

CHILD AND FAMILY SERVICES REVIEW ROUND 4 STATEWIDE ASSESSMENT

Submitted To:

U.S. Department of Health and Human Services

FEBRUARY 12th, 2023

Minor formatting adjustments may have been made to this document for 508 compliance.

Content is unaffected.

500 SW Van Buren St, Topeka, KS 66603

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Statewide Assessment Section I: General Information

Department for Children and Families

State Child Welfare Contact Person(s) for the Statewide Assessment

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Title: PPS Director of Safety & Thriving Families, Performance Improvement and

Professional Development

Address: 555 S Kansas Avenue, Topeka, KS 66603

E-mail: Deanne.Dinkel@ks.gov

Statewide Assessment Participants

Provide the names and affiliations of the individuals who participated in the statewide assessment process; please also note their roles in the process.

		Role in Statewide Assessment
Name (First Last)	Affiliation	Process
Addie Zoeller		
Alexandria Hawkins	DCF	Agency Representative
Allyson White	DCF	Agency Representative
Amanda Brown	KU	Agency Representative
Amber Jewell*	CRP	Lived Expertise
Amy Ervin	DCF	Agency Representative
Amy Meek	KSDE	Agency Representative
Andrew Brown	KDADS	Agency Representative
Ann Goodall	DCF	Agency Representative
Annie Bell	DCF	Agency Representative
Ashley Brown	DCF	Agency Representative
Ashley Johnson	DCF	Agency Representative
Becci Akin	KU	Agency Representative
Becky Austin	Aetna	MCO
Becky Bennett	St. Francis	Agency Representative
Brenda Deacon	DCF	Agency Representative
Brenda Soto	DCF	Agency Representative
Cassandra Sines*	Lived Experience	Lived Expertise
Christy Howard	DCCCA	Agency Representative
Cory Seller*	DCF	Agency Representative
Deanne Dinkel	DCF	Agency Representative
Dena Russell Marion	OJA	Legal
Denise Gibson	Cornerstones of Care	Agency Representative
Desirae Pina	DCF	Agency Representative
Diana Erickson	Sunflower Health	MCO
Dr. Kaela Byers	KU	Agency Representative
Elise Dunnigan	KCSL	State or Community CW Agency Staff
Elizabeth Gregg	DCF	Agency Representative
Elizabeth Pfalzgraf	DCF	Agency Representative
Erick Vaughn	DCCCA	Agency Representative
George Williams	Cornerstones of Care	Agency Representative
Hannah Gremillion*	Lived Experience	Lived Expertise
Heather Krase-Minnick	DG CO	Legal
Heather Moon	KCSL	State or Community CW Agency Staff

Heaven Dotson* Lived Expertise Jacob Castillo Kickapoo Tribal Representative Jeff Butrick KDOC Agency Representative Jenn Preston DCF Agency Representative Jennifer Bretsnyder* DCF Agency Representative Jennifer Martin Smith Attorney Legal Judge Amy Coppola GE CO Judge Legal Judge Debra Anderson DC Co Judge Legal Judge Kevin Kimball FR CO Judge Legal Judy Hood BB CO Legal Kassi McDowell* Lived Expertise Lived Expertise Kate Jones- Roggenbaum* Katherine Evans* DCF Agency Representative Katy Armstrong DCF Agency Representative Katy Jigler KDHE Agency Representative Kairsten Hale* PBP Tribal Representative Kieli Frey DCF Agency Representative Kieli Frey DCF Agency Representative Kimberly Spearman Aetna MCO Lana Goetz OJA Legal Lanette Madison Cornerstones of Care Agency Representative Megan McKnight- Oswald Melinda Kline DCF Agency Representative Morgan Hall SN CO Attorney Legal Nicole Hines KVC Agency Representative Rebecca Turner DCF Agency Representative Repart Representative Rebecca Turner DCF Agency Representative Repart Representative Repart Representative Representative Agency Representative Agency Representative Agency Representative	Name (First Last)	Affiliation	Role in Statewide Assessment
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Sandra Shopteese DCF Agency Representative	Sandra Shopteese	DCF	Agency Representative
Sara Rust-Martin PBP Tribal Representative	<u> </u>	PBP	
Sara Swepston DCF Agency Representative			1
Shailiegh Piepmeier* Lived Expertise Lived Expertise			
Shannon Cole DCF Agency Representative		•	
Sherrie Gross DCF Agency Representative			
Stacie Tush TFI Agency Representative			
Stacy Schmelzle PBP Tribal Representative			
Stacy Tidwell DCF Agency Representative	•		1
Susan Drake Iowa Tribal Representative	•		

Name (First Last)	Affiliation	Role in Statewide Assessment Process
Tanya Becker	DCF	Agency Representative
Tiffany Bartley*	Lived Experience	Lived Expertise
Toni Harryman	DCF	Agency Representative
Traci Dotson*	Lived Experience	Lived Expertise
Vicky Roper	KCSL	State or Community CW Agency Staff
Emily Hartz	Parent Attorney	Legal
Elizabeth Sweeney- Reeder	District Attorney	Legal
Asia Carter	Family Council	Focus Group Participant
Audra Nixon	Family Council	Focus Group Participant
Betsy Miller	GAL	Legal
Daniel Olson	Legal	Legal
Richard Buck	District Attorney	Legal
Sandra Lessor	District Attorney	Legal
Angela Evans*	Family Council	Lived Expertise
Heather Baum*	Family Council	Lived Expertise
Gabriella Guido*	Family Council	Lived Expertise
Carrie Stillian*	Family Council	Lived Expertise
Dale Caine*	Family Council	Lived Expertise
Stormy Lukasavage*	Family Council	Lived Expertise
Michael McDowell*	Family Council	Lived Expertise
Nikki Jackson*	Family Council	Lived Expertise
Jennifer Anguiano	CASA	Legal
Penny Moylan	Judge	Legal
Ron Sylvester	Judge	Legal
Kassie McEntire	Agency Attorney	Legal
Elizabeth Mellor	GAL	Legal
Grant Brazill	Parent Attorney	Legal
Rebekah Phelps-Davis	GAL	Legal
Leah Cerretti	GAL	Legal
Tim Arehart	GAL	Legal
Lindsey Moore	GAL	Legal
Heather Alwin	GAL	Legal
Joan Lowdon	Judge	Legal
Shannon Schmidt	Judge	Legal
Kellie Hogan	Judge	Legal
Michael Hoelscher	Judge	Legal
Angela Hecke	Judge	Legal
Melissa Schoen	County Prosecutor	Legal
	6	<u> </u>

Name (First Last)	Affiliation	Role in Statewide Assessment Process
Kim Robinson	County Prosecutor	Legal
Anonymous	Agency Attorney	Legal
Anonymous	Judge	Legal
Anonymous	Judge	Legal
Anonymous	County Prosecutor	Legal
Anonymous	Parent Attorney	Legal
Anonymous	Parent Attorney	Legal
Anonymous*	Lived Expertise	Lived Expertise
Anonymous*	Lived Expertise	Lived Expertise
Anonymous*	Lived Expertise	Lived Expertise
Anonymous*	Lived Expertise	Lived Expertise
Anonymous*	Lived Expertise	Lived Expertise

Description of Stakeholder Involvement in Statewide Assessment Process

Kansas employs two types of Stakeholder interviews. General Stakeholder interviews are conducted at the community and statewide level in groups and may include tribes, court representatives, state foster/adoptive parent associations, child welfare specialists, youth, etc. These interviews are focused on both outcomes and systemic factors and how they affect children and families.

The second type of interview involves case specific stakeholders. Case Specific interviews are conducted individually with children, parents, foster parents, case workers, court representatives and other professionals who have knowledge about the case. During SFY 2023, Kansas conducted the first round of General and Case Specific Stakeholder interviews.

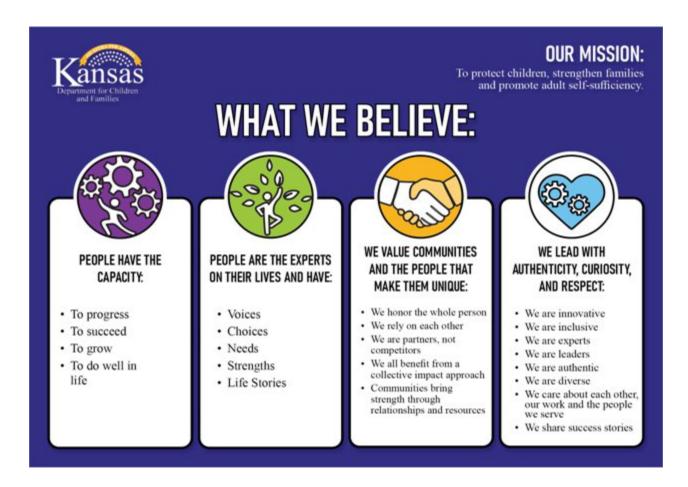
Section II: State Context Affecting Overall Performance

Part 1: Vision and Tenets

Briefly describe the vision and core tenets of the state child welfare system (i.e., primary programs, including title IV-E prevention programs, as applicable; practice model; structure and approach to drive change) that are designed to produce desired child welfare outcomes and the routine statewide functioning of systemic factors.

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.



Prevention and Protection Services (PPS) helps families and vulnerable adults by providing:

- Protection services (KPRC and assessments/investigations)
- Family-based assessments
- Family support services
- Family preservation
- Families first prevention services
- Foster care
- Adoption services
- Independent living services for older youth
- Licensing foster home



Child and Family Wellbeing Overview

Rev. 01-31-22

GOVERNANCE

Federal Guidance

State Law and Policy

Best Practice Standards

Child welfare begins in the...

COMMUNITY

...with primary prevention.

DCF PRIMARY FUNCTIONS

Kansas Protection Report Center (KPRC) 1-800-922-5330

Prevention Assessment and Investigation

Prevention In-Home Supports

Out-of-Home Placement







PARTNERS









STRATEGIES FOR PROTECTING CHILDREN

Strong safety, resiliency and prevention networks

Strong KPRC capacity

Resources to prevent the need for foster care

Evidence-based approaches for parent and relative engagement and work alongside crossover youth Increase timely
permanency, placement
stability and health care
coordination for children in
foster care

Child welfare efforts are made possible by our $\ \ FO\ U\ ND\ ATIO\ N.$

Strong Workforce:

Recruit and develop child welfare workforce partnerships and practice implementation

Informed Decisions:

Outcomes-based, safety- and data-informed alongside families in communities

Kansas Department for Children and Families 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 child and family well-being services. Kansas DCF offers an array of prevention services, including, but not limited to Family Preservation and Family First Programs.

Kansas uses a customized practice model-Kansas Practice Model (KPM) to work alongside families. The KPM proces a consistent and customized framework to support engagement, safety planning and decision making to guide our work alongside families. DCf being a learning agency provides the foundation for staff to be on a learning journey as we are always learning new skills and practices to bring our best to families.

Since the last CFSR Round 3 PIP completion and the FY 2022 Annual Progress and Services Report (APSR), Kansas has continued to focus on areas identified as needing improvement, along with safety as a priority. The FY 2022 APSR provides detailed information on initiatives and continued work towards meeting performance outcomes. Information provided in this statewide assessment will address up-dated work and performance from the final submission of the APSR for FY 2022.

A priority area of focus from the last CFSR that was addressed through the most recent PIP is **Safety** Outcome 2. The goal to ensure safety for children by improving risk and safety assessment and monitoring throughout the life of the case.

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

The KPM approach involves "mapping" conversations with the family to inform the assessment and plan together with the family for immediate and lasting safety. The Conversation Note, also known as "mapping" process, addresses worries, working well and what needs to happen to achieve initial and last safety. This assessment incorporates and highlights the child's voice, integrates the family and the network's 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 and clarity.

In addition to mapping conversations, the Kansas DCF Assessment Map for PPS 2020 is utilized to assess for safety and risk. Worries are identified and assessed for Current and Past Harm; Complicating Factors; and Future Danger. Safety is assessment using Current and Past Safety; Family Resources; and Safety Goal. The Assessment Map provides a Lasting Safety scaling question which can be completed by all participants and staff to look at case specific goals to improve lasting safety and steps to mitigate the risk and build lasting safety with the family for their children.

The KPM emphasizes the importance of assessing safety with families throughout the life of our involvement with each family. An opportunity to continue the work to increase skills is helping create initial and lasting safety, in October of 2022, Kansas provided the opportunity for fifteen Child Protection Supervisors, Learning and Development Specialists and administration program staff from across the state to participate in the Safety Planning Practice Intensive hosted by our partners SafeGenerations. Participants will share their knowledge and new skills with protection supervisors and practitioners across the state as we continue our learning journey to bring our best to children and families.

Energy from the Safety Planning Practice Intensive has brought about the new five-part online series. "It's Not All On You! How to Create a High-Impact Safety Plan With (Not For) a Family." This series will focus on how to work WITH families and their safety networks to share the load of building and monitoring Safety for children. This safety plan will also help the family and their Safety Network members take preventive steps – planning for stressors and triggers and getting specific about **Who** is going to do **What** and **When** to support safety. We are looking forward to expanding our skills and work with families with addressing immediate and lasting safety.

DCF and CWCMPs will continue to address monitoring of safety plans as case reads indicate this is an area of opportunity for improvement. Using new safety planning skills mentioned above will also guide not only initial planning but ongoing and monitoring

Kansas has shown an improvement over the last two years in assessing safety and risk for those in foster care and remaining in the home.

Kansas, not unlike other state's child welfare agencies, is experiencing staff resource challenges. Recruitment and Retention is a top priority for Kansas, and is being addressed through Hiring Events, Market Value Raises, and other ways to support and retain staff.

High caseloads, the responsibility for consequential decisions as front-line workers, and time-consuming paperwork lead to difficulty hiring and keeping qualified staff. The FY 2021 turnover rate among protective services staff was almost 24 percent. In addition, the pay for protective services staff is low. A 2020 market survey shows DCF is paying protective service workers 15 percent below the market rate while supervisors are 16 percent below. Increasing the protective services salaries will place the agency in a position to address the high turnover and attract qualified workers.

In May of 2022, DCF held their first Hiring Event-*Thrive with Us*. The hiring event allows applicants to walk in and apply for open positions on the spot, interview and receive conditional offers all on the same day. Any offers made are conditional until background checks and references are confirmed. Kansas held the first event in Johnson County, in the Kansas City Region. Other areas of the state have been hosting Hiring Events throughout the summer, Fall and Winter.

DCF implemented and continues to explore supports for the workforce completing child and family wellbeing assessments. Regarding active recruitment and retention activities, awards to all protective specialists and supervisors in 2021 and specific service centers in 2022 through the State

of Kansas Employee Award and Recognition Program, which allows the Secretary of DCF to consider a cash award for Meritorious Service authorized by K.S.A. 75-37,105 for the execution of duties far beyond the service level commonly expected. DCF has within its budget an ability to pay statewide up to 80 practicum students (internships) each academic year and recently increased from \$8.00 to \$14.00 per hour the rate of pay for students while in practicum with DCF with intent to increase student practicum placements. We collaborate with the Kansas Council of Social Work Education and border state colleges for workforce development and this summer are expanding positions into each region to amplify practicum supervision and local academic partnerships. DCF is consulting with the National Child Welfare Workforce Institute on full implementation of their Leadership Academy of Supervisors. In 2021, DCF worked with Department of Administration Office of Personnel Services and Division of Budget to prepare a market rate (pay) study for protection specialists which ultimately was included as an enhancement request in the SFY 23 Governor's Budget Recommendations. That request was approved by legislative action raising individual protective services salaries closer to the market rate by providing up to a 12.5% pay increase not to exceed the market rate effective with the June 13, 2022, pay period. This enhancement supports the agency's mission of protecting children and vulnerable adults by enabling the agency to attract and retain protective services staff.

In the summer of 2022, DCF created six Student Services Supervisors, one in each management region. These positions will work with higher education institutions in recruiting students to involve their practicum work with DCF. These positions are being utilized to recruit and retain graduating Social Workers and other Human Services Related fields to develop and increase our child protection workforce resources. These positions supervise the practicum students and coordinate their experiences with Protection Services. The goal is to fill 50 paid practicum placements across the state in Spring of 2023. DCF has provided an opportunity for a total of 80 paid practicums statewide and look forward to our work towards meeting this goal. As of December 31, 2022, there were 38 students participating in a paid practicum, with 28 of those bachelor level Social Work and 10 master level Social Work students. There are 51 practicum students beginning their spring 2023 semester with DCF. We are hoping this will continue to increase as the team learns and develops new strategies.

DCF continues to work on challenges in attracting applicants, and making sure at the time of interviews, applicants have a good understanding of the work to make sure this position is a good fit for them. In addition to hiring, retaining staff seems to be just as challenging, if not more so. The work is hard, demanding and often produces secondary trauma and workforce burnout. A recent statewide initiative by administration to explore resiliency, and secondary trauma was to develop a core team to research other states, local agencies, and community approaches to providing caring support to staff. Recommendations from this team have been submitted for consideration by leadership.

Kansas continuous to add and adapt new ways to support supervisors and build capacity (competencies and skills), accountability and oversight of child and family well-being practice. Supervisors serve an important role as a change agency and cultural change. With the recent KPM implemented, supervisors are actively involved in providing mentoring and support to staff around the KPM. Details of learning opportunities, tools and resources for supervisors and staff are provided in-depth in Systemic Factor 4: Staff and Provider Training.

Another role of supervisors and leadership for oversight of child and family well-being processes and practice is managing with data. Data is reviewed at statewide and regional levels through different avenues and continues to be a focus to improve performance using data to make informed decisions. Information specific to qualify assurance activities is detailed in System Factor 3: Quality Assurance System.

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. 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 below.

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

A priority area of focus from the last CFSR that was addressed through the most recent PIP is Well-Being Outcome 1: Needs of children and families are addressed by improving needs assessments, case planning and service provision throughout the life of the case.

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.

Communication and education throughout DCF, child welfare partners, legal and communities, continues regarding the change in our practice and how we work with families. Regions deliver information and education about the KPM through different avenues. Some include informal meetings with district and county attorneys, schools, community providers, and others. It is evident through outcomes, that the KPM is making a difference for children and families. Courts, communities and others talk about TDM practice, attend TDM meetings and hear about the impact they have on keeping children safely in their homes, and if needed developing a plan to provide safety thorugh other placements. Information about the KPM Showcase is included in Systemic Factor 4: Staff and Provider Training.

Policies and practices were added and/or clarified to address case planning documents and process, including workgroup discussions to address modification if needed.

Discussions around best practices to locate, engage and empower fathers continue at regularly occurring workgroups, supervisor meetings and other avenues.

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, and DCF does allow for these conversations to occur virtually when in-person is a barrier.

With the deployment of CareMatch in October 2019, Kansas incorporated method for Icebreaker's data collection. The CareMatch software was to track all new foster care placements and requires an Icebreakers eligibility determination every time a placement is made. 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.

DCF worked 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. As a result of this work, DCF submitted a work order to the CareMatch developer 5Points to change the data points to be collected and reports provided for IBCs. These changes continue to be in production. The Center and DCF also developed an online survey for CMP and CPA staff to utilize at the end of an Icebreaker Conversation to capture data/satisfaction via "real time." It was developed via SurveyMonkey with accompanying QR codes for families to utilize for ease of accessibility.

Given the delays in getting the data collection updated in CareMatch, there has not been a lot of focus by the CMPs to ensure Icebreakers Conversations are held timely. DCF continues to engage CMPs in a dialogue to strategize how to ensure this practice is more consistent across the state. KVC has come forward with a proposal in which they will begin to use Family Support Coordinators (FSCs) who work directly with foster homes to engage and assist with and Icebreaker Conversation. Traditionally, this role was to the be Case Manager for the child or youth; however, policy was amended in 2021 to allow for CPA workers to assist when possible. This will allow for more staff capacity in ensuring this practice occurs. Icebreakers Conversation is practice Kansas continues to remain invested in as it is a complement to the Kansas Practice Model of walking alongside families. While the implementation of this policy and practice have been marked by barriers, DCF continues to keep pressure on the CMPs to keep biological and foster families interacting with each other from the very start of placement to ensure the best interest of the child remained at the forefront of every case. We continue to look for strategies and creative ways to make these occur, such as virtually or even through simply a phone call when in-person meetings aren't feasible.

Several projects focusing on increasing placement stability for children in care are in place and have shown success in addressing instability. Some of the projects impacting placement stability are described below:

Kansas collaborated with Missouri to expand the border agreement to allow placement with approved relatives and licensed facilities to support placement stability. The Interstate Compact on the Placement of Children (ICPC) agreement is requested within thirty days of placement.

Kansas DCF has prioritized addressing placement instability for all children in out of home care. Leading for Results (LFR) Placement stability is statewide collaboration with origins in 2020 as a statewide Placement Stability Summit. The group opted to receive technical assistance and support from the Center for Capacity Building for States and began working with Chapin Hall and the center for a deep dive into data and analysis of root causes for placement instability. The statewide group of placement stability leaders includes representation from all 8 Catchment areas in Kansas and includes DCF Regional and administration, Case Management Grantees, ACF, CBC, OJA, and others. We have completed our root cause analysis and have developed a Theory of Change) all while ensuring collaboration and engagement with statewide providers, DCF regions, and other stakeholders. We are truly so lucky to have worked with the Child Welfare experts at the Center and at Chapin Hall to get us to where we are. In January, we held a "review-type" meeting to host report-outs from regions and have invited guests to share prevention type efforts that relate to placement stability. Chapin Hall shared a summary of the work within the state of Illinois as they, too, have designed a road map to supporting families and children in the community and reforming child welfare systems. Next steps include meeting with DCF executive leadership and broadening the plan to other state leaders to address systemic changes that affect placement stability. This work will continue to be data driven and responsive to the needs of each individual catchment area.

The top three root causes of placement instability identified through the LFR are 1) Community Prevention with inadequate community-based prevention services to serve older high needs youth; 2) Front Door to Child Welfare is to wide due to a lack of understanding of the role of foster care; and 3) Lack of placements for older youth with intensive behavioral health needs. Kansas data shows the majority of those experiencing placement instability are older youth ages 13-18 with higher level of disabilities/needs.

Placement instability is not just a foster care problem and is directly related to key points throughout the entire child welfare system.

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 days in care 5.6 at the beginning of SFY 2022 and ended SFY 2022 at 7.0. DCF along with CMPs continue to focus on relative placements, including initial placements with relatives.

Placement stability saw some improvement across the state during the height of the pandemic in 2020 and 2021. However, there has been slight uptick in movement of youth across the state again. Some of this is being attributed to the higher mental health needs and lack personnel to staff facilities which can provide the needed level of services. DCF continues to work in partnership with KDADS regarding the lack of acute bed availability, as well as PRTFS across the state denying placement of youth.

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 foster 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. Regardless of the lack of resources, CareMatch continues to be utilized as a placement management system and CMPs are encouraged to utilize

it when making placement decisions for youth.

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.

Two additional immersive workshops for DCF practitioners, supervisors, managers, and other child welfare stakeholders were held in May and August of 2021. During the three-day workshops, Kevin Campbell, model author of Family Finding and Elizabeth Wendel, Family Finding expert dove into the bedrock science behind family engagement practice with the participants. An additional 300 practitioners will learn the philosophy, framework, skills and tools of Family Finding practice. The identified Kansas Family Finding Leads assisted the small group work in the bootcamps.

Following the original Bootcamps each of the Kansas Case Welfare Case Management Providers (CWCMP) developed and began delivering foundational Family Finding curriculum. DCF Learning and Development team along with Family Finding Leads developed a curriculum with delivery to begin in early spring 2023.

In SFY2022 Kevin Campbell and Elizabeth Wendel have provided a series of monthly 1-hour coaching sessions virtually with Family Finding/Seeing Leads as they continue to build their knowledge and skills of Family Finding/Family Seeing tools. These Family Finding/Family Seeing leads are continuing to support the use of this practice approach from the front end of our work alongside families.

Family Finding practice helps to strengthen 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%. SFY 2020 ended with 44% of children placed with relatives or non-related kin. Four of the eight catchment areas are at or meeting the goal. Efforts continue to reach the 50% goal.

Throughout the Round 3 PIP periods Kansas was not able to successfully meet the negotiated improvement goal of 72% for item 6- Achieving Reunification, Guardianship, Adoption, or Another Planned Permanent Living Arrangement. Due to inability to achieve the required level of performance for CFSR PIP measures for Item 6. Performance from round 3 at 63% decreased over the PIP measurement periods and ended measurement period 6 at 59%. Kansas received a fiscal penalty resulting in funds withheld in federal financial participation each year until the state is either found to be in substantial conformity at its next full review.

For nearly a decade, Kansas experienced increasing numbers of children in foster care. This trend 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.

In SFY 2022, DCF continues to provide 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 utilizing this position for tasks such as streamlining internal administrative processes, 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.

The most recent 2022 Adoption Accelerator reports by each provider are below:

TFI Family Services

TFI Family Services provides service to the geographic locations of Area 4 (Southeast Kansas) & 8 (Wichita, surrounding counties).

There were 22 adoptions finalized in March. Area 4 had 12 adoptions and Area 8 had 10 adoptions. Three youth profiles were shared on TFI social media. TFI is working to create video profiles for four youth with adoption case plan goals. Related to the goal of at least 45.8% of children who become legally free for adoption will achieve adoption in less than 12 months, Area 4 had 43.7% and Area 8 had 36.5%. TFI had 5 youth attend the Adopt Kansas Kids videotaping for March.

FosterAdopt, Connect and TFI met to discuss barriers and solutions to getting flow of information and timely communication. This was a very productive meeting.

Area 4 has identified youth that are on target for adoption next quarter and action will be taken to achieve permanency for those youth. In both Area 4 and 8 we will continue high level of case stuffings and trainings to meet Performance Improvement Plan (PIP) goals.

St. Francis Ministries

Geographical areas in Kansas that St. Francis covers include Area 7, which covers Wichita and Sedgewick County.

The adoption accelerator continues to aid in reducing barriers to achieve more timely permanency for children. They have been tracking outcome data and providing that information to supervisors for feedback. The adoption accelerators have also been working with the adoption recruiters to complete adoption profiles for the children to get them on the recruitment website in a timelier fashion.

The agency anticipated it would be a challenge to meet the outcome that cases will be finalized within 24 months of coming into custody due to the delay in termination hearings since the pandemic. The tracked outcome data helps the agency to meet outcomes and project future adoption data. The adoption accelerator continues to complete quarterly social history training to reintegration and adoption staff which has resulted in better social histories.

The accelerator will continue to focus on documentation completion when cases are nearing transfer to adoption. The accelerator will work on completing social histories and updates upon transfer and during the adoption process as well as continue to update tracking system for the two state adoption outcomes (adopted within 24 months of referral and adopted within 12 months of becoming legally free) and work with the teams to assist in meeting the goals monthly. This will be a major focus over the next couple months as the fiscal year ends. The accelerator will continue to maintain information in the tracking system and add new transfers as they move to adoption. The accelerator will continue working with recruitment to ensure completion of 5340s and Adopt Kansas Kids profiles in order to get children placed timely on the adoption website.

St. Francis also services Area 1 & 2 which is Northwest and Southwest Kansas.

There were fifteen children designated for fast tracking adoptive family's assessments. Ten children who had been previously fast tracked had Best Interest Staffings (BIS) scheduled for March with a median length of time between legally free paperwork back from DCF and BIS requested of 81 days (15 days was the least, the longest time was 144 days for three siblings due.)

Twenty-two legal packets were sent to DCF in March.

A goal currently in process is to build a report by case team and manager for BIS time frames as well as identify the gaps in cases from when they are determined legally free to the BIS being scheduled.

KVC

KVC covers geographical Area 3, Northeast Kansas and Area 6 which is Kansas City, Kansas metro along with Johnson and Douglas Counties.

The Adoption Accelerators continue to work on social histories as well as collaborate with the adoption team to help expedite the adoption process. During this period, they assisted the case managers by gathering the needed documents and items that helped make sure they stay up to date.

The Adoption Accelerators worked on gathering the placement history of each child. At the same time, cross referencing them on additional agency software to make sure everything is correct. The adoption accelerators also assisted the adoption case teams on placement information, making calls to past or current placements to get additional information on the child that was missing in their records.

Cornerstones of Care

Cornerstones of Care covers Area 5 which is some areas within Kansas City, Kansas metro, as well as Atchison, Leavenworth & Wyandotte Counties.

During this report period, adoption accelerators helped complete three social histories and updates, assisted with 13 consent packets and two Adoption Placement Agreement (APA) packets to ensure completion before submission to DCF. Additionally, they scheduled formal Best Interest Staffings (BIS) for January 2022. Four BIS waivers were completed for a total of seven children. One formal BIS meeting occurred for

four children and APA was signed for 4 children.

Adoption manager along with adoption accelerators reviewed monthly Adopt Kansas Kids spreadsheet to provide all necessary updates to Foster Adopt Connect. They attended the monthly adoption meetings with Foster Adopt Connect as well as the first quarterly meeting with other Case Management providers. Four Matching calls took place this month. Two legal reviews were completed for Atchison and Leavenworth County cases. The team followed up on pending journal entries that needed corrections.

The 30/60/90 tracking spreadsheet continues to be updated on a bi-weekly basis and is shared on a team's channel with DCF. The adoption accelerators have created individual spreadsheets for each permanency team with all adoption cases. This is helpful for access to complete the adoption tracking reports for court that have been implemented for Wyandotte, Leavenworth and Atchison counties. This month, the adoption team met with Performance Excellence staff and Netsmart program staff to develop an adoption workflow. The meeting was helpful to capture the process accurately.

The adoption accelerators updated a tracking list for relative adoption, foster and adopt- only home studies and continue to work with the team regarding barriers for completion. There has been a significant improvement in the timeliness of relative adoption home studies.

Other projects detailed in the FY 2022 APSR include Rapid Response include Rapid Permanency Reviews (RPR) and Adoption Tracking Tool (ATT). DCF and KU continue to monitor the use and effectiveness of the ATT.

Failure to Place (FTP) Network was created in October 2022, in which agencies and facilities are invited to opt into putting forward a Stand by Bed to hold in the event placement is not able to be found for children and youth in custody. There is a mix of approximately 30 beds in both family foster homes and various facilities available each night to avoid failure to place. As of the writing of this assessment, approximately 70 youth have utilized a network Stand by Bed.

DCF continues to promote the Mental Health in Schools programs through working alongside the Association of Community Mental Health Centers. There are approximately 56 school districts and 17 CMHC's involved in the program. In SFY22, there were 582 foster care youth served across the school districts that participate in this program.

Additionally, Kansas uses 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.

The new Family Crisis Response Helpline established in October of 2021, continues through a 3 years contract 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.

DCF actively partners with Kansas Department of Aging and Disability Services (KDADS)Disability and the Association of Community Mental Centers to address mental and behavioral health services to provide for children's needs and increase placement stability.

Stakeholder focus groups held in Summer of 2022 posed questions to solicit feedback and direction to improve stability for children in foster care. Information from focus groups will be part of the information used to increase performance. Information below is from focus groups:

- 1. What are your reactions to the top three root causes of placement instability?
 - Do connections with family (or the amount of time it takes to get connected) impact placement instability?
 - Inadequate community-based resources, specifically for teenagers.
- 2. What factors may contribute to a child's inability to be placed long-term? What are possible solutions to overcoming these barriers?
 - No feedback provided from focus group attendees.
- 3. How can we better support relatives to care for children and youth with higher levels of needs? What kinds of support to foster families could prevent placement disruption?
 - After-care planning
 - Emphasis on Dyadic services
 - Specifically trained case managers with additional experience for high-needs teens and children that can give intensive and therapeutic case management services
 - Separate specifically trained case managers for HCBS children. Most case managers do not understand HCBS needs/services/etc.
 - Training and community support for relative caregivers
 - An initial placement period that is temporary to allow for time to reach out to family and make the best placement decision for that child to prevent future disruptions

A priority area of focus from the last CFSR that was addressed through the most recent PIP is **Permanency Outcome 1:Children have permanancy and stability in their living situations.**

DCF and its community and contracted partners have worked together to develop a cohesive Diligent Recruitment Plan. The first publication of the plan occurred in 2016. The newest version (see attached) was first 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. In SFY 21-22, it has since undergone some clerical updates by FosterAdopt, Connect (FAC) who now oversees the Diligent Recruitment Plan and updates.

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.

Diligent Recruitment Goals are:

Intentionally recruit, prepare and retain foster/adoptive parents who are best able to meet the needs of children in care:

- Who will actively support reintegration and/or understand the importance of connection with birth Families.
- Demonstrate the understanding and commitment to serve children affected by trauma.
- Are willing to meet the immediate and long-term needs of the child.

Diligent recruitment brings together community partners along with FAC, DCF and Child Welfare Case Management Providers (CWCMPs) to review the data on Kansas children in out of home placement and discuss needs and options. This plan includes continuous analysis of data allowing the agency to effectively communicate with our partners and stakeholders and adjust the plan accordingly.

Diligent recruitment is a systematic approach to preparing and retaining families who can meet the needs of children and youth in foster care.

This effort focuses on a one-system approach to child welfare by connecting programs, agencies and community stakeholders to the fullest extent possible, allowing for maximization of services to children and families. The comprehensive, data-driven Diligent Recruitment Plan outlined here is the vision and unified framework for all stakeholders to utilize in their work with foster and adoptive families.

The group holds shared recruitment commitments, and while CPAs numbers have slightly decreased, there remains a significant need of foster homes to care for the high acuity kids. The leaders 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.

KVC Project Rise –

KVC continues to provide stabilization programming services for at-risk families and their youth located within 9 counties in Kansas. The Grantee reported three teenage children were removed from their home due to methamphetamine use by the parents. The judge ordered parents to attend parenting education in person classes, both faithfully attended, and completed the classes offered by KVC. After successful completion and receiving their parenting certificate, the parents received unsupervised visitation and a reintegration plan.

Emporia – Communities Supporting Families – (Data attached) Currently an ongoing grant with Emporia, Hutchinson, and Wichita school districts. I have data on Emporia and Hutchinson, I do not have data on Wichita. (Data for Emporia and Hutchinson are attached). This is a collaborative effort between the Department for Children and Families and the three school districts listed above. The grant provides funding for one position in Emporia and Hutchinson, and two positions in Wichita to work with families who come to the districts attention for reasons not related to abuse/neglect. Truancy, and other FINA reasons is the target population. The goal is for these positions to work with families and assist them by connecting community supports preventing them from coming to the formal knowledge of DCF through the intake process. These families historically would have came to the attention of DCF and required a formal intake, our DCF worker would then have referred the family to services. Our involvement is unnecessary and is often scary to families when they can obtain the same community services without our involvement. Emporia was the first district to implement in Feb 2021 with Wichita and Hutchinson implementing at the beginning of this current school year. The number of student and families these positions have assisted in a short time is incredible. We are continuing to track data and outcomes before we do any additional expansion.

Family Resource Centers – Awarding 10 grantees funding to start up or augment a Family Resource Center. Grantee awards will be announced before the end of January 2023. Selected programs will be sprinkled in counties across the state.

KLS Parent Advocate Program – 335 families served since inception – October 2021 – December 2022

- 1. Serves: Butler, Cowley, Kingman, Reno, Wyandotte, Douglas, Leavenworth, Sedgwick, Sumner
- 1. Parent Advocate supports families in connecting to resources:
 - 1. Applying for public benefits;
 - 2. Addressing unsafe housing conditions;
 - 3. Child Care barriers;
 - 4. Lack of Supervision issues;
 - 5. Educational Support (truancy, IEP, 504)
 - 6. Low income or employment barriers
 - 7. And more
- 2. When legal assistance is needed, KLS attorneys assist families with:
 - 1. Guardianship
 - 2. Protection Orders
 - 3. Evictions
 - 4. Child Support
 - 5. Custody Disputes

- 6. Expungements
- 7. Credit Issues, etc.
- 3. Testimonial from Advocate:

"I assisted a single mother in becoming accepted in a transitional job program, obtaining safe and affordable house for herself and her children, and enrolling the children in new schools with a warm hand off. I helped complete the paperwork, transported and joined mom in the interview process for encouragement. I also referred mom for legal assistance to establish a parenting plan and child support. The community resources I put in place gives mom job skills and experience while helping her to overcome barriers in becoming stable and keeping her family together."

FPS Community Referral – operating in the Kansas City Region – there have been 27 community referrals this fiscal year.

KPRC – **1-800-children and KDADS Resource Line** – DCF collaborated with Amazon Connect to create a text message to be sent after every call to the Kansas Protection Report Center. Every message sent back to the caller includes information about how to connect to 1-800-children for information on how to find services for families. This went live on 12/13/2022 KCSL may have data indicating if there has been an increase in use of the 1-800-children website. The text also includes information finding services for adults applied to call regarding Adult Protective Services

Racial Collaborative – Update document attached.



The Kansas Racial Equity Collaborative is comprised of three founding organizations which are The Kansas Department for Children and Families, CarePortal, and The University of Kansas School of Social Welfare. Together, they successfully gathered over 2,000 Kansans to educate, amplify, and support the common goal of reducing the number of Black and Brown children in foster care to achieve racial equity in child welfare. This was accomplished through developing a shared language, hosting learning lectures, engaging stakeholders through curious questions, and other activities since September 2021.

