7 Virtual Roundtable facilitated by the Children's Bureau. These young leaders had the opportunity to discuss pressing issues related to the COVID-19 pandemic and racial equity with Associate Commissioner Milner and other young leaders from Region 7 States and Tribes. The representatives from Kansas shared information about the needs and experiences of youth and young adults in the State, as gathered from their peers. The report was issued with themes from all of the Roundtable events was used to inform supports and services provided for youth and young adults in Kansas, including the importance of youth staying connected with each other and their caseworkers/IL Coordinators, exercising caution surrounding youth aging out of custody during the pandemic, and supporting youth and young adults' mental health needs.

The Older Youth and Young Adult Services Partnership was formed during SFY 2021 to bring DCF programs and community partners together to improve the service array for transition age youth (ages 14 to 26). Workgroup participants include representatives from DCF Prevention and Protection Services, DCF Vocational Rehabilitation, DCF Economic and Employment Services, Cornerstones of Care, KVC, Saint Francis Ministries, TFI, Department of Commerce, Department of Education, Jobs for America's Graduates- Kansas, Kansas Kids @ GEAR UP, and three young leaders with lived experience in the Kansas Family and Child Well-Being system. The Partnership group has been divided into seven sub-groups, each with a focus on a different domain related to youth services. Sub-groups include Identifying Documents, Life Skills/Housing, Education, Employment/Financial Planning, Youth Voice and Advocacy/Connections and Lifetime Networks, Health and Well-being, and Transportation. The goal of the sub-groups is to assess service gaps and establish supportive networks for youth. During SFY 2022, the Partnership will expand membership to include additional young leaders and community partners.

In January 2021, youth and young adults were invited to participate in a Listening Session with representatives from the Biden-Harris Transition Team. DCF is aware of at least two young leaders who attended the virtual event. DCF shared the event invitation with youth, young adults, and staff via email and social media.

Throughout the COVID-19 pandemic, DCF and CWCMP staff have maintained frequent contact with youth and young adults participating in foster care and DCF IL services to gather feedback on their needs, struggles, and successes. Information and feedback shared by youth and young adults has informed the

array of services developed and administered during SFY 2020 and SFY 2021. The youth and young adults who provided the feedback have been direct recipients of these supports. Please see the COVID-19 and Consolidated Appropriations Act sections of the Chafee portion of the APSR for additional information.

During SFY 2022 to 2024, the KCPSTA will continue increasing youth participation in family and child well-being workgroups and meetings to ensure the youth voice is represented in the development of agency policies, procedures, and initiatives. In addition, the KCPSTA plans to assess cultural competency and involve cultural advisors in program activities to ensure the KCPSTA develops plans and implements services that are inclusive of the cultures, values, and viewpoints of the youth and communities served.

Staff from PPS DCF IL and the CWCMPs collaborate with other government agencies, 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.

The KCPSTA partners with the Kansas Department for Aging and Disability Services to assist youth with applying for and coordinating Home and Community Based Services waiver programs. DCF IL and CWCMP staff have regular contact with the Social Security Administration to assist youth in applying for Social Security Benefits and receiving and utilizing to their WARDS accounts to support their daily living needs, employment and/or educational goals, and efforts towards self-sufficiency. The KCPSTA has also partnered with the Kansas Department of Revenue and the Office of Vital Statistics to assist with obtaining identification cards and birth certificates for youth currently in foster care and youth participating in the DCF IL Program. DCF IL and CWCMP staff support youth in applying for and accessing medical coverage through the State's KanCare Medicaid Program.

During SFY 2021, the DCF Youth Programs division established the Youth Services Collaboration to increase collaboration between DCF's Youth Services Programs (Independent Living, Crossover Youth, and Special Response Team) and other State agencies that serve the older youth population, including the Kansas Department for Aging and Disability Services' Behavioral Health team and the Kansas Department of Corrections- Juvenile Services. The workgroup also includes the DCF Director of Medicaid and Children's Mental Health and the Advisors for KYAC and RYACs. The group first met in December 2020 and has continued to meet monthly. Each agency rotates sharing information about their programs, services, and upcoming events. The group has identified a goal to connect youth councils across the state, including KYAC, RYACs, YLINK, STAND, and Yellow Ribbon to unite the voices of youth in Kansas in the advocacy and youth engagement work that each council is undertaking.

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 serves up to 2,500 youth per year 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, 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, Douglas, and Shawnee Counties. During SFY 2021, Youthrive shifted funding sources from a DCF Chafee grant to a DCF TANF Youth and Family Stability grant. As of February 2021, Youthrive is serving 61 youth in the program. Due to limited program growth from SFY 2018 to SFY 2020, Youthrive ended services in Sedgwick and Reno Counties in June 2021. Thanks to private donations from the community, services have continued in Reno County but are administered separately from the Youthrive Corporation.

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 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 youth with assistance with driver's education, driver's license attainment, and car purchases.
- Empower youth to develop leadership and advocacy skills.
- Provide youth 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, and youth conferences.

The DCF IL Program partners with Pre-Employment Transition Services (Pre-ETS), a Vocational Rehabilitation (VR) Program. 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 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 youths who access each program. KCPSTA staff also refer youth to VR services, as needed, to support youth with a diagnosed disability with their education and employment goals.

KCPSTA staff regularly refer youth to programs and support services through local KansasWorks workforce centers. Programs and support services include resume building, interview skills, completing job applications, and on the job training.

The CarePortal is an online faith-based engagement tool that connects family and child well-being professionals to their local faith-based communities. When a family and child well-being professional identify a need, they can access the CarePortal 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 CarePortal provides ownership to the community regarding local social problems needing support and creates awareness. Since the beginning of DCF's relationship with the CarePortal, the IL Program has submitted several requests to assist youth with car repairs and obtaining needed items, such as cribs and household appliances. The KCPSTA also refers youth to DreamMakers and One Simple Wish to help meet youth's needs and goals, including orthodontic services, car repair, and specialized computers and software for post-secondary education programs.

During SFY 2021, DCF staff with Economic and Employment Services, Vocational Rehabilitation, and Prevention and Protection Services began collaborating with representatives from the Department of Commerce, the Area One Workforce Center, and Saint Francis Ministries to discuss how to improve the customer service experience for individuals served by all of these programs. The group decided to develop a pilot program in a Western Kansas community with youth ages 16 to 24 that would include on the job training, work experiences, mentoring, and financial literacy. The group decided to implement the pilot program in Hutchinson/Reno County, with the goal of engaging youth early in client-led services, provide them multiple options for services that fit their needs and goals, and to make the transition between services as smooth as possible.

DCF facilitated the Kickoff Meeting for the Hutchinson Young Adult Education and Employment Pilot in April 2021. The DCF Deputy Secretary and Executive Director of Kansas Workforce ONE provided a welcome to the group. A panel presented information on Workforce ONE, DCF Independent Living Services, Rehabilitation Services, Pre-Employment Transition Services, and Economic and Employment Services. The panel was followed by small group discussions related to what aspects of service provision are working well in the Hutchinson area, where improvements could be made, goals the pilot should focus on, and what data should be collected. The group will meet again to discuss next steps. Meeting participants included representatives from DCF Economic and Employment Services, DCF Independent Living, DCF Vocational Rehabilitation, DCF Pre-Employment Transition Services, Department of Commerce, Kansas Workforce ONE, Saint Francis Ministries, Kansas Kids @ GEAR UP, Youthrive, and Job's for America's Graduates- Kansas.

During SFY 2021, the DCF IL Program and Cornerstones of Care partnered with Emerging Builders to offer paid, on-the-job training for construction sites in Wyandotte County. This partnership focuses on trainees with lived experience in State custody who are interested in exploring careers in the construction sector. Emerging Builders is a ten-week pre-apprenticeship program includes a combination of experiential training, intensive classroom learning, and person-centered services that support the individual development of the trainee outside of the construction skills. A key component of the Emerging Builder's experience is provided through their program support; young people have access to staff members for guidance, problem solving, and support during their program participation. A cohort of five youth and young adults participated in the Emerging Builders program in Spring 2021. The Emerging Builders partnership is funded by a contract with DCF IL and will support a cohort of five youth and young adults during SFY 2022.

The DCF IL Program has partnered with Kansas Continuums of Care and local housing agencies to access the U.S. Department of Housing and Urban Development's Foster Youth to Independence (FYI) Initiative. See the FYI section of the APSR for more information. During SFY 2022 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.

Hope for the Holidays (H4H) is a program that invites businesses, organizations, faith communities, and individuals to sponsor wish lists for DCF IL Program participants. H4H promotes stability, offers encouragement, and provides hope during the holiday season for IL youth who have aged out of the foster care system. Many youth transitioning into adulthood from foster care struggle during the holidays, as their permanent connections are underdeveloped and ties to local communities have not yet formed. H4H also creates awareness and promotes support for youth who have transitioned from foster care into adulthood. This endeavor was initially developed as community services did not recognize the needs of youth who had transitioned from foster care into adulthood. These youth were often denied participation in community sponsored drives/events or had transportation barriers that left them unable to participate.

To promote the safety of young people, donors, and DCF staff during the COVID-19 pandemic, the 2020 H4H program focused on collecting gift cards and greeting cards that could be mailed to IL Program participants. Thanks to donors' incredible generosity, H4H was able to provide over \$28,000 in gift cards to over 456 young adults, with many raising children of their own. The gift cards went directly to the young adults so they could purchase items such as groceries, clothing, and household goods. The gift cards also helped young families experience a joy-filled holiday with their children.

Please see Attachment 43, DCF Independent Living Regional Activities SFY 2021, for information on regional partnerships and involvement with other federal/state agencies and public/private organizations.

Statewide IL Program meetings are held every quarter. Participation at these meetings by DCF IL, CWCMP IL, KDOC-JS, Tribal, Kansas Kids @ GEAR UP, and Jobs for America's Graduates (JAG-K) Transitions Services 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; Managed Care Organizations; Kansas Youth Suicide Prevention Resource Center; Global Orphan Project- CarePortal; 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 Career Technical Education and Accelerating Opportunity; Kansas AO-K programs; JAG-K; DreamMakers; O'Brate Community Foundation; Project Warm Embrace; Working Healthy; university student support programs youth who experienced foster care; SSI/SSDI Benefits Counseling through the Kansas Department for Health and Environment; and DCF VR and Pre-ETS. 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.

