# The State of Idaho "Keeping Children Safe" Citizen Review Panel

# Statewide Annual Report 2011 Recommendations



# Idaho's "Keeping Children Safe Panels"

Recognizing the importance of public participation and community engagement, beginning in 1995, the Department of Health and Welfare organized citizen review panels in each of its seven regions to examine how Idaho's Child Protection System works and to make recommendations for improving the system. The panels have focused on providing an independent analysis of how the child protection system responds to abuse and neglect and the overall community supports for children and families in crisis.

In 1996, Congress amended the Child Abuse Prevention and Treatment Act (CAPTA). In its amendments to CAPTA, Congress required that states must establish Citizen Review Panels by July of 1999 in order to receive funding for the Child Abuse and Neglect State Grants Program. While this was the impetus for many states and their Citizen Review Panels, Idaho developed its Citizen Review Panels several years prior to the requirement.

Idaho's Citizen Review Panels have elected to call themselves Keeping Children Safe Panels. Throughout Idaho, most of the panels meet monthly, review cases of child abuse and neglect, attend child fatality reviews, go to court, and observe the implementation of Department policies and procedures as they interact with families and other agencies. Once a year the panels submit a report of their collective experiences, findings and recommendations to the Director of the Department of Health and Welfare.

There are approximately fifty-two (52) Keeping Children Safe Panel members in Idaho. Once a year, they meet together to review their activities, share ideas, and receive additional training. Each panel member serves up to eight hours a month. These citizen volunteers have repeatedly demonstrated their commitment to Idaho's children and a willingness to involve themselves in the work of making our communities safer for children.

On October 13, 2011, during their annual statewide meeting, the Keeping Children Safe Panel members discussed their regional issues and concerns. Their findings are summarized in the following "Keeping Children Safe Statewide Annual Report and Recommendations 2011."

# Idaho Keeping Children Safe Panel 2011 Recommendations

### I. FOSTER CARE

RECOMMENDATION: Seek subsidized funding that will allow those persons who are guardians to receive appropriate funding to assist them while the departments work with the biological parents.

**A. Kinship Care** – As the trend continues not only in Idaho but also nationally to make every effort to keep children in their homes when it is safe as opposed to taking them into care, we recommend that the department:

**Department response:** Since the mid-1990's Idaho has had guardianship assistance available for both relatives and non-relatives. However, under state law, a termination of parental rights is required and the program is funded entirely with state general funds.

The Fostering Connections Act of 2008 gave states the option of using federal funds for a Relative Guardianship Assistance Program (RGAP). After a lengthy process, our state plan has been approved.

Who is eligible? Youth, 14 years and older, who have been living with a relative foster parent(s) and who, without guardianship assistance, would remain in Department custody. The youth must demonstrate a strong attachment to the prospective legal guardian and the relative must commit to caring for the youth on a permanent basis.

What it will mean for youth in foster care. The opportunity to exit foster care and have permanency by continuing to live with relatives and maintain important family connections. It is ideal for the older youth who does not want to be adopted and it does not require a termination of parental rights. One condition of RGAP is that the youth has been consulted regarding the kinship guardianship arrangement.

What it will mean for the relative guardian: It will mean making a legal and emotional commitment to their relative youth. The possibility of adoption must be addressed with the relative caretaker. RGAP is very similar to Adoption Assistance Program in which the ongoing assistance can include a cash payment and Medicaid to support the child until age 18. The youth and each of their siblings will have a Guardianship Assistance Agreement and a separate cash payment.

What will it mean for the youth's siblings? Any siblings of the RGAP eligible youth will be automatically eligible for RGAP when they reside in the same relative home as the eligible sibling.

What will it mean for the youth's parents? Parents will not have custody of their children who are in the relative's legal guardianship. It will be the responsibility of the youth and the guardian to determine an appropriate and safe level of contact. Parents will be expected to pay child support as they are still the legal parents and financially responsible for their child(ren) and their parental rights have not been terminated.

# RECOMMENDATION: Increase awareness of the dangers and damage that illegal drug use and pornography pose to the youth of Idaho.