Please see below for a list of the various events hosted, sponsored, and supported by the Kansas Racial Equity Collaborative.

- Hosted 4 learning lectures bringing in local and national experts to help define the problem through history, shared language, and common goals.
 - Attended by over 2,000 Kansans across the state in diverse fields of study and practice.
- Hosted an in-person symposium attended by over 200 people engaged in a day of reimagining the child welfare system, inspired action, and building relationships across systems;
- Distributed a bi-monthly newsletter building on the learning occurring during the learning lectures;

- Hosted a Kansas Capitol Reflection Ceremony and included organizations doing racial equity work for families across the state of Kansas;
- Presented the Kansas Racial Equity Collaborative during the following workshops and events:
 - o Kempe Foundation International presentation (2022)
 - o National Association Children's Counsel presentation (2022)
 - o Kansas Governor's Conference (2022)
 - o Tilford Conference (2022)
 - o APSHA Savannah Conference (2022)
 - o APSHA Spokane Conference (2022)
 - o Society for Social Work and Research Conference (2023)
- Co-Sponsored juvenile justice expert Kristin Henning to discuss how to disrupt bias and facilitate equity for children and families
- Co-Sponsored 4 Questions Kansas Practice Model presentation
- Kansas Governor's Conference
- Hosted several Courageous Conversations to amplify people across Kansas working to impact racial equity
- Created a website and fact sheet for the racial equity collaborative
- Published articles for the following newsletters:
 - Kansas Bar Association Journal
 - o NACC Winter Journal

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.





What it means and how it works

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 Foundation of Our Practice

The selected practice approaches and tools from Team Decision Making, Family Finding, Signs of Safety, Structured Decision Making, Solution Focused Questions and the Resolutions Approach comprise the foundation of the Kansas Practice Model. 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.



Permanency and Stability

One of the most critical goals of the Kansas Practice Model is to establish and support lasting safety for families. Practitioners and families work together to identify and implement solutions that support stability, security and permanency. While these may look different for every family, whether it is maintaining children safely in the home, early reunification or alternatives identified with the family, practitioners using the framework of the Kansas Practice Model are focused on working alongside families to identify their goals and maintain lasting safety.



Family and Community Prevention Networks

Prevention, support and safety networks are vital to the Kansas Practice Model framework. Practitioners focus on helping families expand their support system with assistance in identifying individuals who support them and who want the family to experience the best outcomes. By working alongside families to build stronger networks for support and safety, the Kansas Practice Model helps families stay together or reunify safely and improve the well-being of all family members.



Healthcare and Well-Being Coordination

The Kansas Practice Model puts the well-being of the family and safety of the children at the forefront of every step in the process. This model supports practitioners in their work alongside families with a goal of meeting the needs of parents and caregivers, who in turn, are better able to meet the needs of their children. Practitioners help families discover ways to integrate self-care, enjoyment and passion in their lives and access needed healthcare services and community supports.

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 for immediate and lasting safety. This assessment incorporates and highlights the child's voice, integrates the family and the network's 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 and clarity.

Kansas Department for Children and Families 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 child and family well-being services. Kansas DCF offers an array of prevention services, including, but not limited to Family Preservation and Family First Programs.

Family Preservation provides voluntary services alongside families to build on family strengths keep families intact. Families must meet the following eligibility requirements to participate in Family Preservation: 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 services may also be offered to pregnant women using substances, to help connect the family with treatment and prenatal services. Family Preservation is a provided by three contracted child welfare agencies across the state.

Family Preservation has two tier service options on intensity and duration of services provided. Tier 1 Intensive In-Home Family Preservation Services and Tier 2 Short-Term Family Preservation Case Management Services.

Tier 1 services are provided by a master's level practitioner with the intent to mitigate immediate child safety concerns, stabilize family crisis, and assess the family's needs. This level of service last approximately six weeks. Practitioners are expected to meet intensively with the family, consistent with the applied evidence-based model. In SFY22 there were 541 families provided services through Tier 1.

Tier 2 services are Provided by a worker dyad consisting of an assigned Case Manager and a Family Support worker, assessing for existing risk and emergent safety issues and when identified, initiative services to stabilize and support the family. Tier 2 services typically last three to six months. The case manager will meet with the family at a minimum of one hour face-to-face weekly. Family Support workers will assist the family with learning skills to strengthen the family system. In SFY22 there were 1,130 families provided services through Tier 2.



The Family First Prevention Services Act (FFPSA) was signed into law February 9, 2018. FFPSA offers communities within the State of Kansas a wide array of individualized services to meet the unique needs of each family. FFPSA serves children at "imminent risk" of removal who can remain safely at home living with parent(s), formal or informal kinship placements, and aftercare services for reunified and post-permanency with services; their parents/caregivers; and pregnant and parenting youth in foster care including, but not limited to children at "imminent risk". Family First services are trauma-informed, evidence-based programs offered by qualified clinicians in the categories of mental health, substance use disorder treatment, kinship navigation, and parent skill-building. While some services are available statewide, others are only available regionally. Kansas implemented FFPSA in October of 2019, and 3,575 referrals have been made through November 2022. In SFY22, there were 1,208 referrals. Through on-going education and communication of FFPSA services to community partners, referrals should continue to show an increase.

As of January 2023, 13 grantee agencies-utilizing a total of 11 unique trauma-informed, evidenced-based programs-provide services to support and strengthen families in communities across the state. The array of Family First services includes parent skill building programs, substance use disorder prevention and treatment services, mental health programs, and kinship navigation. Information for all Family First agencies and programs are available on the Kansas DCF website.

FFPSA has had a significant impact on reducing the need to bring children into the custody of the Secretary. A chief measure of the program's success in the percent of children remaining at home after 12 months of referral. Initial data shows that overall, 89% of children and youth who have reached 12 months from the time of referral have remained at home. The program goal is 90%. The rates for two categories, kinship navigation and mental health, were 100% and 90%, respectively.



In November of 2019, Team Decision Making (TDM) was implemented in phases across counties of the state, with statewide implementation in the summer of 2020. 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 action or in-action and 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 safely reside.

Communication with community stakeholders is key to the success of TDM as a practice approach. Local ongoing outreach to engage courts, communities, service providers, families, and law enforcement in understanding the value of this important practice remains a priority.

Our partners at EvidentChange, formerly the National Council on Crime & Delinquency (NCCD) and the Children's Research Center, continue to guide and mentor our efforts to cultivate a TDM practice that maintains fidelity to the model. Research from EvidentChange shows the more consistently we can adhere to TDM's key elements, the more likely we are to experience positive outcomes.

Looking toward community partners being community supporters for families with no identified or suspected abuse/neglect. Families who are experiencing a type of neglect that is poverty related, may be able to receive services from community partners, such as schools, 1800Children and others to serve the family without the need to come through the DCF channel.

For most in child welfare, there is a given responsibility as a mandated reporter for the State of Kansas to report any suspicion of abuse or neglect. As Kansas progresses to a child and family well-being system, creating a culture of primary prevention and helping families access supports earlier may prevent the need for reports related to children's safety, thus improving community relationships, parent confidence, and children's overall experiences within their family. Providing this support to families earlier on is known as being a mandated supporter.

Being a mandated supporter gives everyone a role in helping Kansas families thrive. Communities should feel empowered to wrap-around families whenever there's an opportunity."

Those opportunities come when communities look at strengthening families through everyday actions. When parents are thriving, children are thriving. Communities can normalize help-seeking and offer resources or connections to services, like community-based providers, to families without involving DCF if there is no safety concern for the child.

Community-based providers share the common vision of helping families facing challenges achieve positive outcomes. These providers can serve any or most families residing in their community, and anyone can refer a family.

Supporting families and connecting directly to services

The following examples are just a few community-based providers, or other services, in the regions which mandated supporters can directly refer families when it is unnecessary to involve DCF.

Northwest Region

Child Advocacy and Parenting Services, Inc (CAPS), Salina. Free services for families such as parenting classes, family support and advocacy. Educational services are also offered, such as bullying prevention classes to reduce peer abuse, personal safety programs to empower young children to protect themselves from sexual abuse, and school readiness to help families and early childhood educators prepare children 0-5 for kindergarten. CAPS provides free childcare for children under 12 for families attending their in-person classes as well as respite childcare to allow families in the community.

LiveWell Northwest Kansas, Colby. With a vision and passion for a higher quality of life in Northwest Kansas, LiveWell focuses on access to healthy food, encouraging physical health, tobacco-free living, healthy childhood development to promote community health. They provide parent coaching, childcare, early childhood education, organizing community gardens, and walking trail projects and more. The non-profit also hosts many community events for health and wellness education as well as professional training. Kansas Parents as Teachers, (affiliate program directory) This evidence-based model provides parent education services to Kansas children and families ages birth to kindergarten. The four goals of the Parents as Teachers program are (1) Increase parent knowledge of early childhood development and improve parent practices, (2) Provide early detection of developmental delays and health issues, (3) Prevent child abuse and neglect, (4) Increase children's school readiness and success.

Southwest Region

<u>Family Promise of the Flint Hills</u> serves families in Emporia and surrounding areas. Their mission to transform the lives of children and families facing homelessness. They achieve this through hospitality and daily living support, providing safe shelter, food, counseling and training in partnership with local communities of faith and civic support. Family Promise of the Flint Hills offers innovative programs from preparing families to be tenants to helping them find a career path.

Bright House, Hutchinson. Serving Harper, Kingman, Reno and Rice counties. Providing services to victims and others affected by domestic violence, sexual violence and human trafficking. Bright House will work one-on-one to individualize assistance for each person. Assistance can range from help with legal paperwork, emergency shelter and safety, or a listening ear to provide guidance. Bright House's 24-hour hotline is available to those who are experiencing domestic violence, sexual violence, or human trafficking.

Wichita Region

<u>International Rescue Committee in Kansas</u>, <u>Kansas Family Connection and Resilience program</u> – Sedgwick county. Offering one-on-one support to families under stress needing additional resources. Offered in the language of the family's choice, providing connection to resources, and designed to strengthen families and work with them on solutions. Contact Yeni Telles with questions, yeni.telles@rescue.org.

Mental Health Association of South Central Kansas, Youth and Family Stabilization Program. Counties served: Barber, Butler, Cowley, Elk, Greenwood, Harper, Kingman, Pratt, Sedgwick, Sumner. This no-cost

program designed to strengthen and stabilize families by providing hands-on training for relationship skills, workforce readiness, and life skills. For questions, contact Latisha Bean, latisha.bean@mhasck.org.

Northeast Region

Per Express Partnership for Children (PEPC) Marysville. Serving Marshall and Washington counties. PEPC provides a wide array of preventive services to families that include parenting classes, a pantry with food, diapers, household and personal care needs. The Family Support program helps families that are dealing with unstable housing. This program walks alongside the family to help them access and navigate areas such as employment, education, transportation, health, social-emotional wellbeing and finances.

Community Action, Inc. With three office locations in Topeka, the programming at Community Action serves those living in the Northeast and Northcentral regions of the state. With the primary focus on fighting poverty, the programs provided to children and families include home visitation programs and child care through the Early Head Start and Head Start programs, rent and utility support, food pantry, diaper depot, affordable housing and many other opportunities to support children and families. Community Action's way of supporting families includes putting families in charge of their lives by focusing on the strengths in each household, providing guidance and services that reduce trauma, embraces the diversity and differences in each person and build relationships that help families move from poverty toward prosperity.

Southeast Region

<u>Greenbush</u> serves unified school districts statewide with campuses in Girard, Lawrence, Topeka, and other smaller offices throughout Kansas. Offering a wide variety of services from family and community enrichment opportunities, early childhood educational programs, to professional development and educator workshops.

Kansas Department of Health & Environment Special Health Care Needs (SHCN)—Serving statewide with satellite offices. SHCN provides specialized medical services to infants, children, and youth up to age 21 who have eligible medical conditions. Additionally, the program provides services to persons of all ages with metabolic or genetic conditions screened through the Newborn Screening. The program promotes the functional skills of persons, who have or are at risk for a disability or chronic disease. The SHCN decision schema is a tool to help determine eligibility.

Kansas City Region

El Centro, Inc., has been serving Latino families in Wyandotte County for 45 years. The non-profit agency strives to strengthen communities and improve the lives of Latinos and others through educational, social and economic opportunities. A wide array of services and programming is offered through El Centro including a Head Start preschool, economic support such as rent/mortgage/utility assistance, assistance in filing income taxes, budgeting, health care access and navigation, nutrition services and developing leaders within the community to build power and assist in creating policy changes.

Heartland 180, Inc. has been providing prevention programming for disadvantaged underperforming youth in Wyandotte county. The mission of Heartland 180 (H180) is "to passionately empower youth to improve their lives by accepting personal accountability and to continuously strive toward the goal of achieving their full potential". While the H180 after school program is the primary program for youth in middle and high school, H180 also provides programming for parents and the family to help reduce family conflict and improve school attendance and performance. H180 has been successful in helping youth increase academic performance and school

<u>Team for Infants Exposed to Substance abuse (TIES) with Children's Mercy</u>, Kansas City. The TIES program identifies and partners with pregnant and postpartum women and their families to provide support, access to community resources, problem solving, and goal setting to promote enhanced child development

and social and emotional well-being and healthier family functioning. This free program enrolls families during pregnancy or within 6 months of the baby's birth and can continue until the child is 24 months. A participant of the TIES program shared, "they check on my recovery, are always praising me and are always interested in not just me and my daughter but my whole family. I am so thankful for them and it's helped with everything to have them in my life." TIES Specialists provides a variety of services, from accompanying women to appointments, offering in-home counseling about stress, relationships, parenting and other issues, and Women's Support Group meetings that not only provide support but have fun family activities.

Part 2: Cross-System Challenges

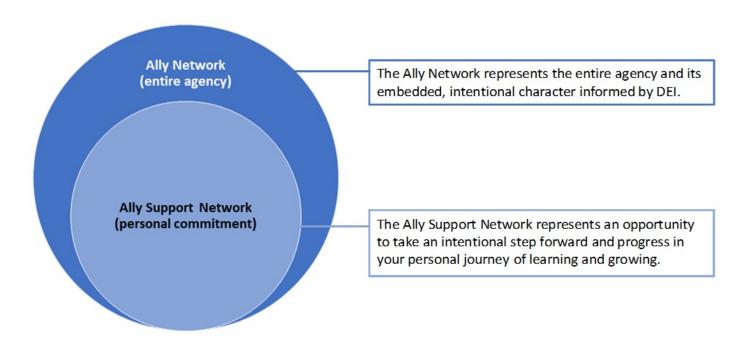
Briefly describe cross-cutting issues not specifically addressed in other sections of the statewide assessment that affect the system's programs, practice, and performance (e.g., legislation, budget reductions, community conditions, consent decrees, staff turnover and workload).

Staff turnover and workloads continue to be an ongoing challenge, which are not unique to Kansas. DCF Personnel services along with DCF leadership continue to address by review and analysis of turnover rates, and the use of exit interview data. The goal is to provide a healthy workforce and environment for employees to continue their professional journey and join the DCF team. The DCF Strategic Planning Committee which includes employees of all levels across the state, including executive leadership, have surveyed DCF employees and have data to help the agency address these challenges.

Part 3: Current Initiatives

Briefly describe the cross-cutting improvement initiatives (e.g., practice model, new safety model, workforce projects) to provide context for, and an understanding of, the priority areas of focus from the last CFSR that were addressed through the state's most recent PIP. This is an opportunity to highlight current initiatives and progress made toward achieving desired outcomes and systemic change.

DCF is committed to Justice, Equity, and Inclusivity. DCF has a division for Diversity, Equity and Inclusion (DEI) serving all DCF workforce. An Ally Support Network (ASN) is an opportunity to demonstrate intentional commitment to the progression of diversity, equity and inclusion at DCF by engaging in continued awareness, learning, empathy practice, support and connectedness. The ASN functions as a support group and a learning opportunity allowing all DCF employees the chance to progress on their own personal journey of growth and learning while also working to embed DEI into the agency cultural every day. Learning continues through quarterly learning opportunities and facilitates yearly debriefing sessions featuring reflective conversations in which to build upon our learning collaboratively. The DEI team provides intentional invitations for all DCF employees to engage with and learn about a diversity of cultural events and histories intended to broaden employees' perspectives and cultural knowledge. Resources for continued learning is offered to continue an individual's learning journey from wherever you are.



The DCF Ally Network...



IS:

- A conceptual representation of the DCF community and culture cultivated by embedding diversity, equity and inclusion into our processes and relationships.
- A reflection of DCF's core beliefs, namely: leading with authenticity, curiosity, and respect.
- An opportunity to learn, change and grow together through consistent internal reflection and external collaboration.
- A space in which to show up as your authentic self and connect with others as their authentic selves.

IS NOT:

- An exclusive club or clique.
- A requirement or expectation.
- Connected to performance reviews.
- A way to supervise or regulate behavior or activities.
- A measure of morality, values, or any other personal characteristics.

The Ally Support Network...



IS:

- An opportunity to demonstrate intentional commitment to the progression of diversity, equity and inclusion at DCF by engaging in continued awareness, learning, empathy, practice, support and connectedness.
- A brave space in which everyone can feel that they belong, can lead from wherever they are, and can take intentional action steps toward the advancement of diversity, equity and inclusion.
- A network of like-spirited individuals with a broad range of lived experiences and perspectives that intends to support every individual's personal journey of growth and change.

IS **NOT**:

- An exclusive club or clique.
- A requirement or expectation.
- Connected to performance reviews.
- A way to supervise or regulate behavior or activities.
- A measure of morality, values, or any other personal characteristics.
- A space in which to express personal complaints, issues or conflicts that do not directly relate to diversity, equity and inclusion at DCF.
- The only place in which you can get or give support.

DCF DEI team alongside child protection staff have participated in "Beyond the Rhetoric Workshop-Becoming an Ally for Equity in Child Welfare" hosted by SafeGenerations. Other opportunities including "Advancing Racial Equity" hosted by DCF to pursue racial equity in child welfare for child welfare mandated reporters and community organizations to provide training and strengthen and preserve families. DCF and the University of Kansas School of Social Work continue to work together on disproportionality projects, and other studies around racial equity.

Introduction to Data included in Assessment of Performance

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

Comparing SFY 2016 and SFY 2022, Kansas data shows an increase in Child in Need of Care reports received by the agency. In SFY 2016 there were 67,642 reports received compared to 70,057 in SFY 2022, for a 4% increase. Between SFY 2016 and SFY 2022, Kansas consistently assigned between 55% and 57% of all reports. In SFY 2019, Kansas saw a jump in the percentage of reports assigned to 62%

NCANDS data represents Child in Need of Care reports for abuse and/or neglect allegations by Federal Fiscal Year. In FFY2016, there were 37,994 reports in the submission, representing 27,388 unique children. In FFY 2020, there were 48,213 reports in the submission, representing 29,552 unique children.

This is an increase of 27% in reports made, with a 8% increase of unique children represented in the reports.

Kansas has strong data quality as evidenced by consistently meeting the AFCARS standards specified in 45 CFR 1355.40 (e). Kansas has had no required resubmission of AFCARS files since the FFY 2007 file. Kansas has submitted the annual NCANDS file since 1995, meeting all data quality validation standards required.

In October of 2021, Kansas began using the new Performance Improvement and Learning System (PILS). This system is used to conduct all program reads, capture read data and provide reports.

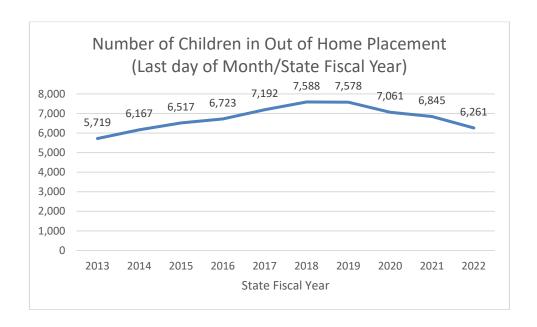
Kansas conducts case read reviews for In-Home and Out of Home Services. Combined, the sample reviewed is representative with a confidence level of 95%, at a confidence interval of $\pm 5\%$. In-Home Family Preservation and Out-of-Home Service cases are reviewed separately to identify areas of success and opportunities for growth. The Out-of-Home Services quarterly sample is representative with a confidence level of 95%, at a confidence interval of $\pm 6.1\%$. The In-Home services samples are not as representative of the population but are conducted primarily for the purpose of collaborating with providers on practice expectations, as well as identifying strengths and areas of improvement.

Case reads across all DCF programs are conducted quarterly, unless resources are being utilized for specialized or targeted reads, and during times of special reads related to Performance Improvement Plans (PIP). PILS is used to capture case read data for all program types. DCF also utilizes OMS for some case read quarters.

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

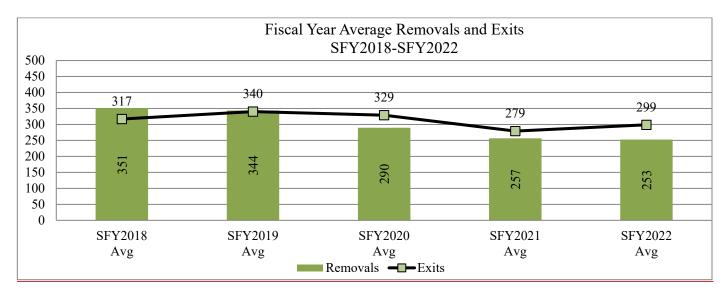
Data regarding children in Out of Home Placement

The number of children in out of home placement in Kansas on the last day of the State Fiscal Year has decreased by 17% since SFY 2018. On June 30, 2022, there were 6,261 children in out of home placement compared to 7,588 on June 30th, 2018. Kansas continues to work on further reducing the need for foster care in Kansas.



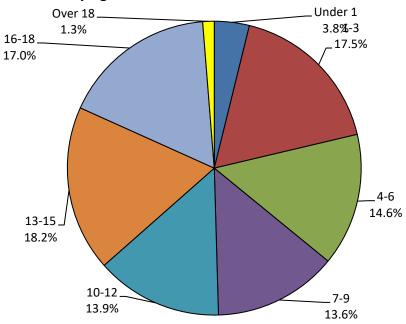
Two different decision points contribute to the number of children in out of home placement. Removals into out of home placement and discharges from out of home placement both impact the total number of children in out of home placement.

The graph below provides a visual representation of removals (the green bars) and discharges (the black line) in Kansas for the past five State Fiscal Years. With the decrease for the need for foster in Kansas, removals have decreased, and discharges have been stable with some decrease as well, which is anticipated with a lower number in out of home placement population.

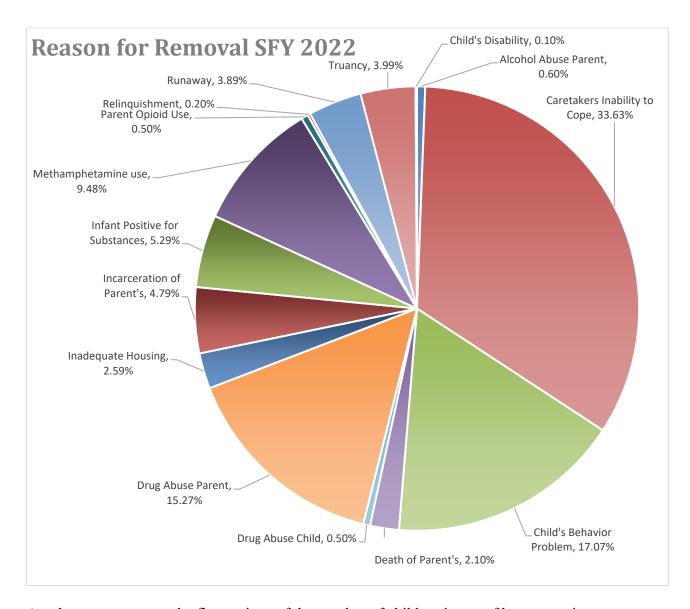


In Kansas, majority of children in out of home placement are 13 years old and older. The pie chart below provides data of children in out of home placement by age groups.

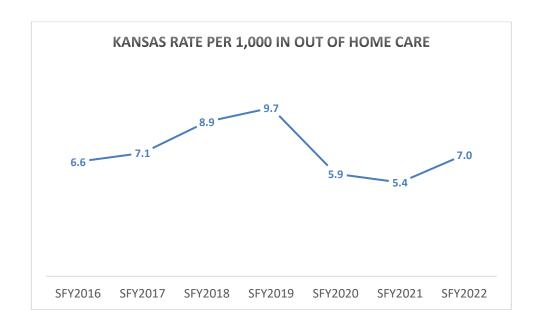
Children in Out of Home by Age SFY22



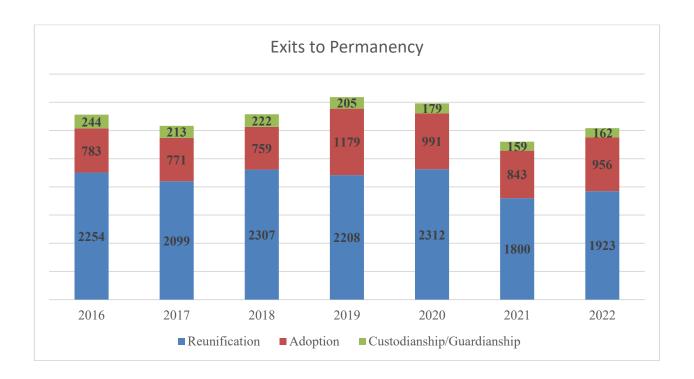
Children/Youth in Kansas may experience foster care for more than one removal reason. DCF data illustrated below captures the indicated primary removal.



Another way to assess the fluctuations of the number of children in out of home care is to compare the number of children in out of home care to the state's child population. Kansas had an increase in out of home population between SFY 2016-2019 with a significant drop to 5.4 in out of home care per 1,000 children in the state's population. DCF had a record low on July 7th, 2022, with 6,288 children/youth in out of home placement at a point in time. This was the lowest need for foster care since February 2015.



Between SFY 2016 and 2022, an average of 87% of children/youth in out of home placement achieve permanency through reunification, adoption, or guardianship/custodianship. Over the last seven years, reunifications remain the highest of all permanency types, ranging between 54% to 61%. Nearly one-fourth (24%) of all permanencies are through adoption, ranging between 21-29%. An average of 5% of all children/youth achieve permanency through guardianship and/or custodianship. The need for foster care in Kansas has declined over the last several years, with a 17% decrease since 2018. The reduction of children/youth entering care impacts the number of exits.



Federal performance data used to analyze the state's performance for safety, permanency and well-being is comprised of federal AFCARS and NCANDS data submissions for 17B18A, 18A18B, 18B19A, 19A19B, 19B20A, 20A20B. Kansas agency data uses the same methodology except reporting for a state fiscal year (SFY) which is July 1st through June 30th. Data also represented in this assessment includes numbers served and demographics, along with other agency only outcomes and success indicators.

Some of the graphs used throughout the analysis section of safety, permanency and well-being uses Risk-Standardized Performance (RSP). A RSP is derived from a multi-level statistical model and reflects the state's performance relative to states with similar children and considers the number of children the state served, the age distribution of these children, and, for one indicator, the state's entry rate. It uses risk adjustment to minimize differences in outcomes due to factors over which the state has little control and provides a fairer comparison of state performance against the national performance. The RSP is represented with vertical bars in the line graph with the lower RSP and upper RSP of the 95% RSP (confidence) interval, and national performance (NP) is the dotted black line.

Safety

Safety Outcomes 1 and 2

Safety outcomes include: (A) children are first and foremost, protected from abuse and neglect; and (B) children are safely maintained in their own homes whenever possible and appropriate.

<u>Safety Outcome 1: Children are first and foremost protected from abuse and neglect.</u>

Item 1: Timeliness of initiating investigations of reports of child maltreatment. Were the

agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within time frames established by agency policies or state statutes

During CFSR Round 3, Kansas received an overall rating of Strength for Item 1, with 98% of the 40 applicable cases rated as a Strength.

All Child in Need of Care (CINC) reports shall have an Initial Assessment Decision made without delay. Per DCF Prevention and Protection Services (PPS) policy, reports received by the Kansas Protection Report Center (KPRC) shall have an Initial Assessment Decision completed or Preliminary Inquiry initiated within one-half working day from the time the report is received by KPRC. The performance standard is 95%. In SFY22, an average of 90% of all child reports were completed within the next one-half working day.

KPRC leadership using continuous performance improvement processes identified factors/root causes in response to the decrease in performance for timely initial assessments from 2017-2020. Through the process, strategies were identified and implemented to increase performance. Contributing factors included an increase in reports during high volume times of the year; extra time required to process web reports used by mandated reporters; staff resources including scheduling options and burnout. Strategies to address resources included further research of scheduling, lunch time and breaks

To address staffing resources, the Intake Protection Specialist (IPS) position was created in SFY 2017 to replace the traditional Administrative Specialist position. KPRC has two position types, Intake Protection Specialist and Licensed Protection Specialist, with both completing the whole intake process, starting with receipt of intake to Initial Screening decision. The change to one position completing the whole intake was implemented to reduce the time spent on reports being handled by more than one person, which creates a delay in initial assessment screening timeframe.

Administrative Data

Kansas Administrative data continues to show performance for the last two state fiscal years as meeting the state's set performance standard of 95% of assigned reports for abuse/neglect reasons will have timely face-to-face contact within the assigned response time. DCF continues to monitor and will initiate performance improvement activities if performance drops below the performance standard for a set period of time.

Outcome	SFY 2016	SFY 2017			SFY 2020	SFY 2021	SFY 2022
Timely Initial Assessment Decision Standard: 95%	87%	46%	42%	67%	72%	95.7%	90%
Timely Initial Contact Standard: 95%	97%	97%	96%	96%	93%	95%	95%

Data Source: FACTS

Numerator: All reports assigned for abuse/neglect reasons where contact was made within assigned response

time.

Denominator: All reports assigned for abuse/neglect reasons.

Kansas had some challenges during PIP measurement periods in meeting the performance standard. Since the last review period in 2020, where timely contacts were made in 69% of the case reviews, there is an increase in performance with 74% of case reviews indicated a timely response in SFY 2022. Case reads may indicate a different percentage of agency system data performance. A further analysis of case read documentation indicates low performance is due to untimely or missing documentation. Cases where documentation is missing are given an "area needing improvement" rating as the case reader cannot determine if an initial contact was made timely from reviewing documentation, or if reasonable effort requirements were met. The lack of documentation does not necessarily indicate that initial contacts were untimely or reasonable effort requirements were not met, only it is unknown at the time of case review due to the lack of documentation. Face-to-face contact is entered in KIDS and populates into FACTS. When case reads are read, the reader may not identify the necessary document in the case file to support the timeliness of contact and/or reasonable efforts. Documentation challenges will continue to be addressed through the continuous improvement process.

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?

SFY Agency Data	SFY2022 July-September	Item 1 Performance
Agency Data	July-September SFY22	65%
CFSR Review Round 3	Period Under Review	
CFSR Review	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 2	January 2017-March 2018	61%
PIP Measurement Period 1	July 2014-May 2015	98%
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

Agency Case Read Questions	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
For cases assigned for further assessment, does the documentation support the assigned response time according to policy?	*	*	99%	90%	*	100%	99%
Was the immediate safety of the child determined within the assigned response time or was there documentation of reasonable efforts and/or allowable reasons for not completing timely?	91%	89%	87%	80%	80%	77%	74%

^{*} Case read data is unable to be retrieved from previous case read system.

Data Source-Agency Case Read system

<u>Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.</u>

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

In CFSR Round 3, Kansas was not in substantial conformity with Safety Outcome 2.

Kansas received an overall rating of Area Needing Improvement for Item 2.

Kansas has a strong commitment to keep children safely in their homes. Entries into care continue to decrease which compliments the strong collaboration with communities, service providers and DCF. In SFY 2017 there were 4,020 removals compared to 3,032 in SFY 2022, which is a 33% decrease in removals.

Case Read data shows an increase in efforts to provide or arrange for appropriate services to protect and prevent removals and re-entries from SFY 2020 to SFY 2022. Services, practice approaches and initiatives over the last couple of years have contributed to safely reducing removals. Kansas works to keep children in their homes when possible. If immediate or ongoing safety concerns are unable to be resolved, a removal may be necessary. In SFY 2022, 97% of all removals were necessary to ensure the child's safety.

Agency Administrative Data

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
For the period under review, did the agency	71%	65%	65%	63%	50%	65%	64%
make concerted efforts to provide or arrange							
for appropriate services for the family to							
protect children and prevent their entry into							
foster care or re-entry into foster care after a							
reunification? (Be sure to assess the entire							
period under review.							
If, during the period under review, any child	99%	96%	92%	100%	82%	98%	97%
was removed from the home without providing							
or arranging for services, was this action							
necessary to ensure the child's safety?							

Data source: Kansas Case Reads

Family Preservation outcomes concentrate on child remaining safe through services and after the completion of services. Family Preservation services continue to be successful in keeping families together. Data prior to SFY 2020 is not provided because of the change in outcomes

due to the new tier system. Families continue to be safe when participating in family preservation services.

Family Preservation Outcomes	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Tier 1: Children are Maintained Safely at	*	*	*	*	99%	93%	96%
Home for Family Preservation In Home							
Services							
(Children)							
Standard: 90%				*			
Tier 2: Children are Maintained Safely at	*	*	*	*			
Home for Family Preservation In Home					92%	90%	88%
Services					92/0	9070	0070
(Children)							
Standard: 90%			*	*			
Tier 1: Children are Maintained Safely at	*	*	*	*	98%	92%	94%
Home with Family for Family Preservation					90/0	9270	9470
In Home Services (Family) 90%							
Tier 2: Children are Maintained Safely at	*	*	*	*	90%	87%	86%
Home for Family Preservation In Home							
Services							
(Family)							
Standard: 90%							
Safety during Family Preservation In	*	*	*	*	99%	99%	99%
Home Services Tier 1 between referral and							
closure							
Standard: 95%							
Safety during Family Preservation In	*	*	*	*	97%	97%	97%
Home Services Tier 2 between referral and							
closure							
Standard: 95%							

Numerator: The # of children referred to family preservation Tier 1 who were not referred to foster care during the service period or within 30 days of case closure.

Denominator: The # of children referred to Tier 1 family preservation excluding non-completions where family preservation referral has closed.

Data Source: FACTS

*PPS outcome measures for Family Preservation Services changed with new contracts starting in SFY20. Methodology is not comparable, therefore performance for years 2016-2019 are not included.

Data Source: FACTS

Kansas looks forward to adding additional service providers to the Family First network to bring services to families across all parts of the state.

Between October 1, 2019, and November 30, 2022, there were 3,575 Family First referrals. A family may receive more than one service type.

FFPSA services have contributed to the success of reducing the number of removals into care. Tailored services are provided to families to address challenges within a family unit.

Agency Administrative Data

Outcome Measure	SFY						
	2016	2017	2018	2019	2020	2021	2022
Target children and youth who have reached 12 months from the time-of-service referral remained together at home without the need for foster care. Standard: 90%	NA	NA	NA	NA	NA	88%	89%

Data Source: FACTS & ROM

Because referrals for Family First Prevention Services began in October 2019 (SFY 2020), the administrative program outcome data measuring prevention of entry into foster care is not available until SFY21 as the children served by the program must have reached 12 months from referral date.

Agency Administrative Data

Outcome Measure	SFY	SFY	SFY	SFY	*SFY	SFY	SFY
	2016	2017	2018	2019	2020	2021	2022
Target children and youth receiving family first services placed in foster care during an open case (Goal: Less than 10%)	NA	NA	NA	NA	2.3%	3.9%	3%

Data Source: FACTS & ROM

Comment from one of the DCF Regions about the work with Family First services:

Recently, a family already receiving foster care services had a new baby. Our DCF Practitioner was able to talk with the county attorney about the Family First Kansas Parents as Teacher's Association Bright Future Program and their capacity to work with this mother and father to provide parent skill building. This included meeting with the family in their home two to three times per week as well as checking the baby's weight weekly. Through their ongoing work to support the mother through her health issues and the family's willingness to accept the Family First PAT program (which is more intensive than local community PAT referrals), the father is gaining skills needed to care for their newborn. "The (PAT) program is wonderful as the families that accept this service learn bonding techniques, stages of developmental growth and proper care for newborns. The home visitor teaches all this and more with the curriculum. The biggest thing that I've noticed is how they work on the bond between the parent and the child. That bonding needs to happen early, and I've seen some good successes," said a DCF supervisor.

In SFY22, there were 1,613 Initial TDM meetings held statewide, touching the lives of 2,965 children/youth. Of those 1,613 meetings, 83% of mothers attended the meeting. 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 54%. Families were supported by family members, friends, and other support, with 63% in attendance, which compared to the national average of 38%. The attendance of families, family

^{*}SFY2020 data begins from implementation date of October 2019 – June 2020

supports, and community partners provides a practice which is effective in keeping children safely in their homes. Of all children represented in a TDM meeting nearly one-half had a recommendation by team members to not remove the child/youth from their home. There are instances when the team's decision recommends a child/youth be removed from their home, when a plan is not reached to provide for the child to remain safely in their home. Of all 2,965 children impacted by a TDM meeting, 41% had a recommendation of removal. For those removal recommendations, 60% had a recommendation of placement with a relative.