During SFY 2021, the DCF IL Program has continued to reach out to and collaborate with Continuums of Care (CoCs), Public Housing Authorities (PHAs), and community partners to implement the U.S. Department of Housing and Urban Development's (HUD) Foster Youth to Independence (FYI) Voucher Program. The PPS Director, Deputy Director of Youth Programs, IL Program Manager, and Regional IL

Supervisors participate in bi-monthly calls with Region 7 HUD and Administration for Children and Families representatives to discuss States' progress in implementing the FYI Program.

There are four Continuums of Care in the State of Kansas and 22 PHAs that do not administer Family Unification Program vouchers and are eligible to participate in the FYI Program. Efforts to implement the FYI Program in Kansas have focused on developing partnerships between Regional DCF IL teams and the CoCs, PHAs, and community partners located within each Region.

East Region

The East Region has worked to make connections with the Topeka/Shawnee County Continuum of Care and PHAs in the region to implement the FYI initiative. The DCF IL Supervisor has contacted every PHA in the region and, so far, the CoC and four of the six PHAs are willing to partner with DCF for this program. The four interested PHAs include the Topeka Housing Authority, Southeast Kansas-Community Action Program, Chanute Housing Authority, and Pittsburg Housing Authority. During this process, the Regional DCF IL team has been able to improve their relations with the local PHAs and improve IL Coordinators' knowledge of the public housing programs provided by HUD. This has also been a great benefit to youth still in custody as IL Coordinators often recommend to case teams that youth apply for public housing if they are of appropriate age and need housing resources post-release from foster care custody. The two PHAs are currently not interested in implementing the FYI Program have stated they would be willing to reconsider once the program is implemented with other PHAs and are interested in continued partnership with the DCF IL Program.

East Region is in the final stages of completing the Memorandum of Understanding (MOU) between DCF, the Balance of State CoC, Southeast Kansas-Community Action Program, and the Pittsburg Housing Authority. The Wichita Region will also participate in this MOU, as the Southeast Kansas-Community Action Program serves one county within the Wichita Region's borders. Upon completion, East Region IL staff will work on connecting with the Topeka Housing Authority to begin the process of implementing the FYI Program in the Topeka/Shawnee County area.

Kansas City Region

The IL Supervisor met with the Kansas City Kansas Housing Authority Section 8 Director in October 2019 to discuss partnering to implement the FYI Voucher Program to benefit youth aging out of foster care. One Regional IL Coordinator attended a meeting in November 2019 and community partners attended multiple meetings to discuss providing some of the services that are required as part of the FYI Program. The community partners included Cornerstones of Care, a Greater Kansas City Coalition to End Homelessness CoC representative, and Managed Care Organization representatives from Sunflower Health Plan with services geared towards youth who have aged out of foster care. The Wichita/Sedgwick County group was making good progress on finalizing a MOU between child welfare and housing partners, so the Kansas City Kansas group decided to pause meetings while that MOU was being developed, in hopes of using the finalized MOU as a template. The IL Supervisor has been reaching out to the Kansas City Kansas Housing Authority Section 8 Director but has not made any further movement on the FYI vouchers as of April 2021.

The IL Supervisor met with the Johnson County Kansas Housing Director and a United Community Services CoC representative to discuss the FYI Voucher Program. The Johnson County Housing Director did not feel his agency was in a position to move forward with anything at that time due to staffing issues; however, the IL Supervisor and Housing Director agreed to stay in contact and the IL Supervisor will provide updates on FYI progress in the Kansas City Region as well as the Wichita Region, the other urban area in the state.

During SFY 2020, the Kansas City IL Supervisor met with the Kansas City Kansas Housing Authority and the Johnson County Housing Authority to discuss implementation of the FYI Program. Despite a positive start with Kansas City Kansas Housing, the initiative has not moved forward. The housing agency had other factors influencing their ability to commit to the work and they lacked capacity in their department to devote the required time and resources. The IL Supervisor continued to reach out regularly during SFY 2021 and received little response. The Johnson County Housing partners had also voiced concerns about their capacity for taking on the program and questioned the income level of IL youth to meet requirements for the high cost of the housing market in the county. HUD Region 7 representatives participated in a call with the IL Supervisor and Kansas City Kansas Housing to provide information on the FYI Program and answer questions. Despite these efforts, the IL Supervisor has not been able to engage regional housing partners in this work.

West Region/Balance of State Continuum of Care

The Balance of State CoC serves 101 Kansas counties and partners with PHAs in each DCF Region, including the entire West Region. The DCF IL Program Manager initiated communication with the Balance of State CoC in Fall 2019. In Spring 2020, the IL Program Manager and CoC Coordinator began communicating with the Southeast Kansas- Community Action Program and Southeast Kansas Services at Catholic Charities, a Coordinated Entry partner, to facilitate implementation of the FYI Program. The MOU between these partners is due to be finalized in Summer 2021. After implementation of the FYI Program in Southeast Kansas, DCF and the Balance of State CoC will collaborate with other PHAs, including those located in DCF's West Region, to continue expansion of the FYI Program across Kansas. The Newton Housing Authority has expressed interest in implementing the FYI Program. The IL Program Manager and West Region IL Supervisor met with the Newton Housing Authority Director in 2020. The Director expressed interest in implementing the FYI Program, and Newton will be the next community within the Balance of State CoC that will be targeted for the FYI Program, upon completion of the Southeast Kansas MOU.

The DCF IL Program Manager was selected to participate on the Balance of State CoC Steering Committee. The CoC Steering Committee is the decision-making and planning body for the CoC and is responsible for ensuring the CoC ends homelessness for all families and individuals throughout the 101 counties of the KS BoS CoC. The Steering Committee met for an onboarding meeting in April 2021. Meeting topics included purpose and group expectations, the CoC and collective impact, CoC roles and responsibilities, and defining officer roles and election procedures. The committee will continue to meet throughout SFY 2021 and SFY 2022.

Wichita Region

The Wichita Region DCF IL Program is partnering with the City of Wichita PHA Housing and Community Based Services programs and the IMPACT-ICT CoC to implement the HUD FYI Program. A MOU between these three entities, in addition to the Wichita Workforce Center, has been fully executed, and outlines services, supports, and case management opportunities for youth and young adults who present for services via any of these partners. The MOU was developed to broadly encompass other HUD or Health and Human Services programs that may become available in the future, reducing the need to develop additional MOUs for these partnerships. This MOU has been shared with the DCF IL Program Manager, Regional IL Supervisors, and other CoCs across the state.

In July 2020, the Wichita Region IL Program submitted ten referrals to the Wichita Housing Authority for the FYI Program. The Wichita team will be working to submit 15 new referrals/names by the end of February or early March.

In July 2020, ten initial youth were referred to the program by DCF IL and all ten vouchers were approved, with funding becoming available to the PHA in October 2020. Of the ten vouchers initially requested and approved by HUD, five youth are currently leased up. Unfortunately, numerous barriers prevented some of the youth from getting leased up, including a lack of employment history and income, lack of identifying documents, lack of rental history, and untreated mental health concerns. DCF IL Coordinators have consistently attempted to work with youth to remove these barriers and have helped 50% of the youth to be able to secure a lease. The DCF IL team was recently informed that the remaining five vouchers initially approved must be rescinded and requested from HUD again by the PHA, due to a directive received from HUD. These vouchers will be requested again when the DCF IL team submits 15 new youth referrals for FYI vouchers, expected by the end of April 2021. Once submitted, this will conclude the original 25 vouchers allowed by the FYI program for FFY 2021. Until March 2021, the PHA was not accepting new referrals for the FYI program because the initial vouchers approved were not leased up at a rate of at least 90%, but this limitation has since been removed and the team is moving forward with preparing the second round of referrals. The collaborative partners are continuing to identify and overcome barriers to getting young adults with foster care experience successfully housed.

Education and Training Vouchers (ETV) Program (section 477(i) of the Act)

The DCF IL Program administers the State's Education and Training Voucher (ETV) Program. The ETV Program serves youth and young adults 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 an eligible out-of-home foster care placement on the date the youth attained 18 years of age; or
- Youth who left an eligible out-of-home foster care placement subject to a permanent custodianship or guardianship on or after the youth's 16th birthday; or
- Youth who were adopted from an eligible out-of-home foster care placement on or after the youth's 16th birthday; or
- Youth who were in an eligible out-of-home placement for any length of time on or after their 14th birthday, unless an adoption, permanent custodianship, or guardianship is finalized prior to the youth's 16th 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 educational 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 their release from 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 and availability. ETV funds may be used for costs associated with post-secondary education and/or training only. Total expenditures per youth cannot exceed \$6,250 (\$5,000 Federal funds with State match of \$1,250) or the total cost of attendance per youth

per plan year, whichever is less. The ETV plan year begins on July 1 and ends on June 30 of the following year.

DCF 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 (Education & Training Voucher Program Plan). All youth participating in post-secondary education and training plans must be actively involved in all stages of the plan. In July 2020, two experienced IL Coordinators provided a virtual ETV training for the statewide DCF IL team, with the goals of providing information to new IL Coordinators and reinforcing consistency in program implementation.

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 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 prior to applying for ETV funds. Youth who 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, the IL Coordinator, and the CWCMP case manager, if the youth is still being served by the CWCMP.

The IL Coordinators track all expenses, so 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 are tracked by each Region and DCF Administration.

The methodology for reporting the unduplicated number of youths 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.

Since March 2020, DCF IL staff have worked to ensure ETV-eligible youth are receiving the maximum level of support available for room and board and other applicable expenses during the COVID-19 crisis. IL Coordinators have maintained regular contact with ETV Program participants to ensure their basic needs are being met, to encourage them in their educational pursuits, and to provide additional supports as necessary. The IL Program continues to purchase laptops, printers, backpacks, and earbuds for students who have transitioned to online learning. The program has also utilized grocery pick-up and delivery services to provide food and household goods for students living in dormitories after campus dining services closed. The DCF IL Program Administration shared a letter with the Kansas Board of Regents in March 2020 to encourage schools to allow young adults with lived experience in foster care, KDOC-JS, or Tribal Authority custody to remain in dormitories when campuses began to close. Several ETV Program participants were allowed to remain in campus housing.