**B.** Children continue to be at risk for exploitation and direct harm from the effects of either drugs or pornography.

**Department Response:** Local law enforcement agencies offer a variety of workshops and day trainings on the issues of illegal drug use and pornography for professionals, parents, and foster parents. These workshops are typically provided by law enforcement task forces who are familiar with the local issues in these topic areas. These trainings inform participants about illegal drug use and pornography. Most of these trainings are offered free of charge and are offered more than one time a year.

# **RECOMMENDATION:** Increase the reimbursement rate to foster parents.

**C.** Foster Care reimbursement rates

**Department Response:** The Joint Finance and Appropriations Committee appropriated \$650,000 to increase the foster care reimbursement rates. The increase in the foster care stipends was a welcome surprise for child welfare. When the child welfare budget was set in early March, the Department's recommendation to increase foster care reimbursement rates was not included. In the waning days of the Joint Finance and Appropriations Committee's meetings, a proposal to increase foster care payments was introduced by Rep. Wendy Jaquet, D-Ketchum, and seconded by Rep. Shirley Ringo, D-Moscow. Rep. John Vander Woude, R-Nampa, spoke out in favor of the motion. "I believe that it's very critical for these children at this age to place them into families and to protect them and give them the solid environment that they need," he said. "These are challenging kids, and I think we really should be supporting families that are willing to take on those challenges." The proposal received unanimous support from the Joint Finance and Appropriations Committee.

RECOMMENDATION: Structure PRIDE training so that <u>some</u> of the classes can be taken online or through video conferencing. Further explore child care options to assist families in attending PRIDE.

**D.** The current structure of PRIDE training can be cumbersome for relatives; foster parents living in rural communities or who have work schedules that do not allow them to attend the current PRIDE training. Child care may also create conflicts for relatives/foster parents to attend PRIDE.

**Department Response:** Because PRIDE is a practice model that includes an assessment component, it is important to continue the group structure of PRIDE as a best-practice model. In addition to gaining knowledge, attendance at PRIDE encourages the building of supportive relationships with other potential resource parents, existing resource parents, and department staff. Consideration of alternative delivery methods of PRIDE continues to be included in the PRIDE Contract. Each Region has the ability to "waive" or "vary" certain non-safety requirements including training delivery on a case-be-case basis, however it is best practice to continue the group learning structure in order to be able to fully assess the prospective family.

This spring, CFS evaluated the content of PRIDE's 9<sup>th</sup> session which includes guidance related to the "nut and bolts" of being a foster parent. Recruiter Peer Mentor's (RPM's) will now deliver the topics of this session within the home of the prospective foster family either following completion of the other PRIDE sessions or immediately after an expedited placement is made with relatives or fictive kin. Session 9 will focus on a panel made up of current foster parents, birth parents and youth.

### II. LEGAL CHARGES/LEGAL REPRESENTATION

RECOMMENDATION: Establish minimum sentencing guidelines for the judicial system when sentencing a "felony injury to child" charge. This will allow the presiding judge more discretion in the overall length of the sentence, with a minimum sentence of 5-7 years.

**A.** Currently if a perpetrator is charged with Felony Injury to Child, the perpetrator can only be sentenced to a maximum of 10 years in prison.

**Department Response:** Children and Family Services does not have the authority to establish sentencing guidelines for the judicial system. Although Chapter 15, subsection 18-1501(1) states that "injury to a child is punishable by imprisonment in the county jail not exceeding one (1) year, or in the state prison for not less than one year nor more than ten (10) years," section (3) describes felony injury to a child. In that section it appears there could be stiffer penalties under other sections of the law. More specifically, it states:

"If a child suffers bodily injury or death due to a violation of this subsection, the violation will constitute a felony punishable by imprisonment for not more than ten (10) years, unless a more severe penalty is otherwise prescribed by law." Other sections of the law give the judicial system additional sentencing options, depending on the type and severity of the crime committed.

RECOMMENDATION: The Department of Health and Welfare needs legal standing and legal representation in all Child Protection cases.