Initial TDM process allows for participants to complete a feedback form after the meeting. The feedback solicited captures how participants felt the purpose of the meeting was explained to them, that they felt comfortable with other participants present an explained use of technology for virtual meeting. Statewide between January 1, 2022, and June 30, 2022, 71% of participants strongly agreed the purpose of the meeting was clearly explained. Other questions focused on during the meeting; did I feel safe to participate and share my opinion, and the group listened to my worries and concern. Two-thirds of all participants strongly agreed their experience during the meeting was a safe place. The last group of questions were about after the meeting with two-thirds who strongly agree they knew what was to happen next, and there was a plan created by all and the decision included input from all participants.

TDM Stories from DCF Regions:

Part of what goes into making a meeting smooth comes from having and giving hope while being understanding to families. This success story is centered on a mother with multiple disabilities including being deaf, mute and not being able to use or understand sign language due to finger amputations as a result of her medical conditions. DCF wanted to ensure mom's voice was heard and went the extra mile to make it happen. The DCF team decided having the facilitator conduct an in-person meeting in the hospital would be the most beneficial to mother. In person, mom was able to communicate and comprehend the contents of the meeting through two tablets one which mom used to type what she wished to communicate and another where she could see the live charting in addition to live captioning. Through this unconventional form of communication DCF was able to understand mom's concerns for herself and the baby. Mom also was able to show through her participation in the TDM how determined she was to care for the baby, telling the team, "I'm tougher than you think". The team worked hard at looking at her natural resources and ones that could be provided to mom through DCF APS, to offer mom the best chance at success. Through much deliberation, the DCF team and mom were able to make a detailed plan which mom could work on while the baby was in the hospital. The plan focused on making sure mom worked on getting the necessary equipment for her and her child's needs. When the meeting ended mom thanked the team for giving her a chance to prove she can care for her child. To quote Kelsey, "giving mom the opportunity to share her thoughts and plans helped ease some of the nervous feelings. By utilizing the time baby was going to be in the hospital we were able to enhance mom's hope and belief in herself while still having peace of mind that baby was safe while things got put into place".

Quotes from families and others participating in TDM meetings:

"It was a bad situation that ended better. Way better. There was a lot of support. A lot of 'hey let's get you through this. Let's work together. Get you to that end goal'."

"I have been invited to participate in several TDM's. These TDM's seem to be a good way to bring all parties together to discuss what the situations are and ideas on what to do moving forward. The environment of these meetings have allowed for open communication and brainstorming best solutions for the family. It has been great to see all parties involved to keep the children's best interests in mind."



TDM 2022 YTD Report - Statewide Summary July 1, 2021 - June 30, 2022

and rannines		
Section I. PPS FACTS & TDM Application Data		
1a. Reports assigned for Further Assessment*	TBI	D**
Reports assigned for Further Assessment with a TDM Meeting (subset of 1a)	TBD**	TBD**
1b. Children/Youth Removals	30	004
Children/Youth Removals by Law Enforcement (PPC) (subset of 1b)	1442	48%
Children/Youth Removals with a TDM (subset of 1b)	1351	45%
Section II. Characteristics of TDM Meetings - TDM Application Data	# Meetings	% Meetings
2a. TDM Meetings	16	513
2b. TDM with Suspected/Confirmed Domestic Violence	257	16%
2c. Attendance at Meetings	# Meetings	% Meetings
DCF Worker	1563	97%
DCF Supervisor	1586	98%
Other DCF Staff (not assigned worker/supervisor)	256	16%
Mother	1320	82%
Father	873	54%
Children/Youth	384	24%
Caregivers	52	3%
Family Members and Friends	1018	63%
Contract Agency Staff	603	37%
Neighborhood / Community Representatives	30	2%
Service providers / Other supports	642	40%
Section III: Summary of Children/Youth Identified with a TDM Meeting	# Children	% Children
3a. Children/Youth with a TDM Meeting (ages 0-17 yrs)***		965
3b. Youth ages 12+ with a TDM Meeting	809	27%
3c. Children ages 0-11 with a TDM Meeting	2194	74%
Section IV. Child/Youth Placement & Recommendation	# Children	% Children
4a. Child/Youth Location at Time of TDM (subset of 3a)		
In Home	1191	40%
Separated	1774	60%
Removed by Law Enforcement (subset of "Separated")	1374	77%
4b. Recommendation for Custody & Care (subset of 3a)	# Children	% Children
Maintain Child/Youth in own home, no court involvement	684	23%
File for court intervention not involving out of home placement	366	12%
Immediately return Child/Youth to own home, no court involvement	333 374	11% 13%
Place Child/Youth with relative, no court involvement File for any type of custody that includes out of home placement (OOH)	1208	41%
4c. Placement Recommendations for Child/Youth Placed Out of Home (subset of "OOH")	# Children	% Children
Place with a Relative	720	60%
	720	6%
Place with Unrelated person, not Foster Parent	+	
Place in Foster Home	396	33%
Place in Group Home	10	1% 1%
Place in Residential Treatment		-,-
Place in Independent Living	2	0%

Communities Supporting Families is currently an ongoing grant with Emporia, Hutchinson, and Wichita school districts.

Emporia was the first district to implement in Feb 2021 with Wichita and Hutchinson implementing at the beginning of this current school year. Communities in Schools with Emporia School District served 149 children in SFY 22 and 122 through November of SFY23. Hutchinson USD Communities Supporting Families served 124 in SFY23 through October. Data for Wichita was not available at the time of assessment.

DCF has assisted in promoting 1-800-Children resource through all opportunities by sharing this resource with communities, families and DCF staff. In December 2021, the KPRC developed a calling tree option for those calling to report abuse/neglect to opt in to receive a text with 1-800-Children to find supports for a family through the 1-800-Children resource directory. As of January 2022, 238 reporters have selected to receive a text. In March 2022 the online web reporting was updated to include a link to the resource directory. In December 2022 PRC implemented a text to be sent to reporters after all calls that includes information on how to support families.

Data Themes and quotes (italics) from Focus Groups:

More efforts to keep children in the home with services'

- The TMD process' Team Decision Making (TDM) practice tool to gather families and their supports to try to work out a Plan/ensure safety of children and family and avoid children coming into foster care. TDMs are often after Ex Parte Order or Temp. Order for Custody (Some locations don't use Ex Parte Orders as much as Temp. Orders). PPC-72 hours-allows time for a TDM and recommendations.
- Engage parents in communications of concern
- TDM Facilitation
- •' I would say the use of families first prevention services has increased, keeping youth at home longer, before sometimes bringing them into care. There seem to be at least more efforts made to keep them in their homes.'
- FP a big one. Safety planning and creating behavior plans. Help provide parents with tools that help kids remain safe.
- 'More dedicated individuals that actually work with the families that are in the foster care system to keep the family unit intact if at all possible. More resources being offered and utilized for the families.'
- Prevention programs to help kids stay out of the system
- Safety and support SafeKids Kansas ensuring their home is safe, drowning prevention, emergency protocols, if a family is having trouble accessing car seats, they can get those, ensure they are installed safely, get carbon monoxide detectors involved, self-safety on walking to and from school, checklists for leaving children home alone.
- Home visiting programs are helpful, can provide parenting support, safe sleep, empower parents and how to think about safety in their environment, providing breastfeeding, evaluating developmental milestones, ASQs
- There are different resources out there like housing authority, utility supports in communities, outreach services, in Concordia they have transportation for a few dollars where bus service isn't available established by community members

• 'The number of kids in state custody is down from previous years. Could be due to Governor Kelly's expansion of social safety nets rather than "legal or judicial work," though.'

A survey was sent to the two Citizen Review Panels-Intake to Custody and Custody to Transition with 23 responses received. Rating system was: Usually Effective, Sometimes Effective, Rarely Effective and Not Effective.

How effective is the state in safely maintaining children in their home whenever possible and appropriate?

18 of the 23 responses rated as "usually or sometimes effective".

The Kansas Youth Advisory Council participated as a stakeholder focus group and responded to facilitated questions.

What did you need to prevent leaving family in first in way of services or supports:

Several say not possible. 2 said if still there would be dead. For most that wasn't really an option.

JD—my sister went into foster care and then back a 2nd time. SRS was always called on my household.

HG—no one ever listened to me. Was reported for living her with no kin (family was in Louisiana) and when that found out reintegration taken off the table real quick. If had listened to me—was over the top and a lie. Had guardianship papers, etc. Took to place where not allowed to see others, etc. No one took the time to ask me what I wanted or why I was up here. My parents were never deemed unfit. Felt like they cut corners rather than try to work with other states. Said reached out to my family and that was a lie—family told me they didn't call. Worked out for the better, but if they asked why I was being picked up and what was going on.

Of supports needed and couldn't get what would have been most important.

AD—5 years trying to get a service dog and told that wasn't possible. Then met a foster child with a service dog. Researching it myself and some would help or listen. Needed pointed to resources at age 15. Would tell me they would look into it but never did, or given resources but would cost \$10-15K and didn't have that \$. Can't go to store by myself. Was with people and still flipped out and Katie had to come get me. Health issues as well. One time at Trails and fell and collapsed and was on floor for 4 hours. No cameras in bedroom, IL and not set up for that. Dog could have gotten help.

ZB—I think I got all the services I need. Can't answer for first case. If mother got services she needed think I would have been reunified. Didn't really document what services she did get.

HG—IL resources. Reintegration off the table without my say. Didn't learn about IL until after aged out and then learned could have had IL apartments, etc. Moved around a lot of homes my senior year high school. Looking back think I would have been eligible to live in those types of apartments.

JD—being able to see my siblings. 13 siblings and hardly ever got to see them. I think that is biggest support—sibs. My sister in care and 2 years only saw about 2 x.

HG Therapy—in religious homes and not open to therapy. Wanted to pray with her about and she is not religious. High levels of trauma and need people qualified and equipped that take Medicaid.

CS--MH centers and students, saw therapist that didn't know what ACE scores were. Need to understand where we come from and not knowing if going to wake up with.....

HG Not understanding medications and not be overmedicated. I don't remember a lot of stuff.

AD—came to Trails on 18 different meds of varying dosages. Happens so many people. Telling doctors to cold turkey meds and severely sick. Anorexia. Proving point that need meds. Medicated not to help me but medicated into compliance. If there was someone that could be like that's a lot of medication.

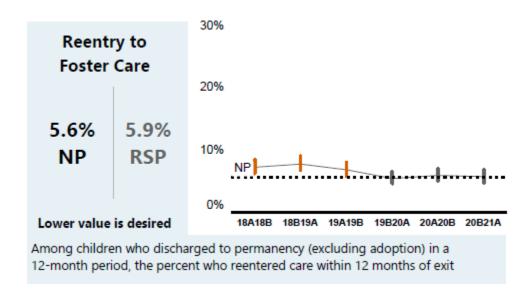
L—foster mom asked when came did she need all those meds, no. Always add meds, but not take away.

HG—not looking for interactions.

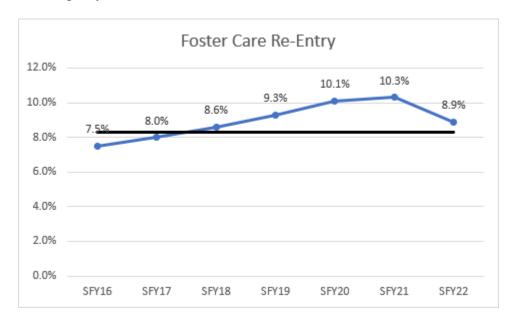
Performance Key

- State's performance (using RSP interval) is statistically better than national performance.
- State's performance (using RSP interval) is statistically no different than national performance.
- State's performance (using RSP interval) is statistically worse than national performance.

Federal Data Profile:



State Agency Data:



Numerator: The number of children in the denominator who re-entered foster care within 12 months of discharge.

Denominator: The number of children who entered foster care during the 12 month period and discharged within 12 months to reunification, living with relative, or guardianship/custodianship. Source: FACTS

Performance illustrated by the Federal Data Profile indicates Kansas' performance using the RSP interval is statistically no different than the national performance.

Kansas held focus groups to gather feedback and suggestions for improvement from stakeholders across the state.

Focus group participants were asked:

What factors do you believe separate children who do not re-enter foster care after being discharged from children who do re-enter?

- Length of time to complete mental health treatment
- Lack of access and engagement in family treatment
- SUD as factor for reason of separation
- Inconsistency in providers
- Workforce shortages and turnover/burnout
- May not be maximizing available services
- After care planning being utilized
- Natural supports
- Making meaningful connections and feeling safe
- Being sent home before family is ready
- Engagement in dyadic treatment processes
- Community-based support systems
- Having a CASA
- Children and their families who have natural supports/connection to community
- Children with challenging behaviors tend to come back into care (especially those who are older)
- Families' ability to obtain quality services and engage in services
- Engagement in aftercare services
- Family feeling confident about what to do if a crisis occurs post reintegration and support to them in lieu of being scared to contact supports/services for automatic re-removal

Do you believe there are any additional services that could be provided to families after discharge that may prevent re-entry? Are there any current services that you believe are making a difference?

- Aftercare (how does this impact return to care? should it be extended?)
- Crisis Respite Services
- CCBHC Certified Community Behavioral Health Clinic
- Dyadic Services
- Family Resource Centers
- Training staff to meet families core needs
- Connecting families to community supports prior to reunification occurring
- Parent engagement with evaluation of services of what went well and how to improve, that we listen to this input.

Item 3: Risk assessment and Safety Management. 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?

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.

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.

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?								
SFY21 Agency Data	SFY21 January-June 2021	Item 3 Performance						
Agency Data	January-June 2021	79%						
CFSR Round 3 Review	PUR							
CFSR Round 3	April 2014 – May 2015	78%						
PIP Measurement Period 1 PIP Measurement Goal: 84%	July 2016 – September 2017	63%						
PIP Measurement Period 2 PIP Measurement Goal: 84%	January 2017 – March 2018	69%						
PIP Measurement Period 3 PIP Measurement Goal: 84%	July 2017 – September 2018	71%						
PIP Measurement Period 4 PIP Measurement Goal: 84%	April 2018 – June 2019	91%						
PIP Measurement Period 5 PIP Measurement Goal: 84%	January 2019 – March 2020	77%						
PIP Measurement Period 6 PIP Measurement Goal: 84%	July 2019 – September 2020	82%						

	SFY						
Agency Case Read Question	2016	2017	2018	2019	2020	2021	2022
If the case was opened during the period under	97%	90%	86%	83%	77%	94%	84%
review, did the agency conduct an initial							
assessment that accurately assessed all risk and							
safety concerns for the target child in foster							
care and/or any child(ren) in the family							
remaining in the home?							

•			
assessed all of the risk and safety concerns for the target child in foster care and/or any			
the target child in foster care and/or any			
the target enna in roster care and/or any			
child(ren) in the family remaining in the			
home?			

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, if safety	86%	80%	42%	74%	50%	66%	56%
concerns were present, did the agency: (1)							
develop an appropriate safety plan with the							
family and (2) continually monitor and update							
the safety plan as needed, including							
monitoring family engagement in any safety-							
related services?							

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, were there	83%	70%	58%	85%	87%	85%	81%
safety concerns pertaining to the target child in							
foster care and/or any child(ren) in the family							
remaining in the home that were not							
adequately or appropriately addressed by the							
agency?							

Source: Agency Case Read Reviews

Outcome measures were changed with the Family Preservation program structure. The first three years of the construct of Tier 1 and Tier 2 services, the performance standard of 95% was exceed. For all three years in Tier 1, families did not experience a maltreatment between referral and case closure, with 99% for three years. Tier 2 services also exceed the performance standard with 97% to 100% of families not experiencing a substantiated abuse or neglect within the first 180 days of services and in SFY 2022, 100% did not experience maltreatment between referral and case closure.

	SFY	SFY	SFY	SFY	SFY	SFY	SFY
	2016	2017	2018	2019	2020*	2021	2022
Outcome							
Tier 1-Families do not experience	*	*	*	*	99%	99%	99%
maltreatment between referral and case							
closure. Standard: 95%							
*SFY20-reporting period January-June 2020.	l .	II.		-1	ч		
	SFY	SFY	SFY	SFY	SFY	SFY	SFY
	2016	2017	2018	2019	2020	2021	2022*
Outcome							
Tier 2-Families will not experience	*	*	*	*	97%	97%	100%
substantiated abuse or neglect within the							
first 180 days of Family Preservation.							
Standard: 95% SFY20-21.							
*Tier 2-Families do not experience maltreatment							

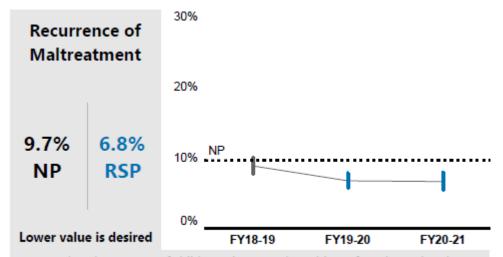
between referral and case closure. Standard: 95% SFY22				

Numerator: The # of families referred to family preservation Tier 2 who did not have a substantiated or affirmed finding on an event occurring between referral and case closure.

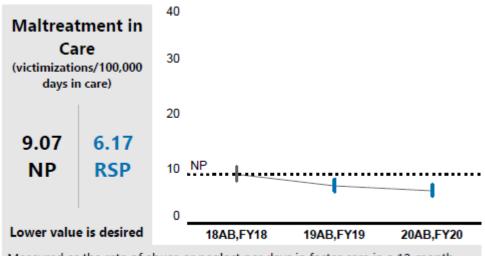
Denominator: The # families referred to Tier 2 family preservation and case has closed.

Data Source: FACTS

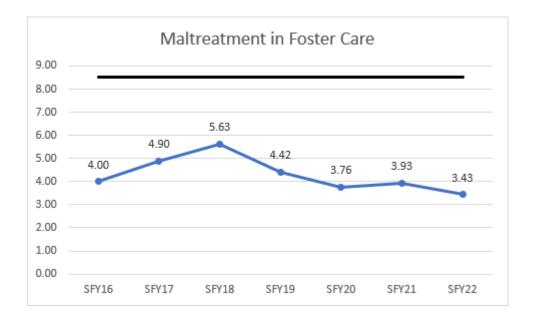
The drop in performance noted in case reads for 2018 may be a result of the transition to new contracts and the make up of the state providers. Comments captured through case reads indicate in some instances, there was a safety concern addressed, but not addressed via a safety plan, or safety plan was mentioned but the reader was unable to find the actual documentation in the file. In addition, one provider has discovered that when case logs are printed after submitted, their system has not been putting the question asking "was safety assessed" in the log, or a statement that safety was assessment. This is being addressed through the provider's software to fix but most likely will not be able to fix for past documentation.



Measured as the percent of children who were the subject of a substantiated or indicated report of maltreatment in a 12-month period and who experienced subsequent maltreatment within 12 months of the initial victimization

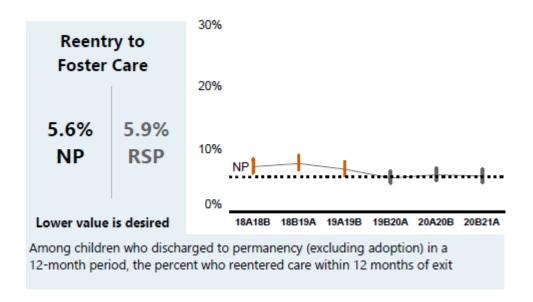


Measured as the rate of abuse or neglect per days in foster care in a 12-month period that children experienced while under the state's placement and care responsibility



Kansas' performance for the last three years indicates performance, using RSP interval, is statistically no different than national performance.

Kansas agency data shows a rate lower than the performance standard of 8.50 victimizations per 100,000 days in care for the last six state fiscal years. Kansas data aligns with federal data showing children in foster care experience maltreatment at a rate lower than the national performance.



Regarding re-entry to foster care, the last three federal data submissions indicate Kansas children re-enter foster care at a rate no different than national performance. Performance has increased from previous submissions when Kansas was performing worse than national performance.

Permanency

Permanency Outcomes 1 and 2

Permanency outcomes include: (1) children have permanency and stability in their living situations; and (2) the continuity of family relationships is preserved for children.

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

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

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 review of case file documentation and interviews with key case participants.

Kansas has shown an increase in performance from the last PIP PUR. The Kansas Round 3 PIP established

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

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)?

SFY21 Agency Data	SFY2022 June-September 2021	Item 4 Performance
Agency Data	June-September 2021	86%
CFSR Round 3 Review	PUR	
CFSR Review		
CFSR Round 3	April 2014 – May 2015	70%
PIP Measurement Period 1 PIP Measurement Goal: 79%	July 2016 – September 2017	69%
PIP Measurement Period 2 PIP Measurement Goal: 79%	January 2017 – March 2018	73%
PIP Measurement Period 3 PIP Measurement Goal: 79%	July 2017 – September 2018	73%
PIP Measurement Period 4 PIP Measurement Goal: 79%	April 2018 – June 2019	75%
PIP Measurement Period 5 PIP Measurement Goal: 79%	January 2019 – March 2020	60%
PIP Measurement Period 6 PIP Measurement Goal: 79%	July 2019 – September 2020	82%

Data Source: Federal Online Monitoring System

SFY21 data January-June 2021

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Were all placement changes during the period under review planned by the agency in an effort to achieve the child's case goal or to	61%	57%	58%	50%	65%	69%	49%
meet the needs of the child? Is the child's current placement setting (or most recent placement if the child is no longer in foster care) stable?	95%	93%	91%	95%	96%	93%	94%

Agency case reviews

Case review data reflects stability in a child's current placement setting as a strength for Kansas. Areas of opportunity include placement changes to achieve the child's case plan goals or to meet the needs of the child. Efforts to increase placement stability addressed in Item 5, also apply to placement changes being planned and for the needs of the child.

Permanency Performance Area 5: Placement Stability

Description: Of all children who enter foster care in a 12-month period, what is the rate of placement moves per 1,000 days in foster care?

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 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Placement Stability: Rate of moves per							
1,000 days in Foster Care	6.6	7.1	8.9	9.7	8.6	5.4	7.0
Standard: 4.44 (lower is better)							

Data Source: FACTS

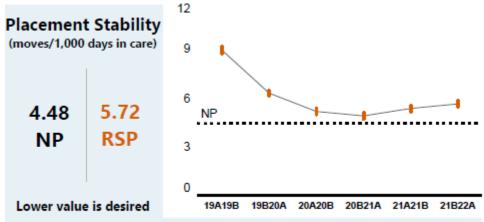
Numerator: Total number of placement moves during the 12 month period for children included in the denominator.

Denominator: Of Children who enter foster care in a 12 month period, the total number of days these children have been in foster care on the last day of the 12 month period.

Each month, Kansas examines placement stability for the 12-month cohort of children entering foster care. In SFY 2022, 61% of the cohort experienced 4.4 or fewer moves. Kansas initiated services from The Capacity Building Center for States to address placement stability challenges. The Center in partnership with DCF and CWCMPs, are analyzing situations in which children have fewer moves compared to those children with significantly higher rate of moves.

Rate of Moves	Number of Children	Percent of Children
4.4 or fewer	1793	61%
4.5 - 5.5	87	3%
5.6 - 6.5	92	3%
6.6 - 7.5	74	3%
7.6 - 8.5	81	3%
8.6 or greater	812	28%

Data Source: FACTS



Among children who entered care in a 12-month period, the number of placement moves per day they experienced during that year

Placement stability has improved drastically since the 19A19B file. There has been a small increase in rate of moves in the last two files. Kansas' performance using RSP interval is statistically worse than the

national performance.

Focus Group Data:

- 1. What are your reactions to the top three root causes of placement instability?
 - Do connections with family (or the amount of time it takes to get connected) impact placement instability?
 - Inadequate community-based resources, specifically for teenagers.
- 2. What factors may contribute to a child's inability to be placed long-term? What are possible solutions to overcoming these barriers?
 - [NO RESPONSES VIA MURAL]
- 3. How can we better support relatives to care for children and youth with higher levels of needs? What kinds of support to foster families could prevent placement disruption?
 - After-care planning
 - Emphasis on Dyadic services
 - Specifically trained case managers with additional experience for high-needs teens and children that can give intensive and therapeutic case management services
 - Separate specifically trained case managers for HCBS children. Most case managers do not understand HCBS needs/services/etc.
 - Training and community support for relative caregivers
 - An initial placement period that is temporary to allow for time to reach out to family and make the best placement decision for that child to prevent future disruptions
 - 1. What are the main barriers to reaching permanency in 12 months for our children in care? How do non-DCFS removal petitions impact permanency?
 - Not everyone agrees with the goal of reunification
 - Improve ability to craft case plans that meet the targeted needs of the family
 - Make specific and targeted goals in the case plan that help families understand what needs to be done and in what order
 - Parents don't understand the consequences of not following through with plan timely and length of time to support secondary change
 - I appreciate these questions but there is a context here: we will only be able to eliminate racist inequities when the forcible separation of children from their parents is no longer viewed as an acceptable intervention
 - Lack of services in the community
 - Homelessness lack of affordable housing, and the employment issues associated with that
 - Lack of therapeutic and supportive foster homes
 - Many foster parents not understanding or truly supporting reintegration blaming of families
 - Stigma and real concerns with seeking help from DCF, families don't seek help earlier.
 - Lack of placements
 - Overwhelmed systems full of people all doing their best but this is hard! (Courts, Foster parents, Child Welfare employees, case manager, etc.)
 - Once a month contact with a parent working reunification and 6-month case plans (thus 12 visits to achieve goal of permanency and only 2 case plans) is not adequate to measure progress/next steps of goals

- Initial 4–6-week intensive engagement with parents
- Icebreakers for engagement for all involved to work together to meet goal of permanency
- Reduce 10 year waiting list for Autism Waiver
- Separating case plans for cases involving Domestic Violence as a universal rule
- Peer mentoring engaging parents with parent mentors who have successfully reintegrated.

2. What role does DCF have in contributing to these numbers? What about our foster care providers? What about our court systems?

- Work force issues and turnover
- Too high of expectations to reintegrate ("stable" job, "stable" housing, be "drug free"...how long is it to be considered stable or drug-free?)
- Ineffective panel attorneys (GALs not visiting their children, not knowing best practices, etc.)
- DCF needs to have more oversight and check ins regarding what is going on, why children aren't going home to differentiate cases that should resolve sooner than others and what other supports are needed
- CMPs need to have case managers with more specific caseloads and lower caseloads, higher pay for retention as worker turnover impacts reunification
- Fear of agencies/court that if the family will be safe to reunite and not re-enter (having things to be perfect vs safe)
- What about the legislature not fully funding necessary supports for families?
- Judges not holding hearings more frequently
- GALs need to know the children they are serving and be able to adequately inform the court of issues surrounding the case. One foster mom told me in over 60 children she has NEVER even spoken to a GAL besides moments prior to court
- 12-month timeline may be challenging for families who have complex needs
- What about communities and individuals not stepping up and taking care of their neighbors?
- Judges not holding contractors and DCF accountable, this varies WIDELY across the JDs.
- Turnover in case workers, service providers, or case managers (lack of continuity, upsetting to families who must change workers or don't know who to call b/c of change)
- Mandated reporting instead of focus on how to support families (mandated supporters)

3. Are you aware of any steps or initiatives being taken in your region to have children reach permanency in a timelier manner?

- Adoption tracking tool is helping those with a plan of adoption
- I disagree that the adoption tool is working. Case managers are overwhelmed, and they must complete it, and everyone must review it and use it during hearings and case plan meetings etc.

What worked well:

- I appreciated the focus on what needs to change, and joint responsibility in making that happen, not about blaming
- Ideas: When services including CM follow the child and there is no disruption with potential changes in placement
- When the child and family are wrapped in services, and it works to avoid disruption
- I really like this feedback board!

What needs to change:

- Culturally appropriate classes for families
- ICWA Education
- We started with a focus on racial equity, but didn't really come back to that
- Ideas: Treatment for the family. Child behavior/symptoms are a "symptom" of the problem
- Workforce support across the board this is hard work with high burn out.
- More specialized or therapeutic foster home placement options as an alternative to institutionalization
- More secure care options for older youth with mental health or juvenile offenders' issues
- I could hear other breakout rooms talking in the background while in my breakout room

New ideas to try:

- More prevention level services across the board
- Foster care providers trained more extensively in trauma response and polyvagal theory
- Crisis respite services for families to access
- What does prevention look like to the families being served?
- ILP youth paired with an elder in community (akin to a pen pal). The young person helps the older person Read to them bake cookies with them play a board game
- Maybe a special group set up around truancy in small counties that historically have children removed for truancy. This group would brainstorm prevention services, work to debunk myths, and overcome barriers, improve communication prior to removals, etc.
- FUN Foster Care Parent Group Networking by way of some family social activities, Coffee Time, Sharing Lunch, 3K, Golfing, Bicycling, Ice Cream Social, Talent Show, Learn a second language, Self-Care Together
- Targeted or specific questions to specific groups (settlement advisory board, subcommittees of governor's behavioral health services planning council, YLINK (KDADS), joint committee on child welfare oversight, mental health modernization task force, children's alliance, Kansas Action for Children, Kansas Appleseed, and more

Unanswered questions:

- Context/History: impact of privatization, future impact of change from CMHCS to CCBHC
- Ideas: What prevention level services are missing?
- What myths and misunderstandings are there in what FC can deliver for children that is a barrier to prevention work?

Agency Case Read Question	2016	2017	2018	2019	2020	2021	2022
For a child who is legally free for adoption, did the agency utilize the Adoption Tracking Tool (ATT), PPS 5400 to compile and track information as the case moves toward adoption?	ж	*	*	*	*	*	38%

If the ATT – PPS 5400 was utilized, were the appropriate sections of the form completed	*	*	*	*	*	*	95%
based on the status of the case?							

^{*}Case read question started in SFY 2022.

Case read supports there are opportunities for improvement with using the ATT. DCF and KU will continue to analyze the utilization and effectiveness of the tool.

A survey was sent to the two Citizen Review Panels-Intake to Custody and Custody to Transition with 23 responses received. Rating system was: Usually Effective, Sometimes Effective, Rarely Effective and Not Effective.

How effective is the state in providing a stable placement for children in foster care?

Two-thirds (n=15) of the responses were rated as "usually or sometimes effective".

Are there current initiatives and/or work addressing placement stability for children in foster care?

17 of the 23 responses were aware of initiatives and/or work addressing placement stability, 5 unsure and 1 responding no.

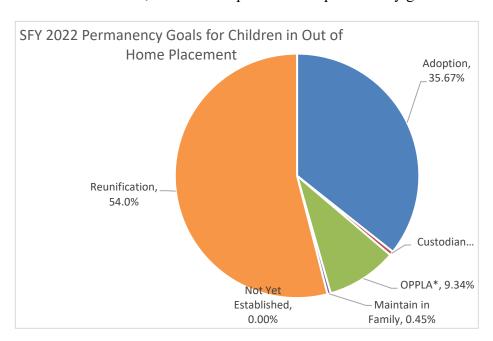
Item 5: Permanency goal for the child. Did the agency establish appropriate permanency goals for the child in a timely manner?

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. Kansas achieved the negotiated improvement goal in two consecutive measurement periods, 5 and 6.

SFY21 Agency Data	SFY21 Agency Data SFY2022 June-September 2021				
Agency Data	June-September 2021	82%			
CFSR Round 3 Review	PUR				
CFSR Round 3	April 2014 – May 2015	65%			
PIP Measurement Period 1 PIP Measurement Goal: 74%	July 2016 – September 2017	78%			
PIP Measurement Period 2 PIP Measurement Goal: 74%	January 2017 – March 2018	56%			
PIP Measurement Period 3 PIP Measurement Goal: 74%	July 2017 – September 2018	73%			
PIP Measurement Period 4	April 2018 – June 2019	70%			

PIP Measurement Goal: 74%		
PIP Measurement Period 5 PIP Measurement Goal: 74%	January 2019 – March 2020	80%
PIP Measurement Period 6 PIP Measurement Goal: 74%	July 2019 – September 2020	74%

In SFY 2022, 54% of children in out of home placement had a permanency goal of reunification. For the same time, 36% had adoption as their permanency goal.



	SFY						
Agency Case Read Question	2016	2017	2018	2019	2020	2021	2022
Were all placement changes during the period under review planned by the agency in an effort to achieve the child's case plan goals or to meet the needs of the child	61%	57%	58%	50%	50%	69%	49%
Is the child's current placement setting (or most recent placement if child is no longer in foster care) stable?	95%	93%	91%	95%	95%	93%	94%
Is (are) the child's permanency goal(s) specified in the case file?	99%	97%	97%	98%	100%	98%	99%
Were all permanency goals in effect during the period under review established in a timely manner?	96%	93%	80%	85%	78%	83%	73%

Were all permanency goals in effect during the	97%	96%	89%	95%	81%	86%	85%
period under review appropriate to the child's							
needs for permanency and to the circumstances							
of the case?							

In SFY 2022, Kansas' performance for permanency goals established timely fell slightly below the Round 3 PIP negotiated performance goal of 74% with 73% established timely. Kansas continues to have higher performance with permanency goals appropriate to meet the child's needs and files having documentation of permanency goal.

Kansas continues discussions with CWMPs to improve practices, identifying and addressing any systemic issues in establishing permanency goals in a timely manner.

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

Did the agency make concerted efforts to achieve Reunification, Guardianship, Adoption, or Another Planned Permanent Living Arrangement for the child.

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?								
SFY21 Agency Data	SFY2022 June-September 2021	Item 6 Performance						
Agency Data	June-September 2021	49%						
CFSR Round 3 Review	PUR							
CFSR Round 3	April 2014 – May 2015	63%						
PIP Measurement Period 1 PIP Measurement Goal: 72%	July 2016 – September 2017	44%						
PIP Measurement Period 2 PIP Measurement Goal: 72%	January 2017 – March 2018	48%						
PIP Measurement Period 3 PIP Measurement Goal: 72%	July 2017 – September 2018	48%						
PIP Measurement Period 4 PIP Measurement Goal: 72%	April 2018 – June 2019	50%						
PIP Measurement Period 5 PIP Measurement Goal: 72%	January 2019 – March 2020	50%						
PIP Measurement Period 6 PIP Measurement Goal: 72%	July 2019 – September 2020	59%						

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. Kansas will continue to identify areas where changes or improvements can be made to ensure permanency goals are achieved timely. The agency case review process and other avenues used to explore performance and practice will addresses these challenges.

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

- "I was released to a homeless shelter when I aged out because I had no knowledge of the world"
- "I got put on a bus back to my hometown with \$50 and a trash bag"

Permanency Performance Area 1: Permanency in 12 months for children entering Foster

Care Description: Of all children who enter foster care in a 12 month period, what percent discharged to permanency within 12 months of entering foster care?

National Standard: 40.5%

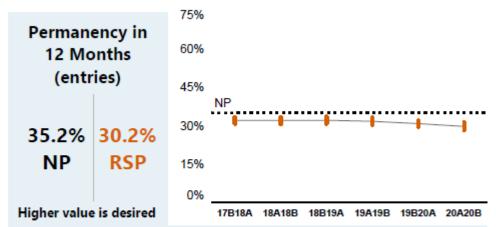
In CFSR Round 3, Kansas was not in substantial conformity with Permanency Outcome 1. Kansas did not meet the national standard.

Through Round 3 PIP, Kansas did not successfully meet the negotiated improvement goal of 72%. Due to inability to achieve the required level of performance for CFSR PIP measures for Item 6. Performance from round 3 at 63% decreased over the PIP measurement periods and ended measurement period 6 at 59%. Kansas received a fiscal penalty resulting in funds withheld in federal financial participation each year until the state is either found to be in substantial conformity at its next full review.

Kansas continues to not meet timely permanency in 12 months. Efforts to increase timely permanency continue to be addressed, through meeting other data points and outcomes, such as placement stability, use of the Adoption Tracking Tool, providing services to families, efforts to increase initial and ongoing safety for families and other initiatives. Agency outcome data indicates Kansas would meet the RSP interval from CFSR Round 3 of 30.2%, with 31% meeting timely permanency within 12 months in SFY 2022.

In Calendar year 2020, with the pandemic, all courts were not holding hearings for timeframes depending on areas of COVID outbreak and ability for judicial districts to use technology to reinstate some hearings.

Many permanency hearings were delayed due to the pandemic; therefore, Kansas is not surprised by performance of timeliness of permanencies for Calendar years 2021 and 2022.



Among children who entered foster care in a 12-month period, the percent who exited foster care to reunification, adoption, guardianship, or living with a relative within 12 months of their entry

Agency Outcome Measure	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022	
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 Standard: 40.5%	40%	38%	37%	36%	36%	34%	31%	

Numerator: The number of children who entered foster care in the 12 month reporting period, who discharged to permanency (Reunification, Adoption, Guardianship, or Living with Other Relative) within 12 months of entering foster care and before turning 18.

Denominator: The number of children who entered foster care in the 12 month reporting period.

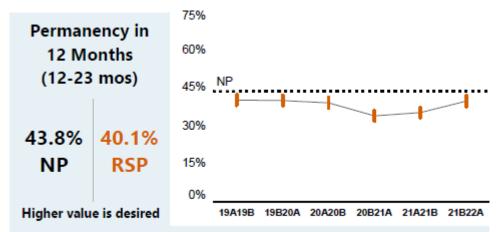
Note: For purpose of Federal Outcomes the trial home placement adjustment was made if childs last placement was placed at home. Exclusions: Outcome excludes children in care less than 8 days and any youth age 18 or older at entry or exit from foster care.