Many ETV Program participants have struggled to maintain academic progress during the pandemic. Struggles have included difficulty with the online learning environment, the lack of available campus academic and social supports, and concerns about health and well-being that have impaired students' abilities to attend classes and complete assignments. IL Coordinators have been strong advocates for youth, working with schools to find supportive resources or assisting youth with

withdrawing from classes when necessary. Prior to the passing of the Consolidated Appropriations Act, young adults under the age of 21 who ended or suspended their post-secondary education were able to receive continued support through the Chafee portion of the DCF IL Program. IL Coordinators continue to facilitate discussions with youth regarding their plans for post-secondary education and encourage them to remain engaged or to reengage in school, according to the goals and needs of the youth.

The chart below includes ETV expenditure data from SFY 2018 to SFY 2020 (see the SFY 2020 Independent Living/Self-Sufficiency Services Annual Report- [SSIS Annual Report SFY 2020.pdf](#)).

	SFY 2018	SFY 2019	SFY 2020
# Young Adults Served	330	281	272
Payment Totals	\$520,596	\$437,620	\$787,030
Annual Average per Young Adult	\$1,577.56	\$1,557.37	\$2893.49

The data shows a decrease in the number of youth and young adults receiving ETV funds in SFY 2019 and SFY 2020. However, the annual average per young adult remained the same or increased each year. This increase may be an indication that, although less youth attended a post-secondary program during SFY 2020, the need for financial support was higher. The decrease in youth and young adults receiving ETV funds may also be correlated with secondary education graduation rates upon exiting foster care custody.

IL Coordinators have reported that, for a few young people, the shift to online learning has been a positive experience that has allowed them greater academic success. IL Coordinators have implemented weekly check-ins with these students, along with other interventions, and have observed measurable improvement in their grades, social connectedness, and other areas.

Beginning January 2021, the DCF IL Program implemented the ETV Program provisions of the Supporting Foster Youth and Families through the Pandemic Act, Division X of the Consolidated Appropriations Act of 2021 (Division X). The maximum ETV limit has been raised from \$6,250 (80% Federal funds with 20% State match) to \$12,000 (100% Federal funds) per academic year through September 30, 2022. In addition, the age limit for youth to participate in the ETV Program has been raised to age 26 (eligibility ends when a youth turns 27) through September 30, 2021.

Per Division X programmatic flexibilities, the IL Program has also provided ETV support to youth who are not currently enrolled in a post-secondary education program or who have not made satisfactory progress during the Spring 2021 semester due to the impact of the COVID-19 pandemic. ETV funding is being used to help youth to remain enrolled in a post-secondary education program by including expenses that are not part of the education institution's cost of attendance. The IL Program has assisted young people with acquiring laptops, cell phones, tools for internet access, and other technology supports. ETV funding is being used to prepay rent, childcare, and other living expenses to provide stability with housing, education, and employment. IL Coordinators have used ETV funding to help youth obtain the identifying documents needed to enroll in school. The IL Program is also using ETV funding to assist students with paying student loans and other fees that are preventing the student from being able to remain enrolled or to re-enroll in a post-secondary education program.

The DCF IL Administration team has worked closely with DCF Communications staff to develop materials and social media messaging to promote the Chafee and ETV Program enhancements available through Division X. Please see Attachment 47, CAA IL & ETV Expansion Flyer. Please see the Division

X section of the APSR below for more information on marketing strategies related to Division X of the Consolidated Appropriations Act.

During SFY 2022 to 2024, DCF IL staff will continue presenting information about the ETV Program to DCF, CWCMP, KDOC-JS, and Tribal staff; youth and young adults, including the Kansas Youth Advisory Council; 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. See Attachment 48, Annual Reporting of Education and Training Vouchers Awards (D).

Consultation with Tribes (section 477(b)(3)(G) of the Act)

The comprehensive social service grants with each of the four Tribes for independent living services are funded through the Kansas Chafee Program for Successful Transition to Adulthood. These serve as agreements for each Tribe to administer their Chafee services. Regular contact with Tribal staff is conducted through Resident Tribes of Kansas meetings scheduled by Department for Children and Families (DCF) Prevention and Protection Services (PPS) staff for coordination of family and child well-being services. PPS staff and each Tribe share information about ongoing and scheduled Chafee activities. Tribal social services staff are invited to participate in the quarterly Statewide Independent Living Meetings facilitated by the DCF Independent Living (IL) Program.

The DCF Tribal Specialist facilitated meetings in September and October 2020 with the Region 7 Tribal Welfare Specialist, DCF Deputy Director of Youth Programs, DCF IL Program Manager, and DCF Foster Care Program Manager to discuss how DCF can support Tribal services for transition age youth. The Deputy Director of Youth Programs and Independent Living Program Manager developed a list of options and ideas for how the DCF IL Program can support each Tribe in their work with older youth and young adults who have experienced Tribal and/or foster care custody. The list was shared with participants at the Resident Tribes meeting in October 2020. Please see Attachment 50, DCF Independent Living-Tribal Coordination Ideas 2020, for more information.

The DCF IL Program Manager, DCF IL Assistant Program Manager, and DCF National Youth in Transition Database Coordinator share regular updates and resources with Tribal social services staff via email. Updates and resources include training opportunities, FAFSA and post-secondary education information, invitations to participate in the Child Welfare Virtual Expo and webinars, Aged Out Medicaid information, youth leadership conferences, national youth internship and employment opportunities, resources for youth and families with disabilities, and information related to supporting youth during the COVID-19 pandemic. Please see Attachment 51, DCF IL Communication with Tribes SFY 2021, for more information.

Tribal youth are included in annual youth conferences, learning opportunities, and the Kansas Youth Advisory Council. Each Tribe has also been allotted a certain number of laptops they are able to order for Chafee-eligible youth ages 16 and older, funded by the DCF IL Program. 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 Tribal Specialist and Regional Tribal Liaison are available for consultation regarding case-specific independent living services.

Tribes support youth ages 14 to 21 who are in custody pursuant to an order of the Tribal court. The services provided in this program work 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 similar to those provided by the child welfare case management providers.

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 included in the quarterly program reports. All youth under Tribal jurisdiction are eligible for services and supports through Chafee on the same basis as other youth.

Services and transition planning for youth who have been released from Tribal custody are provided in coordination with the DCF IL Program and Tribal staff. Eligible Tribal youth and young adults may participate in the DCF IL Program, including the Education and Training Voucher Program. Tribal staff are provided with information and education regarding the DCF IL Program's services and supports.

Consolidated Appropriations Act (DIVISION X) Funds

The Supporting Foster Youth and Families through the Pandemic Act, Division X of the Consolidated Appropriations Act (Division X), was passed into law on December 27, 2020. The State of Kansas has received additional Chafee and ETV Program funds to support youth and young adults during the pandemic. Eligible youth and young adults are ages 14 to 27 and experienced out of home placement at age 14 or older in the custody of DCF, the Kansas Department of Corrections- Juvenile Services, or a Tribal Authority. Division X allows for programmatic flexibility to ensure funds reach youth and young adults directly, through September 30, 2021. Additional post-secondary education supports will be available through September 30, 2022.

Since the first week of January 2021, the DCF IL Program Administration team has been working to plan and implement the provisions of Division X. The team has met at least weekly and has scheduled regular meetings with inner agency departments including the Executive Branch Information Technology (EBIT), Operations, the Office of Financial Management, and Public and Governmental Affairs. All plans have been developed with the goal of supporting young people as they work toward stability and self-sufficiency.

DCF IL staff have participated in multiple learning opportunities related to Division X, including the FosterClub Older Youth Pandemic Relief webinars, Division X Peer to Peer Calls hosted by the Children's Bureau, and Independent Living Meetings facilitated by the Region 7 Administration for Children and Families team. Child welfare professionals, youth currently in foster care, and youth and young adults with lived foster care experience have been invited to participate in many of these conversations.

In February 2021, the DCF IL Administration team held a listening session with the Kansas Youth Advisory Council to gather councilmembers' recommendations for Kansas' Division X implementation plan. In March 2021, the Deputy Director of Youth Programs and the IL Program Manager met with a representative from FosterClub's Policy Team to share Kansas' plans for Division X. FosterClub will assist DCF with sharing information on the services and supports available in Kansas. Also, in March the DCF Deputy Director of Youth Programs and the National Youth in Transition Database Coordinator presented Kansas' plans for Division X during a Children's Bureau Peer to Peer Call. The DCF IL team continues to share information and solicit feedback on Kansas' Division X implementation with youth and young adults, child welfare professionals, court professionals, placement providers, and other stakeholder groups.

In March 2021, the DCF IL Administration team met with Think of Us to review data collected from over 300 youth and young adults from Kansas who applied for their micro cash grants in Fall 2020. The IL

team used this information to prioritize aspects of Division X implementation that focus on youth's most pressing needs, including supports for housing, education, mental health, youth who are pregnant and/or parenting, and obtaining/maintaining employment. In April 2021, Think of Us reached out to the IL Program Manager to offer contact information for youth who completed grant applications, upon the youth's consent. DCF IL will continue to receive support from Think of Us to connect with youth and young adults who may be eligible for Division X supports in Kansas.

The DCF IL Program provides a room and board subsidy for eligible youth ages 18 to 20 who have aged out of foster care. Strategies were explored to raise the previous subsidy limit from \$350 to an amount that would better support youth's housing needs. An analysis of 66 adults statewide was completed by the Office of Financial Management prior to Division X using characteristics of income and resources, monthly expenses, and startup expenses to determine assistance options. The IL Program raised the subsidy limit to \$700 beginning January 2021, which will impact the over 300 Independent Living participants who receive subsidy each year. From January through September 2021, all eligible youth ages 18 to 26 participating in the IL Program will receive the \$700 in subsidy support per month, regardless of demonstrated need. Beginning October 1, 2021, the \$700 limit will remain, but the amount of subsidy a youth receives will be based upon their budget and need.