**B.** The Department of Health and Welfare does not have legal representation and isn't considered a party to the civil action. Currently, the Department relies on county prosecutors to represent the State of Idaho leaving the Department without its own voice in court. What the Department may feel is in the best interest of the child may not be represented by the county prosecutor. This can create a conflict of interest within the county prosecutor office if they are trying to prosecute criminally as well as the civil CP action.

**Department Response:** The Department continues to work towards a solution for legal representation. Currently financial resources are not in place to hire additional attorneys or to implement party status of the Department. However, the Department continues to work with the Supreme Court Improvement Committee, the Attorney General's Office, and the Prosecuting Attorneys Association to identify and address areas of the state where legal representation has been problematic. Legal representation is being monitored in all judicial districts of the state and the Department is currently gathering more information related to financial and systematic barriers.

### III. OLDER AND AGED-OUT YOUTH

RECOMMENDATION: Extend Medicaid benefits to 21 years-of-age to youth who have aged out of foster care.

**Department Response:** Currently, youth who leave foster care receive Medicaid benefits to age 19; Idaho Medicaid rules would need to be amended to allow older youth Medicaid coverage until age 21. However, even though the philosophy of this recommendation is sound, as it is in the best interest of foster youth to have connections and additional support as they leave foster care, due to the fiscal and systemic impacts, it is not financially feasible at this time.

RECOMMENDATION: By October 2012, each region will share information they have on their respective Independent Living programs to determine what works and what doesn't. The regions could look at implementing a volunteer mentoring program as one way of supporting these often at-risk youth.

**A.** Older youth in care often face unique challenges and extra hardships.

**Department Response:** Regions were asked in 2011 to provide a template of regional Independent Living services that would be posted on the internal share

point site so that all social workers within IDHW could view what services where provided for youth throughout the state.

In addition, the federal government required information be collected from the State of Idaho Independent Living program. This information will be used to evaluate the level of service delivered to older youth in Idaho in particular areas. Nationally this data will be collected from all the states as a national research study on the use of Independent Living dollars also called Chaffee funding. The study's goal is to evaluate the states use of Chaffee funding in connection to the delivery of independent living services to youth in each state. This is the first national study/evaluation since implementation of Chaffee Funding in 1999.

# IV. EDUCATION/PREVENTION

RECOMMENDATION: Appoint a liaison from DHW (Behavioral Health) to communicate with the school districts to ensure adolescents have proper mental health care. Start a wraparound process for families whose children suffer from mental health concerns. We further recommend a more formalized process of collaboration and protocol for crisis education to the districts.

**Department Response:** Idaho Department of Health and Welfare Children's Mental Health Program has a specialized unit who provides Wrap around services for the most vulnerable teens that qualify for the program. These services are provided in a team approach to deliver specialized services to teens. Children's mental health along with the school, parents, and often times other community based services work collaboratively to ensure the best outcome for the teen. These services are not provided to all youth. These services are only for youth involved with Children's mental health and meet eligibility requirements to receive wrap around services.

**A.** School Districts do not appear to communicate with the partners within their communities to ensure adolescent's mental health needs are met, especially as it relates to adequate funding available to families.

RECOMMENDATION: Establish a work group to look at the use of school based services via Medicaid. School based Psychosocial Rehabilitation for families can allow for 1 on 1 mental health assistance in the schools.

**Department Response:** IDHW participates in the Idaho Interagency Council for Secondary Transition. This group of professionals discusses the resources available to youth in high school who are dealing with mental health issues and/or developmental delays that in turn impact there transition from high school to adult living. Services that are available to these students are shared through networking during the collaborative meetings. The information taken from these meeting is shared with social workers working with older youth, foster families,

biological families and community partners. This group works hard to educate both students and parents on resources available to families.

**B.** Allows for ability of child to remain in their respected school program, and not enter a "day treatment school setting, or residential setting."

# **RECOMMENDATION:** Research and review generational cycles of clients within Child Protection.

C. Adolescents, who have aged out of foster care, may have children of their own who enter foster care at a later date. This generational impact needs further assessment to determine if appropriate services were provided and if they were effective. Assessment is necessary to determine the approach taken by the Department. This allows the Department to develop a more effective approach.