Data Source: FACTS

Permanency Performance Area 2: Permanency in 12 months for children in Foster Care 12 to 23 months

Description: Of all children in foster care on the first day of a 12-month period who had been in foster care (in that episode) between 12 and 23 months, what percent discharged from foster care to permanency within 12 months of the first day of the 12-month period? National Standard: 43.6%

In CFSR Round 3, Kansas met the national standard for permanency in 12 months for children in foster care 12 to 23 months.



Among children in foster care at the start of the 12-month period who had been in care for 12 to 23 months, the percent who exited to permanency in the subsequent 12 months

Agency Outcome	SFY						
	2016	2017	2018	2019	2020	2021	2022
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 Standard: 43.6%	41%	40%	37%	40%	41%	36%	42%

Numerator: The number of children who were in foster care 12 to 23 months on the first day of the 12 month reporting period, who discharged to permanency (Reunification, Adoption, Guardianship, or Living with Other Relative) within 12 months of the first day of the reporting period and before turning 18.

Denominator: The number of children who were in foster care 12 to 23 months on the first day of the 12 month reporting period.

Data Source: FACTS

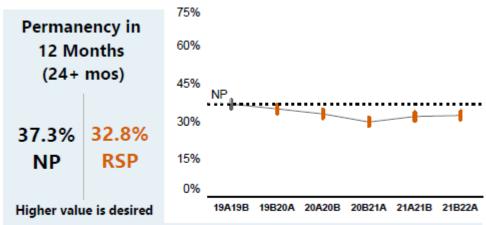
Kansas is not meeting the performance standard of timeliness for timely discharges for children in care for 12-23 months, although performance did increase in SFY 2022 with the highest performance in the last six SFYs. If using the RSP from Round 3 of 40.1%, Kansas would meet for SFY 2022 at 42%.

Permanency Performance Area 3: Permanency in 12 months for children in Foster Care 24 months or more

Description: Of all children in 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 from foster care to permanency within 12 months of the first day of the 12-month period? National Standard: 30.3%

In CFSR Round 3, Kansas did not meet the national standard for permanency in 12 months for children in foster care 24+ months.

Kansas continues to meet timeliness of children in foster care for 24+ months, with SFY 2022 agency performance at 35%. The data profile for 21B22A indicate Kansas would not of met CFSR Round 3 RSP interval of 32.8%.



Among children in foster care at the start of the 12-month period who had been in care 24 months or more, the percent who exited to permanency in the subsequent 12 months

Agency Outcome Measure	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
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 Standard: 30.3%	31%	35%	29%	36%	38%	34%	35%
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 Standard: 45.8%	42%	40%	29%	39%	44%	41%	40.4%
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>	23%	22%	18%	17%	19%	15%	12.8%
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 Standard: 96.8%	91%	89%	88%	92%	92%	89%	89.6%
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 Standard: 47.8% (lower is better)	36%	32%	31%	34%	29%	35%	39.3%

Data Source: FACTS

Numerator: The number of children who entered foster care in the 12 month reporting period, who discharged to permanency (Reunification, Adoption, Guardianship, or Living with Other

Relative) within 12 months of entering foster care and before turning 18.

Denominator: The number of children who entered foster care in the 12 month reporting period.

Note: For purpose of Federal Outcomes the trial home placement adjustment was made if childs last placement was placed at home. **Exclusions:** Outcome excludes children in care less than 8 days and any youth age 18 or older at entry or exit from foster care.

Data Source: FACTS

Data Source: FACTS

Numerator: The number of children who were in foster care 12 to 23 months on the first day of the 12 month reporting period, who discharged to permanency (Reunification, Adoption, Guardianship, or Living with Other Relative) within 12 months of the first day of the reporting period and before turning 18.

Denominator: The number of children who were in foster care 12 to 23 months on the first day of the 12 month reporting period.

Numerator: The number of children in foster care in the report period who became legally free for adoption in the 12 months prior to the year shown, who were discharged to a finalized adoption in less than 12 Months of becoming legally free.

Denominator: The number of children in Foster Care in the report period who became legally free for adoption in the 12 months prior to the reporting month.

Data Source: FACTS

Numerator: Number of children who were discharged from foster care to a finalized adoption in less than 24 months from the removal from home date in the report period.

Denominator: Children who were discharged from foster care to a finalized adoption in the report period.

Data Source: FACTS

Numerator: The number of children discharged from foster care, who were legally free (parental rights termination dates or date of death for both mother and father) for adoption at the time of discharge, and who were discharged to a permanent home (discharge reasons of adoption, permanent custodianship, reunification, or living with relative) prior to their 18th birthday.

Denominator: The number of children discharged from foster care, who were legally free (parental rights termination dates or date of death for both mother and father) for adoption at the time of discharge.

Data Source: FACTS

Numerator: The number of children who were either (1) discharged from foster care for emancipation or (2) reached their 18th birthday while in foster care, and were in foster care for 3 years or longer. Denominator: The number of children who were either (1) discharged from foster care for emancipation or (2) reached their 18th birthday while in foster care.

Data Source: FACTS

Agency Measure	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Average months in foster care for children discharged to reunification Suggested Timeframe: 12 months	9	10	10	10	10	12	11
Average months in foster care for children discharged to custodianship/guardianship Suggested Timeframe: 18 months	18	19	20	19	19	24	22
Average months in foster care for children discharged to emancipation Suggested Timeframe: NA	39	37	38	36	38	39	42
Average months in foster care for children discharged to adoption Suggested Timeframe: 24 months	35	36	38	39	39	40	39
Adoptions finalized Standard: NA	755	758	766	1210	998	846	948

Data Source: FACTS

Based on this data, Kansas could improve outcomes for children and families by ensuring concerted efforts are made to achieve permanency in a timely manner.

When a child is reunified with their family, reunification occurs, on average, 11 months after the child's entry into foster care. This is within the 12-month suggested timeframe for achievement. However, Kansas recognizes the need to increase the number of permanencies that occur in 12 months. Data in 2022 indicate a decrease in this percentage and continues to fall short of the 40.5% standard for permanency in 12 months. This outcome has been highlighted on CMP Performance Improvement plans in each area (with the exception of catchment area 2 where the outcome is currently being met).

When a child exits to custodianship/guardianship, permanency is achieved, on average, within 21 months of the child's entry into foster care. This data point indicates improvement over SFY 21, yet still higher than previous years and outside the 18-month suggested timeframe for achievement.

When a child exits to adoption, permanency through adoption occurs, on average, 40 months after the child's entry into foster care. This average has increased in recent years, however, has remained steady with SFY 21.

The suggested timeframe for achieving adoption is 24 months. Kansas data shows another decline in the percentage of children who exited to adoption and achieved permanency within 24 months of entering care. SFY 22 (July 21 through April 22) reflects only 13% of children met this suggested timeframe. Also, only 38% (another decrease) of the children, who became legally free for adoption, had exited to adoption 12 months later.

<u>Permanency Outcome 2: The continuity of family relationship and connections is preserved</u> for children.

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

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 review of case file documentation and interviews with key case participants.

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.

Agency Outcome Measure	SFY	SFY	SFY	SFY	SFY	SFY	SSFY
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	2016	2017	2018	2019	2020	2021	2022
Children in foster care, with siblings in							
foster care, placed with at least one	79%	77%	74%	73%	74%	77%	77%
sibling	7970	/ / /0	/4/0	/370	/4/0	/ / /0	/ / /0
Standard: 78%							

Data Source: FACTS

Numerator: The number of children who are placed with at least one sibling in out of home placement on the last day of the month.

Denominator: The number of children who have siblings in out of home placement on the last day of the month.

Data Source: FACTS

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the DIID was the shild aloosed with			(20/	(20/	550/	5 (20/	570/
During the PUR, was the child placed with all siblings who also were in foster care?	63%	51 %	63%	62%	33%	56.2%	5/%
If the answer to the above question is "no", was there a valid reason for the child's separation from the siblings?	65%	67 %	71%	63%	70%	80.6%	68%

Case Read results suggest an area of opportunity to increase sibling placement. Outcome data remains consistent with just below the performance standard.

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

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.

Kansas continues to strive to increase frequency and quality of visitation with child and parents. Frequency of sibling visitation continues to remain low.

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, were	72.1%	61.9^	56.1%	51.5%	65.4%	72.9%	64.44%
concerted efforts made to ensure that visitation							
(or other forms of contact if visitation was not							
possible) between the child and his or her							
mother was of sufficient frequency to maintain							
or promote the continuity of the relationship?							

During the period under review, were	84.1%	86.8%	70.2%	70.7%	90.9%	73.6%	75.16%
concerted efforts made to ensure that the							
quality of visitation between the child and the							
mother was sufficient to							
maintain or promote the continuity of the							
relationship?							
During the period under review, were	68.3%	54.5%	48.6%	40.6%	58.8%5	66.8%	58.06%
concerted efforts made to ensure that visitation							
(or other forms of contact if visitation was not							
possible) between the child and his or her							
father was of sufficient frequency to maintain							
or promote the continuity of the relationship?							
During the period under review, were	84.8%	82.3%	66.7%	68.9%	84.6%	67.4%	69.57%
concerted efforts made to ensure that the							
quality of visitation between the child and the							
father was sufficient to							
maintain or promote the continuity of the							
relationship?							
During the period under review, were	58.3%	51.9%	52.9%	31.0%	27.3%	64.0%	44.9%
concerted efforts made to ensure that visitation							
(or other forms of contact if visitation was not							
possible) between the child and his or her							
sibling(s) was of sufficient frequency to							
maintain or promote the continuity of the							
relationship?							
During the period under review, were	77.6%	73.8%	69.2%	45.8%	57.1%	71.5%	68.24%
concerted efforts made to ensure that the							
quality of visitation between the child and his							
or her sibling(s) was							
sufficient to promote the continuity of their							
relationships?							

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

In CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 9.

Agency 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.

Agency Outcome Measure	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Children aged 6 and older attending the same school after removal <i>Standard</i> : 25%	15%	15%	16%	17%	18%	18%	24%
Youth emancipating from custody with an identified lifelong Connection for Success Standard: NA	59.9%	75.6%	81.2%	79%	79%	86%	88%

Data Source: FACTS

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, were concerted efforts	88.2%	82.6%	71.3%	76.8%	70.8%	80.1%	75.96%
made to maintain the child's important							
connections (for example, neighborhood,							
community, faith, language, extended							
family members, including siblings who are							
not in foster care, school, tribe, and/or							
friends)?							
XX	93.2%	00.70/	79.3%	86.0%	89.4%	91.9%	02 420/
Was a sufficient inquiry conducted with the	93.2%	88.7%	/9.3%	86.0%	89.4%	91.9%	93.43%
parent, child, custodian, or other interested party to determine whether the child may be							
a member of, or eligible for memberships							
in, an Indian tribe?							
If the child may be a member of, or eligible			54.5%	30.8%	57.1%	51.9%	45.95%
for membership in, an Indian tribe, during	52.9%	36.2%					
the PUR, was the tribe provided timely							
notification of its right to intervene in any							
State court proceedings seeking an							
involuntary foster care placement or							
termination of parental rights (TPR)?							
If the child is a member of, or eligible for	62.8%		40.0%	22.2%	60.0%	55.3%	47.06%
membership in, an Indian tribe, was the child	62.8%	47.1%					
placed in foster care in accordance with the							
Indian Child Welfare Act (ICWA) placement							
preferences or were concerted efforts made to							
place the child in accordance							
with ICWA placement preferences?		1 00			<u> </u>	1 12 .	

Case Read results suggest that making concerted efforts to maintain a child's important connections and conducting sufficient inquiry regarding whether the child may be a member of or

eligible for membership in an Indian tribe are areas where performance is strong in Kansas.

Result percentages for the last two Case Read questions above, regarding providing timely notification to tribes and placing children in foster care in accordance with ICWA when applicable, have fluctuated. It is important to note that of the Out of Home sample reviewed each quarter, there are only a few cases in which these questions are applicable. The low numbers applicable for these questions mean that the confidence interval is too large to rely on percentages as an indicator of performance. Although numbers of cases read for these questions are too low to rely on percentages as an indicator of performance, the consistently low percentages of cases meeting these standards suggests that this continues to be an area of opportunity in Kansas.

Educational Stability for Children in Foster Care Workgroup (Formerly ESSA)

This workgroup has been ongoing and has changed membership and vision over the years. Since 2019, the group has shifted focus from primarily the implementation of federal legislation of Every Student Succeeds Act (ESSA) to now maintaining compliance with this act, as well as discussing current educational matters. The group is comprised of specialized staff from each of the CWCMPs, Educational Coordinators, Kansas Department of Education (KSDE), Kansas Association of School Boards (KASB) and DCF, which meets monthly. Each CWCMP is invited to share with the group successes and struggles they may be having in ensuring school-aged children and youth in foster care are enrolled and receiving all needed educational services. Educational updates are shared with the group, as well as other agencies such as Jobs for America's Graduates (JAG), Families Together and other educational affiliates present information.

One of the incremental ways performances is increasing could be related to Kansas implementing the Placement Stability Team Decision Making (PS-TDM) model. This model considers same school attendance as a factor when considering a placement move.

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

In CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 10.

Placement with relatives or other kin continues to be the preferred placement, when it is in the child's best interest. The current Child Welfare Case Management Provider contracts include Placed with Relatives as a contract outcome. In SFY 2021 the performance standard change from 29% to 50% of all children are placement with a relative/nrkin. In SFY 2021, non-related kin were added to the outcome measure. Kansas continues to make see more children residing with relatives and nrkin. Some CWCMPs have met the 50% or are close to meeting this goal.

Agency Outcome	SFY						
	2016	2017	2018	2019	2020	2021	2022
Of all children in out of home placement, what percent are placed with a relative? Standard: 29% SFY21-50%	33%	33%	32%	33%	34%	40%	44%

Aganay Casa Pand Quastion	SFY	SFY 2017	SFY	SFY	SFY	SFY	SFY
Agency Case Read Question	2016	2017	2018	2019	2020	2021	2022
Did the agency, during the period under	0.607	5.50 /	74%	72%	86%	70%	68%
review, make concerted efforts to identify,	86%	75%					
locate, inform, and evaluate maternal relatives							
as potential placements for the child, with the							
result that maternal relatives were ruled out as							
placement resources (due to fit, relative's							
unwillingness, or child's best interests) during							
the period under review?							
Did the agency, during the period under			77%	73%	80%	63%	58%
review, make concerted efforts to identify,	80%	69%					
locate, inform, and evaluate paternal relatives							
as potential placements for the child, with the							
result that paternal relatives were ruled out as							
placement resources (due to fit, relative's							
unwillingness, or child's best interests) during							
the period under review?							

Agency Case Read System

Case Read results suggest making concerted efforts to identify, locate and evaluate maternal and paternal relatives for children not currently placed with relatives continues to be an opportunity for improvement. Child Welfare Case Management Providers (CWCMP) efforts in this area have included hiring staff to search for relative placements and hiring staff to support those placements.

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

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.

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.

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Were concerted efforts made to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his/her mother?	67.8	62.9	47.5	55.8	54.5	65.8%	54.6
Were concerted efforts made to promote, support, and otherwise maintain a positive and nurturing relationship between the child in foster care and his/her father?	57.2	55.4	41.2	47.8	42.9	57.3%	48.72

A. Well-Being

Well-Being Outcomes 1, 2 and 3

Well-being outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs.

In CFSR Round 3, Kansas was not in substantial conformity for Well-Being 1.

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

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

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.

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

Family Preservation

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, did the agency conduct a formal or informal initial and/or ongoing comprehensive assessment that accurately assessed the child's needs?	87%	75%	74%	80%	77%	84%	91%
During the PUR, were appropriate services provided to meet the child(ren)'s identified needs?	71%	39%	31%	64%	59%	72%	84%
During the period under review, did the agency conduct a formal or informal initial and/or ongoing comprehensive assessment that accurately assessed the mother's needs?	91%	81%	74%	80%	79%	90%	85%
During the period under review, did the agency conduct a formal or informal initial and/or ongoing comprehensive assessment that accurately assessed the father's needs?	62%	53%	37%	54%	45%	57%	57%
During the period under review, did the agency provide appropriate services to the mother to meet identified needs?	79%	71%	57%	71%	72%	86%	78%
During the period under review, did the agency provide appropriate services to the father to address identified needs?	52%5 2.4	46%	21%	42%	41%	53%	49%

Agency Case Read System

Case Read results suggest that for all In-Home services assessing the needs of the is an area of strength. There is an area of opportunity to look services being provided to children. Assessing and providing services to mothers and fathers continues to be an area of opportunity.

Foster Care

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, did the agency	94.4	92.7	81.9	85.5	66.0	84.8%	88.2
conduct a formal or informal initial and/or							
ongoing comprehensive assessment that							
accurately assessed the child's needs?							
During the period under review, were	89.0	83.5	66.7	78.6	62.5	74.7%	73.05
appropriate services provided to meet the							
child's identified needs?							
During the period under review, did the agency	85.9	79.8	55.9	67.3	70.6	65.4%	64.25
conduct a formal or informal initial and/or							
ongoing comprehensive assessment that							
accurately assessed the mother's needs?							

^{*}Question pertaining to providing services to mother was not read in SFY22. Agency Case Read System

Data continues to show an area of opportunity in assessing and providing services. When reflecting on the data there are factors that may contribute to discrepancies in performance indicators across time. Some of these factors may include virtual visits, expanding grantees, transition timeframes, and decrease in staff resources.

Data from Focus Groups

What challenges are unique to engaging with fathers in assessment and service planning?

- Fathers are sometimes unknown or not willing to participate
- Mothers may not want contact with them
- IPV Issues
- Not having male assessors available
- · Higher resistance to engagement
- Child support enforcement

What initiatives are taking place in KS that might help to improve our work with fathers?

Family finding

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

- Some family council members found support in individual case workers/family advocates/ CASA workers throughout their experience
 - o A common theme among these support individuals is a genuine connection/relationship built on trust
 - o with the family council member

Were the case workers assigned to your case interested in you as a person?

- A family council member reported that once she lost custody of her child to the child's other parent, she received no services or support to regain custody. She felt like a number being checked off the caseworkers list.

Workers care more about you when you're younger and more easily placeable If you could waive the magic wand, what would you want to see differently?

- Make transitioning a child from their home into a foster home/residential facility less traumatizing

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

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.

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.

Family Preservation

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, did the agency make concerted efforts to actively involve the	68%	58%	44%	67%	63%	55%	69%
child(ren) in the case planning process?						0.40/	
During the PUR, did the agency make	93	87%	79\$	77%	82%	81%	89%
concerted efforts to actively involve the mother in the case planning process?	%						
During the PUR, did the agency make	71	70%	56%	66%	44%	65%	67%
concerted efforts to actively involve the father in the case planning process?	%						

Foster Care

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, did the agency make	75	75%	71%	60%	66%	76%	69%
concerted efforts to actively involve the	%						
child in the case planning process?							
During the PUR, did the agency make	86	79%	66%	65%	61%	70%	65%
concerted efforts to actively involve the	%1						
mother in the case planning process?							
During the PUR, did the agency make	76	65%	53%	54%	63%	61%	54%
concerted efforts to actively involve the	%						
father in the case planning process?							

Case Read results suggest for Foster Care Services, involving child(ren), mothers and fathers in the case planning process remain areas of opportunity for Kansas.

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

Were the case workers assigned to your case interested in you as a person?

- A family council member reported that once she lost custody of her child to the child's other parent, she received no services or support to regain custody. She felt like a number being checked off the caseworkers list
- Workers care more about you when you're younger and more easily placeable
- If you could waive the magic wand, what would you want to see differently?
 - Make transitioning a child from their home into a foster home/residential facility less traumatizing
 - Provide funding for required classes and programs enforced by the courts (WB 12)

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

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.

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 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.

The FFY22 federal child/worker visit report was submitted and Kansas exceeded the standard of 95% of children in foster care received a monthly visit. Kansas performance for FY22 was 97%. Kansas also exceeded the standard of 50% of all visits are to be made in the residence, with 88%.

Family Preservation

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, was the frequency of the visits between the caseworker (or other responsible party) and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?	71.1	59.6	77.8	81.8	74.2	71.4%	84.93
During the PUR, was the quality of the visits between the caseworker and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals (for example, did the visits between the caseworker or other responsible party and the child(ren) focus on issues pertinent to case planning, service delivery, and goal achievement)?	43.7	23.8	50.8	70.2	51.6	59.7%	67.14

Case Read results suggest that for In-Home Services, although there has been significant improvement for Family Preservation Services in the areas of frequency and quality of visits between the caseworker and children, these remain areas of opportunity for Kansas.

Foster Care

	SFY						
Case Read Question	2016	2017	2018	2019	2020	2021	2022

During the PUR, was the frequency of the visits between the caseworker (or other responsible party) and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?	90.0	83.4	76.6	70.9	58.0	87.9%	82.89
During the PUR, was the quality of the visits between the caseworker and the child(ren) sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals (for example, did the visits between the caseworker or other responsible party and the child(ren) focus on issues pertinent to case planning, service delivery, and goal achievement)?	78.4	68.3	81.1	68.8	75.5	71.1%	53.25
During the PUR, was the child (if 10 or older) offered the opportunity to use the "Monthly Individual Contact" form PPS 3061?	46.2	39.2	38.1	35.2	20.0	39.1%	39.07%

Case Read results suggest that for Foster Care Services, the areas of frequency and quality of visits between the caseworker and children remain areas of opportunity for Kansas.

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 FFY 2018-2020, data reflected a decline in the performance standard for monthly caseworker visits. In FFY 2021, system issues were corrected, communication between DCF and Case Management Providers has improved, and Kansas' ratings have increased for FFY 2021 and FFY 2022. DCF continues to address any system issues and work with the Case Management Providers to ensure outcomes continue to be met.

Outcome Measure	FFY						
	2016	2017	2018	2019	2020	2021	2022
Monthly Caseworker Visits Standard: 95%	97%	95%	90%	74%	89%	95%	97%
Visits In Home Standard: 50%	83%	83%	83%	85%	76%	83%	88%

Data Source: SCRIPTS

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. It is written in the CWCMP grant that workers must have a quality visit with children and youth assigned to their case load on an at least monthly basis, with at least 50% of those occurring in the child's or youth's residence. It is policy the CWCMP Case Manager meet alone with the child and do a walk-through of their home (when it occurs in the residence) to assess the child or youth for safety and ensure all needs are met. 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.

In 2019, in response to the pandemic Kansas extended flexibility in worker-child visit requirements. Specifically, permission was granted by Administration for Children and Families (ACF) to allow visits to occur virtually. Kansas has learned how to balance safe in-person visits again, and virtual platforms have been phased out. The use of virtual platforms is an option used in extraordinary circumstances.

Kansas continues to monitor monthly caseworker visits and work with CWCMPs to identify effective strategies to increase performance outcomes.

What are some of the challenges in making visits with biological parents?

- Homeless parents
- No transportation accesses

The Kansas Youth Advisory Council participated as a stakeholder focus group and responded to facilitated questions.

1. What type of communication with your CPS worker worked best for you? (Examples: email, text, phone call, video calls, letters, face to face meetings)

How would you have preferred for your worker to communicate with you?

What types of barriers were there when you needed your worker to communicate with you? What things got in the way? What could have helped and improved their communication with you? What was the best way for you to communicate/have contact with your worker?

- AD Would have like worker to talk to me at all. Specific workers—some that never met. Was one who would talk down to me and make me feel like trash—called over foster family dog to help cope.
- L-first worker would come over all the time and talk to her—still talk to her even though not worker since 10 yrs old. Took me out for ice cream when went to first facility. Into high school have a couple of workers and would send papers in mail to fill out. Just told no longer in system and didn't really talk about aging out.
- JD—preferred for case worker to be consistent—a lot on caseload and also had sister. Never communication that happened, especially with aunt who was relative placement.
- HG my caseworker didn't communicate with me directly—but with who stayin with. Especially with aging out process. Got pushed along and no one really talked of me about it. Wasn't prepared coming out of care. Couldn't reach out to case worker about resources available and not having connection not being in care very long. Communicating with people around me instead of me—didn't feel much connection.
- CS—nothing positive. Outed me to my bio family and foster family. Moved me from where I had been 3 years b/c didn't want me around children and was a pedophile. Tried to kill self-7

times junior year in high school. Told not safe placement. Nothing positive to say about it. Never talked to me about things. Thought could trust at first but got home and was sitting in living room with foster mom, bio family and told way before I was ready. Other foster kids heard and outed at school.

0-10 great relationship, etc and knew would respond to 0 didn't know name, how to contact.

0

4—HG didn't know what talking about, not accurate info, trickle down didn't make it to me. Not inclusive. 4 for knowledge and efforts in some areas.

4

0

AD A couple higher-- 6 and 8 others lower.

What brought number up—L—1 worker would get 10. CS –when switched to another agency, supervisor when went to work and was really good—7 or 8.

One small thing that would bring up 1?

Communication, paying attention, empathy, not telling me I am worthless, compassionate and understanding, we did not have the same childhood you had. Not just kids on your caseload—you might be done at 5, but this is our entire life. Even work with this group—don't always have understanding—trauma experienced impacts us. Bucket list of MH stuff long—LGBTQ stuff—told immature b/c asexual. That is not. You guys get to go home at night, this is our life and your decisions will affect foster kids life for months and years.

How would worker rate relationship with you 1-10?

HG- Many of the YA's report amazing relationship with ILC's after care.

Not sure, think would be professional.

AD—used to live in IL program, even if don't like to remain professional. Worker would probably rate relationship higher than I did.

CS mine was well aware we didn't have a good relationship. Cussed up and down the wall and said hated her. She would rate me a -5. 2nd one would rate an 8 or 9. Two IL workers and loved both very much—both absolutely amazing.

AD—like my IL worker as a person. Doesn't always do job the best, but like them as a person. Rate her higher and she would rate me a 6

HG would rate me a 6—no major issues, some hospitalizations.

ZB—I would give her a 10

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Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

- An individual with foster care experience reports that they didn't have role models due to the transitional nature of the system and constantly changing case workers
- A family council member discussed a strong connection with their foster parent and how that foster parent taught them how to advocate for themselves

Were the case workers assigned to your case interested in you as a person?

- A family council member reported that once she lost custody of her child to the child's other parent, she received no services or support to regain custody. She felt like a number being checked off the caseworkers list
- Workers care more about you when you're younger and more easily placeable

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

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.

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.

See below for latest case read information regarding Item 15. Q1 percentage was updated, no case read was completed for Q2, and Q3 read resulted in 55%. Kansas continues to identify this as an area of opportunity for improvement. Quarterly meetings with case read results and discussion regarding ways to increase percentage continue regularly. CWCMPs (Child Welfare Case Management Providers) recently shared initiatives and projects they have started or plan to start for increasing their performance regarding parent engagement with both mothers and fathers.

Family Preservation

During the PUR, was the frequency of the visits between the caseworker (or other responsible party) and the mother sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?	84%	81%	84%	88%	85%	88%	91%
During the PUR, was the quality of the visits between the caseworker and the mother sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?	64%	58%	57%	67%	63%	91%	92%
During the PUR, was the frequency of the visits between the caseworker (or other responsible party) and the father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?	87%	81%	74%	80%	82%	72%	61%
During the PUR, was the quality of the visits between the caseworker and the father sufficient to address issues pertaining to the safety, permanency, and well-being of the child and promote achievement of case goals?	73%	66%	64%	67%	50%	81%	67%

Case Read results suggest that for all In-Home Services, areas of frequency and quality of visits with the caseworker and father remain areas of opportunity for Kansas.

Foster Care

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, was the frequency of the	57	40%	33%	39%	40%	52%	34%
visits between the caseworker (or other	%						
responsible party) and the mother sufficient							
to address issues pertaining to the safety,							
permanency, and well-being of the child and							
promote achievement of case goals?							

During the PUR, was the quality of the	83	71%	72%	64%	54%	74%	76%
visits between the caseworker and the	%						
mother sufficient to address issues							
pertaining to the safety, permanency, and							
well-being of the child and promote							
achievement of case goals?							
During the PUR, was the frequency of the	49	34%	32%	35%	52%	40%	24%
visits between the caseworker (or other	%						
responsible party) and the father sufficient to							
address issues pertaining to the safety,							
permanency, and well-being of the child and							
promote achievement of case goals?							
During the PUR, was the quality of the visits	81	70%	68%	64%	67%	68%	71%
between the caseworker and the father	%						
sufficient to address issues pertaining to the							
safety, permanency, and well-being of the							
child and promote							
achievement of case goals?							

Kansas continues to identify this as an area of opportunity for improvement. Quarterly meetings with case read results and discussion regarding ways to increase performance continue regularly. CWCMPs recently shared initiatives and projects they have started or plan to start for increasing their performance regarding parent engagement with both mothers and fathers.

Case Read results suggest that frequency and quality of visits between the caseworker and the mother, and the caseworker and father are areas of opportunity for Kansas.

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

Were the case workers assigned to your case interested in you as a person?

- A family council member reported that once she lost custody of her child to the child's other parent, she received no services or support to regain custody. She felt like a number being checked off the caseworkers list
- Workers care more about you when you're younger and more easily placeable

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

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

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.

Administrative Data Outcome Measure SFY SFY SFY SFY SFY SFY 2016 2017 2018 2019 2020 2021 2022 Children in foster care for 365 days or longer that progress to the next grade 83% 86% 99% 78% 69% 88% 91% level Standard: 70%

Numerator: The number of children in out of home placement on June 30th 2021, who are in out of home placement on June 30 2022, and have progressed to the next grade level.

Denominator: The number of children in out of home placement on June 30th 2021, who are in out of home placement on June 30 2022.

Data Source: FACTS

Family Preservation

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR did the agency make concerted efforts to accurately assess the	95 %	81%	76%	67%	68%	89%	92%
child(ren)'s educational needs?						0.40/	
During the PUR, did the agency engage in concerted efforts to address the child(ren)'s educational needs through appropriate	89 %	58%	56%	41%	60%	91%	85%
services?							

Foster Care

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR did the agency make concerted efforts to assess the child(ren)'s educational needs?	95%	93%	85%	81%	73%	85%	89%
During the PUR, did the agency engage in concerted efforts to address the child(ren)'s educational needs through appropriate services?	89%	81%	67%	67%	54%	73%	75%
During the PUR, for each initial placement and placement change, was the child enrolled in school timely?	89%	88%	89%	91%	63%	84%	81%
Are the required releases for educational records forms in the child's file?	94%	87%	92%	85%	84%	82%	72%

Case Read results indicate that for Foster Care services, assessing children's educational needs and engaging in concerted efforts to address the children's educational needs through appropriate services are areas of strength for Kansas.

Case Read results indicate for Foster Care services, having required releases for educational

records in the child's file and timely enrollment in school for each placement are areas of opportunities for Kansas.

In the CWCMP grants include a set of success indicators developed to measure the educational progression and/or success for children/youth in foster care. The current CWCMP grants include an outcome measure focusing on educational progression within 365 days.

Agency Success Indicator	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Adults Ending Custody with the Secretary will have Completed 12 th Grade.	46%	51%	68%	39%	31%	32%	54%

Numerator: The number of adults ending custody with the Secretary of DCF for reason of Emancipation or Runaway, who have completed the 12th grade.

Denominator: The number of adults ending custody with the Secretary of DCF for reason of Emancipation or Runaway.

Data Source: FACTS

Agency Outcome	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Children in Care for a full SFY will							
Progress to the Next Grade Level.	83%	86%	99%	78%	69%	88%	88%
Standard: 70%							

^{*}Data for this outcome will report progress toward the outcome; however, due to the nature of the cohort it is not a valid measure until the completion of a state fiscal year.

Numerator: The number of children in out of home placement on June 30th 2021, who are in out of home placement on June 30 2022, and have progressed to the next grade level.

Denominator: The number of children in out of home placement on June 30th 2021, who are in out of home placement on June 30 2022.

Data Source: FACTS

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

If you could waive the magic wand, what would you want to see differently?

- Foster care should use their resources for the children they have in care – for example there is funding for children to take drivers ed but kids aren't allowed to take the class because no one wants to provide a car

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

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

In CFSR Round 3, Kansas received an overall rating of Area Needing Improvement for Item 17.

Family Preservation

A C D 10 4	SFY						
Agency Case Read Question	2016	2017	2018	2019	2020	2021	2022
During the PUR, did the agency assess the	98%	90%	53%	80%	64%	82%	91%
child(ren)'s physical health care needs?	9070	9070					

During the PUR, did the agency assess the child(ren)'s dental health care needs?	100%	100%	40%	71%	60%	78%	89%
During the PUR, did the agency ensure that appropriate services were provided to the child to address all identified physical health needs?	88%	70%	43%	58%	71%	77%	76%
During the PUR, did the agency ensure that appropriate services were provided to the child to address all identified dental health needs?	100%	0%	25%	67%	50%	66%	56%

Case Read results suggest that for Family Preservation services, assessing the children's physical and dental health care needs are areas of strength. Case Read results indicate that ensuring that appropriate services were provided to the child to address identified physical health needs is an area of strength for Kansas. Case Read results suggest that ensuring that appropriate services were provided to the child to address identified dental health needs is an area of opportunity for Kansas.

Foster Care

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, did the agency assess the child(ren)'s physical health care needs?	89%	84%	61%	59%	47%	68%	64%
If the child's first OOH placement occurred during the PUR, was a health assessment completed 30 days before or after the placement? If not, were there attempts to schedule it within 14 days?	76%	77%	58%	59%	60%	62%	67%
Are the child's immunizations current?	87%	83%	68%	76%	68%	73%	76%
During the PUR, did the placement provider receive appropriate medical and surgical consent forms for the child?	90%	93%	91%	85%	92%	89%	86%
During the PUR, did the agency assess the child's dental health care needs?	76%	73%	49%	49%	43%	59%	57%
During the PUR, did the agency ensure that appropriate services were provided to the child to address all identified physical health needs?	85%	74%	45%	54%	27%	57%	49%
During the PUR, did the agency ensure that appropriate services were provided to the child to address all identified dental health needs?	63%	53%	33%	34%	23%	41%	41%
For foster care cases only, during the period under review, did the agency provide appropriate oversight of prescription medications for physical health issues?	81%	87%	62%	69%	30%	61%	60%
Did a case transfer staffing occur, if applicable, as documented by completing the PPS 3005?	*	*	34%	36%	35%	49%	52%
During the PUR, did the agency provide an Initial Mental Health and Trauma Screen within thirty (30) days upon the child's entry into foster care?	*	*	*	*	*	645	69%

Was the assessment performed by a person who has been trained to reliably administer the Screen, and who is either a Qualified Mental Health Professional or a professional who holds a bachelor's degree in the field of human services or a related field?		*	*	*	*	57.1	60.0
For a child who is legally free for adoption, did the agency utilize the Adoption Tracking Tool (ATT), PPS 5400 to compile and track information as the case moves toward adoption?	*	*	*	*	*	*	37.5
If the ATT-PPS 5400 was utilized, were the appropriate sections of the form completed based on the status of the case?	*	*	*	*	*	*	95.24

^{*}Case Read questions were not part of the review instrument

Case Read results suggest that for Foster Care services, assessing the child's physical health care needs and ensuring that appropriate services were provided to the child to address identified physical health needs in an area of opportunity for improvement.

Case Read results indicate that completing a timely health assessment, ensuring the child's immunizations are current and ensuring that the placement provider received appropriate medical and surgical consent forms for the child are areas of opportunity for Kansas.

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

In CFSR Round 3, Kansas received an overall rating of Area Needing improvement for Item 18.

Family Preservation

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the PUR, did the agency conduct an assessment of the child(ren)'s mental/behavioral health needs either initially (if the child entered foster care	95%	85%	93%	80%	68%	86%	96%
during the PUR) or on an ongoing basis to inform case planning decisions?							
During the PUR, did the agency provide appropriate services to address the child(ren)'s mental/behavioral health needs?	87%	65%	71%	68%	75%	83%	88%

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, did the agency complete a substance abuse screening tool on all family members?	84%	41%	80%	80%	91%	75%	81%
During the period under review, did the agency provide appropriate services to address the families' substance abuse needs?	59%	39%	27%	61%	56%	70%	64%

Case Read results suggest that for all In-Home services, assessing the child's mental/behavioral health needs and providing appropriate services to address the mental/behavioral health needs are areas of strength in Kansas. Case Read results suggest that for all In-Home services, assessing the child's developmental needs and providing appropriate services to address the developmental needs are areas of strength in Kansas. Case Read results indicate that assessing substance abuse needs of all family members and providing appropriate services may be areas of opportunity for Kansas.

Foster Care

Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, did the agency	96%	97%	92%	89%	80%	88%	89%
conduct an accurate assessment of the							
children's mental/behavioral health needs							
either initially (if the child entered foster care							
during the period under review or if the in-							
home services case was opened during the							
period under review) and on an ongoing							
basis to inform case planning decisions?							
During the period under review, did the agency	91%	87%	83%	82%	70%	80%	78%
provide appropriate services to address the							
child(ren)'s mental/behavioral health needs?							
For foster care cases only, during the period	78%	75%	68%	63%	50%	66%	66%
under review, did the agency provide							
appropriate oversight of prescription							
medications for mental/behavioral health							
issues?							