In January 2021, the DCF IL Program removed the 30% Chafee budget cap for room and board expenses through September 30, 2021 and increased the ETV limit to \$12,000 per youth per year through September 30, 2022. Both Chafee and ETV funds are being used to prepay up to one year in rent, utilities, and/or childcare for IL Program participants. On April 1, 2021, the IL Program expanded to open or re-open IL cases for young adults ages 22 to 26 who would benefit from focused, time-limited Chafee and/or ETV services, through September 30, 2021. Eligibility ends when a young adult turns 27.

On April 23, 2021, DCF launched the Independent Living Re-entry Program. Young adults who aged out of foster care custody from October 1, 2019 through September 30, 2021 have the legal right to "re-enter" to receive foster care services. Since Kansas does not currently have a statutory/legal framework for young adults to re-enter foster care through the court system process, young adults will be eligible to enter into an agreement to receive foster care supports through the DCF IL Program. This is a voluntary, short-term program that will end on September 30, 2021. These supports will allow young adults to work closely with an IL Coordinator to meet their basic needs and work toward their goals as they continue to transition to self-sufficiency. Young adults are expected to actively work toward achieving their education and/or employment goals. Participants will not be involved in a child in need of care (CINC) court case in the legal system. IL Coordinators will work with participants to find stable housing. Young adults participating in the Independent Living Re-entry Program will work with their IL Coordinator to complete the PPS 7003 Voluntary Agreement for Re-entry Program Services (see Attachment 52).

All youth who age out of foster care custody between April 23, 2021 and September 30, 2021 are required to review and sign the Re-Entry Acknowledgement Memo during the exit interview (see Attachment 53). Youth are to be provided a copy of the signed memo, which includes the contact information for each of the Regional DCF IL teams. The signed memo, the youth's PPS 3059 My Plan for Successful Adulthood, a copy of the youth's application for Aged Out Medical, and a copy of the youth's identifying documents are to be emailed to the Regional DCF team and the local Foster Care Liaison.

The DCF Public and Governmental Affairs team has developed materials to promote Kansas' Division X services. Please see Attachment 47, CAA IL & ETV Expansion Flyer and Attachment 54, CAA Re-entry Flyer. The statewide IL team continues to share these materials with youth and young adults who may be eligible to participate, child welfare case management provider staff, residential facilities, resource

families, child placing agencies, legal professionals, CASA organizations, and other groups across the state that can help inform youth and young adults of the available time-limited supports. The Public and Governmental Affairs team is also developing social media posts that will be shared on DCF's Facebook and Twitter accounts through September 2021.

DCF IL Coordinators are reaching out to all of the young adults on their caseloads, and all eligible young adults they have contact information for who are no longer engaged in the IL Program, to inform them of Kansas' Division X services. DCF IL is also spreading the word to youth and young adults via NYTD surveys and sending letters to youth's last known addresses.

As of May 2021, the DCF IL Program is continuing to develop implementation plans to assist youth and young adults with purchasing vehicles and finalizing processes related to the pandemic relief application and payments. The IL Administration team is working with Operations to adapt a process for purchasing vehicles for Division X purposes.

Since January 2021, the IL Administration team has been working with Operations and EBIT to develop a plan for issuing one-time pandemic relief payments for young adults. Eligible young adults are ages 18 to 26 and are not currently in foster care or participating in DCF's Independent Living Re-entry or IL Programs. The same payment amount will be provided to each young adult, and the amount provided will be determined by the total funds available and the number of young adults whose applications are approved. Young adults participating in the DCF IL Program will automatically receive a payment and do not need to apply. EBIT has created a secure online application that will send the applicant's data to IL staff for review. A printable application will also be available.

Operations has assisted with developing a request for proposal for a pre-paid debit card program that will be used to issue the pandemic relief payments. The pre-paid debit cards will also be used for regular IL Program purposes. The timeline for accepting applications and issuing stimulus payments is dependent upon implementation of the pre-paid debit card program. The current plan is to accept applications in July and August 2021 and to issue payments in September 2021.

The DCF IL Program will be hiring eight additional IL Coordinators across the state to support Division X efforts. The size of caseloads are expected to increase as the State of Kansas continues efforts to identify youth who are eligible for services. In addition, the agency plans to hire temporary positions, as needed, to assist with processing the pandemic relief applications and additional documentation demands for payments.

Division X Service Provision	Date of Implementation
Increasing Subsidy to \$700 per month through 9/30/2021. This applies to DCF IL participants currently receiving Subsidy, incoming IL participants who qualify for Subsidy, youth over 21 who were receiving extended Subsidy, and youth who turn 21 before 9/30/2021.	January 2021
Removing the 30% room and board budget cap for Chafee funds through 9/30/2021.	January 2021
Increasing the ETV limit to \$12,000 per youth through 9/30/2022.	January 2021
Pre-paying up to one year of rent, childcare and utility expenses for IL participants using Chafee or ETV.	February 2021
"Soft opening" to open or re-open IL cases for young adults age 21 or over who have urgent needs the IL Program can assist with.	March 17, 2021
Ability to open or re-open cases IL cases for young adults ages 21 or over who would benefit from a focused, time-limited Self-Sufficiency Plan.	April 1, 2021

Youth who have aged out of foster care during the pandemic are eligible to participate in the Independent Living Re-entry Program.	April 23, 2021
Pending: Assisting youth with purchasing vehicles, utilizing up to \$4,000 in Chafee funds per youth.	Tentative: May 2021
Pending: Providing a one-time pandemic relief payment for young adults who apply and are not currently participating in foster care, the Independent Living Re-entry Program, or the IL Program. IL Program participants will receive the payment but will not need to apply.	Tentative: Applications will be accepted in July and August 2021. Payments will be issued in September 2021.

C.6. Consultation and Coordination Between States and Tribes

There are four federally recognized tribes headquartered in Kansas. Those tribes along with their contacts include:

1. Iowa Tribe of Kansas & Nebraska; Shelly Thompson nafscm@iowas.org
2. Kickapoo Tribe in Kansas; Jacob Castillo Jacob.Castillo@ktik-nsn.gov
3. Prairie Band Potawatomi Nation (PBPN); Tameka McCray
TamekaMcCray@pbpnation.org
4. Sac and Fox of Missouri in Kansas and Nebraska; Pam Burden
pam.burden@sacandfoxks.com

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. Each quarterly meeting has an established agenda and sign in sheet. See Attachment 55 DCF/Kansas Tribe Quarterly Meeting notes.

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). 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, barriers, MOU's, APSR/CFSP updates and PIP updates, access Pathlore, and a future goal of individual tribal monthly meetings.

Challenges due to the Covid-19 pandemic included multiple losses in upper management within Social Services for the Kansas Tribes. Thus, creating an opportunity to meet virtually. Quickly, it was acknowledged virtual meetings saved time for the tribes in several capacities: travel time, staff time, safe distancing, maintain communication, and enhance relationships.

During SFY2021 a meeting was held with the Office of the Governor's Native American Affairs Tribal Liaison, Chris Powell. It was discovered that in years past the Governor's Native American Affairs Tribal Liaison was invited to the quarterly statewide meetings. Upon his return to the Governor's Tribal Liaison position he has not been invited to the quarterly meetings. He will be invited to all future quarterly meetings and attend as his schedule allows. We also discussed to maintain communication about tribal matters that may affect Kansas tribes.

Invitations are extended 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, Icebreakers Group, Mandated Reporter Training, Fostering Play Training, Podcast Series That Can Help Your Agency Improve Service Options, and 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 statewide meetings 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 family and child well-being 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.

Challenges due to the Covid-19 pandemic did not support face-to-face site meetings due to social distancing and travel restrictions. Utilizing technology, DCF and the tribes began meeting monthly through Zoom. These meetings provided mutual meeting space to conduct on-going discussions, introductions, reviewing the Memorandum of Understanding (MOU), 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. This year how several tribes inquired how to request an increase. The process of a submission proposal for a grant increase was provided to all the tribes verbally and written. The PPS regional tribal liaison participates in monthly, and quarterly meetings.

The purpose of a site visit is to provide an opportunity to share and exchange information regarding any changes and updates in the family and child well-being systems within tribal and DCF programs. Tribal social services concerns are addressed, and need 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 individual site visits.

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 Year. This last year an electronic link was provided to the tribes to have an electronic copy of the States CFSP. Follow up requests were emailed within the fiscal year, if no plans received from tribe(s).

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 DCF 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 believe" a child may be an Indian child. A meeting was set up with Erica Hunter the KPRC Director to discuss "reason to know" unassigned intakes that identify tribal

persons. DCF legal, KPRC Director, PPS Tribal Specialist, and PPS Training Program Manager discussed;

PPM1340 A. The following are referrals and reports DCF is not permitted by K.S.A. 38-2226 to investigate. In such cases, the information taken by the KPRC shall be transmitted promptly to the appropriate person or agency.

KPRC policies do not specifically address tribe screen outs. Further discussions are being held to assure all aspects regarding screen outs are being addressed such as malice reports.

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 (FP) and Foster Care Services (FC) 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 family and child well-being 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 specialist 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.

One tribe PBPN has submitted their pre-print for Title-IVE and is waiting to hear back from submission. They have expressed an interest in partnering with DCF to learn and gain work experience to manage IV-E cases before becoming direct pay. This discussion occurred under the Director of PBPN Social Services who has since vacated the position. This topic has been tabled until the leadership position is filled, and they share their direction for the program.

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), Sac and Fox, 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. See Attachments 70-73 for all signed ICWA MOU's between DCF and each federally recognized Tribe 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 State and Tribal communities regarding the alleged abuse or neglect of children. Upon completion of the investigation, the tribal worker will file, if necessary, petitions to the Tribal courts, 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 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. 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 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.

The DCF Family First Program Manager has been working with the tribes and collaborating the intake process for the tribal families. The tribes have expressed wanting to have partnerships with the service providers to support their families along the process and be in tandem with service providers. The tribes will also be available as a partner to provide cultural components for the families. This collaboration will continue throughout SFY2022.

D. Foster Care Services

Tribes provide services to assist youth in need of out-of-home placement. Each tribe is responsible for the selection and training of staff to provide the services. 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. See Attachments 70-73 for ICWA MOU's signed between DCF and each federally recognized Tribe in Kansas.