^{*}Initial trauma screen questions were added to Foster Care case read tool SFY21Q3.

Case Read results suggest that Foster Care services, assessing the child's mental/behavioral health needs and providing appropriate services to address the mental/behavioral health needs. The agency providing appropriate oversight of prescription medications remains constant in 2/3rds of cases have appropriate oversight and notes this an area of opportunity.

Beginning in March of 2020, the pandemic has shown an increase in mental health needs for children and families across Kansas. The pandemic created an unintended benefit with the use of telehealth, particularly in areas of mental health deserts.

DCF continues to promote the Mental Health in Schools program through working alongside the Association of Community Mental Health Centers to address gaps in mental health care for youth in foster care. There are approximately 56 school districts and 17 CMHC's involved in the program. In SFY22, there were 582 foster care youth served across the school districts that participate in this program. Additionally,

Kansas uses 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.

A survey was sent to the two Citizen Review Panels-Intake to Custody and Custody to Transition with 23 responses received. Rating system was: Usually Effective, Sometimes Effective, Rarely Effective and Not Effective.

1. How effective is the state in addressing matters related to safety, permanency and well-being with children and families?

Over ½ of all responses rated the state being "sometimes effective" n=16, and 3 rated as "rarely or not effective".

Section IV: Assessment of Systemic Factors

Systemic Factor A: Statewide Information System

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

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

In CFSR Round 3, Kansas received an overall rating of Strength for Item 19. Finding were determined based on information from the statewide assessment.

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

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

Neglect Data System (NCANDS), National Youth in Transition Database (NYTD), Family First Prevention Services Act (FFPSA), and other stakeholders.

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

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

<u> </u>	<u>Adminis</u>	<u>strative</u>	QA Dat	<u>ta</u>			
Measure	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
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%	100%	99%	100%	98%	100%	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?	96%	96%	95%	93%	96%	98%	99%
Does the information on the child's Hispanic origin in FACTS match information found on the PPS 1000 or the PPS 5110?	97%	97%	97%	91%	94%	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?	78%	76%	87%	89%	66%	85%	65%
Does all placement history information in FACTS accurately reflect the placement history information on all PPS 5120 documents?	97%	96%	95%	85%	90%	95%	99%
Does the current placement address in FACTS match the information on the most recent notice of move/acknowledgement (PPS 5120) from the provider?	98%	97%	90%	91%	94%	92%	93%

Measure	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
Does the information on the PLAN screen accurately reflect the most recent case plan conference date as indicated on the PPS 3051?	97%	95%	93%	78%	85%	91%	86%
Does the information in FACTS accurately reflect the child's current permanency goal as indicated on the most recent PPS 3051?	98%	96%	95%	96%	96%	90%	93%
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%	96%	100%	95%	90%	96%	100%
If the child was discharged from custody, does FACTS accurately reflect the date and reason of discharge?	97%	97%	100%	100%	75%	100%	88%
Does the date of the mother's termination of parental rights in FACTS accurately reflect information found in the case file?	81%	87%	92%	100%	90%	78%	83%
Does the date of the father's termination of parental rights in FACTS accurately reflect information found in the case file?	82%	90%	89%	89%	82%	88%	88%
If child has been adopted, does the finalization date of the adoption in FACTS accurately reflect information found in the case file?	87%	91%	100%	100%	100%	80%	100%
If child is being adopted, does the information in FACTS regarding the adoptive parent/child relationship accurately reflect information in the case file?	94%	88%	100%	73%	0%	90%	75%

Case Read results suggest the data in FACTS related to 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 is highly accurate with the following exceptions: data related to diagnosed disability types, date and reason for discharge, and data related to the demographic characteristics of foster parents. DCF Administration and Information Technology Services (ITS) work together to compile and organize an AFCARS error report monthly. Error reports are shared with Regional Support Services Leadership who work with CWCMPs and Data Entry staff to identify and correct errors. Case Read results suggest in general, a consistently high level of accuracy of data in FACTS.

Each CWCMP uses a resource management system independent from the state system. This requires a close working relationship between state and CWCMPs to ensure consistency in reporting data and in the manner in which the agencies access data from the state. Each time information including a child's status, demographic characteristics, location or permanency goals

needs to be entered or updated, CWCMP staff submit the information using DCF issued forms to DCF Regional staff for data entry into FACTS. Policy provides instructions and timeframes for submitting information to Regional staff for data entry. CWCMP staff are required to submit the PPS 5120 within 48 hours of initial referral for out of home services and anytime there is a placement change, address change, or level of care change. CWCMP staff are required to submit the PPS 5120 within 24 hours of a move or Release of Custody court hearing unless the move occurs over the weekend or on a holiday, in which case the form should be submitted by 11:00 a.m. on the next working day. CWCMP staff are required to submit the PPS 5120 within 48 hours of the child being AWOL, receiving inpatient medical or psychiatric services, respite, or if there is a change of address for the placement unless it occurs over the weekend or on a holiday, in which case the form should be submitted by 11:00 a.m. on the next working day. Once information is received by the DCF Regional office, data entry staff have five days to enter into FACTS.

With the contract changes in SFY 2020, DCF facilitated discussions with CWCMPs regarding federal outcomes based on federal indicators, outcomes and success indicators determined by DCF. During these discussions DCF provided an overview of Child Welfare Outcomes, and guidance on calculating outcomes. A reconciling process was developed in a collaborative effort by DCF and CWCMPs. This process ensures data quality and promotes timeliness of data entry, a process which occurs monthly and on an annual basis. Technical assistance was provided by DCF in using error lists and other available data quality monitoring tools.

Kansas is confident in the quality of data in FACTS and the timeliness of data entry proved by validated AFCARS submissions with no requirement to resubmit for several years.

There is PPS policy regarding timeframes for data entry, and timeliness of data entry is monitored by data entry staff supervisors and administrators on a regional level. Although FACTS creates a timestamp whenever new data is entered or changed, regional procedures for the flow of information from social workers to FACTS data entry staff vary.

Regarding the Statewide Information System, Kansas' assessment is an overall strength for this systemic factor. The Statewide Information System ensures 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. DCF is working collaboratively with ITS to ensure all new AFCARS data elements are collected and appropriately mapped for the Spring 2023 federal submission. Kansas' Statewide Information System is functioning well and exceeds these minimum expectations for functioning.

A survey was sent to the two Citizen Review Panels-Intake to Custody and Custody to Transition with 23 responses received. Rating system was: Usually Effective, Sometimes Effective, Rarely Effective and Not Effective.

How effective is the statewide information/data system (FACTS) at identifying demographics for children in foster care?

19 of the 23 responses rated a "sometimes and usually effective", with 0 at "not effective".

Systemic Factor 2: Case Review System

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

During CFSR Round 3, Kansas was not in substantial conformity with this systemic factor using the state's performance on Items 20, 21, 22, 23, and 24.

Kansas received an overall rating of Area Needing Improvement for Item 20: 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.

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.

The Kansas Youth Advisory Council participated as a stakeholder focus group and responded to facilitated questions.

3. Did your CPS worker develop your case plan with you? If not, how was your case plan shared with you?

Tell me about how your case plan was developed. What was your involvement like? What did you

appreciate most about being involved in developing your case plan? If you weren't involved, why do you think you weren't? How did you find about what was included? What would have helped you be more involved in developing your case plan?

- CS never told about it. Would call us in. would come to foster home and call in. was never invited to it b/c had things with school—basketball, etc. One had a case plan goal that couldn't be in room alone with other kids b/c could be a predator as gay man. No history of anything like that.
- HG mine was unsure if capable of being part of those conversations. One placement didn't treat me as adult or about to be doing adult things. Hospitalization senior year. Did it during times not home, etc. Was overly medicated after being in hosp. and didn't really remember.
- AD always invited to show up but what I had to say not taken into consideration. Since 14 had getting DL on case plan, never took into consideration vision problems, couldn't see street signs. Regularly scheduled when I had theatre and would choose doing show over cp. Hospitalized for being gay. Certain things—time to talk down to me, being told problem child. Got violent put on file, being harassed at school for weeks and hit bum—hit with my shoe. Had been going to teachers, placement, workers, etc for weeks. Needed to be less violent. How much did they listen to me. Got better with certain placements where they would popcorn it back to me—what do you want on it and that was better. Some goals were there b/c needed fillers. Or here is a basic goal and never made with intent for me to fill them. Never meant for me to fulfill but to just be on there.
- ZB—first stint in foster care system. Was originally put in fc due to parental abuse. All the years of everything going on with me was put back in and then got adopted. Found out many years later. Pretty much all the stuff put on my original case --there was items to be put on but no explanation of if done or not done on there. Were you part of developing....no. Found out about them many years later. Being invited.
- What would have helped been more involved in dev. own case plan—
- CS—having a worker that had respect
- L if goals actually meant something, but nothing was really pushed for it. Would ask me but then flip into what they wanted. Oh, you mean.... No not really, but.
- JD—when was invited, was during school hours and pulled out a lot, esp during history class and got D in history when always got A's. Looking at involvement for case plan, but not pulling out of school/ activities.
- HG—get feedback at school about where were you and
- HG—not included b/c was quicker to just go talk to foster parent. If she took the time to make sure and see my face and make sure I understood what was coming out of her mouth. Not time to process the information being told—that wasn't considered.
- Having a case worker that respected me. Not seeing me as a dumb child. When comes to f.c. know what I am talking about. Not being able to see—how can get dl and be safe on road. Actively listening to me. If say I am being hurt at placement—not doing for attention. Actually look into it.
- Not just say we'll look into it.
- MH issues—you have depression, anxiety, etc. Still a human and know what is going on.
- CS—not doing things that are legal. Alarms on rooms come out one at a time for eating/ shower, etc. CM knew about it and didn't do anything about it. Regular foster home. If we say we aren't comfortable—listen and move us.
- AD—Cory has a story that I have hear too many times. Since was in care as long as I was that is all too common to me. Transportation driver 2x week for 2 years.....???? will always trust another foster kids before anyone else. Was told since fh was religiously affiliated was ok to be told to take down all pride stuff, not ok to talk about being non-binary. Had a drawing from a friend with a quote that had word devil and foster parent took off the wall and tore it up. Never saw that person again and only things I had from that friend. Was told I was devil child and not allowed to touch others.
- If you were cm how would you have interacted with self?
- CS—why I became a cm after finishing school. Wanted to be the case manager that I wanted. Mind my own business if youth came out to me. Asked youth if ok to tell supervisor —show respect.

- HG—talk to me like I am a person. Interact with me the same way they did with placement and maybe take a bit more time.
- JD—bigger point of view—starts at top and goes all the way down. Issue that has been an issue for a while—people burnt out really quick in SW. Gpa saw this when he was in the field too. Aspect of SW—trying to do with their hearts, but getting burnt out. These are children that are going home and it's their lives. See both points of view. Issue that will take a lot of time. SW burn out a big problem.
- L—be in person as much as I could. put their needs best I could at top of list.
- ZB—with 1st cm would have quit job while ahead. With everything first case manager did for me basically hurt me in the long run. 2nd one wish I still had—would have done everything she did and more. Helped me in so many ways can't even put in words
- AD—treat me the way I want to be treated. Effort into know about LGBTQ+ in general. Also would have taken time to hear own story and known not appropriate to say just going to send back to father (and would be dead). PC not a good person and know. MH crises coming to that realization. There was a long time told don't talk to her or talk trash—attack her and not tell me what was happening and why it wasn't ok. Would have saved me a lot of issues. No contact and now harassing my sister to find me and having to lie to sister so doesn't know where is. Had someone taken the time to sit me down and tell me what was going on and why it wasn't ok. Mentor that wasn't good? Struggle with social cues—being more explicit with explanations. Ignore that I don't get social cues. I am going to tell you something and you need to tell me what you think I am saying.

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?

In CFSR Round 3, Kansas received an overall rating of Strength for Item 21. Findings were determined based on information from the statewide assessment and stakeholder interviews.

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.

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.

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

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?

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.

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.

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

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

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.

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

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.

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 Performan										
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

Agency Administrative Data

Measure	*SFY 2022
For children who became legally free in SFY 2021, average days between removal and date legally free	716

Data Source: FACTS

*SFY 2022 data reflects data from July 2021 through February 2022, more recent data is available at time of this assessment.

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 271	Average # of Months between petition to terminate parental rights and termination 4.2 Months
Mother	271	4.2 Wollins
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. More recent data is not available at the time of this assessment.

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?

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.

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.

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.

PPS policy requires that each child in DCF custody, including those who are part of a sibling group who are also in custody, have their own individual case plan. All providers use the same forms for case plans. Case plan forms are in the PPS Policy and Procedure Manual and include federal requirements. Case plans are approved and reviewed by DCF to assure requirements are met. The initial case plan is due within thirty (30) days of the initial court order for removal. To ensure ongoing timely decision making, subsequent case planning meetings are conducted at minimum every 170 days.

The CWCMP submits a copy of the case plan and any supporting applicable documents to DCF for review and approval. Upon receiving approval, the CWCMP submits a copy to the court.

For both in-home and foster care services, the initial case plan per Kansas policy is to be completed no later than 20 days from the date of referral with the active participation of all persons identified at the initial team meeting as well as other possible resources identified by the family. Such initial case plan statutorily is to be completed and provided to the court within 30 days from the date of removal.

Foster Care

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, did the agency make concerted efforts to actively involve the child in the case planning process?	74.6	75.2	71.2	59.8	65.6	76.2%	68.75
During the PUR, did the agency make concerted efforts to actively involve the mother in the case planning process?	86.1	78.5	65.6	65.3	61.3	70.1%	65.37
During the PUR, did the agency make concerted efforts to actively involve the father in the case planning process?	75.6	64.5	55.3	54.3	63.2	61.0%	53.94

Agency case read system

Family Preservation

Agency Case Read Question	SFY 2016	SFY 2017	SFY 2018	SFY 2019	SFY 2020	SFY 2021	SFY 2022
During the period under review, did the agency make concerted efforts to actively	68.2	58.1	44.0	66.7	63.0	55.0%	68.97
involve the child in the case planning process?							
During the PUR, did the agency make concerted efforts to actively involve the mother in the case planning process?	93.0	84.7	73.8	77.2	81.5	80.9%	89.39
During the PUR, did the agency make concerted efforts to actively involve the father in the case planning process?	71.0	69.9	56.3	65.5	43.8	65.3%	67.3

Agency case read system

The OSRI does not provide definitions for "concerted efforts" so PPS provides additional instructions for these questions. Concerted efforts must include more than one attempt and more than one strategy. Strategies may include letters, phone calls, e-mail or attempts at in-person contact.

To contribute to strengthening engagement with families, DCF, KU and OJA as part of the Kansas Strong grant partnered with Kansas Family Advisory Network (KFAN) who delivered a survey to families in a variety of settings for input. Survey results were then compiled and synthesized by KU as a resource.

Case Read results suggest that for Foster Care Services, involving child(ren), mothers and fathers in the case planning process remain areas of opportunity for Kansas.



2022 Child and Family Services Reviews (CFSR) Kansas Legal and Judicial Stakeholder Focus Groups and Engagement

December 2022

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I. Executive Summary

The Kansas Child and Family Services Reviews (CFSR) Core Planning team is comprised of individuals from the Kansas Department of Children and Families (DCF), the Court Improvement Program (CIP), youth and families with lived expertise, Children's Bureau staff members, CFSR Unit members, guardians ad litem, legal and judicial stakeholders, Capacity Building Center for States (CBCS), and Capacity Building Center for Courts (CBCC).

As the Statewide Assessment meetings were held in the summer of 2022, the Kansas CFSR Core Planning team decided that deeper and broader engagement of the legal and judicial community was desired in order to more fully understand the functioning of the child welfare system in Kansas. As part of the planning calls, the CFSR Core Planning team created a legal and judicial subcommittee that would strategize and develop a plan for more robust legal and judicial engagement. The subcommittee was supported by the CIP, DCF, and the CBCC. Ideas from the subcommittee were discussed and shared with the Kansas CFSR Core Planning team on a regular basis in order to support awareness of and continually improve the work of the subcommittee.

The legal and judicial subcommittee created a strategic plan to recruit a wide range of legal and judicial stakeholders from across Kansas. A communication plan was developed that included an explanation of each of the opportunities for legal and judicial stakeholder participation in the Kansas CFSR. A copy of the initial communication to legal and judicial stakeholders can be found in <u>Appendix A</u>. The opportunities included:

- Being a member of the Statewide Assessment (SWA) team,
- Joining a focus group,
- Participating in a stakeholder interview,
- Serving as an onsite reviewer of Child in Need of Care (CINC) cases¹, and/or
- Being a Program Improvement Plan (PIP) team member.

As part of the communication plan, an initial survey of interest in participation in the CFSR opportunities was distributed to over 700 legal and judicial stakeholders. The initial survey asked participants to indicate which opportunity (or opportunities) they would like to join. The initial survey also asked two specific questions of respondents in order to begin to gather insights from legal and judicial stakeholders. Only those participants who wanted to participate in an opportunity to support CFSR efforts would have completed the following initial survey questions:

- 1. In the last year what is the greatest success you have seen in legal or judicial work in CINC cases in Kansas?
- 2. Currently, what is the highest legal or court need related to CINC cases that you see in Kansas?

The initial survey received 44 responses. Themes from the initial survey questions surfaced and were used to build questions for the focus group sessions. Notable successes in Kansas include:

- More efforts to keep children in the home with services,
- Implementation of the Adoption Tracking Tool,
- Improvement in diverting kids from entering foster care with prevention services (leading to reduction in the number of CINC filings),

¹ Onsite case review includes In Home cases and Out of Home cases.

- Improvement in identification of relatives early,
- Improvement in training statewide,
- Reunifying children with their families,
- More concerted legal advocacy on whether the agency is making reasonable efforts to reintegrate children and filing motions if this threshold is not being met, and
- The guardianship program set up by DCF with Kansas Legal Services.

Themes from the "highest legal or court need in CINC cases", as gathered from the initial survey questions, include:

- Lack of placements for children,
- Workforce turnover (including case workers, qualified attorneys (including parent counsel and appellate attorneys), and service providers),
- Lack of quality independent living services for youth who age out of care,
- Lack of services, including mental health services and services to support rural populations,
- Funding for GALs so that they can comply with Kansas Supreme Court Rule 110A²,
- Provision of accurate, complete, and timely information to the Courts,
- Privatization of child welfare has led to a lack of consistency, and
- Juvenile Justice reform, which increased the number of children coming into foster care.

After receiving feedback from various entities on what information was needed to support a more robust SWA, the legal and judicial subcommittee planned to design and deliver three separate focus groups with targeted content and questions for legal and judicial stakeholders related to CFSR items 20-24, 29, and 30. Legal and judicial stakeholders were recruited by CIP and DCF from across Kansas as part of the communication plan.

Input from legal and judicial stakeholders related to CFSR items 20-24, 29, and 30 was prioritized in focus group sessions. CFSR items 20-24, 29, and 30 are:

- Item 20: Written Case Plans
- Item 21: Periodic Reviews
- Item 22: Permanency Hearings
- Item 23: Termination of Parental Rights
- Item 24: Notice of Hearings and Reviews to Caregivers
- Item 29: Array of Services
- Item 30: Individualizing Services

Two overarching themes regarding the functioning of the child welfare system emerged throughout various engagement opportunities with legal and judicial partners in Kansas. Those themes include workforce related issues (impacting the quality of legal representation as well as the delivery of services) and lack of mental health services to support the needs of children and families. These themes and solutions

² Rule 110 and Rule 110A contains information on CASA Volunteers and Programs and the Standards for Guardians Ad Litem, respectively. An amended Rule 110 goes into effect on January 1, 2023. Information on the amended Rule 110 can be found at: Rule-110.pdf (kscourts.org). (See also https://www.kscourts.org/kscourts/media/kscourts/rules/Rule-110.pdf). Information on Rule 110 and Rule 110A can be found at: website-rulebook.pdf (kscourts.org)

proposed by stakeholders are discussed in Section F: Additional Items to Note.

II. Methods

The CIP and CBCC held three focus groups with targeted content and questions for legal and judicial stakeholders in November and December 2022. Legal and judicial stakeholders were recruited from across Kansas and included participants from rural, suburban, and urban areas. Various roles of legal and judicial stakeholders were represented including judicial officers, guardians ad litem (GAL), parent attorneys, county/district attorneys, and CASA/Citizen Review Board members. Ensuring that legal and judicial stakeholders reflected a diverse and inclusive group of stakeholders, which is also reflective of the children and families who are served by child welfare systems, was a priority. Each focus group was 90 minutes in duration and participants attended one focus group. Focus groups gathered information from participants in three ways:

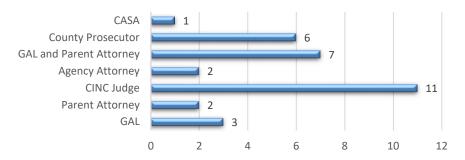
- 1. Polling questions (<u>Appendix B</u> includes 23 questions and 3 demographic questions),
- 2. Narrative response document, and
- 3. Facilitated discussion with documented responses.

Focus groups were held on November 17 (six participants), December 2 (12 participants), and December 5, 2022 (14 participants) with a total of 32 participants. An item to note is that not every focus group participant filled out every poll. There are some polls that do not have 32 responses in the individual item analysis below. A breakdown of the participants' roles, judicial district representation, and demographic information of the focus group participants are indicated in the figures below.

A. Roles of Focus Group Participants

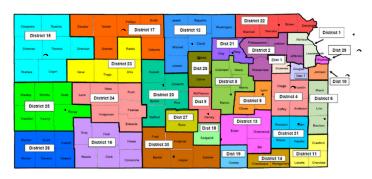
The legal and judicial subcommittee wanted to ensure that a diverse array of roles within the legal and judicial system was invited to and attended the focus groups. At least one participant from each of the legal and judicial roles attended the focus groups. The diversity of roles and system perspective provides additional insights into system performance.

Focus Group Participants by Role



B. Representation of Judicial Districts of Focus Group Participants

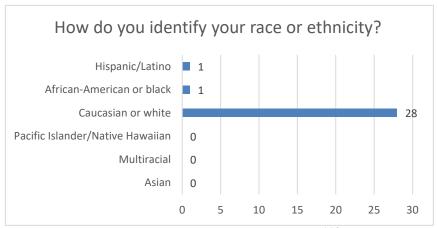
Kansas Judicial Districts



KEY INSIGHT

ATTENDEES OF THE FOCUS
GROUPS WERE
OVERWHELMINGLY
CAUCASIAN OR WHITE.
ENGAGING WITH DIVERSE
LEGAL AND JUDICIAL
PARTNERS SHOULD BE A
FOCUS FOR STAKEHOLDER
INTERVIEW GROUPS.

C. Demographics of Focus Group Participants

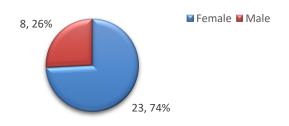


KEY INSIGHT

CINC JUDGES AND
GAL/PARENT
ATTORNEYS WERE
THE TOP TWO ROLES
REPRESENTED IN
THE FOCUS GROUPS

113

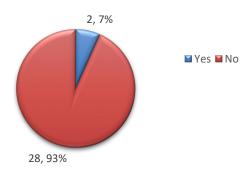
How do you identify your gender?



KEY INSIGHT

TWO TRIBAL MEMBERS
ATTENDED THE FOCUS
GROUPS. OUTREACH AND
ENGAGEMENT WITH
TRIBES WILL BE
CRITICAL FOR
STAKEHOLDER
INTERVIEW GROUPS.

Are you a member of a tribe?



III. Information Gathered including Focus Group Responses

A. Item 20: Written Case Plans

Item 20 in the CFSR asks the child welfare system to consider the following: How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

The focus group facilitator asked participants to reflect on several main themes related to written case plans including, but not limited, to the following:

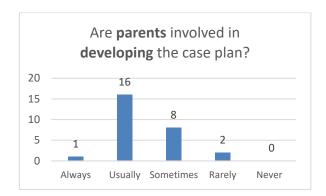
- In what ways are parties engaged in case planning processes,
- Whether, and to what extent, attorneys are involved in the development of case plans,
- How and when judges and attorneys receive written case plans.

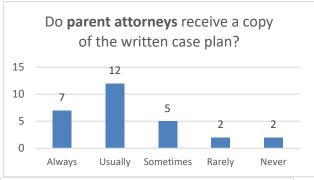
Additionally, focus group participants responded to five polls when discussing written case plans. The polls asked participants to reflect on which roles receive a copy of the written case plan as well as an inquiry into whether parents are involved in the creation of and receive a copy of their case plan. The scale of the responses ranged from "5-the

KEY INSIGHT

NEARLY 75% OF FOCUS GROUP ATTENDEES WERE WOMEN.

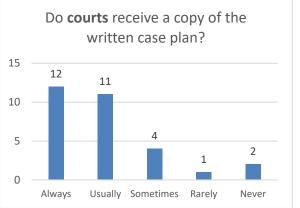
respective role always received a copy of the written case plan to 1-the respective role never receives a copy of the written case plan (Always, Usually, Sometimes, Rarely, Never)." The results are as follows:

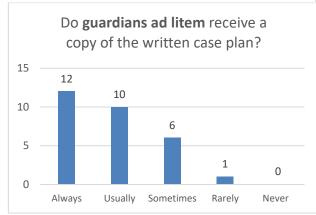


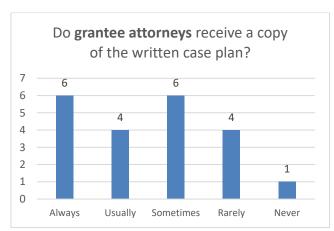


KEY INSIGHT

IN THE MAJORITY OF POLL RESPONSES, PARTIES AND THE COURTS "ALWAYS" OR "USUALLY" RECEIVE A COPY OF THE WRITTEN CASE PLAN.







The only party who had more even responses across the response continuum was the role of the grantee attorney. The question related to grantee attorneys may be worth additional inquiry in the future to better

understand the results.

1. Focus Group Qualitative Feedback and Discussion Themes

Insights gathered from the polls led to an opportunity for participants to provide narrative responses to topics associated with each CFSR item as well as a facilitated discussion. Specific to Item 20, there were several common themes across the focus groups regarding strengths of the case planning process as well as suggestions for improvements to case planning.

Strengths of the written case planning process include:

- The case planning process is a good way for everyone to meet and review issues at the beginning of the case and review and track case progress,
- Outlining expectations in writing is helpful,
- Collaborative process with parties,
- When the case planning process is a team effort, it feels like an "effort to reintegrate than a plan to terminate" [parental rights].

Participants noted that E-filing of documents has made it easier for attorneys and the court to be able to access case plans that have been filed with the court. As long as case plans are filed, participants noted that case plans should be accessible to all parties to the CINC case through the E-filing system.

Participants suggested that when the written case planning process is collaborative, inclusive of various roles, and expectations are clear and prioritized, better results are achieved for families. To that end, suggestions from participants for improvement to the written case planning process are:

- Broadly support a collaborative case planning process that produces an individualized case plan that can be understood by parents with tasks that are prioritized,
- Case planning needs to be a process with proper notice to parties, in an environment that supports engagement (whether virtual or in person) and includes involvement by parents and attorneys,
- Simplify the case plan form to make it easier for parents to understand,
- Involve older youth in the case planning process, and
- Ensure case plans are completed and completed timely.

B. Item 21: Periodic Reviews and Item 22: Permanency Hearings

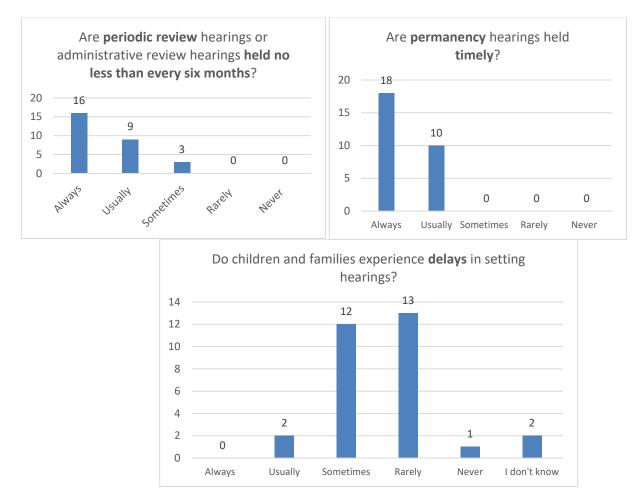
Item 21 in the CFSR asks the child welfare system to consider the following: How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

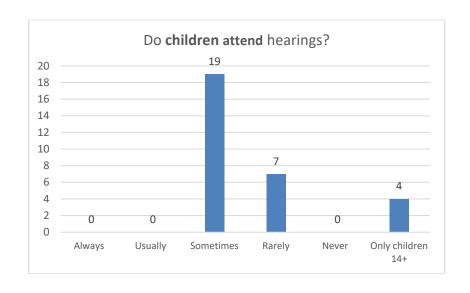
Item 22 in the CFSR asks the child welfare system to consider the following: How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster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

The focus group facilitator asked participants to reflect on several main themes related to periodic reviews and permanency hearings including, but not limited, to the following:

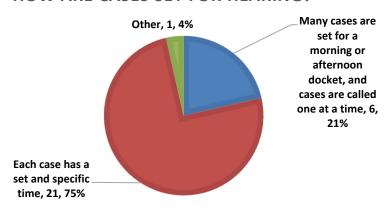
- Whether hearings are held timely,
- Receipt of information (what information is given) prior to court,
- Sufficiency of time for hearings, and
- Preparation of parties in advance of court.

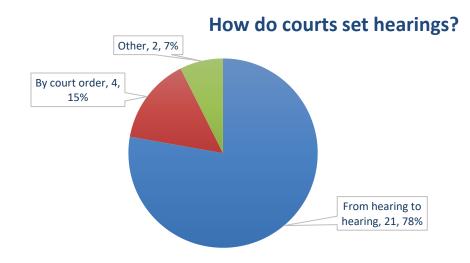
Additionally, focus group participants responded to six polls when discussing periodic reviews and permanency hearings. The polls asked participants to reflect on the timeliness of hearings, the extent to which families experience delays in setting hearings (if any), the manner in which hearings are set, and whether children attend hearings. The results are as follows:





HOW ARE CASES SET FOR HEARING?





1. Focus Group Qualitative Feedback and Discussion Themes

Specific to Item 21 and Item 22, regarding periodic and permanency hearings, respectively, focus group participants shared information about the functioning of hearings and the ways in which the legal system

interacts with parties.

Thinking about timeliness of both periodic reviews and permanency hearings, poll and narrative inquiry results support that hearings are prioritized and held timely. Some focus group participants indicated that hearings are held every 90-120 days in their jurisdiction as a matter of course. Additionally, parties receive notice of the next hearing while at the prior hearing (meaning that hearings are set from hearing to hearing). If issues arise between hearings that cannot be solved outside of court, the parties will receive notice of a hearing that was set by court order. While the vast majority of periodic and permanency hearings are held timely, sources of potential delays in holding timely hearings include:

- Parents do not appear for court,
- Failure to timely file court reports,
- Attorney or court schedules (high caseloads or crowded dockets),
- Services not being provided to families (families need more time to complete services),
- Lack of sufficient notice of hearings.

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Characteristics of high-quality hearings include attorneys being prepared (including ensuring parent attorneys and GALs review documents and consult with and prepare their clients for hearings), thorough court reports timely submitted with information gathered from various sources, and where there is sufficient time scheduled with the court to discuss the case. When all parties and the court have comprehensive and up-to-date court reports including reports from service providers and collateral contacts (e.g. therapy reports, educational records, mental health records, etc.), then the court can focus on addressing needs during the hearing. Focus group participants noted that comprehensive information does not always make it to the court or to parties timely, which impacts hearing quality and can cause delays.

Children and youth attend hearings "sometimes", as noted in the polls. Reasons for children to not attend court include:

- Drive time to court is prohibitive or would require children miss school,
- Court conflicts with school or activities for children,
- Discretion of youth attendance is decided by either the GAL, court, or county attorney based on factors present at each hearing,
- Youth don't want to attend (reasons for this varies).

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Two suggestions for improvement in court processes are inclusion of older youth in court and permanency planning and ensuring quality legal representation for parents and youth. Participants noted that ensuring older youth attend hearings and are able to speak about their case in court or with a written court report is important. Two participants inquired about the use of the "My Plan" document or "My Thoughts for the Judge" document and whether those are or should continue to be used by older youth. Several focus group participants noted that GALs need to talk to children prior to the hearing on a regular basis so that their interests can be represented in court, and the failure to do so can lead to delays in hearings being held. One participant noted the limitations with the legal workforce, providing: "Regular child/parent contact would be great; but caseloads are so immensely large and compensation is relatively low that people cannot make their full time job responding to their more than full time caseload (parents attorney's or GALs)."

Focus group participants noted that case worker turnover is a major issue and leads to a lack of clear information being provided to the court for periodic or permanency hearings. A noted strength was that

some case workers are well prepared for hearings, especially workers who have worked with the family for a period of time or who are experienced case workers. However, caseworkers are sometimes ill-prepared for hearings because they are new to the case or do not have information from the previous case workers. Additionally, some focus group participants noted that there are specific challenges with caseworker preparedness when the worker is an Independent Living worker (working with older youth).

Most focus group participants noted that there is sufficient time for hearings and courts often will extend the time for hearings when needed or reset to a different date if needed. Extending the time for hearings can, however, lead to long days and long wait times for families that may mean families sit for 2-3 hours waiting for court. Both the poll and narrative responses noted that cases are set for a time for a time certain for families. One comment demonstrates that the sufficiency of time for the hearing is "very dependent on the judge. Some make time for each hearing. Others do not."

Lastly, focus group participants noted that there are several mechanisms to address issues outside of periodic or permanency hearings. Those include:

- Parent attorney reaches out to agency supervisors for help in solving an issue,
- Regular meetings with parties,
- Email or phone calls (informal processes to address issues),
- Meet briefly prior to court to address issues.

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If issues cannot be resolved informally or outside of court, either the issue remains unsolved until the next hearing or the parties will file for an emergency hearing to bring issues to the court's attention.

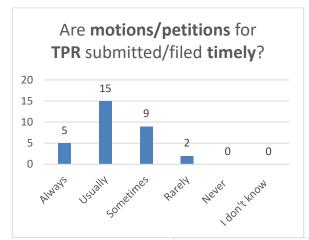
C. Item 23: Termination of Parental Rights

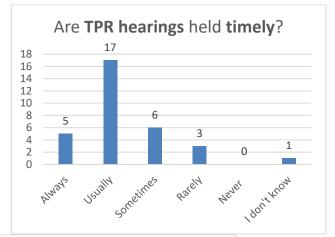
Item 23 in the CFSR asks the child welfare system to consider the following: How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

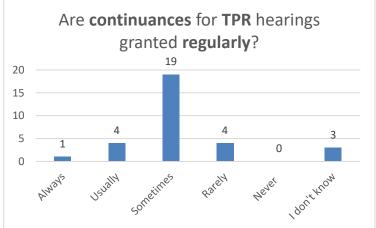
The focus group facilitator asked participants to reflect on several main themes related to termination of parental rights including, but not limited, to the following:

- Commons barriers to filing petitions timely, holding hearings timely, or receiving decisions timely,
- Reasons for continuances,
- What are common circumstances for when TPR is appropriately not filed.

Additionally, focus group participants responded to three polls when discussing termination of parental rights. The polls asked participants to reflect on timeliness of TPR hearings, the frequency with which continuances are granted for TPR hearings, and whether motions/petitions for TPR are submitted/filed timely. The results are as follows:







1. Focus Group Qualitative Feedback and Discussion Themes

Insights gathered from the polls related to TPR led more specific insights into Item 23. Based on polling data during the focus group, TPR is "always" (5 responses) or "usually" (15 responses) timely filed or requested in the majority of cases (9 respondents answered "sometimes", 2 respondents answered "rarely", and no one answered "never"). When there are issues related to TPR, there were several common themes across all focus groups regarding barriers to timely filing of TPR petitions, reasons for continuances, and barriers to timely TPR hearings or decisions. Additionally, participants shared the circumstances where TPR is not appropriate to be filed.

Barriers to timely filing of TPR petitions include:

- The prosecutor or county attorney has a heavy caseload and is unable to complete the work,
- Parents are making progress and TPR is not appropriate to file,
- Caseworker or agency issues including turnover of caseworkers, lack of comprehensive or timely submitted court reports, or a lack of information on services that have been provided.

Potential solutions to timely filing or requesting TPR include "the Judicial Council/OJA to adopt a standardized points of severance form for the prosecutor to use to build out their motion." Additionally, because TPR motions are very specific, drafting the motions without a standard form means that there is additional time spent preparing each motion. Another potential solution that was mentioned was a request for a "separate form for finding of unfitness and placement of the child in a permanent custodianship."

Reasons for continuances of TPR hearings include:

- Did not contact tribe,
- Lack of appropriate notice or service by publication,
- Parents are making progress to reintegrate children into the parents' home,
- Attorneys need time to prepare or discuss with their client or witnesses (if witnesses weren't prepared prior to first hearing, this may lead to delays),
- Conflicts between parent attorneys and parents that require appointment of different counsel,
- Services have not been provided to the family,
- Parents do not appear for TPR hearings,
- Crowded schedules of attorneys,
- Having to set TPR hearings over multiple days in order to hear all evidence.

Barriers to timely TPR hearings or decisions include:

- Crowded court calendars,
- Lack of notice or service of process,
- Caseworker turnover where current caseworker may not be familiar with the case
- TPR may not be appropriate for the child,
- Parents have different timelines (e.g., one parent relinquishes parental rights and the other parent proceeds to trial).

Circumstances where TPR is not appropriate to be filed include:

- Lack of a permanency resource or adoptive resource for the child,
- When sufficiency of agency efforts is in question,
- When older youth are involved and another planned permanency living arrangement (APPLA) is a more appropriate case plan goal,
- When termination of parental rights is not in the child's best interest (e.g. when the child is strongly bonded to their parent),
- Lack of service of process,
- Caseworker turnover (new workers have a lack of knowledge of what services have been provided to parents),
- Parents are participating in services and making progress in case plan goals.

D. Item 24: Notice of Hearings and Reviews to Caregivers

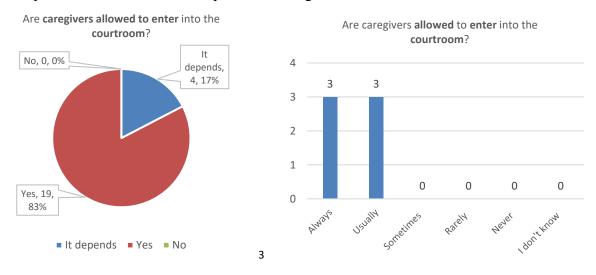
Item 24 in the CFSR asks the child welfare system to consider the following: How well is the case review system functioning statewide to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care (1) are receiving notification of any review or hearing held with respect to the child and (2) have a right to be heard in any review or hearing held with respect to the child?

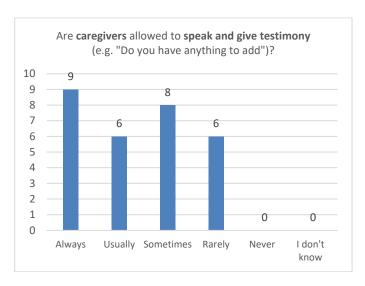
The focus group facilitator asked participants to reflect on several main themes related to notice of hearings and reviews to caregivers including, but not limited, to the following:

- How is notice of hearings given,
- Who receives notice of hearings,

- In what ways is the right to be heard in court operationalized, and
- What information, if any, do caregivers receive prior to arriving in court?

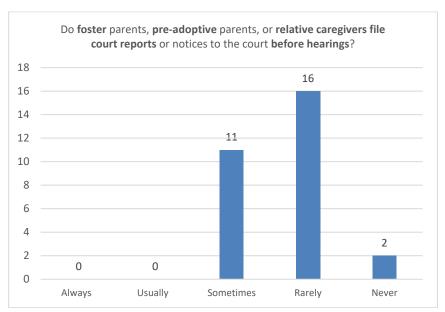
Additionally, focus group participants responded to three polls when discussing notice of hearings and reviews to caregivers. The polls asked participants to reflect on whether caregivers are allowed to speak and give testimony in court, whether caregivers are allowed to enter the courtroom, and whether caregivers file court reports or notices to the court prior to hearings. The results are as follows:





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³ The answers to this poll question, "Are caregivers allowed to enter into the courtroom", changed between the first focus group and subsequent focus groups. The first focus group could answer the question with: Always/Usually/Sometimes/Rarely/Never/I don't know. The subsequent focus groups could answer the question with: Yes/No/It depends.



1. Focus Group Qualitative Feedback and Discussion Themes

Information gathered from focus group participants specific to Item 24 offers insights into who receives notice of hearings, in what ways, and how the right to be heard is operationalized in CINC cases. Caregivers receive notice of hearings from the county attorney. Some county attorneys also try to send the Foster Parent Court Report Form to placement resources along with notice of the hearing.

Some caregivers attend court regularly (but focus group participants added it is rare), and when they are in court, whether they speak in court depends on the situation and discussion in court (and whether the caregiver specifically requests to speak). The rate at which caregivers attend court seems to be location specific as some focus group participants noted that there is high participation from caregivers and others noted it is not often that caregivers attend court.

By statute, caregivers have a right to submit a court report. However, not all caregivers provide a report to the court. Participants noted that not all caregivers have knowledge that they can submit a court report.

Additionally, some caregivers request and are granted Interested Party status. The ways in which caregivers know about Interested Party status varies. Some focus group participants provided that those caregivers with previous experience with the child welfare system file for Interested Party status, some are asked by the court if they would like to file for Interested Party status, and some learn about Interested Party status from a GAL, a caseworker, or another attorney.

Lastly, caregivers can obtain information about the case prior to court (case filings) if they are granted Interested Party status or if they ask the GAL, have secured their own counsel, or have asked the caseworker for information.

E. Item 29: Array of Services and Item 30: Individualizing Services

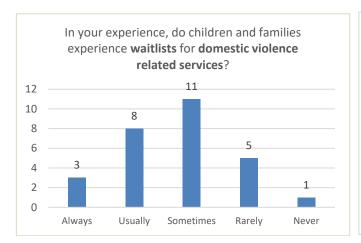
Item 29 in the CFSR asks the child welfare system to consider the following: How well is the service array and resource development system functioning to ensure that the range of services specified below is available and accessible in all political jurisdictions covered by the CFSP?

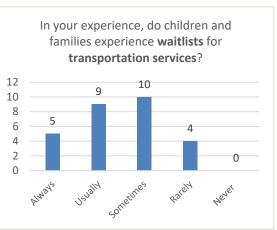
Item 30 in the CFSR asks the child welfare system to consider the following: How well is the service array and resource development system functioning statewide to ensure that the services in Item 29 can be individualized to meet the unique needs of children and families served by the agency?

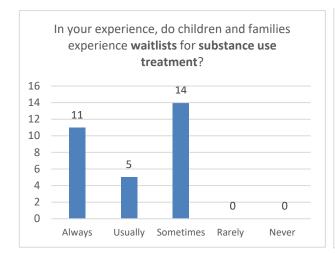
The focus group facilitator asked participants to reflect on several main themes related to child welfare service array and individualization of services including, but not limited, to the following:

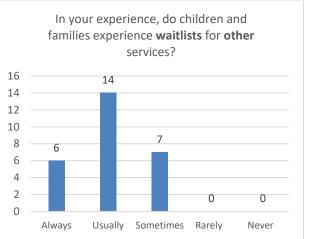
- Culturally and developmentally appropriate services,
- Usefulness of services that are matched to the needs of families,
- Availability of resources.

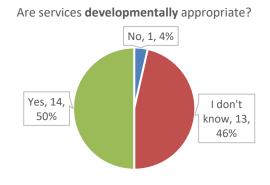
Additionally, focus group participants responded to six polls when discussing child welfare service array and provision. The polls asked participants to reflect on whether children and families experience waitlists for a variety of services and whether services are developmentally and culturally appropriate. The results are as follows:



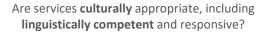


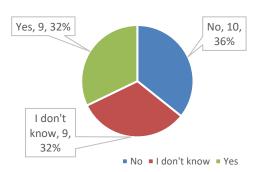






I don't know





1. Focus Group Qualitative Feedback and Discussion Themes

Information gathered from focus group participants specific to Item 29 and Item 30 provides additional insights into service array and delivery. Participants shared that the most useful services are in-home services, Functional Family Therapy (FFT), parenting classes, mental health services, substance use services, and family therapy. Participants noted that the services are generally matched to address the needs of the family but getting services in place quickly is a challenge and there are often waitlists for services across the service array. Focus group participants highlighted in both the polls and the narrative document that waitlists are common throughout the state and providers do not have sufficient work force available to serve all of families timely, regardless of rural or urban geography.

An area that focus group participants elevated for more discussion and consideration in the future relates to addressing special education needs and disability-related issues. Some focus group participants expressed a need to assess parents' intellectual capabilities in a timely manner and then provide services at a level that parents can understand. Further, the lack of basic skills in parents is preventing the higher-level needs from being addressed.

When asked about cultural competency of services, focus group participants noted that there is a lack of language appropriate services for families who require service in a language other than English. Forms are not commonly translated in languages other than Spanish, which was a noted need. Additionally, a lack of interpreter services outside of court is a challenge to ensure families are aware of and able to address issues.

One specific noted strength was in regards to services provided by tribes. Specifically, "We have a tribe north of us that will often provide certain services to families that are incredibly helpful. Parenting classes, drug and alcohol counseling, and domestic violence classes, to name a few. It gives native families options they may feel more comfortable with."

Focus group participants noted some ways in which inequity is being addressed include ensuring parents are appointed counsel, ensuring language services are provided in court, and ensuring families receive financial assistance to meet needs (e.g., gas cards).

F. Additional Items to Note

From the initial inquiry sent to legal and judicial stakeholders for CFSR participation through the last focus group, several additional themes outside of the specific CFSR items noted above emerged that help paint a fuller picture of the functioning of the child welfare system in Kansas. Two primary themes that kept

surfacing throughout all collected data sources are workforce related issues (both social workers and legal services) and a lack of mental health services for children.

1. Workforce Related Issues

Throughout the focus groups, participants noted that there is a lack of attorneys. Additionally, the disparity in pay and caseloads between private practice attorneys and panel attorneys negatively impacts the quality of legal representation. One focus group participant noted that GALs lack knowledge about their clients. A potential solution that was shared would be to provide a resource or "questionnaire" to help guide the GAL in learning about and sharing issues on behalf of their client, which would enhance their advocacy efforts.

"As a private practice attorney, I am overwhelmed if I have 100 active cases. Panel attorneys routinely carry 200+ cases AND make less than 15% of what they would earn in private practice. They must carry private cases in addition in order to keep their overhead paid. If CINC attorneys and GALs were paid at the same rate as BIDS felony attorneys, the quality of services would increase dramatically and Rule 110A could be followed."

In one focus group, one participant noted:

Further, in some surrounding

jurisdictions, CINC panels have changed to the "120/hour payment" structure.

Focus group participants noted that low pay and high caseload sizes impact retention of social workers as well. Two focus group participants noted that "low pay and case load for social workers leading to turnover is the second biggest problem" facing Kansas.

Some participants noted that private contracting of child welfare has brought about challenges in Kansas. Whether the focus group participant was relatively new to CINC cases or had extensive experience in child welfare, participants noted that privatization has created different challenges.

Focus group participants shared a possible solution to address workforce issues and the way in which social workers interact with families. Generally speaking, grantees provide families with a case manager and a support worker. Currently, the case manager manages family meetings and prepares reports. The support worker is the primary contact and provides services to the family and children, visits the placement, observes interactions, coaches the family to engage in the case plan, among other things. Focus group participants suggested having the more experienced case managers (and anyone specifically licensed or educated in social work or evidence-based programs) engaged in the day-to-day work with children and families since they have the additional expertise to coach and guide families. Any administrative work (setting meetings, completing paperwork, etc.) could be done by support workers.

Another potential solution that was shared was to setup regionally-based child welfare offices whereby grantees/contractors could serve families across multiple counties as families needed the support (similar to how public defender offices are managed).

2. Lack of Mental Health Services and Services

Accessing services timely in general presents challenges, and focus group participants agreed that mental health services and accessing those timely is a major challenge for children and families. The lack of mental health services for children was repeatedly mentioned throughout focus group sessions. Focus group

participants mentioned that a lack of mental health services or getting children to mental health services after a disruption of their placement is the "biggest problem in child welfare." The lack of timely service provision was a common theme throughout the facilitated discussions. The lack of services impacts many CFSR items and systemic factors and was discussed across nearly all of the systemic factors as part of the focus groups.

G. Conclusion

Legal and judicial partners in Kansas provided insights and information on the functioning of the child welfare system in Kansas in multiple ways in order to support DCF's CFSR efforts. Qualitative and quantitative data was collected from legal and judicial stakeholders so that the child welfare system in Kansas can better understand strengths to build upon and needs to address. Information gathered should be used as a foundation to dig deeper into needs and conduct further root cause analysis so that interventions can be selected to meet the needs of children and families. The CFSR is an opportunity for the entire child welfare system to engage in a robust continuous improvement cycle that is rooted in equity, centered on lived expertise, and supports curiosity in solving problems. During the statewide assessment, Kansas DCF and the CIP collaboratively created spaces to listen to and learn from the legal and judicial community to support continuous improvement.

Appendix A: Initial Communication to Legal and Judicial Stakeholders

The below is a copy of the email that was sent to legal and judicial stakeholders in an effort to recruit legal and judicial stakeholders as participants throughout the CFSR process in Kansas. The email was distributed to over 700 unique individuals.

"Good afternoon,

As you may know, the Department for Children and Families (DCF) is currently involved in Round 4 of the Child and Family Service Review (CFSR). Recently, Chief Justice Marla Luckert, Justice K.J. Wall, and the Office of Judicial Administration Court Improvement Program (CIP) team met with the Administration for Children and Families (ACF) and KS DCF leaders to discuss the CFSR. At that meeting, Chief Justice Luckert and Justice Wall stated the judicial branch is committed to assisting DCF in the CFSR process.

As the CFSR process is not new, you may wonder why there is such a focus on legal and judicial engagement in this round. By participating in this process, courts can bring their expertise to achieve a better understanding of the strengths and needs of the child welfare system and be a part of developing Program Improvement Plans which include improvements that would be beneficial to all child welfare stakeholders. Such improvements could include:

- identifying disparities in services and outcomes for children and families;
- using data to understand better the status of child welfare outcomes, strengths and needs within their jurisdictions, and engage in improvement efforts;
- improving the quality of court reports and testimony which the courts rely upon to make decisions;
- improving the quality and effectiveness of legal representation for all parties;
- improving the quality of hearings by focusing efforts on implementing statutory requirements, such as the Adoption and Safe Families Act (ASFA), more effectively make required statutory findings, e.g., reasonable efforts.

We are asking for your help to ensure this process is as beneficial as possible and makes a positive impact on our child welfare system. We are asking lawyers and judges to participate in one or more of the six opportunities for involvement (feel free to participate in as many as your schedule and capacity allow):

- 1. Member of the Statewide Assessment (SWA) team: The SWA will meet monthly until December 2022 (meetings are virtual). The team has met twice thus far. The group plans to continue meeting virtually for about two to three hours per month. The team is reviewing relevant data points and conducting root cause analysis to determine how the system is working—and how it may need to improve.
- 2. Focus Group Participant: This opportunity will use structured questions to offer a forum to share your input and feedback regarding legal and judicial perspectives on child welfare in Kansas. Focus groups will be conducted virtually and will be held:
 - November 17, 9 a.m.-10:30 a.m. CST,
 - December 2, 12 p.m.-1:30 p.m. CST, and
 - December 5, 3 p.m.-4:30 p.m. CST.

Participants will choose only one date to attend.

- 3. Stakeholder interview: Interviews will take place the week of April 17, 2023. Interviewees can request a virtual interview. Stakeholder interviews may be grouped by role (e.g. Parent attorney, Guardian ad Litem, county/district attorney, judiciary, and CASA/CRB). Each group will engage in a facilitated discussion using a specific interview guide. The interviews will last approximately 90 minutes. A copy of the Stakeholder Interview Guide can be found on the CFSR portal.
- 4. Onsite reviewer of CINC cases: Onsite reviews will occur the week of April 17, 2023, in Brown, Crawford, Doniphan, Nemaha, and Sedgwick Counties.

This is a week-long commitment – Monday, April 17- Thursday, April 20, 2023, from approximately 8:00 am CST until 5:00 pm CST with a chance of some later evening hours. These will involve partnering with a federal reviewer to review cases, take notes, fill out an onsite review instrument (OSRI) and conduct interviews (either in person or virtually) of members of a case team, including the child, mother, father, and other critical voices involved in the case. Training to be an onsite reviewer is required. The dates for the two-day training will likely be held in January 2023. Dates will be determined soon.

5. Program Improvement Plan (PIP) team: This team, including legal/judicial stakeholders, will support the development of the strategies and key activities in the PIP. These meetings will likely start after July 2023 and last for approximately 2-3 months.

When the proposed PIP is approved by DCF's federal partners, it usually takes two years to implement the plan. The PIP team will support implementation as needed.

If you are interested in helping please fill out the <u>interest form</u>. If you have previously agreed to assist but have not been in contact with DCF, please complete the form. If you have questions or would like additional information, please email either <u>tcs@kscourts.org</u> or Jennifer Slagle at <u>Jennifer.Slagle@ks.gov</u>. Feel free to forward this information to other attorneys and judges who may be interested. Thank you for your consideration!

Lana Goetz
Court Program Specialist
Office of Judicial Administration"

Appendix B: Zoom Polling Questions

- 1. Race and ethnicity demographics
- 2. Gender identity demographics
- 3. Tribal membership inquiry
- 4. Are parents involved in developing the case plan? (On a scale of 1 to 5; 1-parents are never involved in developing the case plan and 5-parents are always involved in developing the case plan)
- 5. Do courts receive a copy of the written case plan? (On a scale of 1 to 5; 1-courts never receive a copy of the case plan and 5-courts always receive a copy of the case plan)
- 6. Do parent attorneys receive a copy of the written case plan? (On a scale of 1 to 5; 1-parent attorneys never receive a copy of the case plan and 5-parent attorneys always receive a copy of the case plan)
- 7. Do guardians ad litem receive a copy of the written case plan? (On a scale of 1 to 5; 1- guardians ad litem never receive a copy of the case plan and 5-guardians ad litem always receive a copy of the case plan)
- 8. Do grantee attorneys receive a copy of the written case plan? (On a scale of 1 to 5; 1- grantee attorneys never receive a copy of the case plan and 5-grantee attorneys always receive a copy of the case plan)
- 9. Are periodic review hearings or administrative review hearings held no less than every six months? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 10. Are permanency hearings held timely? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 11. Do children and families experience delays in setting hearings? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 12. How do courts set hearings? (A. by court order B. from hearing to hearing C. fill in the blank)
- 13. How are cases set? (A. each case has a set and specific time B. many cases are set for a morning or afternoon docket, and cases are called one at a time, C. fill in the blank)
- 14. Do children attend hearings? (always/sometimes/rarely/never/only children 14+/only children with APPLA as a case plan)
- 15. Are motions/petitions for TPR submitted/filed timely? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 16. Are continuances for TPR hearings granted regularly? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 17. Are TPR hearings held timely? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 18. Do foster parents, pre-adoptive parents, or relative caregivers file court reports or notices to the court before hearings? (Always/Usually/Sometimes/Rarely/Never/I don't know)

- 19. Are caregivers allowed to enter the courtroom? (Always/Usually/Sometimes/Rarely/Never/I don't know and Yes/No/It depends)
- 20. Are caregivers allowed to speak and give testimony (e.g., "Do you have anything to say or add")? (Always/Usually/Sometimes/Rarely/Never/I don't know)
- 21. In your experience, do children and families experience waitlists for substance use treatment? (Always/Usually/Sometimes/Rarely/Never)
- 22. In your experience, do children and families experience waitlists for domestic violence related services? (Always/Usually/Sometimes/Rarely/Never)
- 23. In your experience, do families experience waitlists for transportation provided by the DCF grantee? (Always/usually/Sometimes/Rarely/Never)
- 24. In your experience, do children and families experience waitlists for other services? (Always/Usually/Sometimes/Rarely/Never)
- 25. Are services developmentally appropriate? (Y/N/I don't know)
- 26. Are services culturally appropriate, including linguistically competent and responsive? (Y/N/I don't know)

Appendix C: Focus Group Attendees (Role and Judicial District)

Role Judicial			
Kok	District		
CINC Judge	1		
CINC Judge	3		
GAL and Parent	3		
Attorney			
Agency Attorney	3		
CINC Judge	4		
County Prosecutor	4		
GAL and Parent	5		
Attorney			
County Prosecutor	6		
CINC Judge	8		
County Prosecutor	9		
Parent Attorney	10		
GAL	10		
GAL and Parent	10		
Attorney			
GAL and Parent	12		
Attorney	1.5		
GAL and Parent Attorney	15		
GAL and Parent	15		
Attorney			
CINC Judge	17		
CINC Judge	17		
County Prosecutor	17		
GAL	18		
CINC Judge	18		
CINC Judge	18		
Parent Attorney	18		
Agency Attorney	20		
CASA	21		
CINC Judge	22		
County Prosecutor	25		
County Prosecutor	28		
GAL	29		
CINC Judge	29		
CINC Judge	30		
GAL and Parent	31		
Attorney			

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon

- Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

If you could waive the magic wand, what would you want to see differently?

- Prepare an effective recovery plan for parents struggling with SUD
 - o Keep mothers and children together by utilizing recovery centers that allow children

Systemic Factor 3: Quality Assurance System

Item 25: Quality Assurance System. How well is the quality assurance system functioning statewide to ensure that 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 that 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 Department for Children and Families Prevention and Protection Services has leadership and ownership of a Continuous Performance Improvement (CPI) process which is applied consistently across the State. The process is utilized by state and provider staff at all levels as a problem-solving process and improvement.

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

DCF Performance Improvement team are responsible for providing support and accountability for the structure, methodologies and administration of quality assurance and continuous performance improvement activities for the DCF Regions and Providers. Outcomes are reviewed at least quarterly by state and provider staff.

DCF Regions participate in Quality Assurance and Continuous Performance Improvement activities. DCF Regions coordinate Continuous Performance Improvement activities with their Child Welfare Case Management Providers.

To assess performance of the Contractor, the state will review and monitor accountability for child welfare programs through direct oversight, case read processes and administrative site visits. Case read and oversight activities are used to assess and improve the delivery of services to families. Results of case read and oversight activities may be published by DCF on the internet or in other public information material.

I. Monitoring Contract Outcomes:

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

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

If contract outcomes are not met, DCF may request CWCMPs to develop a Program Improvement Plan (PIP) approved by DCF, to address unmet outcomes. The PIP shall include action steps to be taken to create improvements and demonstrate continued improvement for each unmet outcome.

For performance standards not met in SFY 2022, PIPs were implemented with CWCMPs to address how performance on outcomes will be met.

FY 2022 performance was used to calculate meeting or not meeting each outcome. If a penalty was calculated for an outcome based on the grant performance standards, those were then reviewed to see if the catchment area specific PIP goal for June 30th, 2022, was met. If the PIP goal was met that penalty is waived. If both the grant performance standard and the PIP goal were not met, then a penalty was incurred. Incentives were credited in accordance with CWCMP grant outcomes/practice improvements incentive process, based on allowable expenses less reimbursed costs.

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

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

The case read sample for each program and process is derived from the respective case population for out of home, AFCARS and Family Preservation are 6 month period under reviews (PUR) with a month gap from the end of the PUR to the start of the read period. Intake and Assessment are 6 week samples with a month and half gap between the end of the PUR and state of the case read. 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 for that Region is achieved.

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

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

Case review and MIS data is available and utilized at the statewide level, and at the regional, county, judicial district, unit, and worker levels.

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

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

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

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

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

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

The number of cases in the sample for each program and process is set at a level sufficient to maintain a confidence level of 95% statewide. The confidence interval for each instrument is outlined in the table below. Data gathered from case reads in which the sample size is sufficient for a reliable confidence interval may be generalized to the entire population. Case reads in which the sample size is too small for a reliable confidence interval are conducted to identify examples of areas that may warrant further investigation.

Case Read Instruments	Universe Per Qtr.	Reads / Qtr.	% of Universe	Confidence Interval (+/-)
Intake and Assessment - Assigned	6,320	400	6.3%	4.8%
Intake and Assessment - Not Assigned	4,130	80	1.9%	10.7%
Adult Protective Services (APS) - Assigned	2,167	100	4.6%	9.6%
Adult Protective Services (APS) - Not Assigned	1,218	40	3.3%	15.2%
In Home – Family Preservation	1,280	80	6.3%	10.7%
In Home – Family Services	227	20	8.8%	21.5%
Alternative Response	300	20	6.7%	21.5%
Out of Home	7,090	250	3.5%	6.1%
AFCARS	7,090	213	3.0%	6.6%
Adoption Assistance – Adoption Placement Agreement	986	75	7.6%	11.1%
Adoption Assistance – 18 year olds	103	25	24.3%	19.2%
IV-E Eligible	3,162	162	5.1%	7.5%
IV-E Ineligible	3,659	199	5.4%	6.8%
6 years old & under – Not Assigned	1,887	260	13.8%	5.6%
Reports Received – Intake Worker Accuracy	19,098	19,098	100.0%	0.0%
Social Worker Assessments - Assigned (25% APS)	10,791	250	2.3%	6.1%
Social Worker Assessments - Not Assigned (25% APS)	8,250	250	3.0%	6.1%

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

Case Read data is also validated by comparing results on case reads which have a reliable confidence interval to outcomes measured using FACTS data. The ability to validate data using systems and case reviews is a strength of Kansas' quality assurance system.

Kansas may conduct Case-Specific Stakeholder Interviews. Case Specific interviews are conducted individually with children, parents, foster parents, social workers, court representatives and other professionals who have knowledge about the case. Interviewers utilize the 7 core questions provided in the federal Child and Family Services Reviews Stakeholder Interview Guide plus a variety of clarifying / follow-up questions created by CPI staff.

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

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

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

Federal Utility programs:

Kansas utilizes the Data Compliance Utility (DCU), the Data Quality Utility (DQU) and the Frequency Report Utility monthly to identify potential issues with AFCARS data. This is a way to identify potential compliance issues and data accuracy, and make corrections as appropriate prior to submission.

Prior to submission of the NCANDS file, the data is processed through the NCANDS validation program and identified errors are sent to the field for correction.

To ensure that quality data is submitted for NYTD, Kansas utilizes the NYTD Data Review Utility (NDRU) bi-monthly. Identified errors are sent to the field for correction.

PPS error and reporting correction process:

After the AFCARS Federal Review in August 2007, the Agency began extensive monitoring of AFCARS accuracy. Error reports are distributed monthly to facilitate error correction. Preventative measures are also taken to reduce the number of errors and dropped cases. This is an area of strength in Kansas. AFCARS submissions continue to comply with data quality standards and Kansas has not had to resubmit an AFCARS file since the FFY 2007 file.

Data accuracy for the NCANDS submission is consistently monitored and includes monthly error reports, monthly data correction, two PPS Outcomes related to Timely Contact and Timely

Findings, and case read reviews related to intake and assessment. Data quality related to NCANDS is an area of strength in Kansas; Kansas has submitted the annual NCANDS file since 1995, meeting all data quality validation standards required.

Data accuracy related to NYTD is monitored through the use of NDRU as well as monthly error reports sent to the field for correction.

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

Qualitative Data Collection: Kansas collects qualitative data through General Stakeholder Interviews, Case-Specific Stakeholder interviews, targeted case record reviews and other data collection methods such as surveys.

Kansas collects input from stakeholders though Kansas Citizen Review Panels at least quarterly. The purpose of Kansas Citizen Review Panels is to determine, with attention to a citizen's perspective, whether state and local agencies effectively administer their child protection responsibilities. The Kansas Citizen Review Panel Intake to Petition/Children's Justice Act Task Force formerly known as the Child Safety and Permanency Review Panel looks at the system from intake to petition and the Kansas Citizen Review Panel Custody to Transition Panel, looks at the system from custody to transition. Membership consists of a broad range of people who work on behalf of families and/or the best interests of the child including a judge, district attorney, prosecuting attorney, guardian ad litem, foster parent, social service supervisors, Court Appointed Special Advocate, foster care provider staff, family advocates, state foster care and adoption personnel, and tribe representatives. The citizen review panels are a logical source of stakeholder feedback. Each quarter the citizen review panels review outcomes and data, driven by their agenda for that quarter, and provide stakeholder input. Kansas recognizes that there is an opportunity to better utilize the citizen review panels. As areas of opportunity are identified, prioritized, and addressed through the CPI cycle, focused input from the Citizen Review Panels will be sought to help identify root causes, potential solutions, and on-going monitoring.

Kansas recognizes that there are opportunities for gathering data in future General Stakeholder Interviews, focus groups and surveys that go beyond the scope of the 45 core and 141 follow up questions. As areas of opportunity are identified, prioritized and addressed through the CPI cycle, targeted questions could be asked to gather input from these stakeholders to help identify root causes and potential solutions.

Kansas recognizes that there are opportunities for gathering data in future case specific stakeholder interviews that goes beyond the information requested in the seven core questions.

As areas of opportunity are identified, prioritized, and addressed through the CPI cycle, targeted questions could be added to gather input from the case specific stakeholders to help identify root causes and potential solutions.

Kansas provides relevant reports.

Two different applications are involved in gathering and analyzing results from case read reviews. The Case Read Application is used by readers for data entry and the Central Reporting Application (CRA) is used to compile and analyze case read data. All DCF supervisors and management-level staff have access to the Central Reporting Application. Reports can be generated from the Central Reporting Application for selected quarters going back to SFY 2008, and can display statewide data, or data by Region, unit, or worker. Data is available in a variety of forms including tables, Pareto charts, line graphs and bar charts. The CRA is used to review case read data for the current quarter under review, trends over time, and case reader consistency reports. Reports available in the Central Reporting Application include the following:

Level of detail	Name of report	Content of report		
Statewide Summary	Compliance / DCF Region	This report provides a summary comparison of Regional performance. You may only report on one quarter at a time.		
Statewide Summary	Statewide Line Graph / Question	Indicates changes in statewide performance over time (by quarter). A line graph is provided for each question showing the direction performance is moving from quarter to quarter. You SHOULD report on multiple quarters.		
Statewide Summary	Bar Graph by DCF Region / Quarter	Indicates changes in performance over time (by quarter) and by DCF Region. A bar graph is provided for each Region and each question showing the direction performance is moving from quarter to quarter. You SHOULD report on multiple quarters.		
Summary by Region or Statewide	Regional Line Graph / Question	Indicates changes in performance over time (by quarter). A trend line is provided for each question showing the direction performance is moving from quarter to quarter. You SHOULD report on multiple quarters.		
Summary by Region or Statewide	Compliance / Focus / Question	Provides performance in percentages for each question. Questions are grouped by area of focus, function or activity. You may report on one or multiple quarters.		
Summary by Region or Statewide	Compliance by Question	Report content is like report #5 but questions are in numerical order. The e-Mail button will export the raw data behind this report in a spreadsheet attached to an e-Mail. You may report on one or multiple quarters.		
Summary by Region or Statewide	Compliance by DCF Worker	Provides performance in percentages for each question and summarized for each DCF Worker. Questions are in numerical order and grouped by CFSR Item. You may report on one or multiple quarters.		
Case level detail by Region, Provider, Worker(s) & Youth	Errors/Focus/ Question	Provides case level detail including case reader comments for questions that are out of compliance. The report provides the detail for questions with a "No" answer sorted by each worker or screener and is useful for follow-up supervision. Questions are grouped by area of focus, function or activity. You may report on one or multiple quarters.		
Case level detail by Region, Provider, Worker(s) & Youth	Case Read Errors ("No") Only & Case Read Errors by Question	Like report #6 but the report is sorted by individual case including worker or screener and questions are in numerical order. The "by Question" report is sorted by question and questions are in numerical order. You may report on one or multiple quarters.		
Case level detail by Region, Provider, Worker(s) & Youth	NA's / Question	Provides case level detail including case reader comments for questions that are marked N/A. You may report on one or multiple quarters.		
Case level detail by Region, Provider, Worker(s) & Youth	All Comments / Question	Provides case level detail including case reader comments for all questions (marked "Yes, No or N/A") that contain case reader comments. You may report on one or multiple quarters.		

Level of detail	Name of report	Content of report
Case level detail by Region, Provider, Worker(s) & Youth	Compliance By Individual Case	Provides case level detail including case reader comments for all questions. This report is sorted by individual case. You may report on one or multiple quarters.
Statewide Summary by Reader	Case Reader Consistency by Question	A summary comparison of case reader findings statewide, sorted by case read question. The report is useful for looking at case reader consistency. You may report on one or multiple quarters.
Statewide Summary by Reader	Reader Regional Productivity	A count of case reads conducted by each case reader. The report is useful for looking at case reader utilization and productivity. You may report on one or multiple quarters.
Statewide Summary by Reader	Case Reader Findings / Reader	A summary of individual case reader findings, sorted by case read question. The report is useful for looking at case reader consistency. You may report on one or multiple quarters.
Case Reader "notes to self" for follow-up activities.	Your Internal Management Notes	This report contains the notes ("to self") made by case readers that are not specific to individual case read questions. They are associated with CFSR Item groupings of case read questions and used for miscellaneous follow-up activities.
Statewide Summary by Reader	Case Reader Read Numbers	This is another count of case reads conducted by each case reader. The report is useful for looking at case reader utilization and productivity. You may report on one or multiple quarters.
Statewide record of cases read	Case Log – Statewide & All Instruments	This is a statewide count of case reads conducted by each case reader and a listing of all cases read. The report is useful for managing case read sample lists; scheduling, quotas and general tracking. You may report on one or multiple quarters.
Summary by Region	Pareto Chart by DCF Region	This report is by DCF Region and is used to quickly identify the questions/areas with the worst performance. The report provides a bar graph in ascending order of performance for the questions performing below your selected %. You may report on one or multiple quarters. When using the Pareto Chart reports (by region or statewide) you may set the upper limit of the report to a percentage such as an outcome's performance standard or threshold and therefore limit the report to only those questions that fall below the percentage you set. NOTE: When setting the upper limit to a standard such as 80%, enter 79.99% into the upper limit box. The box will still show 80% but it will calculate based on 79.99% and provide a more accurate result.
Statewide Summary	Pareto Chart – STATEWIDE	This statewide report is used to quickly identify the questions/areas with the worst performance. The report provides a bar graph in ascending order of performance for the questions performing below your selected %. This "STATEWIDE" report also includes a list of the actual questions & their numerators and denominators. You may report on one or multiple quarters.
Summary by Region or Statewide	Reason Codes / Region Reason codes / Age	For case read questions that include "Reason Codes" such as OOH question #8 this report provides a breakdown of numbers and percentages for each applicable reason code. The "by Age" report gives a breakdown of age categories for the youth included in the sample. You may report on one or multiple quarters.