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 family and child well-being 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) 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.

This last year the one PBPB youth was sporadic in participation due to COVID-19 restrictions. The ILP staff position experienced turn over throughout the year. A meeting was set up with the DCF's ILP program staff, tribes, PPS tribal specialist, and ACF to go over available ILP opportunities for the youth. DCF Deputy Director of Youth Programs and Independent Living Program Manager facilitated the meeting and provided explanations available services. The tribes were provided a list to reference. See Attachment 51 DCF IL Communication with Tribes SFY 2021.

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 PBPB, 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. PBPB 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 to be signed by Sac and Fox. Sac and Fox subsequently submitted a newly created MOU. Language from both documents was then combined and DCF and the tribe will review to come to an agreement which the parties could execute. The goal was to enter into an MOU that is beneficial to the tribal families, youth and children served to be approved by the DCF Secretary and Tribal Council. An MOU (not the identical document) has been reviewed each year since 2011 but the tribe had not signed which must be a voluntary execution of contract. On October 14, 2020 Sac and Fox submitted a signed MOU to DCF. On October 27, 2020 Sac and Fox has a completed and approved MOU with all required signatures. This is a great accomplishment for Sac and Fox and DCF to complete an updated MOU in ten years. See Attachment 73 for a copy of the signed MOU.

March 27, 2020 Kickapoo Tribe in Kansas submitted a signed MOU to DCF. A completed MOU between Kickapoo Tribe in Kansas DCF with all required signatures was completed on March 2, 2021.

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 family and child well-being 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 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” 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. All revised Judicial Council ICWA forms were approved by the Kansas Judicial Council and posted on their website. 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 well-being. 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 family and child well-being 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 (PBPN) in Mayetta, KS. These pilot groups for families with children ages 6-11 include 4 families in Lawrence and 5 families at PBPN. 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, PBPN is planning a fall SFP group 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, PBPN, 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.

During the last year 2020-2021 the pandemic presented challenges to continue delivery program education to families. With the assistance of technology, the in-person classes switched to virtual classes. This transition required much planning to accommodate the families to be prepared for the virtual experience as well as the trainers had to learn Zoom and engage the participants. They got creative with story time for the children. The group meal became dinner boxes for the family to keep them on track and spending quality time with one another.

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 PBPN 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.

Update 2019-2021 the SharePoint access availability. The Tribes were not able to gain outside access to the SharePoint due to connectivity challenges. The concept of housing the same information and option of tribes to share/upload files. Microsoft Teams has been one of the web based virtual meeting programs that supports many of these concepts. A few of the tribes throughout the year have expressed Teams is unstable due to location or reception. This program is being researched for feasibility and potential growth.

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, now retired, former 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 National Indian Child Welfare Association (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 and has continued to be updated by the tribes.

D. CAPTA State Plan Requirements and Update

NAME, ADDRESS AND FAX NUMBER OF THE APPLICANT AGENCY:

Kansas Department for Children and Families
Prevention and Protection Services
DCF Administration Building
555 S. Kansas Ave. 4th Floor
Topeka, KS 66603

STATE LIAISON OFFICER:

Ann Goodall (interim)
DCF Administration Building, Second Floor
555 S Kansas Ave
Topeka, KS 66603 Phone: 785-296-6083 Fax: 785-368-8159
E-mail: Ann.Goodall@ks.gov

APPLICANT AGENCY'S EMPLOYER IDENTIFICATION NUMBER:

48-6029925

DUN AND BRADSTREET DATA UNIVERSAL NUMBERING SYSTEM (DUNS): 175 - 37-804

The CAPTA state plan is embedded within the Annual Program and Service Review, which can be found here:

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

On July 1, 2015 Kansas added “Aggravated Human Trafficking” to the Kansas Code for Care of Children definition of Sexual Abuse. There were additional substantive changes to State Law related to prevention of child abuse and neglect in the 2016 legislative session specifically tied to Preventing Sex Trafficking and Strengthening Families Act. Policies were revised as needed. On July 1, 2016, new legislation went into effect which expands the definition of Sexual Abuse as it relates to Human Trafficking. In SFY 2017 there have been no substantive changes which would affect eligibility for CAPTA. The full statute for Human Trafficking can be found at www.kslegislature.org. The specific statute is 21-5426(b). In SFY 2020 there have been no substantive changes which would affect eligibility for CAPTA.

The 2018 CAPTA State Plan identified the following items of area of focus in Kansas:

- The program areas selected for improvement from the 14 areas delineated in section 106(a) (1) through (14) of CAPTA are areas (1), (4) and (7).
- Area (1) the intake, assessment, and investigation of reports of abuse and neglect;
- Area (4) enhancing the general child protective system by developing, improving, and implementing risk and safety assessment tools and protocols; and
- Area (7) improving the skills, qualifications, and availability of individuals providing services to children and families, and the supervisors of such individuals, through the child protection system, including improvements in the recruitment and retention of caseworkers.

In 2019, DCF started the process of approval for hiring a position in DCF Administration to assist with all program CAPTA funds. The position job duties include working with Citizen Review Panels, Child Death Review Board, Critical Incidents and monitoring of CAPTA funds. In review of child deaths and critical incidents the position will be looking for ways to improve policy, procedures and training for front line staff. The position has been filled by Ann Goodall who began her work in July 2019.

As the CARA changes are implemented, the PPS Program Administrator has started a workgroup to consist of PPS Administrative staff and PPS regional staff. One goal of this workgroup is to increase community collaboration. The workgroup will be working on ways for DCF to collaborate with representatives from the medical community including hospital staff, doctors who work with pregnant women and newborns, substance abuse treatment providers, and others identified who work with this population. The initial goal will be to work at a high level to educate stakeholders about CARA and what their role will be with the intent to possibly break off into more regionalized groups as progress is made.

In SFY 2018 Kansas DCF representatives began participating in the Kansas Prescription Drug and Opioid Advisory Committee and Neonatal Abstinence Syndrome Sub-Committee.

CAPTA funds continue to be utilized throughout the agency for providing education and resources on a variety of issues affecting the prevention of child abuse and neglect. Each of the four regions and PPS Administration has utilized their allotment of CAPTA dollars in a variety of ways. Activities for this reporting period include:

- Paying expenses for Child Protective Services (CPS) Specialists to attend various educational courses uses a significant amount of CAPTA funding. This includes registration fees, hotel, per diem, car rental, gasoline, etc. Courses include pre-service training for new CPS Specialists, as well as more advanced training for seasoned staff. These expenses include attendance at;
 - Annual Governor’s Conference for the Prevention for Child Abuse and Neglect,
 - ChildFirst Forensic Interview and Advanced Interview Training for Multi-Disciplinary Teams across the state,
 - Human Trafficking,
 - Kansas implemented the CORE Curriculum in SFY 2017. This is a comprehensive training curriculum consisting of eight modules of training. The primary staff targeted for the training are new staff and their supervisors.
 - The Kansas Behavioral Sciences Regulatory Board (BSRB) requires CPS Specialists licensed by said board to maintain their licenses per BSRB rules and regulations.
 - One course CPS Specialists utilizes live actors paid by CAPTA funds to give staff the experience of conducting live interviews.
 - Federal CAPTA funds are also utilized to provide a home visitor safety course for PPS staff.

Kansas DCF assures every court case involving a victim of child abuse or neglect is appointed a well-trained guardian ad litem (GAL) pursuant to CAPTA section 106(b)(2)(B)(xxiii)). The Kansas Statue, K.S.A. 38-2205 (a) states, “Upon the filing of a petition, the court shall appoint an attorney to serve as guardian ad litem for a child who is the subject of proceedings under this code. The guardian ad litem shall make an independent investigation of the facts upon which the petition is based and shall appear for and represent the best interests of the child. When the child’s position is not consistent with the determination of the guardian ad litem as to the child’s best interest, the guardian shall inform the court of the disagreement. The guardian ad litem or the child may request the court to appoint a second attorney to serve as attorney for the child, and the court, on good cause shown, may appoint such second attorney. The attorney for the child shall allow the child and the guardian ad litem to communicate with one another but may require such communications to occur in the attorney’s presence.” Additionally,

there is a Kansas Supreme Court Rule 110A which relates to duties of the GAL. See Attachment 57 for KS Supreme Court Rule 110A. OJA oversees the primary training of the GALs. Within SFY2021, a project approved by Kansas Supreme Court Task Force permanency planning includes six modules of online training for GALs was completed is now available via Kansascourts.org website. This project was part of the Court Improvement Program (CIP) Strategic Plan. DCF collaborated with OJA regarding the project and has representation on the KS Supreme Court Task Force on Permanency Planning.

See section C.1.j Citizen Review Panels / Children's Justice Act for copy of the DCF's most recent written responses to the citizen review panel reports.

The Kansas Department for Children and Families Policy and Procedure Manual outlines requirements for practitioners to utilize and be knowledgeable about Plans of Safe Care. Section 2050 of the Policy and Procedure Manual states the following:

2050 Plan of Safe Care

A. Purpose

The enactment of the Comprehensive Addiction and Recovery Act of 2016 (CARA) added requirements to the Child Abuse Prevention and Treatment Act (CAPTA). CARA addresses the effects of substance abuse on infants, children and families with the intent of early identification and intervention, to support families affected by substance use disorders.

When identified early, the Plan of Safe Care ensures pregnant women using substances receive access to appropriate treatment, prenatal care, preparation for the birth of an infant who may experience Neonatal Abstinence Syndrome and follow up after release from the hospital.

The Plan of Safe Care required by CAPTA differs from a safety plan which addresses the immediate safety. A Plan of Safe Care is a continuous and long-term plan for the family which focuses on the infant's ongoing health, development, safety and well-being. The Plan of Safe Care identifies the needs of the infant and family and the services to meet those needs. The Plan of Safe Care incorporates the following needs of the infant and family:

1. The physical health, substance use disorder treatment needs, general functioning, development, safety and any special care needs of the infant who may be experiencing neurodevelopmental, physical effects or withdrawal symptoms from prenatal exposure
2. The physical/social/emotional health, substance use disorder treatment needs of the parent(s)/caregiver(s)
3. Services and supports to strengthen the parent/caregiver's capacity to nurture and care for the infant

The Plan of Safe Care requires monitoring of referrals to, and delivery of appropriate services for the infant and family. Plans of Safe Care may continue with service providers in addition to and after DCF involvement with the family.