Outcome and Volume Indicator Reports and Reports with additional types of analysis that are produced on a recurring basis include the following:

Program or Report Type	Report Name	Report Description	Location	Frequency
Multi- Program	Children in DCF Custody on Last Day of Month	Total number of children in all types of DCF custody by month	PPS Website	Monthly
Multi- Program	Open Cases	Data set listing all cases open in FACTS with details on plan types, days since last review and many more. This report also includes errors and preventative issue lists that can be worked to keep data as accurate as possible.	PPS SharePoint	Bi-Monthly
Adoption	Adoption Assistance Error Report	This report is generated from SCRIPTS but uses information obtained from the KAECSES Extracts. The report shows possible funding errors.	PPS SharePoint	Monthly
Adoption	Adoption Assistance Raw Data	This spreadsheet is generated from SCRIPTS using information obtained from the KAECSES Extracts. The spreadsheet has multiple tabs which display for a specific benefit month: (1) all AS program cases; (2) those clients turning age 18 in 2 months; (3) those clients turning age 18 in 6 months; (4) those clients turning age 21 in 2 months; (5) those clients who have a different Source of Funding from last month; (6) those clients receiving a first time benefits; (7) those clients whose benefit ended; (8) those clients who have a change in the dollar amount of their benefit from last month; (9) those clients who received more than 1 benefit; (10) those clients who are State funded and their benefit was over \$500; (11) those clients who are Federal funded and their benefit was over \$710.	PPS SharePoint	Monthly
Adoption	Adoptions Finalized	Number of adoptions finalized by month. Also includes demographic information such as race, ethnicity, special needs, etc.	PPS Website PPS SharePoint	Monthly
Adoption	Adoptive Placement Agreements	Number of adoptive placement agreements signed each month	PPS SharePoint	Monthly
Adoption	Children Awaiting Adoption	Number of youth awaiting adoption each month	PPS Website	Monthly
Adoption	Fostering Connections: Adoption Assistance Criteria for the Applicable Child by Age, Time in Foster Care and Siblings	Includes children 8 and older who had an APA signed and if sibling placed in same home. Also those who had an APA signed who have been in foster care for 60 consecutive months and if sibling placed in same home.	E-mail group	Monthly
Alternative Response	Alternative Response Open, no case plan	Tracks the number of open AR cases that do not have a case plan.	PPS SharePoint	Monthly
Alternative Response	AR Case Plans Signed Timely	Number of AR case plans signed and percentage of those that were signed timely	PPS SharePoint	Monthly
Alternative Response	AR Children Maintained Safely in the Home	Percentage of families successfully completing AR case plans that do not experience a removal within 180 days of case closure.	PPS SharePoint	Monthly
Alternative Response	AR Closure Summary	Number of AR cases that have closed, including percent successful. Includes unsuccessful closure reasons. Report and raw data.	PPS SharePoint	Monthly
Alternative Response	AR Engagement Report	Families referred to AR that agreed to services and signed a case plan	PPS SharePoint	Monthly
Alternative Response	AR Reports Assigned	All Alternative Response reports received and assigned monthly by county, DCF Region and Statewide.	PPS SharePoint	Monthly
Alternative Response	AR Reports Assigned by Presenting Situation	Percentage of reports assigned for AR by presenting situation.	PPS SharePoint	Monthly

Program or Report Type	Report Name	Report Description	Location	Frequency
APS	APS / CMS Involvement	Shows APS involvement for waiver recipients- reports, investigations and substantiations by allegation	E-mail group	Monthly
APS	APS Age of Alleged Victim	APS reports assigned for further investigation statewide, during a six month period, by age of the involved adult.	E-mail group	Semi- Annual
APS	APS Allegations by Age Group	Adults involved in assigned investigations and substantiated allegations by age of involved adult allegation type. Statewide and by DCF Region.	PPS Website	Monthly
APS	APS Annual Summary	Overview of statewide trends in APS data including reports received, reports assigned for further investigation, substantiated investigations, and maltreatment vs. self-neglect.	PPS SharePoint	Annual
APS	APS Closed After Assignment	Number of APS Investigations closed after assignment each month by DCF Region.	PPS SharePoint	Monthly
APS	APS Corrective Action Plans	Number of corrective action plans opened each month by social worker and allegation type.	PPS SharePoint	Monthly
APS	APS Findings with Requested Extensions	Report and raw data showing investigations that have findings during the month and whether or not there was an extension requested.	PPS SharePoint	Monthly
APS	APS Initial Contact Date Errors	Investigations with an error (or significant delay) in the date of face to face contact.	PPS SharePoint	Monthly
APS	APS Intakes Assigned	Reports assigned for further investigation by county, DCF Region and Statewide	PPS Website	Monthly
APS	APS Intakes Assigned by Maltreatment Type	Reports assigned for further investigation by maltreatment type (allegation) Statewide	PPS Website	Monthly
APS	APS Intakes Received	Reports received by county, DCF Region and Statewide	PPS Website	Monthly
APS	APS Investigative Findings	Numbers and percentages of substantiated/unsubstantiated APS investigations by month, by DCF Region and statewide.	PPS Website	Monthly
APS	APS Open Service Plan List	List of all investigations with a Service Plan in a status other than "Complete"; regardless of the status of the investigation.	PPS SharePoint	Monthly
APS	APS Percent of Allegations Substantiated	Percent of substantiated findings by allegation for each region and statewide	PPS SharePoint	Semi- Annual
APS	APS Portrait	Snapshot of the population served by Kansas' APS Program and state and national information as available.	PPS SharePoint	Annual
APS	APS Recurrent Maltreatment	Percentage of adults that did not experience a subsequent maltreatment finding within six months, by DCF Region and statewide.	PPS Website	Monthly
APS	APS Substantiations by Allegation	Percent of substantiated findings by allegation for each region and statewide	PPS SharePoint	Monthly
APS	APS Timely Findings	Percentage of APS investigations with findings made timely by region; includes worker-level data	PPS SharePoint	Monthly
APS	APS Timely Initial Contact	Percentage of APS investigations where initial contact (or attempts) were made timely, by Region and statewide; includes worker-level data	PPS SharePoint	Monthly
APS	APS Timely Service Plans	Number of initial services plans opened each month and whether they were opened timely.	PPS SharePoint	Monthly
APS	Caseload Report- APS	Shows new APS investigations, open APS investigations, and New Service Plans, along with the number of APS social workers with an open investigation by region for the month.	PPS SharePoint	Monthly
CPS	Assigned Abuse Neglect Intakes with ALV under 6 years of age	Assigned abuse neglect intakes with alleged victim under 6 years of age.	PPS SharePoint	Weekly
CPS	Assigned Abuse Neglect intakes with no Decision	Error reportAssigned abuse neglect intakes with no decision data entered in FACTS.	PPS SharePoint	Monthly

Program or Report Type	Report Name	Report Description	Location	Frequency
CPS	Assigned intakes in FACTS but not in KIDS	Error reportAssigned intakes in FACTS but intake is not in KIDS.	PPS SharePoint	Monthly
CPS	Assigned Intakes with children under 1 year of age	Assigned intakes involving a child under the age of 1 year	PPS SharePoint	Weekly
CPS	Caseload- PPS	CINC intakes assigned during the month for investigation and assessment by supervisor, staff, service center and type of intake report.	PPS SharePoint	Monthly
CPS	CINC Reports Assigned	Number of CINC intake reports assigned each month and by county	PPS Website PPS SharePoint	Monthly
CPS	CINC Reports Assigned to Investigate Alleged Maltreatment	Percentage of intakes assigned for each alleged maltreatment type	PPS Website	Monthly
CPS	CINC Reports Received	Number of CINC intake reports received each month and by county	PPS Website PPS SharePoint	Monthly
CPS	Decision within 30 Working Days	Percentage of finding decisions done timely.	PPS SharePoint	Monthly
CPS	Intakes with child under 6 and risk assessment high or intense	Assigned intakes with child under 6 with a risk assessment of high or intense.	PPS SharePoint	Monthly
CPS	Investigative Findings	Number of substantiated and unsubstantiated findings by month	PPS Website	Monthly
CPS	Non Abuse/Neglect Presenting Situations for Assigned CINC Reports	Percentage of intakes assigned for each alleged Non-Abuse Neglect presenting situation types	PPS Website	Monthly
CPS	Recurrent Maltreatment	Children who experienced a subsequent substantiated finding w/in 6 months of previous substantiated finding	PPS Website PPS SharePoint	Monthly
CPS	Timely Contact with Victim/Family	Percentage of contacts completed with victim/family timely for those assigned for Same day or 72 hr. response time.	PPS Website PPS SharePoint	Monthly
CPS	Timely Family Based Assessment	Percentage of family based assessments completed timely.	PPS SharePoint	Monthly
CPS	Timely Initial Assessment	Percentage of Initial Assessments that were completed timely Statewide and by PRC location.	PPS SharePoint	Monthly
Family Preservation	Family Preservation In Home	Number of families referred to Family Preservation each month and those served by Family Preservation.	PPS Website	Monthly
Family Preservation	Family Preservation Referrals with Removals	This report looks at the Family Preservation referrals for the current state fiscal year detailing which cases already has a child removed into out of home placement.	PPS SharePoint	Monthly
Family Preservation	Presenting Situation for Family Preservation Referrals	Presenting situations for a referral to family preservation	PPS Website	Quarterly
Family Services	Family Services Cases Initiated	Number of family service cases initiated by month.	PPS Website	Monthly
Family Services	Presenting Situation for Family Service Referrals	Presenting situations for a referral to family services	PPS Website	Quarterly
Family Preservation	FP Allocation Report	This report shows where regions are with their monthly Family Preservation allocation. It provides a graph displaying a monthly goal and where the State or region is related to that goal.	PPS SharePoint	Monthly
IV-E	IV-E Penetration Rate Historical Comparison	This report shows the IV-E penetration rate as it was reported in previous months.	PPS SharePoint	Monthly
IV-E	Placement Encounter Analysis Report	This report shows clients who are missing placement encounters for the month.	E-Mail Group	Monthly
Independent Living	SSIS Funding	Report showing the number of youth receiving various IL/SS funding (ETV, Chafee, IL Subsidy) and associated dollar amounts by month, provided by DFC Region and statewide.	PPS SharePoint	Monthly
Foster Care	Aftercare Client List	This report shows for the month chosen which foster care clients were in aftercare at least 1 day of that month.	PPS SharePoint	Monthly

Program or Report Type	Report Name	Report Description	Location	Frequency
Foster Care	Disproportionality Comparison Reports	Compares disparity in African American removals into foster care across years.	PPS SharePoint	Annual
Foster Care	Disproportionality Metric by County Report	Report that shows Disparity in representation of each race removed into foster care both Statewide and by county.	PPS SharePoint	Annual
Foster Care	Ethnicity by County	Children in Out of Home Placement by Ethnicity	PPS Website	Monthly
Foster Care	Females in Secure Care Placement	Monthly snapshot of females who are placed in secure care facilities by age groups.	PPS SharePoint	Monthly
Foster Care	Initial Case Plan Report	Children referred to Foster Care providers that have a case plan in 20 days.	PPS Website PPS SharePoint	Monthly
Foster Care	Length of stay in OOH Placement	Children exiting out of home placement by exit reason and length of time in out of home placement. This report is also process by Judicial District and County.	PPS Website PPS SharePoint	Monthly
Foster Care	OOHP by County with Census Data	Children in Out of Home Placement by County	PPS Website	Monthly
Foster Care	OOHP by Gender and Age	Children in Out of Home Placement by Age Groups and Gender	PPS Website	Monthly
Foster Care	Out of Home Decision Point Rates	Contains census data, average removals, current OOH numbers, average ending OOH, as well as rates for each and a ratio of removals to ending OOH.	PPS SharePoint	Monthly
Foster Care	Out of Home Foster Care Placement Utilization Report	Children in Out of Home Placement by Placement and Region.	PPS Website	Monthly
Foster Care	Out of Home Snapshot Data	Data set that lists all the children in out of home placement on the last day of the previous month. This dataset also has a multitude of demographic and placement information.	PPS SharePoint	Monthly
Foster Care	Permanency Goal Report	Children in Out of Home Placement by Permanency Goal	PPS Website	Monthly
Foster Care	Permanency Roundtable Quarterly Update Report	Tracks youth involved in July 2012 roundtable reviews. Progress toward permanency, case plan goal changes, placement stability, permanency status changes, and various other outcomes.	Available upon Request	Quarterly
Foster Care	Placement Settings by Region	Children in Out of Home Placement by Placement Type	PPS Website	Monthly
Foster Care	PPS Rate of Removal Reports	Current year removals and removal rates by county.	PPS SharePoint	Annual
Foster Care	PPS Removal Information SFY2011 through SFY2013	Compares top 15 KS Counties for three years by removal rates and statewide removals, following pages are the current year removals and removal rates by county.	PPS SharePoint	Annual
Foster Care	Quarterly Removal Increases (5 Plus Report)	Report that compares the removals from the previous SFY to the current SFY.	PPS SharePoint	Quarterly
Foster Care	Race by County	Children in Out of Home Placement by Primary Race	PPS Website	Monthly
Foster Care	Removal Reason Booklet	Details removals by DCF regions, gender and age groups. Some county breakouts as well for counties with 20 or more removals for the reporting year.	PPS SharePoint	Annual
Foster Care	Removals by Primary Reason	Children removed into out of home placement by primary removal reason and age groups.	PPS Website PPS SharePoint	Monthly
Foster Care	Removals with Prior LE Plans	Current year removals with a Law Enforcement (LE) plan within 7 days of coming into care.	PPS SharePoint	Quarterly
Foster Care	Removals, Discharges and Out of Home Summary	Shows a monthly breakout of removals, discharges and children in out of home placement.	PPS Website PPS SharePoint	Monthly
Foster Care	Timely Permanency Hearing	Number of permanency hearings completed timely each month	PPS Website PPS SharePoint	Monthly

Program or Report Type	Report Name	Report Description	Location	Frequency
Foster Care	Timely Reunification and Timely Adoption	Graphs statewide performance on these two outcomes.	E-mail group	Monthly
Foster Care	Worker/Child Visits Report	This report shows how we are doing on our federal measure for worker/child visits.	E-mail group	Monthly
Foster Care	YRC II and PRTF Trend Report	Children in Out of Home Placement specifically in a YRCII or PRTF facility by gender.	PPS SharePoint	Monthly
In Home Services	Candidate for Care Report	Report showing the penetration rate of candidates for care.	PPS SharePoint	Monthly
Independent Living	IL Demographics	Report detailing number of youth served with IL Services by gender, age, race, ethnicity, and education level by Region and Statewide.	PPS SharePoint	Monthly
Independent Living	IL/SS Annual Report	Summary of youth served by IL/SS Program, including information about various funding sources	PPS SharePoint	Annual
Management Report	Caseload Report - Point In Time	Point in Time report containing various programs monthly data.	PPS SharePoint	Monthly
Management Report	Child Fatality Reports	2 reportsChild fatalities by DCF region for current fiscal year and Kansas Child Fatalities known to DCF by year substantiated and year of death from SFY 2001 to present.	PPS SharePoint	Monthly
Management Report	Child Fatality Quarterly Report	This report reflects attributes of children in Kansas whose death is substantiated by DCF as the result of maltreatment.	PPS SharePoint	Quarterly
Management Report	Child Welfare Portrait	Snapshot of characteristics and performance of Kansas' child welfare programs and national information as available.	PPS SharePoint	Quarterly
Management Report	DCF-JIAS Cross Over Report	An analysis of youth 10 and over who have been in out of home placement with DCF who are served through the Department of Corrections division of Juvenile Services.	PPS SharePoint	Annual
Management Report	Decision Points Rates Report	Compares three years of service point data (intake reports, family preservation referrals, and removals) with census data and rates for each service point.	PPS SharePoint	Annual
Management Report	IV-E Management Report files	Reports by region are generated showing the most up to date standing of IV-E eligibility, both maintenance and admin. Also the EP Segments from FACTS and the percentage each type of funding represents the whole.	PPS SharePoint	Monthly
Management Report	Kansas Data Trends	Overview of statewide trends in data for CPS and APS including victims and out of home care population information (CPS) and age of involved adult and risk reduction (APS).	PPS SharePoint	Annual
Management Report	Management Team Report	Report showcasing many service points and budget information for quick and easy reference.	PPS SharePoint	Monthly
Management Report	Milestones Across State Fiscal Years	Total CINC reports received, assigned, and percentage assigned for abuse/neglect. Also contains # of family preservation referrals, foster care removals, discharges and finalized adoptions.	PPS SharePoint	Annual
Management Report	PPS and Contract Outcomes Report	Quarterly performance for PPS Regional outcomes and all family preservation and foster care contract outcomes related to Safety, Permanency and Well-Being.	PPS SharePoint	Quarterly
Management Report	PPS Contract Outcomes Report	This report provides quarterly performance for all family preservation and foster care contract outcomes related to Safety, Permanency and Well-Being.	PPS SharePoint	Quarterly
Management Report	PPS Measureable Goals Report	Report listing several PPS internal goals and the progress on those YTD.	PPS SharePoint	Monthly
Management Report	PPS Outcomes Accountability Report	Four particular outcomes: Recurrent Maltreatment, Timely Contact, Timely Initial Assessment, and Placement Stability.	PPS SharePoint	Monthly
Management Report	Quarterly Executive Summary Report	Report that shows Intakes and all Outcome report progress by Region and statewide.	PPS Website	Quarterly
Management Report	SB134 16 and Over Removed into Custody Monthly Report	Youth 16 and Older Removed into Custody of the Secretary for Non Abuse and Neglect Reasons.	PPS SharePoint	Monthly
Management Report	SB134 18 and Over w/Medical Card By Region Monthly Report	Young adults who received a medical card through the Extended Medical Card Program	PPS SharePoint	Monthly
Management Report	SB134 18 and Over w/Medical Card Report	Foster Care Medical Card Extension Program Participants	PPS SharePoint	Monthly
Management Report	State Fiscal year Abuse Neglect report by County	CINC reports received, assigned for abuse/neglect and non- abuse/neglect, and substantiated victims.	PPS SharePoint	Annual

Program or Report Type	Report Name	Report Description	Location	Frequency
Management Report	Statewide Child in Need of Care Distribution	CINC reports received, percentage assigned for abuse/neglect, assigned for non-abuse neglect, substantiated victims, and perpetrators from calendar year 1998 to SFY 2013.	PPS SharePoint	Annual
Outcomes - Adoption	Progress Towards Adoption (Children in Care 17+ Months achieve Legal Freedom)	This cohort report contains the number of children in foster care on the first day of a Fiscal Year who have been in care for 17 continuous months or longer, who were not legally free for adoption prior to that day, who then became legally free during the first 6 months of that same Fiscal Year. (excludes those discharged for reunification, living with relative or permanent custodianship)	PPS Website PPS SharePoint	Quarterly
Outcomes - Adoption	Progress Towards Adoption: Adopted in less than 12 Months from Legal Freedom	Number of children who became legally free and also discharged to finalized adoption in less than 12 months of becoming legally free.	PPS Website PPS SharePoint	Monthly
Outcomes - Adoption	Progress Towards Adoption: Children in Care 17+ Months, Adopted by End of Fiscal Year	This cohort report contains the number of children in foster care on the first day of a Fiscal Year who have been in care for 17 continuous months or longer, who then were discharged from custody by the last day of the same Fiscal Year for adoption. (excludes those discharged for reunification, living with relative or permanent custodianship)	PPS Website PPS SharePoint	Quarterly
Outcomes - Adoption	Timely Adoption in Less Than 24 Months	Children adopted in less than 24 months of removal from out of home date.	PPS Website PPS SharePoint	Monthly
Outcomes - Adoption	Timely Adoption: Median Length of Stay in Months	Median length of stay in months the date of the last removal from home and the date of discharge to adoption.	PPS Website PPS SharePoint	Monthly
Outcomes - Family Preservation	Children are Maintained at Home with Family (Family Preservation)	Families referred to family preservation and if had a child removed from home within 365 days of referral	PPS Website PPS SharePoint	Monthly
Outcomes - Family Preservation	Families Engaged in Services - Family Preservation	Families referred to Family Preservation services that have a case plan in 20 days.	PPS Website PPS SharePoint	Monthly
Family Preservation	Pregnant Woman Using Substances Referrals	Number families referred to family preservation for reason of pregnant woman using substance abuse.	PPS SharePoint	Monthly
Outcomes - Family Preservation	Safety during Family Preservation In Home Services between referral and 90 days	Number of families referred to family preservation 90 days ago who did not have substantiated finding between referral and 90 days.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Educational Progression	Children in Foster Care for entire state fiscal year (365 days) will progress to the next grade level.	PPS Website PPS SharePoint	Quarterly
Outcomes - Foster Care	Placement In Family Like Setting	Children in Out of Home Placement who are in a placement considered to be a "Family Like" placement.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Children in Care 3+ yrs.	Children emancipated who were in out of home care 3 years or longer.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Achieving Permanency: Permanency for Children with Termination of Parental Rights	Children who were discharged to a permanent home prior to their 18th birthday and who were legally free for adoption at that time.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Achieving Permanency: Children in Foster Care for Long Periods of Time (Exit Cohort)	Children in foster care on the first day of the fiscal year (July 1, 2012) who have been in care for 24 continuous months or longer, and who were discharged to a permanent home (discharge reason of adoption, permanent custodianship, reunification or live with relative) prior to their 18th birthday and by the end of the fiscal year (June 30 2013)	PPS Website PPS SharePoint	Quarterly
Outcomes - Foster Care	Placement Stability (In care at least 12 months and less than 24 months.)	Children with 2 or less placements who have been in out of home care for at least 12 months and less than 24 months.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Placement Stability (In care 24 months or longer)	Children with 2 or less placements who have been in out of home care for 24 months or longer.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Placement Stability (In care less than 12 months)	Children with 2 or less placements who have been in out of home care for less than 12 months.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Safety in Foster Care	Number of children safe from maltreatment while in foster care	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Sibling Placement	Number of children who are placed with at least one sibling in out of home placement.	PPS Website PPS SharePoint	Monthly

Program or Report Type	Report Name	Report Description	Location	Frequency
Outcomes - Foster Care	Stable Permanency for Reunification	Number of children discharged to reunification or living with relative and reentered foster care in less than 12 months	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Timely Reunification (Children who entered care between Jan 1 and June 30)	This is an entry cohort where children in foster care(FC) for 8 days or longer, who entered FC for the first time in the 6 month period just prior to the State fiscal year (Jan 1-June 30), and were discharged from custody for reason of reunification, or living with relative in less than 12 months of the latest removal from home.	PPS Website PPS SharePoint	Quarterly
Outcomes - Foster Care	Timely Reunification	Children who were in care 8 days or longer and discharged for reunification or lives with relative, were reunified in less than 12 months.	PPS Website PPS SharePoint	Monthly
Outcomes - Foster Care	Timely Reunification: Median Length of Stay	Children reunified by median time in out of home placement.	PPS Website PPS SharePoint	Monthly
Outcomes - Family Preservation	Babies Are Born Substance Free	Number of births to families referred to family preservation for reason of substance abuse during pregnancy born with negative alcohol and drug toxicology.	PPS Website PPS SharePoint	Monthly
Success Indicator - Foster Care	Same School	Number of children who are age 6 and over in out of home placement and attending same school as prior to removal.	PPS Website PPS SharePoint	Monthly
Outcome - Foster Care	Children Live with Relatives	Number of children residing with relative on last day of the month	PPS Website PPS SharePoint	Monthly
Success Indicator - Foster Care	Education Success: Completed 12th Grade	Young Adults exiting DCF custody for emancipation who have completed the 12th grade or higher.	PPS Website PPS SharePoint	Monthly
Success Indicator - Foster Care	Permanent Connections	Adults ending custody with the Secretary of DCF will have a signed permanency pact. (New Success Indicator for SFY2014).*This replaces the Positive Role Model Success Indicator	PPS Website PPS SharePoint	Monthly

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

The PPS Website provides reports with case read data, volume indicators and outcome data. The report list above indicates reports that are available on the PPS Website and how frequently each report is updated. The PPS Website is public and can be accessed from any computer or device with internet access. Reports on the PPS Website are formatted for accessibility by visually impaired stakeholders. Based on feedback from internal and external stakeholders, Kansas recognized an opportunity regarding navigability of the PPS Website. In SFY 2014, Kansas began seeking stakeholder input on redesigning the layout of the PPS Website.

The PPS SharePoint site is a secure website where case read data, volume indicators and outcome data is available to internal stakeholders. Central Office and Regional staff have access to SharePoint, as do representatives from each of the Child Welfare Case Management Providers (CWCMP). The report list above indicates reports that are available on the PPS SharePoint site and how frequently each report is updated. Also available on SharePoint is a list of all reports routinely produced by the agency along with a description of the report, the frequency of the report, and the location of the report. The PPS SharePoint site is an area of strength for Kansas.

Case read data and outcome data from the State's information system is reviewed during quarterly CPI meetings with internal stakeholders. Attendees at quarterly CPI meetings may include administration PI staff, Regional CPI staff, program managers and administrators, protection supervisors and specialists, and CWCMPs as appropriate.

A facilitated discussion was held by Nani Lee and Paula Burge with the Center for Capacity Building. The attendees: Angela Evans, Heather Baum, Gabriella Guido, Carrie Stillian, Dale Caine, Stormy Lukasavage, Michael McDowell, Kassi McDowell, Traci Dotson, Nikki Jackson, Asia Carter, Audra Nixon Roles: Former foster youth, former foster parents, current foster parents, families reunified, recovering parents (SUD), foster grandparent, biological parents and tribal.

Of all the things that you encountered in your lived experience, can you recall one distinct individual who stands out as someone who helped you move forward?

Were the case workers assigned to your case interested in you as a person?

- The foster care system creates labels and reinforces stereotypes seen in media (SF 25)
- Negative comments come from youth, teachers, other adults around due to small town mentality and stereotypes

Systemic Factor 4: Staff and Provider Training

Training is available in a variety of formats, including online, virtual and in-person classroom delivery. Online courses are completed either through the Kansas Learning and Performance Management (KLPM) System (for internal DCF, CWCMP and Tribal Partner staff) or through KS-TRAIN, a Learning Management System available to anyone in Kansas. Blended training includes courses that have been created or modified for some activities to be completed online by the individual and some activities to be completed either individually or with a group in consultation with a trainer or supervisor. Classroom delivery is provided in a face-to-face environment or in a Virtual environment, such as Microsoft Teams or Zoom. All CWCMP and DCF courses are open to Tribal Partner staff as seats are available.

DCF and CWCMPs all require Pre-Service courses as well as Ongoing Training for all staff. In addition, there are Special Topic courses available to all staff. DCF and CWCMP staff also attend special topics courses provided by outside community partner agencies and various contracted providers.

Change in Learning Management System:

In October, 2021 the Department for Children and Families (DCF) changed from the Pathlore Learning Management System to the LearnSoft Learning and Performance Management System, along with other state agencies in Kansas. This transition was a challenge, with the new Kansas Learning and Performance Management (KLPM) System unable to initially provide automated certificates or to record courses approved for SW continuing education hours. This transition also meant a loss of access to the 28 years of data for the agency stored in the Pathlore Learning Management System. Although some specific data reports can be requested from LearnSoft, these requests appear to be a low priority and we have not been able to access reliable data from before September 2021 when this transition occurred. We are currently only able to provide training data for courses delivered since September 2021 or if we had another source (such as a contractor for a conference, specific topic) available. Due to this lack of access to much of our historical training data, we have included data for SFY 2022 and 2023, as well as any previous data available to us.

were temporarily closed due to the COVID pandemic, all in-person training was transitioned to virtual delivery using Microsoft TEAMS, beginning in April 2020. Our agency was well supported by IT and equipped with laptops for all staff, making Microsoft TEAMS a resource readily available for virtual training. During this pandemic, our agency has experienced a higher than usual turnover rate with more than 250 participants completing pre-service courses during this challenging time. Due to concerns that participants are better able to engage, may feel more supported/connected and learn better when taught inperson, we have been anxious to return to in-person learning. We are currently transitioning back to more in-person delivery of pre-service courses.

This return to in-person delivery was initiated in March 2022 with delivery of Interviewing Skills for Child Welfare (ISCW), a 4-day course. This course had been on pause for delivery during the pandemic as we were unable to adapt delivery to a virtual format and we were very anxious to make it available again. Due to pandemic concerns, substantial precautions were taken, using a larger than normal conference room to allow participants to be spaced 6 feet apart and altering small group and large group activities to support distancing. One participant attended the class while feeling ill, then tested positive for COVID, resulting in exposure to other participants and actors during this March class. This was followed by a high volume of new hires and additional unusual staffing demands on the Learning & Development Team in May and June. In-person delivery of Interviewing Skills for Child Welfare resumed once again in August 2022. Five inperson ISCW classes have now been successfully completed in SFY 2023, with three more classes currently scheduled as we have been able to resume a planned schedule of eight ISCW classes per fiscal year.

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

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 goal is for every newly hired PPS Child Protection Specialist, Child Protection Investigator or Case Manager to be ready to take a case load at the end of their pre-service training. The Pre-Service training teaches the skills and knowledge necessary to effectively address safety, permanency and well-being. Preservice training for PPS Safety and Thriving Families staff is primarily focused on engagement, assessing safety and helping families build safety networks. Topics include those related to the trauma of removal, importance of connections and permanency and child and family well-being. The number of pre-service classes scheduled each year continues to depend on hiring patterns and turnover. PPS provides preservice and initial training (within 90 days or within 6 months) for PPS Child Protection Specialists and Child Protection Investigators. PPS also provides required online pre-service training for CWCMP staff with case management responsibilities, including (1) Case Management Pre-Service, (2) Documentation 101 and (3) current Policy Venues (updated every six months). These courses are accessible on demand through the KLPM for case management staff from the major grantee agencies who have access to the KLPM, with copies of these courses for use by smaller case management agencies available through the agency public content server. Since our transition to the KLPM there have been some problems with the Case Management Pre-Service series interfering with grantee staff being able to complete or have their completions recorded correctly. A revision to the course has been completed and needs to be tested, finalized and re-published to the KLPM. Meanwhile, CWCMP agencies have been monitoring completion of this series carefully with their new case management staff and notifying DCF of any problems

encountered with the online series.

The Kansas Practice Model Overview (KPMO) initially delivered as "Signs of Safety: Agency Awareness" was delivered as a standalone two-day class in person or virtually until January 2021, when it was fully incorporated into Building Well-Being and Safety With Families: Part 1 and Part 2. These two 3-day courses, in combination with a 3-day Child Welfare Basics course and five single topic 1-hour courses (Facilitated Discussions), along with a series of online courses and individual activities now make up PPS Academy, the primary pre-service requirement for new Child Protection Specialists and Child Protection Investigators with DCF Prevention and Protection Services.

The table below shows the number of PPS staff who completed the various pre-service courses.

Pre-Service for PPS	Hours	SFY	SFY	SFY	SFY
Safety and Thriving	TIOUIS	2020	2021	2022	2023
Families staff –		2020	2021	2022	2023
Required prior to					
caseload assignments					
Child Welfare Basics	18	Unavailable	156	64 from	100 as of
(replacement to PPS	hours		150	9/21	2/23
Academy Wrap-Up and	110 4115			J. 21	2.20
Introducing Child					
Welfare in Kansas					
Today)					
(returns to in-person					
delivery Spring, 2023)					
Facilitated Discussions:		Unavailable			
Ethics and	1.0		116 - EC	50-EC	11-EC
Confidentiality	1.0		127- M/R	60-M/R	11-M/R
Meeting with	1.0		125-WS	59-WS	11-WS
Resistance	1.0		36- TM	36- TM	13- TM
Worker Safety	1.0		46- SC	58-SC	11-SC
Time Management					
Self Care					
Building Well-Being	18.0	Unavailable	113	111	45
and Safety with					
Families: Part 1					
(formerly Investigation					
and Assessment and					
KPM Overview)					
(returns to in-person					
delivery xx, 2023)		44 4 -			
Building Well-Being	15.0	Unavailable	113	59	62
and Safety with					

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Families: Part 2					
(formerly Investigation					
and Assessment and					
KPM Overview)					
(returns to in-person					
delivery March, 2023)					
Investigation and	2.0	160	107	92	53
Assessment Online					
PPS Academy – Job	32.0	145	69	34	4
Shadowing					
PPS Academy – CPS-		Unavailable	Unavailable	Unavailable	Unavailable
CPI Shadowing					
Activities					
PPS Academy – Wrap		Unavailable	Unavailable	Unavailable	Unavailable
Up Assignments					
KIDS (Kansas		Unavailable	Unavailable	Unavailable	14-KIDS
Initiatives for Decision					15-KIPS
Support/KIPS: Intake					
and Investigation					
Excellent Customer	1.0	106	113	110	92
Service	110				-
Identifying &	0.5	Unavailable	Unavailable	Unavailable	151*
Explaining Parent and					*Unable to
Alleged Perpetrator					distinguish
Rights					SFY
DVD: Interviewing	2.0	Unavailable	Unavailable	68	60
Children – Getting More					
with Less					
MECAN: Abusive Head	1.0	70	108	117	53
Trauma in Infants and	110	, 0	100	11,	
Children					
The Period of Purple	1.25	Unavailable	Unavailable	Unavailable	149*
Crying	11.20	0 110 (0110/010			*Unable to
01)g					distinguish
					SFY
TDM Staff Orientation	3.0	Unavailable	Unavailable	96	54
Documentation 101	1.0	Unavailable	Unavailable	Unavailable	Unavailable
SafeGeneration GLC's	1.5	Unavailable	Unavailable	256	266
(Group Learning &	1.5				-00
Consultation Sessions)					
Kansas Practice Model		0	Unavailable	32	Discontinued
Collaboration Hub				32	Discontinued
Tours					
10410		SFY	SFY	SFY	SFY
Required Within 90		2020	2021	2022	2023
Days of Entering		2020	2021	2022	2023
Position Position					
1 USITIVII					

Wrestling with Safe	2.0				
Sleep					
Using the Child Protector App – Protecting Against Child Abuse (webinar)	1.0	January 2020	Unavailable	Unavailable	73* Unable to distinguish SFY
Bruising: Decision- making Regarding Common Skin Injuries (webinar)	1.0	May 2020	N/A	N/A	Available Spring 2023
Baby Bumps and Bruises: Sentinel Injuries (webinar)	1.0	June 2020	N/A	January 2022	Available Spring 2023
Abusive Head Trauma: What it is and What we can do about it (webinar)	1.0	N/A	N/A	February 2022	54
Child Sexual Abuse Myths and Facts (webinar)	1.0	N/A	N/A	December 2021	Available Spring 2023
Initiating Child in Need of Care Proceedings (CINC): Documentation and Court		Unavailable	Unavailable	Unavailable	Unavailable
Required Within 6		SFY	SFY	SFY	SFY
Months of Entering Position		2020	2021	2022	2023
Interviewing Skills for Child Welfare	26.0	Unavailable	0	18	60
Family Finding and Participatory Practice Bootcamp	24.0 in SFY 2020; 18.0 in SFY 2021	Unavailable	Unavailable	Unavailable	N/A
Family Seeing: Family Finding from the Start (pilot – December 12, 2022)	6.5	N/A	N/A	N/A	8 at December pilot Available January 2023
From No One to Network	0.5	N/A	N/A	N/A	Available January 2023
Using Engagement Strategies: a KPM Skill	0.5	N/A	N/A	N/A	Available January

Building Activity					2023
Introduction to	1.0	N/A	N/A	N/A	Available
Supporting LGBTQIA+					January
Youth					2023

Evaluation and Transfer of Learning:

DCF PPS has maintained Kirkpatrick Level 1 (Reaction) evaluations for all courses throughout the pandemic and has re-introduced Kirkpatrick Level 2 Transfer of Learning activities for other courses, particularly as we return to in-person training. Rather than surveys to participants alone that were previously in use, a Level 2 Pre- and Post-Assessment has been resumed for Interviewing Skills for Child Welfare, as well as the Transfer of Learning activity for Interviewing Skills for Child Welfare is completed by the participant and their supervisor. Feedback forms have been adapted to include mapping information of their practice interviews are provided, along with access to the recorded practice interviews. Supervisors and participants are asked to review both of the practice interviews completed during class together, with the participant explaining steps/tools used and identifying opportunities for improvement. This provides a better opportunity for the supervisor to observe participants using skills/tools and an opportunity to use this information to support continued learning opportunities for participants.

Item 27: Ongoing Staff Training. How well is the staff and provider training system functioning statewide to ensure that 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?

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.

Kansas collaborates with several entities to develop and deliver ongoing staff training. Power of Partnership LLC, dba SafeGenerations continues to provide expertise and technical assistance in the development of tools, training and consulting related to the implementation of KPM with a focus on developing a Child Protection Framework. Evident Change provides technical assistance, training and consulting for Initial Team Decision Making (TDM) and Placement Stability TDM.

All DCF CPS Specialists, CPS Investigators and CWCMP case managers are required to complete a minimum of 40 hours of continuing education, including 3 hours of ethics 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.

Ongoing Training	SFY 2020	SFY 2021	SFY 2022	SFY 2023
Kansas Practice Model (KPM)	Unavailable	Unavailable	N/A	N/A
Overview – 12 hours				
SafeGenerations Advanced Practice and	160	194	52	24
Leadership: Part 1 – 18.0 hours				

SafeGenerations Advanced Practice and Leadership: Part 2 – 12 hours	Unavailable	45	32	10
Questions That Make a Difference (QTMAD) (8 sessions) 8.0 hrs total	300 seats	60 seats	120 seats	60 seats
Session 1	Unavailable	Unavailable	38	40
Session 2	Unavailable	Unavailable	38	37
Session 3	Unavailable	Unavailable	36	31
Session 4	Unavailable	Unavailable	32	33
Session 5	Unavailable	Unavailable	36	41
Session 6	Unavailable	Unavailable	6	64
Session 7	Unavailable	Unavailable	14	61
Session 8	Unavailable	Unavailable	14	50
SafeGenerations Group Learning &	Unavailable	Unavailable	265	266
Consultation (GLC) Sessions – 1.5 hrs				
Immediate Safety: Part 1 – 3.0	N/A	N/A	37	13
Immediate Safety: Part 2 – 3.0	N/A	N/A	5	11
Developing the Assessment Summary – PPS2020 - 3.0	N/A	N/A	25	5
Assessing Risk – Using the Lasting Safety Scale – 3.0	N/A	N/A	15	12
Navigating Denial & Resistance – 3.0	N/A	N/A	35	3
Words & Pictures Explanations – 3.0	N/A	N/A	7	14
Using the Supervision Tool with Flexibility, Efficiency and Critical Thinking – 3.0	N/A	N/A	43	9
It's Not All On You! How to Create a High-Impact Safety Plan With (Not For) A Family (five 1-hour series completed in small groups led by Small Group Facilitators – 5.0 hrs total	N/A	N/A	N/A	Starting in April 2023
Getting Unstuck: Engaging Families in Situations of 'Denied' Child Abuse	N/A	N/A	N/A	Started January 2023
MECAN Bruises Bites and Burns	Unavailable	Unavailable	Unavailable	Unavailable
MECAN Skeletal Injuries	Unavailable	Unavailable	Unavailable	Unavailable
MECAN Abusive Head Trauma in Infants and Children	Unavailable	Unavailable	Unavailable	171* *unable to distinguish SFY
Learning Leader Development Program: - 16 sessions over 2021 and 2022 for selected participants	3.0 per session	80	55	45
Recognizing Child Maltreatment: Bruises, Burns, Fractures, Head Injuries and Abdominal Trauma	N/A	Unavailable	N/A	16
Recognizing Child Maltreatment:	N/A	N/A	N/A	N/A

Medical Child Abuse, Neglect, Failure to Thrive, Human Trafficking and Child Sexual Abuse				
Using the Child Protector App – Protecting Against Child Abuse (webinar)	N/A	Unavailable	Unavailable	73* *unable to distinguish SFY
Bruising: Decision-making Regarding Common Skin Injuries (webinar)	N/A	N/A	N/A	Available Spring 2023
Baby Bumps and Bruises: Sentinel Injuries (webinar)	June 2020	N/A	January 2022 - 34	Available Spring 2023
Abusive Head Trauma: What it is and What we can do about it (webinar)	N/A	N/A	54	Available Spring 2023
Child Sexual Abuse: Myths and Facts (webinar)	N/A	34	N/A	Available Spring 2023
Origins and Overview of PSB in Children (sebinar)	N/A	N/A	99	Available Spring 2023
Wrestling with Safe Sleep (available to all DCF staff, grantees and community members				
TDM, Youth Engagement and PS-TDM courses				
Risk Intelligent Screening & Assessment (3-part series for PRC)	N/A	N/A	59	22

Group Learning and Consultation (GLC) - Course Code PPCOCWV290

Group Learning & Consultation Sessions (GLC) create an opportunity for practitioners and/or leaders to bring forward their successes as well as their stuck cases/issues for the dual purpose of group learning and consultation. Sessions typically begin with an exploration of the group's recent successes through the use of Appreciative Inquiry and then move into a consultation about a stuck case or issue. The caseworker or supervisor (or other leader) who brings the case forward is guided through a structured process that promotes critical thinking, taps into the collective wisdom of the group and produces concrete next steps that can be applied in the identified case as well as other similar cases/scenarios. Supervisors are asked to team with another supervisor to schedule four GLCs each year for their teams. All sessions are led by DCF Learning Leaders partnering in the roles of Facilitator and Advisor, with support from SafeGenerations staff during some sessions.

Questions That Make a Difference (QTMAD) – 8-part series open to new and experienced staff. Course Codes PPPSCWV352 through PPPSCWV359, facilitated by Small Group Facilitators

By the end of this 8 session course participants will be able to...

- Ask questions with more humility and curiosity
- Lead conversations with more useful questions

- Form various kinds of questions including **perspective** questions, coping questions, **exception** questions, preferred future questions and **scaling** questions
 - Navigate "denial", disputes, and resistance with **skillful** questions
 - Communicate with increased clarity and understanding

It's Not All On You! How to Create a High-Impact Safety Plan With (Not For) A Family — Course Code PPACCWV341 is a 5-part series open to new and experienced staff and lead by Small Group Facilitators along with Safety Planning Intensive participants using an online classroom developed by SafeGenerations. By the end of this 5-session course participants will be able to...

- Identify the key categories of information that are involved in creating a safety plan
- Draft questions to bring to families and their networks to draw out the details of their safety plan
- Describe how the Safety Plan as a product fits into a much larger process of Safety Planning
- State clearly what the worries are for the children in the future
- Communicate what we need to see happen in order to feel that the children will be safe long-term.
- Engage a network of people, usually friends and family, who understand the worries and who are committed to showing us that the children are going to be safe long-term.
- Communicate to the children and check for understanding of why we are involved and what happened that led to our worries.
- Develop the long-term plan with the details of who is going to do what, when and where with the family and their network.
- Refine the plan and determine monitoring over time to produce the Safety Plan.

Getting Unstuck: Engaging Families in Situations of 'Denied" Child Abuse – Course Code PPACCWV370 is an 8-part series open to new and experienced staff and lead by SafeGenerations working with small groups.

By the end of this 8-session course participants will be able to...

- Describe 'denial' on a continuum and how to manage different forms of 'denial'.
- Build strategies and questioning skills to engage families and networks in situations of 'denied' child abuse.
- Build their confidence in facilitating difficult conversations or decisions
- Increase awareness for the importance of involving safety networks throughout the safety planning process, instead of working in isolation with parents.
- Identify tips that increase knowledge and skills for managing stuck cases.

Advanced Practice & Leadership Workshops: Part I and Part II – Course Codes PPACCWV361 and PPACCWV362

Advanced Practice Workshops give formal and informal leaders an opportunity to deepen their understanding and grow their skills in the Integrated Kansas Child Welfare Practice Model. SafeGenerations staff continues to lead the Advanced Practice & Leadership: Part I and Part workshops for DCF practitioners. Plans are being made to transition the facilitation of these workshops to DCF staff in SFY2024.

Part I focuses on the following topics:

- An overview of the integrated Kansas Child Welfare Practice Model
- An In-Depth, Step-by-Step Look at the First 30 Days of a case
- Establishing Working Relationships through the Assessment Interview
- Decision-Making: Assessing and Building Immediate Safety WITH Families
- Involving Networks
- The Kansas Assessment Map & The Building Blocks to Safety

Part II focuses on the following topics:

- Leading for Learning in an Anxious Environment
- Modeling the Principles and Processes through Reflective Supervision

Three Hour Workshops – open to new and experienced staff Immediate Safety Part 1 – Course Code PPCOCWV296

The first days of an assessment can be intense so it's critical that we can make rational decisions as efficiently as possible. In this half-day session, we'll take a focused look at the Kansas Practice Model tools and methods that help us assess immediate safety, identify an immediate safety threat, and make sound immediate safety decisions. This workshop provides a review of how key practice tools can be used to gather information that informs the safety assessment and how the Immediate Safety Scale is used to collaboratively assess safety with family members and other professionals. Participants will gain practice in the use of behaviorally specific, family-friendly language to articulate an immediate safety threat in conversations with the family and safety network members or in preparation for TDM meetings.

Immediate Safety Part 2 – Course Code PPCOCWV298

This workshop provides a review of how key practice tools can be used to gather information that informs the safety assessment and how the Immediate Safety Scale is used to collaboratively assess safety with family members and other professionals. Participants will gain practice in the use of behaviorally specific, family-friendly language to articulate an immediate safety threat in conversations with the family and safety network members or in preparation for TDM meetings. Participants will learn to distinguish between weak and strong immediate safety plans.

Developing the Assessment Summary – PPS2020 - Course Code PPCOCWV293

This workshop provides a practical approach to learning the most efficient way to create the 2020 assessment summary. Help practitioners better understand how to use information from 2019 mapping and safety scaling conversations to develop a full assessment using the 2020, providing families with clear statements of concern regarding worries, danger and safety that bring them hope as they move forward to improve the safety of their children and health of their family.

Assessing Risk – Using the Lasting Safety Scale – Course Code PPCOCWV299

Have you ever wondered, "What does lasting safety have to do with our work"? In this workshop we're going to dig into all things related to the Lasting Safety Scale...why we have it, how to ask it, when to use it and more? Building skills for participants on how to adapt and use the Lasting Safety Scale with adults, children and youth, and how the lasting safety scale can be connected to any decisions about services.

Navigating Denial & Resistance – Course Code PPCOCWV294

Do you ever feel like you get stuck when parents won't 'admit' they hurt their child? You are not alone! These situations are so complex and can feel tricky to navigate. During this session you will learn practical skills, strategies and questions to navigate 'denial' and 'resistance'. Get ready to practice! Build on engagement skills to avoid getting 'stuck" in situations of denial or resistance and help family members be able to move forward to improve safety for children and family members.

Word & Picture Explanations - Course Code PPCOCW0297

So often when we become involved with a family because of an abuse or neglect concern, children are kept to the side as the adults try to sort out the details. This can leave children feeling confused, stressed, and unsettled. In this half-day session, we'll cover the purpose, format, process, and benefits of co-creating a Words & Pictures Explanation so that the children can have honest, consistent, and age-appropriate answers to their biggest questions. This workshop provides an opportunity for the practitioner to work with parents or relatives to develop an explanation everyone can agree on so children have a clear explanation that doesn't leave them feeling unsafe or that they are to blame.

Using the Supervision Tool with Flexibility, Efficiency and Critical Thinking – Course Code PPCOCW0295

In this course we'll look at how to have the Supervision App work *for You* (vs you working 'for' app). Our day-to-day supervision is busy, and the ideal is that the tools we use support of work instead of detracting from it! The Supervision App is designed with that intent! In this half-day workshop, we'll look at how to make the most of the supervision tool and practice using in in different ways based on different supervision scenarios.

Goals: Provide practice and build confidence in using various parts of the Supervisor Tool in ways that best support the growth of workers.

KPM Trainer Certification Process

With the implementation of the Kansas Practice Model (KPM), DCF in coordination with SafeGenerations began a certification process to develop a cadre of trainers to facilitate KPM workshops. During SFY 2022, the first identified PPS practitioners completed certification and are now facilitating PPS Academy and KPMO workshops. The ten practitioners who began certification in May 2021 will complete the process during the summer of 2022. An additional 10 PPS practitioners will begin the certification process in May 2022. In addition, four PPS practitioners who began a master trainer certification process in May 2021 continue progress in their learning. Upon completion, leading the certification process will transition from SafeGenerations to the Kansas master trainers for future groups. The trainer certification process is just one step towards developing a learning culture in Kansas and in building our capacity to continue this trainer development strategy and maintain a cadre for the future.

Certification process:

Prerequisites of Building Well-Being and Safety with Families Part 1 and Part 2 or equivalent and Advanced Practice & Leadership: Part 1 and Part 2, with at least Part 1 completed prior to Step 2 of the certification process and Part 2 completed prior to Step 5.

Step 1: Observe Workshop Delivery

Observe Kansas Practice Model Overview OR Advanced Practice & Leadership: Part

Complete Observation Tool

Step 2: Curriculum Review Calls

Attend five (5) 90-minute Group Curriculum Review Calls led by SafeGenerations or a Certified Master Trainer

Step 3: Co-Deliver Kansas Practice Model Overview with SafeGenerations or a Certified DCF Trainer

Facilitate Select Sections of Kansas Practice Model Overview

Complete Self-Reflection document

Step 4: Deliver Workshop with Colleague

Co-Delivery with another Kansas DCF Trainer Candidate

Video record yourself delivering the workshop in preparation for Step 5

Step 5: Video Review and Certification

Submit 7-8 Confident and 7-8 Not Confident Minutes of video with Self-Reflection document

Participate in a 60-minute Individual Review and Reflection consult with SafeGenerations staff

Submit PPS2020 Case Example to SafeGenerations or Certified Master Trainer anytime during the trainer certification process

SafeGenerations Facilitator Development Workshop, Course Code PPACCW0351

Currently there are 30 DCF staff who have completed the one-day facilitation training. A new group of DCF staff will complete the one-day facilitation training in early 2023. The trained facilitators lead the Questions that Make a Difference series which includes individual and group discussion along with the use of an online course, which focuses on the use of solution focused questions. This course involves eight 1-hour sessions with up to 12 participants in each group. More than 400 DCF practitioners have completed this course. Additional small groups will begin the course during 2023.

In summer 2022, the small group facilitators teamed with a Protection Report Center (PRC) trainer to lead the Risk Intelligent Screening & Assessment (3 sessions) online course for the current PRC practitioners. This course includes individual and group discussion along with the use of an online course, which focuses on making clear and balanced initial assessments. The course will continue to be offered to newly hired PRC staff.

Beginning in spring 2023, the small group facilitators will lead an additional online series, It's Not All On You, which focuses on developing a high impact safety plan with (not for) a family. This online course involves five 1-hour sessions with individual and group discussion. Plans are being made for approximately 200 DCF staff to attend in small groups with up to 12 participants.

Learning Leader Development Program, Course Code PPACCWV370 thru PPACCWV385

In January 2021, thirty-one of the PPS Assessment and Prevention Supervisors along with 44 additional participants were identified as Learning Leaders and started a two-year development program through our contract partner, SafeGenerations. As a part of this development program, these Learning Leaders learned to facilitate Group Learning & Consultation Sessions designed to support practitioners in improving skills in the use of practice tools and practice approaches to support the growth of the practitioners who bring a family forward and the practitioners/supervisors who attend and participate. They also began using Appreciative Inquiry as a practice approach to help practitioners learn from what is working well and to build hope, optimism and momentum in use of the practice. At this time, approximately 50 of the Learning Leaders are working to complete the program requirements. Plans are being made to identify a new group for the development program, which will be led by DCF staff with assistance from our contract partner,

SafeGenerations.

From No One to Network, Course Code PPCOCWV267

Adapted for Kansas, this microlearning is designed to show child welfare workers how to talk with parents and families to identify and build networks of support, using tools like genograms and scripts for connecting with relatives or non-related kin to engage their support for family members. Useful Resources include great questions that can be used to locate and identify additional relatives or non-related kin supports, developed by Kevin Campbell and Andrew Turnell. Pre-requisite for Family Seeing: Family Finding from the Start.

Family Seeing: Family Finding from the Start, Course Code PPCOCW0231 (in-person) or PPCOCWV231 (virtual)

Developed from the week-long boot camp model, this 1-day workshop introduces participants to the theory and practice implications behind this model and will be led by Family Finding Leads. Upon completion of this course the participant will be able to...

- Explain the origins of family finding theory and their implications on current practice
- Identify alternative truths to long-held beliefs about families who are in contact with care systems
- Utilize family finding tools, and know where to find more information about them

Using Engagement Strategies – a KPM Skill-Building Activity, Course Code PPCOCWV268

Adapted for Kansas, this "micro-game" presents child welfare workers with real-world scenarios where you make a series of choices showing how best you would use KPM strategies to support the demonstration of Kansas Practice Model engagement behaviors. Each answer has a different point value assigned, with a maximum of 20 points possible per question. Pick the answer you believe would best demonstrate engagement behaviors with children and families. There are 8 key point questions and it will take you about 20 minutes to complete this activity. Earn up to 160 total points for a perfect score – or try again to improve your engagement skills!

Introduction to Supporting LGBTQIA+ Youth, Course Code PPCOCWV269

Adapted for Kansas, this microlearning teaches child welfare workers about their role when working with LGBTQIA+ youth and how they can best engage and provide support for these youth. Resources are provided for youth, family members and professionals. Pre-requisite for an in-person course which will be provided during SFY2024 for all DCF staff. Learning Resources

Origins and Overview of PSB in Children – Course Code PPCOCWV299

Introduces Problematic Sexual Behaviors (PSB) in children to improve an understanding of how problematic sexual behaviors develops in children, identifying risk factors and misconceptions, as well as safety planning and an overview of treatment options for children experiencing problematic sexual behavior. Participants will be able to:

- Identify at least 3 differences between problematic sexual behavior and typical sexual behavior.
- List 4 factors that can contribute to problematic sexual behavior.
- Identify at least 2 misconceptions surrounding children's problematic sexual behavior.
- Describe treatment options for children with problematic sexual behavior.

Collaboration Hub

The Kansas Practice Model Collaboration Hub was launched in February 2021. This resource was created

for practitioners, and by practitioners, to give space for staff to collaborate, share their knowledge, ask questions, and honor the good work being done with the Kansas Practice Model. Kansas PPS practitioners have access to the SafeGenerations Microsoft Team where it is currently housed. DCF plan to move the Collaboration Hub to the State of Kansas Teams tenant during CY 2023. SafeGenerations staff continue to assist the Learning and Development team in the development of the site and provide technical support. Additional resources and updates are added to the Collaboration Hub as needed.

The Collaboration Hub includes the following pages:

- Home Video tour of the Collaboration Hub and links to other pages.
- General State Implementation Statewide Kansas Practice Model updates and videos containing inspiring messages from leadership.
- Practice Model Learning Resources Resources include guidance on Kansas Initiative for Decision Support (KIDS) for each case type, the Kansas Knowledge Bank which includes answers to frequently asked questions, a Case Example Library, and access to the DCF Training Center
- Forms, Documentation, and Resources links to workflows, practice guides, real life examples for each of the Kansas Practice Model strategies.
- Success, Growth and Stories from the Field Videos of Appreciative Inquiry Interviews completed frontline practitioners.
- Learning and Development Team Directory of Learning Leaders, Practice Leaders, Small Group Facilitators, Certified Trainers, TDM Facilitators and Back-Ups, and Family Finding Leads.
- Supervision and Supervisor Resource Guided Supervision App and Getting Started Guide
- 2021 KPM Showcase (recently added) Videos of the Presentations and Shout-Outs from the KPM Showcases held in 2021.
- 2022 KPM Showcase (Recently added) Videos of the Presentations and Shout-Outs from the 2022 Showcase.
- PPS Training (under construction) Calendar of learning opportunities including initial and ongoing workshops.

Kansas Practice Model Showcase

Kansas began holding an annual KPM Showcase in December 2021 with the second being held in November 2022. These events showcase the work our practitioners, supervisors, Learning & Development specialists, and leadership are learning and practicing in their work with children and families. The daylong event is filled with lots of energy as we bring together child protection practitioners, supervisors, and leaders to focus on success, on what works for practitioners and families and to refresh our enthusiasm for the work. Plans are being made for the next Showcase to be held in the summer of 2023.

Recognizing Child Maltreatment Series

In collaboration with Children's Mercy Hospital in Kansas City, DCF is hosting classroom and webinar workshops provided by the Child Abuse Pediatricians with Children's Mercy's Division of Child Adversity and Resilience. The purpose of these workshops is to increase the knowledge and expertise of CPS Specialists and Investigators in recognizing injuries related to possible child abuse and neglect and to determine when medical attention should be requested. Plans include providing two classroom workshops and 3-5 webinars each fiscal year. The webinar workshops will be recorded to develop online courses for future use.

- Recognizing Child Maltreatment: Bruises, Burns, Fractures, Head Injury and Abdominal Trauma, Course Code PPPSCW0211
- Recognizing Child Maltreatment: Medical Child Abuse, Neglect, Failure to Thrive, Trafficking and Child Sexual Abuse, Course Code PPPSCW0212

A contract is being finalized for the University of Kansas (KU) Medical Center (Wichita) Child Abuse Pediatricians to offer two in-person workshops each year in Wichita and western Kansas. Workshops will begin in Spring 2023.

• Recognizing Child Maltreatment – Physical Abuse and Neglect, Course Code PPCOCW0265

Collaboration with Kansas Coalition Against Sexual and Domestic Violence (KCSDV)

DCF and KCSDV have been collaborating to provide training addressing domestic violence in child welfare on a regular basis since January 2021. Two core and two advanced trainings for child welfare professionals are offered each spring and fall with additional trainings and webinars being offered throughout the year. The audience includes Child Welfare Professionals, including DCF Staff, Reintegration and Family Preservation Case Managers and Family Support Workers; Social Workers; Mental Health Professionals; Foster Home, Kinship, and Adoption Workers; CASAs; and Domestic and Sexual Violence Advocates. Kin/relative, foster, and adoptive families are also welcome and encouraged to attend. The core training content focuses on getting to know the family including identifying risk and dangerousness factors of batterers, understanding the safety and protective actions of the non-abusive parent, and supporting the parent/child bond between children and non-abusive parents. During the advanced training, participants practice strategies and skills to document batterer tactics and accountability, as well as the safety and protective actions of the non-abusive parent. Participants also learn how to identify interventions appropriate for families experiencing domestic violence and interventions that are not recommended. A PDF copy of the *Domestic Violence Manual for Child Welfare Professionals* is provided to all participants and utilized as a training tool during each training. In addition to training, KCSDV project staff participate in collaboration building opportunities including working groups, meetings with DCF staff and other child welfare professionals, and ongoing state committee meetings, including the Supreme Court Task Force on Permanency Planning and the Family First/ KS Strong Statewide Interagency and Community Advisory Board.

Safe Sleep Instructor Training

Since SFY 2020, approximately 50 DCF staff have 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.

To become a KIDS Network certified SSI the following criteria must be met:

- 1. Attend the (2) day training
- 2. Sign and abide by the rules/procedures set forth in the SSI contract.
- 3. Achieve a score of at least 80% on the post-test
- 4. Achieve a score of at least 80% on the crib demonstration

To maintain certification with the KIDS Network, SSIs must:

- 1. Train at least 10 professionals in their local community (or virtually) and input all data by the end of each May.
- 2. Facilitate/co-facilitate at least (1) KIDS Network Safe Sleep Community Baby Shower/Crib Clinic and input all data by the end of each May.
- 3. Attend annual the KIDS Network Safe Sleep recertification course
- 4. Attend at least two bi-monthly Safe Kids Safe Sleep Instructor technical support meetings Currently, DCF has a total of 39 active SSIs. Through combined efforts of the SSIs more than 2000 professionals at DCF, CWCMP staff, and other community partners across the state have completed a 2.5 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.

C. Child Welfare Supervisors

Kansas continues to recognize the need for strengthened supervisory capacity, particularly in oversight and support of child welfare practice changes as Kansas continues implementation of the Kansas Practice Model. The need to further develop Assessment and Prevention Supervisors has been highlighted by the additional challenges of COVID-19 that have limited face-to-face interactions, opportunities for new hires to shadow experienced practitioners and the challenges of workshops held virtually rather than in person. This new requirement would be in addition to the initial agency requirements required for new supervisors in DCF.

Beginning in SFY2024, Kansas will implement the use of the National Child Welfare Workforce Initiative Leadership Academy for Supervisors (LAS) for building leadership skills with our supervisors. This curriculum consists of six online modules based on the NCWWI Leadership Model and includes 21 contact hours of self-directed online learning held over a 7-9-month period of time. This program is designed to be completed by supervisors with one-year minimum experience who have made the initial transition to supervision. Cohorts will spend 36 hours online, and an additional minimum of 9 hours in synchronous learning activities to provide an opportunity for supervisors to share their progress and receive peer and instructor feedback.

LAS was developed to address the following NCWWI competencies:

- Adaptive Leadership
- Strengths-Based Leadership
- Cultural Humility

All supervisors attending LAS will complete a personal learning plan and a change initiative project to contribute to a systems change needed within the agency. Because this is being implemented as an agency initiative, the Leadership Academy for Supervisor Learning Network (LASLN) will be available after each module and provide space for participants to network with facilitators and other learners to discuss and reinforce what was covered in the previous module.

Delivered online, LAS includes an Introductory Module and five (5) modules based on the NCWWI Leadership Model:

- 1. Introductory Module
- 2. Foundations of Leadership
- 3. Leading in Context: Building Collaboratives
- 4. Leading People: Workforce Development
- 5. Leading for Results: Accountability
- 6. Leading Systems Change: Goal-Setting

Statewide Supervisor Meetings and Annual Supervisor Conference

Quarterly Statewide Supervisor Meetings have not been held since March of 2020 due to COVID restrictions. They will resume in March 2023 and the next Annual Excellence in Supervision Conference will be held in-person on September 6-8, 2023. Participants at quarterly supervisor meetings review outcomes and issues related to safety, permanency and well-being, as well as Kansas Practice Model implementation efforts and other initiatives. These statewide meetings provide opportunities for supervisors to network, learn about services available in Kansas, receive information about new initiatives, gather input from supervisors across the state from different agencies, and provides opportunities to complete preapproved CEU's. Plans are being made to focus on safety planning during the upcoming meetings and collaborate with KanCoach staff who will lead coaching circles.

Each year, DCF with the assistance of Mainstream NonProfit Solutions holds the Excellence in Supervision Conference. The conference is open to supervisors from DCF, CWCMPs, Tribal Partners, Child Placing Agencies and Family Service grantees. The conference was held virtually when COVID restrictions were in place but resumed to in-person in SFY2023. The goal of the conference is to bring together supervisors from across the state to network, build their leadership skills, and improve their resiliency.

Supervisor Training (DCF and CWCMP)	SFY	SFY	SFY	SFY
	2020	2021	2022	2023
Excellence in Supervision Conference	117	152	145	133
Pre-Conference Workshop				
The Neurobiology of Stress and Brain-Body	106			
Practices (PPCNCW1907)				
Ethics in the COVID-19 and Social Media Era		143		
(PPCNCW2001)				
It is NOT Personal: Keeping the Right			145	
Perspective				
The Practical and Ethical Considerations of Stress,				115
Burnout and Compassion Fatigue for Profession				
Helpers (PPCNCW2201)				

D. Kansas Strong for Children and Families

The University of Kansas School of Social Welfare (KUSSW) and its partners, the Kansas Department for Children and Families (DCF) and the state's network of privatized providers of adoption and foster care (KVC Kansas, Saint Francis Ministries, TFI Family Services, Cornerstones of Care, and DCCCA), in concert with the Court Improvement Program (CIP), are part of a federal five-year grant to develop and deliver Kansas Strong for Children and Families (KS Strong).

A goal of the project is to implement a coaching program for public and private supervisors across child welfare programs to address basic social work practices in four areas: parent and youth engagement; risk and safety assessment; relative/kin connections; and concurrent planning. Plans include training on coaching for supervisors, implementing coaching services, and developing a comprehensive set of methods and tools for supervisors to deliver coaching to frontline workers. This initiative started with a pilot in June of 2020 and was fully implemented to all regions, all child welfare agencies by July 1, 2021. The model chosen to adapt for Kansas is the Atlantic Coast Child Welfare Implementation Center (ACCWIC) skills

based coaching model. It has been successfully launched and operating in New York City child welfare. Supervisors have opportunities to attend virtual and/or in person training, attend skill based collaborative practice sessions and have personal coaching from a trained KanCoach to learn and enhance their coaching skills to utilize with front-line workers. As with other workshops delivered since March 2020, these classes have been successfully delivered using a virtual platform to allow supervisors from all participating child welfare agencies to attend. As of January 2023, 116 supervisors have completed the 12-month project, 84 supervisors remain active and a new cohort began the initial training in January 2023. There are plans to begin offering the coaching program to administrators and directors spring 2023. The involved agencies are in the process of making plans to sustain the coaching model in Kansas beyond the grant period.

Item 28: Foster and Adoptive Parent Training.

How well is the 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) that addresses the skills and knowledge needed to carry out their duties with regard to foster and adopted children?

Systemic Factor 5: Service Array and Resource Development

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

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

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.

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

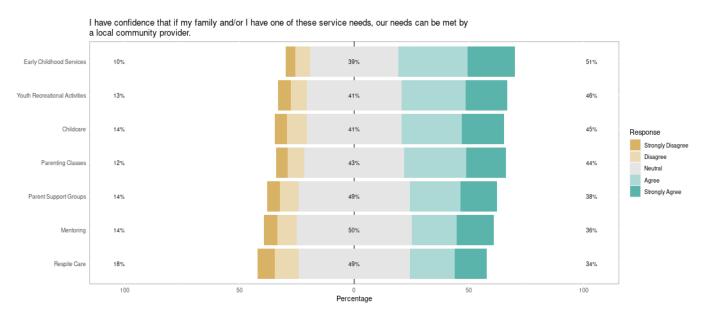
Service Access Survey Item	State	Mother	Father	Relative	Non- Relative	
I can usually find services in my community that can help me with things my family and/or I need.	3.6	3.7	3.7	3.5	3.1	
It is easy to access services in my community when my family and/or I need them.	3.5	3.5	3.4	3.4	3.2	
Once I find 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 (ICAB) 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 ICAB will be created within each DCF Region. The local advisory boards will communicate and share information with a statewide ICAB. State ICAB will meet at least quarterly and regional will meet three times a year.

In 2019 and 2021, the University of Kansas Center for Public Partnerships (KUCPPR) partnered with Kansas Family Advisory Network (KFAN) to deliver the Kansas Parent Survey, in all DCF regions, to families in a variety of settings from offices, schools, grocery stores, churches, etc. Over three hundred surveys were completed by parents and caregivers who were involved with the child welfare system. In 2021, more than six hundred surveys were completed by parents and caregivers who may or may not have been involved in the child welfare system . Survey results were then compiled and synthesized by KUCPPR. In the Childhood & Parenting section of the survey, Confidence in Service Array, both years data revealed the following:



Results reflect families had confidence community-based services were available to meet their family's needs in the categories of early childhood service, youth recreational activities, childcare, parenting classes,

parent support groups, mentoring, and respite care. DCF is educating communities about 1800children.ks.org, a resource website, and parent helpline, 1-800-CHILDREN.

University of Kansas School of Social Welfare surveyed and interviewed families who participated in the Family First Kinship Navigation program, about their experience. Survey results indicated a need for additional kinship supports, such as healthcare, educational assistance, finances, transportation, social and community supports. In SFY22, DCF formed a partnership with FosterAdopt Connect in Johnson and Wyandotte counties to strengthen services available to kinship families.

The Family First Interagency Community Advisory Board (ICAB) and the Kansas Family First Family Council include stakeholders with lived experience. Parent Survey feedback was shared with these statewide groups in SFY22. Ongoing communication and feedback occur at quarterly and biannual meetings.

Communities in Schools (Emporia) – families have access to services without making a report to DCF. Services are community based. Families are referred by a school liaison partially funded by DCF.

Kansas has since improved customization of services through implementation of new assessment tools through the KPM 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.

McIntyre vs. Howard Settlement Agreement is officially monitored by a neutral party, Center for Study of Social Policy who provides additional oversight regarding assessments, mental health provisions and services to children and families experiencing foster care.

Case read results suggest an opportunity for Kansas to grow in measuring the family's access to services. Kansas recognizes the opportunity to strengthen collaboration with our state agency partners to facilitate service access for families. Kansas implemented one strategy, Mental Health in Schools, a collaborative initiative between KDADS and KSDE, which brought mental health services into the school setting. This program has improved availability to access to mental health services. By being available in school, families are not pressured to schedule and meet appointments outside of school. A pilot began in school year 2018, was deemed successful and has since expanded to include fifty-eight school districts.

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

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.

Services in 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.

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Kansas recognizes an area of opportunity related to gathering data to assess the functioning of Item 30, Individualizing Services.

A survey was sent to the two Citizen Review Panels-Intake to Custody and Custody to Transition with 23 responses received. Rating system was: Usually Effective, Sometimes Effective, Rarely Effective and Not Effective.

How effective is the state in individualizing and/or tailoring services to meet the unique needs of children and families?

Just over one-half (n=12) of responses rated as "usually or sometimes effective".

Systemic Factor 6: Agency Response to the Community

Item 31: State Engagement in Consultation with Stakeholders Pursuant to CFSP and

APSR. How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

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 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.

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

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

A survey was sent to the two Citizen Review Panels-Intake to Custody and Custody to Transition with 23 responses received. Rating system was: Usually Effective, Sometimes Effective, Rarely Effective and Not Effective.

How effectively does the state coordinate services or benefits with the services or benefits of other federal and federally assisted programs serving the same population?

Two-thirds (n=17) of the 23 responses rated as "usually or sometimes effective".

How effective does the state collaborate with stakeholders (tribal representatives, consumers, birth parents,

grandparents and other relatives, service providers, foster families and foster care providers, juvenile court and other public and private child and family services agencies) in improving services to children and families?

Over one-half (n=15) rated as "usually or sometimes effective).

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

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

During CFSR Round 3, Kansas received an overall rating of Strength for Item 33: Standards Applied Equally.

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.

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

During CFSR Round 3, Kansas received an overall rating of Strength for Item 34: Requirements for Criminal Background Checks.

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.

Kansas Department of Health and Environment (KDHE) will only issue a full license after the prospective foster parents both clear the criminal background, fingerprint and child abuse registry check. DCF does not claim IV-E funding until KDHE has issued a full license.

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

In SFY 2014, Kansas recognized an area of opportunity related to the functioning of Item 35, Diligent Recruitment (DR) of Foster and Adoptive homes and initiated a Continuous Performance Improvement project (CPI). This project intended to ensure 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 first 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.

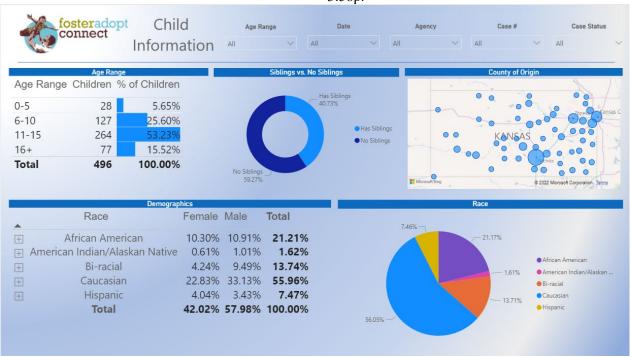
DCF and its community and contracted partners have since worked together to develop a new cohesive Diligent Recruitment Plan. The first publication of this plan occurred in 2016 and was developed in partnership with Capacity Building, Center for States for guidance and support. Kathy Ledesma, the Program Area Manager for Adoption and Christine DeTienne, the State/Territory Liaison. In SFY 21-22, it has since undergone some clerical updates by FosterAdopt, Connect (FAC) who now oversees the Diligent Recruitment Plan and updates.

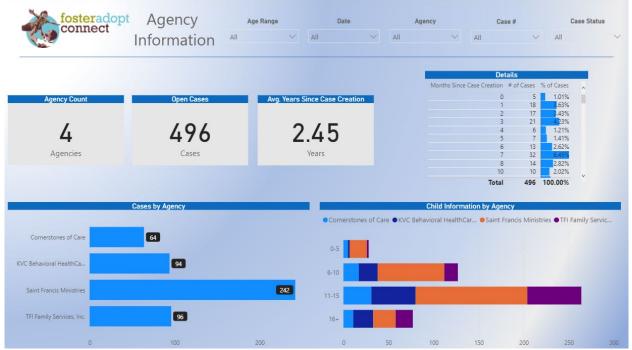
In addition to the statewide Diligent Recruitment Plan, each CWCMP and Child Placing Agency (CPA) develops an individualized recruitment plan which includes general, targeted, and individual recruitment strategies, see Attachments 36-40. Participants in their targeted recruitment activities include a 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.

Foster Adopt, Connect (FAC) administers the adoption exchange. As of April 2022, 496 children were on the exchange. These children are legally free for adoption and are without an identified adoptive resource.

Administrative Data

Adoption Exchange Demographics, data source: FosterAdopt Connect Adopt KS Kids PowerBI report 4.22.2022 @ 3:58p.





Number of Inquiries to Adoption Exchange

SFY 2019	6304
SFY 2020	7057
SFY 2021	5231

Data Source: FosterAdopt, Connect, Adopt Kansas Kid

While there is no specific data related to the exact number of follow-ups to the inquiries on the Adoption Exchange, it prioritizes attention to inquiries, as well as customer service and education through specific practices outlined. Upon registration to the Adopt Kansas Kids website, families are provided an initial packet of information that includes educational resources regarding the impact of adoption, as well as information pertaining to the adoption process itself, and what families can expect when inquiring on children through the Adopt Kansas Kids. The Adoption Exchange maintains an inquiry tracking system that is used to engage follow-up from CMP's and allows Adopt Kansas Kids staff to provide important customer service and timely response to families that have inquired. CMP's receive a monthly report that includes a detailed list of open inquiries, allowing them to review and provide a response regarding the inquiry status. During SFY 2022, 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

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.

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.

In Spring of 2022, KS approached the different regions of the state to gather input and partner with local communities to address how to discuss collaboration regarding reducing the use of congregate and ensuring children and youth continue to be placed in the least restrictive, family-like settings within their home communities. As part of this effort, many established congregate providers were also engaged to discuss looking at different models and changes they could implement in their facilities to better serve the community's needs. Part of this effort was also to help message as the need for foster care reduces so too does the need for congregate care; thus, providers are encouraged to look at other ways to service families and keep children with their families. As the efforts continued throughout the summer, many regions noted gaps in services for mental health and IDD supports. With the continued utilization and expansion of Family First grants and the implementation of FRCs, the intent is KS continues to fill these gaps and empower communities to keep children safe in their homes. When children cannot be safe in their homes, they are placed first with relatives and then in family foster homes prior to the use of congregate care.

Outcome	SFY						
	2016	2017	2018	2019	2020	2021	2022
Of all children in out of home placement, what percent are placed with a relative? Standard: 29%-50% for SFY21 & 22	33%	33%	32%	33%	34%	40%	44%

^{*}change contract outcome to 50%

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.

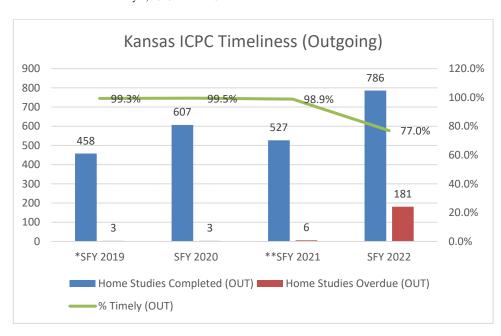
Kansas NEICE Administrative Data

SFY	Home Studies Completed (IN)	Home Studies Overdue (IN)	% Timely (IN)
*SFY 2019	218	19	91.3%
SFY 2020	381	42	89.0%
**SFY 2021	298	129	56.7%
SFY 2022	403	50	87.6%

SFY	Home Studies Completed (OUT)	Home Studies Overdue (OUT)	% Timely (OUT)
*SFY 2019	458	3	99.3%
SFY 2020	607	3	99.5%
**SFY 2021	527	6	98.9%
SFY 2022	786	181	77.0%

Resource: National Electronic Interstate Compact Enterprise (NEICE)

^{**} Data for SFY is from July 1, 2020 to SFY 2022.

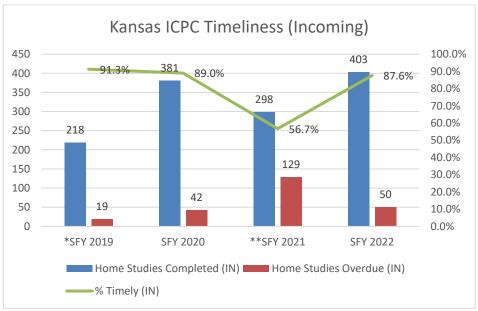


Resource: National Electronic Interstate Compact Enterprise (NEICE)

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

^{*}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)

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.

^{*}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 June, 2022.