B. Criteria

When a report is assigned Substance Affected Infant, FINA with the sub-type Infant Positive for Substances, or Pregnant Woman Using Substances (PWS), the CPS Specialist shall determine whether criteria is met for a Plan of Safe Care within the assigned response time, documented on the PPS 1002, Section IX. The CPS Specialist shall consult with the health care provider with knowledge of the effects

of any prenatal substance abuse on the infant. A Plan of Safe Care shall be completed when one or more of the following criteria are met:

1. the mother has used/is using opioids or other substances during pregnancy and/or the pregnant woman is participating or has participated while pregnant in a medication-assisted treatment program (methadone, etc.) or
2. a medical professional confirms the infant is affected by substance abuse, withdrawal symptoms or Fetal Alcohol Spectrum Disorder. When criteria is unknown or not met for a Plan of Safe Care, the Family Based Assessment shall continue. If at any time, during the life of the case, additional information is available which meets criteria for a Plan of Safe Care, DCF or a service provider shall complete a Plan of Safe Care for the infant and family.

C. Engagement with the Family

The family shall be informed the purpose of the Plan of Safe Care is identifying the needs of the infant and family to provide services with the goal of maintaining the infant and any other children safely in the home. PPS 2008 What is a Plan of Safe Care shall be provided to the family.

D. Plan of Safe Care

Prior to the infant's release from the hospital DCF shall list the needs of the infant and family members on the Plan of Safe Care (PPS 2007). When DCF receives the report after the infant has been released from the hospital, or if the case is assigned for a Pregnant Woman Using Substances (PWS), the Plan of Safe Care shall be initiated as soon as possible, not to exceed 3 working days from the initial contact.

Once the needs are identified, a referral for services with community programs or Family Preservation Services (FPS) shall be offered to the family to provide the services and/or assist the family in locating appropriate services to meet the needs identified in the Plan of Safe Care. Whenever possible, the service provider should be able to continue to monitor the Plan of Safe Care by identifying the services and make referrals for the services to meet the needs identified on the Plan of Safe care for the infant and family.

If the family declines services, the CPS specialist shall consult their supervisor for next steps relevant to this family. If Team Decision Making is available in the Region, consider convening a team to review.

Depending on the circumstances of the case, Section III Services, and Referral Dates on the PPS 2007 Plan of Safe Care shall be completed by DCF, or service provider based on the needs of the family to support successful engagement in services. The Plan of Safe Care is a continuous plan which is updated and monitored as needed.

The PPS 2007 Plan of Safe Care is completed with the family, and utilizes information gathered throughout the assessment from a multidisciplinary team. To develop a coordinated and comprehensive assessment of the needs of the infant and family, the multidisciplinary team may include, but not be limited to:

1. Child Welfare
2. Medical
3. Substance use disorder treatment
4. Mental health

5. Early childhood intervention
6. Home visitors
7. Public health
8. Other community supports, as appropriate

The Safety Assessment PPS 2030B, Family in Need of Assessment PPS 2030E, UNCOPE PPS 2005, and CWCMP or community partner assessments shall be used to inform the Plan of Safe Care. Appendix 2L Factors to Guide the Plan of Safe Care may be used to assist in gathering information for the Plan of Safe Care.

If following concerted efforts of engagement, the family selects not to participate in the Plan of Safe Care, the CPS Specialist or the service provider shall document the family's decision not to participate in Section IV Signatures. The PPS 2007 Plan of Safe Care, containing the identified needs and recommended services, shall be provided to the family in the event the family seeks other community services on their own. The CPS specialist shall explain to the family, they may want to share the Plan of Safe Care with other community providers and resources to seek services on their own.

E. Monitoring the Plan of Safe Care

A Plan of Safe Care is a continuous plan for the family which focuses on the infant's ongoing health, development, safety and well-being. In addition, the Plan of Safe Care shall address the caregiver and other family member's physical/social/emotional health, substance use disorder treatment, parenting capacity, and preparation to care for the infant. The PPS 2007 Plan of Safe Care is updated as needed to monitor additional needs identified and referrals for services.

The needs related to the safety and risk concerns for the infant and family identified by the PPS 2007 Plan of Safe Care shall be incorporated in the PPS 3050 Family Service/Preservation Case Plan as the objectives and activities are developed.

The Plan of Safe Care shall be monitored to determine whether referrals are made to appropriate services, and whether services are delivered to the infant and family or caregiver.

Upon closure of a Family Service/Family Preservation case, the Plan of Safe Care PPS 2007 shall be provided to the family. The family has the option to continue services and monitoring by community services and resources.

There have been 86 Plans of Safe Care completed from 1/1/2019-3/31/2021.

American Rescue Plan Act of 2021

Kansas DCF received \$949,707 in CAPTA funds related to the 2021 American Rescue Plan. At the time of the 2022 APSR submission plans have not been finalized on how these funds will be spent. An update will be provided in the 2023 APSR.

E. Updates to Targeted Plans within the 2020-2024 CFSP

Foster and Adoptive Parent Diligent Recruitment Plan

DCF and its community and contracted partners have worked together, in collaboration with the National Resource Center for Diligent Recruitment, to develop a cohesive Diligent Recruitment Plan. The first publication of the plan occurred in 2016. See Attachment 25 for the DCF Diligent Recruitment Plan 2020-2022. This was developed in partnership with Capacity Building, Center for States for guidance and support. Kathy Ledesma, the Program Area Manager for Adoption and Christine DeTienne, the State/Territory Liaison who have continuously provided guidance and technical assistance as key members of the Diligent Recruitment teams.

The plan was developed to showcase:

- Consistent messaging and communications related to diligent recruitment with emphasis on improved data collection and analysis.
- Implementation of effective strategies for recruiting and supporting families.
- Kansas will improve outcomes of timely permanency, placement stability and foster/adoptive parent licensing, recruitment and retention.

Data Driven Goals are:

- Recruit, prepare and retain foster and adoptive families for children who are age 13 and older and who have significant behavioral and mental health needs.
- Recruit, prepare and support African American foster and adoptive families.
- Recruitment, prepare and support adoptive families for children/youth registered on the adoption exchange.

A smaller sub-group called the DR Core Implementation Team was put together in late 2019, comprised of experienced individuals in leadership from the various Child Placing Agencies (CPAs.) The goal of the group is to provide coordinated vision and leadership in the public-private partnership towards the achievement of the objectives in the State's Diligent Recruitment Plan.

A mission statement was developed for the group:

We are champions of One Diligent Recruitment Vision for All identified Kansas children. We will collaborate to model and advocate for creatively increasing capacity of placement resources.

The group holds shared recruitment commitments, as CPAs numbers have increased, there remains a significant need of foster homes to care for the high acuity kids. The leaders of the Core Group for Diligent Recruitment have a shared mission which is to model responsibility to all agencies, staff etc.

Mission points:

- Reduce the number of children in out of home care.
- Share resources to close the gap between placement capacity and placement needs.
- Advocate for change in culture by moving/building the support system as this groups goal is about providing resources for kids to get to permanency quicker.
- Move the needle on definition/language of foster parents by changing the language. One Message for One Child Welfare System.

See Attachment 25 Diligent Recruitment Plan.

Health Care Oversight and Coordination Plan

See Attachment 58 for the Update to Health Care Oversight and Coordination Plan.

Disaster Plan

The most significant disaster faced by Kansas, as in all other states, was the COVID-19 pandemic. Please see Attachment 59 for the DCF Administration Disaster Plan. Each DCF region similarly has a Disaster Plan following the same structure as the attached plan, but with different emergency contact numbers included.

Please also see attached disaster planning documents from Child Welfare Case Management Providers: 60 KVC Kansas, 61 Saint Francis Ministries, 62 TFI Family Services and 63 Cornerstones of Care. Additionally, See Attachment 74 for the Independent Living Disaster Plan.

Training Plan

See Attachment 24 DCF Training Plan, and supplemental training attachments:

- Attachment 64 DCF PPS SFY 2021 Training Report
- Attachment 65 Training Plan – Cornerstones of Care
- Attachment 66 Training Plan – DCCCA, Inc.
- Attachment 67 Training Plan – KVC Kansas
- Attachment 68 Training Plan – Saint Francis Ministries
- Attachment 69 Training Plan – TFI Family Services

Effective October 1, 2014, the State of Kansas claims 75 percent Federal Financial Participation (FFP) for TIPS MAPP and Deciding Together training. Kansas claims 75 percent FFP for on-going training provided to foster (including kin) and adoptive parents. All other eligible training will be claimed at the regular 50 percent administrative FFP rate. Total computable costs subject to the 75 percent FFP is estimated to be less than \$1.0 million dollars.

F. Statistical and Supporting Information

CAPTA Annual State Data Report Items

I. Information on Child Protective Service Workforce

Position	Education Requirements	Qualification	Training Requirement	
			Pre-Service*	Annually
Administrative Specialist	Education may be substituted for experience	Two years of experience in general office, clerical and administrative support work	12 hours	1 hour minimum
Intake Protection Specialist (IPS)	Two years of college or two years of work experience in the Kansas Protection Report Center	Two years of experience at call center/customer service center; bilingual in English/Spanish preferred.	12 hours	1 hour minimum

Child Protection Specialists	Four-year degree in a Human Services or Behavioral Sciences field of study, or education determined relevant by the agency	License to practice social work, Professional Counseling or Marriage and Family Therapy in the State of Kansas	PPS social work specialists = 78 hours KPRC social work specialists = 59 hours	40 continuing education hours every 2 years to maintain licensure
Position	Education Requirements	Qualification	Pre-Service*	Annually
Child Protection Supervisor	Bachelors level social worker or Masters level Professional Counseling or Marriage and Family Therapy	License to practice social work, Professional Counseling or Marriage and Family Therapy in the State of Kansas plus one year of social work experience	11 additional program related hours (to above) plus approximately 24 hours of agency-related training	40 continuing education hours every 2 years to maintain licensure

*Pre-Service occurs within 90 days of employment

ii. Data on education, qualifications and training

<i>Data as of 2/7/2021</i>	Intake Protection Specialist (IPS)	Protection Specialists	Protection Supervisor
Not Indicated ^[1]	8	23	3
Less than High School	0	0	0
High School or equivalent	5	1	1
1 Year College	4	10	0
2 Years College	1	3	1
2 Year College Degree	7	2	0
3 Years College	0	13	2
4 Years College	0	13	0
Bachelor's Degree	5	258	62

^[1] The new employee is given a form to provide personal demographic information, i.e., name, address, etc. Education level is a part of this form, but it is not required they provide it. If employees don't enter this information on the form it is not entered into the system. Transcripts and education are verified in the application/hiring process; however, for reporting purposes education is tracked via this form.

Some Graduate School	0	0	2
Master's Degree	2	46	10
Doctorate	0	1	0
Total	32	370	81

Qualifications and Training Requirements are met 100 percent for employees to retain employment. There are no specific educational requirements for advancement in the agency. A minimum of one year's child welfare experience is required to be eligible for a supervisory position.

iii. demographic information of the child protective service personnel;

Race							
Position	Hispanic	American Indian	Black	White	Asian	Not Specified	Total
Intake Protection Specialists	3	0	6	13	1	9	32
Protection Specialists	15	0	28	218	1	108	370
Protection Supervisors	2	1	4	55	0	19	81

Sex			
Position	Male	Female	Total
Intake Protection Specialists	4	28	32
Protection Specialists	59	311	370
Protection Supervisors	2	79	81

Age							
Position	20-29	30-39	40-49	50-59	60 & over	Not Specified	Total
Intake Protection Specialists	4	11	6	8	3	0	32
Protection	163	80	65	46	16	0	418

Specialists							
Protection Supervisors	17	29	15	18	2	0	81

iv. information on caseload or workload requirements for such personnel, including requirements for average number and maximum number of cases per child protective service worker and supervisor (section 106(d)(10) of CAPTA).

SFY2021 YTD (Jul-Feb) Caseload	Child Protection Specialist (CPS)	CPS Supervisors	CPS Staff and Supervisors
Average Monthly Cases	11.5	4.6	11.2
Average Max Monthly Cases	17.3	6.1	16.8

SFY2021 YTD (Jul-Feb) Caseload	CPS to Supervisor Ratio
Average Monthly Ratio	3.6
Max Monthly Ratio	4.2

SFY2021 YTD (Jul-Feb) Caseload	CPS to Supervisor Ratio	CPS Staff Ratio	Total Cases per Supervisor
Average Monthly Ratio/Cases	3.6	11.5	41.5

Juvenile Justice Transfers

Number of children under the care of the state child protection system who were transferred into the custody of the state juvenile justice system in FY 2019	54
Source of the information	FACTS, DCF's Child Welfare Reporting System
How the state defines the reporting population	Youth transferred to another state agency

Education and Training Vouchers

Please see attachment D. number 48.

Inter-Country Adoptions

As of April 2021, DCF has approximately 8 children in custody who were previously adopted internationally. SFM reported 1, KVC reported 5, Cornerstones of Care reported 2 & TFI reported none. See section C5, “Services for Children Adopted from Other Countries” for additional details.

Monthly Caseworker Visit Data

Please see monthly caseworker visit section C.5.

G. Financial Information

G.1.a. Monthly Caseworker Visit Formula Grant and Data

Please see monthly caseworker visit section C.5.B, #6.

G.1.b. Financial Information for Title IV-B Subpart 1 & 2

Please see Attachment 45 CFS 101s, in both .pdf and excel formats. Also please see Attachment 49 Kansas FY 2021 Re-allotment in .pdf and excel formats.

G.1.c. Chafee Program

G.2 Current Year Funding

FY2021 Re-allotments, Requests for Additional Funding and Submitting a Revised CFS-101 Budget Request

G.2.a. Re-allotments

G.2.b. Revisions – Submitting a Revised Part 1

G.3 FY 2022 Budget Request – CFS-1-1, Parts I and II

G.4 FY 2019 Title IV-E Expenditure Report – CFS-101, Part III

G.5 Expenditure Periods and Submission of Standard Form 425 (SF-425) Federal Financial Report

Attachment Guide

1. Kansas DCF PPS Organizational Chart
2. Kansas Practice Model Explainer
3. Health Care Oversight and Coordination Plan
4. IAB Charter
5. Kansas/Missouri Border Agreement
6. 2019-2020 Governor's Behavioral Health Subcommittee Annual Report
7. CYPM Kansas State Policy Team meeting minutes
8. Prevention Workgroup meeting minutes/updates
9. Information Sharing Group meeting minutes/updates
10. KDOC-JS Juvenile Justice Web-line Newsletter
11. DCF Prevention in Kansas Newsletter
12. Shawnee County CYPM Implementation Recommendations
13. Montgomery County CYPM Implementation Recommendations
14. Sedgwick County CYPM Adjustment Recommendations
15. DCF Internal Mental Health Audit #1
- 15.1 DCF Internal Mental Health Audit #2
- 15.2 Kansas Family Crisis Response Services
16. Kansas CYPM Flyer
17. Youth Services Collaboration meeting minutes
18. JIAS-DCF Crossover Youth Report SFY 2005-2020
19. Kansas Citizen Review Panel CTT Annual Report 2020
- 19.1 Director's Response 2020 Custody to Transition report
20. Kansas Citizen Review Panel Intake to Petition/CJA Annual Report 2020
- 20.1 Director's Response 2020 Intake to Petition
- 20.2 Kansas Reintegration RPR Tracking Tool
21. Adoption Tracking Tool Pilot Survey and Focus Group Report
- 21.1 Adoption Tracking Tool
22. Parent Youth Facilitation Initial Pilot Summary
- 22.1 Kansas Foster Parent Survey Results
23. KPM Training Crosswalk
24. DCF Training Plan 2021
25. DCF Diligent Recruitment Plan 2020-2022
- 25.1 Cornerstones of Care Recruitment Plan 2021

- 25.2 KVC Recruitment Plan 2021
- 25.3 St. Francis Ministries Recruitment Plan 2021
- 25.4TFI Recruitment Plan 2021
- 26. DCF Strategic Implementation Team Employee Experience charter
- 27.DCF Recruitment Flyer
- 28. Parent-Youth Relationship Facilitation Program Fact Sheet
- 29. Foster Care Structure Rate
- 30. Family Preservation Tiers
- 31. Family Preservation Policy Suggestion Flyer
- 32. FFPSA Providers
- 33. Prevention Service Track
- 34. FFPSA Presentations and workshops
- 35. Kansas Bed Numbers for QRTP Facilities
- 36. Adopt Kansas Kids State Report 2021
- 37. Policy 5360 Procedures Related to Signing the Adoption Placement Agreement
- 38. Policy 6210 Eligibility Requirements for Adoption Assistance
- 39. State Child Death Review Board Annual Report
- 39.1 Director's Response SCDRB 2020
- 40. Youth Recovery Report 2021
- 41. KFAN Kansas Kinship Navigator Resource Guide
- 42. CWCMP IL Activities SFY 2021
- 42.1 KS FY20 Baseline
- 42.2 KS FY14-18 Data Snapshot
- 42.3 KS FY20 Served
- 43. DCF Independent Living Regional Activities SFY 2021
- 43.1 SSIS Annual Report SFY 2020
- 43.2 IL Monthly Demographic Report
- 44. KYAC Work Plan 2018-2022
- 45. CFS's 101s**
- 46. Kansas Youth Engagement Team Action Plan 2021
- 47. CAA IL & ETV Expansion Flyer
- 48. Annual Reporting of Education and Training Vouchers Awards (D)**
- 49. FY21 Kansas Re-Allotment**
- 50. DCF Independent Living-Tribal Coordination Ideas 2020
- 51. DCF IL Communication with Tribes SFY 2021
- 52. PPS 7003 Voluntary Agreement for Re-entry
- 53. Re-entry Acknowledgement Memo
- 54. CAA Re-entry Flyer
- 55. DCF/Kansas Tribes Quarterly Meeting notes
- 56. NAFS Monthly Share
- 57. KS Supreme Court Rule 110A

58. Update to Health Care Oversight
59. DCF Administration Disaster Plan
60. KVC Kansas Disaster Plan
61. Saint Francis Ministries Disaster Plan
62. TFI Family Services Disaster Plan
63. Cornerstones of Care Disaster Plan
64. DCF PPS SFY 2021 Training Report
65. Training Plan – Cornerstones of Care
66. Training Plan – DCCCA, Inc.
67. Training Plan – KVC Kansas
68. Training Plan – Saint Francis Ministries
69. Training Plan – TFI Family Services
70. DCF and Iowa Tribe ICWA MOU
71. DCF and PBPN ICWA MOU
72. DCF and Kickapoo Tribe in Kansas ICWA MOU
73. DCF and Sac and Fox Nation of Missouri in Kansas and Nebraska ICWA MOU
74. Independent Living Disaster Plan

Acronym Guide

A

AAICPC: Association of Administrators of the Interstate Compact on the Placement of Children
ABC: Attachment and Biobehavioral Catch-Up
ACE: Adverse Childhood Experience
ACF: Administration for Children and Families
A-CRA: Adolescent Community Reinforcement Approach
AECF: Annie E. Casey Foundation
AFCARS: Adoption and Foster Care Analysis Reporting System
AKK: Adopt Kansas Kids
AP: Assessment and Prevention
APA: Adoptive Placement Agreement
APLI: Appropriate Placement Level Indicator
APPLA: Another Planned Permanent Living Arrangement
APSR: Annual Progress and Services Report
ASFA: Adoption and Safe Families Act
ASQ-SE: Ages and Stages Questionnaire, Social Emotions
ATT: Adoption Tracking Tool
AUK: Adopt US Kids

B

BIA: Bureau of Indian Affairs
BID: Best Interest Determination
BIS: Best Interest Staffing
BSRB: Kansas Behavioral Science Regulatory Board

C

CAFAS: Child and Adolescent Functional Assessment Scale
CAK: Children's Alliance of Kansas
CAP: Corrective Action Plan
CAPTA: Child Abuse Prevention and Treatment Act
CARA: Comprehensive Addiction and Recovery Act of 2016
CASA: Court Appointed Special Advocate
CAT: Mobile Response Crisis Assessment Tool
CB: Children's Bureau
CBC: Capacity Building Center
CBCAP: Community-Based Child Abuse Prevention
CBST: Community Based Service Team
CCDF: Child Care Development Fund
CCWIS: Comprehensive Child Welfare Information System
CDDO: Community Developmental Disability Organization
CFCIP: John H. Chafee Foster Care Independence Program
CFP: Casey Family Programs

CFSP: Child and Family Services Plan
CFSR: Child and Family Services Review
CIF: Children’s Initiatives Fund
CIP: Court Improvement Program
CIS: Cognitive Interaction Skills
CINC: Child in Need of Care
CJA: Children Justice Act
CJJR: Center for Juvenile Justice Reform
CLE: Continuing Legal Education
CMHC: Community Mental Health Center
CMP: Case Management Provider
CMS: Centers for Medicare and Medicaid Services
CoC: Continuum of Care
CPA: Child Placing Agency
CPI: Continuous Performance Improvement
CPS: Child Protective Services
CQI: Continuous Quality Improvement
CRA: Central Reporting Application
CRT: Caregiver Response Tool
CROPS: Child Report of Post-Traumatic Symptoms
CSDC: Child Stress Disorder Checklist
CSS: Child Support Services
CSS: Community Support Specialist
CST: Child Screening Tool
CTIC: Comprehensive Trauma Informed Care
CWCMP: Child Welfare Case Management Provider
CYPM: Crossover Youth Practice Model

D

DA/CA: District Attorney/County Attorney
DAISEY: Data Application and Integration Solutions for the Early Years
DCF: Kansas Department for Children and Families
DCU: Data Compliance Utility
DHCF: Department of Health Care Finance
DQU: Data Quality Utility
DR: Diligent Recruitment

E

EBP: Evidence Based Practices
EBIT: Executive Branch Information Technology
EES: Economic and Employment Services
EHS: Early Head Start
EPSDT: Early and Periodic Screening, Diagnosis and Treatment
ESSA: Every Student Succeeds Act
ETV: Education and Training Voucher

F

FACTS: Family and Child Tracking System
FAFSA: Free Application for Student Aid
FAP: Family Advocacy Program

FBI: Federal Bureau of Investigation
FC: Foster Care
FCRFL: Foster Care and Residential Licensing
FCSOC: Family Centered Systems of Care
FCT: Family Centered Treatment
FFPSA: Family First Prevention Services Act
FFT: Functional Family Therapy
FFY: Federal Fiscal Year
FINA: Family in Need of Assessment
FPS: Family Preservation
FS: Family Services
FY: Fiscal Year
FYI: Foster to Youth Independence

G

GAL: Guardian ad Litem
GBHSPC: Governor’s Behavioral Health Services Planning Council

H

H4H: Hope for the Holidays
HCBS: Home and Community Based Services
HFA: Healthy Families America
HISM: Hotline/Intake/Screening Managers
HTAB: Human Trafficking Advisory Board
HUD: Housing and Urban Development

I

IAB: Interagency Board
ICP: Individualized Crisis Plan
ICPC: Interstate Compact on the Placement of Children
ICWA: Indian Child Welfare Act
IDA: Individual Development Account
IDD: Intellectual Developmental Disability
IEP: Individualized Education Program
IFM: Initial Family Meeting
IL: Independent Living
IPS: Intake Protection Specialist
IRIS: Integrated Referral and Intake System
IRP: Individualized Recruitment Plan
ISP: Initial Service Plan

J

JAG- K: Jobs for America’s Graduates – Kansas
JCIC: Juvenile Crisis Intervention Centers
JIAS: Juvenile Intake and Assessment Services
JJOC: Juvenile Justice Oversight Committee
JO/CINC: Juvenile Offender / Child in Need of Care

K

KAAC: Kansas Adoption Advisory Council
KAN: Kansas Adoption Network

KAPP: Kansas Assessment Permanency Project
KASB: Kansas Association of School Boards
KBH: Kan-Be Healthy
KBI: Kansas Bureau of Investigation
KBOR: Kansas Board of Regents
KCCTF: Kansas Children’s Cabinet and Trust Fund
KCPSTA: Kansas Chafee Program for Successful Transition to Adulthood
KCRP-CT: Kansas Citizen Review Panel – Custody to Transition
KCSL: Kansas Children’s Service League
KDADS: Kansas Department for Aging and Disability Services
KDOC-JS: Kansas Department of Corrections – Juvenile Services
KDHE: Kansas Department of Health and Environment
KEES: Kansas Eligibility Enforcement System
KEESM: Kansas Economic and Employment Services Manual
KEHS: Kansas Early Head Start
KEHS-CCP: Kansas Early Head Start Child Care Partnerships
KEHS-HV: Kansas Early Head Start Home Visitation
KEY: Kansas Endowment for Youth
KFAN: Kansas Family Advisory Network
KFAPA: Kansas Foster and Adoptive Parent Association
KIDS: Kansas Initiative for Decision Support
KIN-TECH: Kinship Interdisciplinary Navigation Technologically Advanced Model
KIPS: Kansas Intake/Investigation Protection System
KKGU: Kansas Kids at GEAR UP
K-PARC: Kansas Post Adoption Resource Center
KPM: Kansas Practice Model
K-PMTO: Kansas Parent Management Training Oregon Model
KPop: Kansas Power of the Positive
KPQC: Kansas Perinatal Quality Collaborative
KPRC: Kansas Protection Report Center
KSA: Kansas Statutes Annotated
KSCDV: Kansas Coalition Against Sexual and Domestic Violence, Inc.
KSDE: Kansas State Department of Education
KSNAF: Kansas Serves Native American Families
KSSAF: Kansas Serves Substance Affected Families
KU: University of Kansas
KUCPPR: University of Kansas Center for Public Partnerships & Research
KUSSW: University of Kansas School of Social Welfare
KVC: KVC Kansas
KYAC: Kansas Youth Advisory Council

L

LGBTQI: lesbian, gay, bisexual, transgender, queer (or questioning), and intersex

M

MEPA: Multi-Ethnic Placement Act
MCO: Managed Care Organization
MCV: Monthly Caseworker Visits

MDT: Multidisciplinary Team
MHMAC: Mental Health Medication Advisory Committee
MI: Motivational Interviewing
MIS: Management Information System
MOU: Memorandum of Understanding
MRSS: Mobile Response and Stabilization Services
MST: Multisystemic Therapy

N

NACAC: North American Council on Adoptable Children
NAS: Neonatal Abstinence Syndrome
NAN: Non-Abuse/Neglect
NCANDS: National Child Abuse and Neglect Data System
NCCD: National Council on Crime and Delinquency
NCMEC: National Center for Missing and Exploited Children
NEICE: National Electronic Interstate Compact Enterprise
NFYI: National Foster Youth Institute
NDRU: NYTD Data Review Utility
NICWA: National Indian Child Welfare Association
NOSF: Notice of Survey Findings
NRCDR: National Resource Center for Diligent Recruitment
NRK: Non-related Kin
NYTD: National Youth in Transition Database

O

OCK: One Care Kansas
OJA: Office of Judicial Administration
OSRI: On Site Review Instrument

P

PAC: Permanency Advisory Council
PAR: Pre-Authorization Review
PAT: Parents as Teachers
PBPN: Prairie Band Potawatomi Nation
PCAP: Parent Child Assistance Program
PCIT: Parent Child Interaction Therapy
PCS: Permanent Custodianship Subsidy
PD: Physical Disability
PECFAS: Preschool and Early Childhood Functional Assessment Scale
PHA: Public Housing Authority
PIP: Program Improvement Plan
PPM: Policy and Procedure Manual
PPS: Prevention and Protection Services
Pre-ETS: Pre-Employment Transition Services
PRT: Parental Rights Termination
PRTF: Psychiatric Residential Treatment Facility
PSI: Parenting Stress Index
PSSF: Promoting Safe and Stable Families
PTSD: Post-Traumatic Stress Disorder
PWS: Pregnant Woman Using Substances

PYF: Parent/Youth Facilitation Project

Q

QRTP: Qualified Residential Treatment Program

R

RE/FC/AD: Reintegration/Foster Care/Adoption

RFP: Request for Proposal

RPR: Rapid Permanency Review

RS: Rehabilitation Services

RST: Response Team Specialist

RYAC: Regional Youth Advisory Council

S

SACWIS: Statewide Automated Child Welfare Information System

S. B.: Senate Bill

SCDRB: State Child Death Review Board

SCRIPTS: Statewide Contractor Reimbursement Information and Payment Tracking System

SCTFPP: Supreme Court Task Force on Permanency Planning

SDM: Structured Decision Making

SFM: Saint Francis Ministries

SFFC: Safe Families for Children

SFP: Strengthening Families Program

SFY: State Fiscal Year

SGF: State General Fund

SIDS: Sudden Infant Death Syndrome

SOS: Street Outreach Services

SPC: Strategic Planning Conference

SPT: State Policy Team

SRT: Special Response Team

SS: Seeking Safety

SSA: Social Security Survivors Benefits

SSDI: Social Security Disability Insurance

SSIS: Self-Sufficiency Information System

SUD: Substance Use Disorder

T

TA: Technical Assistance

TANF: Temporary Assistance for Needy Families

TB: Tuberculin

TBI: Traumatic Brain Injury

TBRI: Trust-Based Relational Intervention

TDM: Team Decision Making

TF-CBT: Trauma Focused Cognitive Behavioral Therapy

TFI: TFI Family Services

TIPS-MAPP: Trauma Informed Partnering for Safety and Permanence Model Approach to Partnerships in Parenting

TPR: Termination of Parental Rights

TS: Transition Services

TST: Trauma Systems Therapy

TVPA: Trafficking Victims Protection Act

V

VR: Vocational Rehabilitation

W

WIG: Wildly Important Goal

WSU: Wichita State University

Y

YLINK: Youth Leaders in Kansas