**Department Response:** The Department has referred this recommendation to our University Partners at ISU. A review of current literature and research on breaking the cycle of abuse is needed to better understand the contributing factors associated with generational cycle of clients. This project will commence within the current school semester. We will report research findings to the panel.

# RECOMMENDATION: Obtain <u>dedicated</u> funding from legislature to establish Community Resource Workers in every school district.

D. KCS Panel members continue to support the recommendation that DHW continue efforts to obtain DEDICATED funding to be used under the oversight of the Department to restore Community Resource Workers in all elementary schools in the State. These services have a proven track record in being effective in increasing the well-being of children and school readiness.

**Department Response:** The Department continues to recognize the excellent services Community Resource Workers offer to families and communities in Idaho. There are currently 24 Community Resource Worker positions throughout the state. These workers continue to have access to \$300,000 in Emergency Assistance funds they can utilize for qualified families in their schools. Unfortunately due to budget constraints, the Department is unable to dedicate funding to allow CRW positions in all schools throughout Idaho or to expand the CRW program. However, Department Navigators do support schools in regions without CRW positions. Navigators also support schools in all regions during the summer months when schools are not open.

RECOMMENDATION: Continue efforts for funding preventative services that would support the families to address safety concerns which may result in children being declared in imminent danger by law enforcement.

**E.** The Department is obligated to ensure that children remain in their respective homes when it is safe as opposed to taking them into care. A Regional assessment of what resources are available to department staff is needed to determine what areas may need improvement to further support the Department's ability to provide "Reasonable Efforts" to prevent removal.

Department Response: In State Fiscal Year 2012, the Department served approximately 562 families via in-home services. While the number of families receiving in-home services is slightly down from FY 2011, the number of children removed from the home was also down. The trend continues to show an increase in in-home services with a decrease in removals. With the launch of the state-wide central intake center the Department continues to integrate components of a differential response system. This system allows the Department to respond differently to accepted or screened-in reports of child abuse and neglect based on factors such as the type and severity of the maltreatment, the agency's history with the family, the age and cognitive abilities of the child, and the willingness of the parents to participate in services. The Department continues to look at ways to fully integrate a differential response system.

#### V. PREVENTION

RECOMMENDATION: Pursue Legislation to establish a child fatality review team in all counties with statewide oversight. KCS panel recommends a fatality review be put in place for child suicide or other unnatural deaths. Members may include coroner, law enforcement, physician, KCS panel member, DHW representative, any other agency/authority case by case basis.

**A.** There is no uniformity in death review issues and the process is not required; therefore, it does not occur.

**Department Response:** While specific legislation was not passed during the last legislative session, there continues to be tremendous community support for a statewide fatality review team. In May 2012, the Governor signed an Executive Order allowing the Governor's Task Force to convene a child fatality review team. The Department, Idaho Voices for Children, and the Governor's Task Force, are working to finalize protocol for the review team with an anticipated launch date of January 2013.

RECOMMENDATION: Research the existing Idaho Public and 211 websites to see if they need to be more user friendly for the public.

**Department Response:** 211 has a recently updated website (<a href="www.211.idaho.gov">www.211.idaho.gov</a>) where all of the resources throughout the state can be accessed. From the website one could search the online resource database for

over 3,600 resources and it is very user friendly. All resources within the database are aimed at addressing the needs of the most vulnerable of Idaho's citizens. Resources must be low-cost, sliding scale or free to meet 2-1-1 eligibility. A simple word like "food" will yield over 300 results including free meals, food banks and where to go in your area to apply for food stamps. A person can refine the search by adding their zip code and it will reduce the number of resources to only those near them.

RECOMMENDATION: If needed, create a statewide website with links to various regional/county resources listed in a simple viewing format with accessible links. Each region will submit resources and links to be added to the website.

### B. Public Website

**Department Response:** The Keeping Children Safe Panel currently has a webpage on the internal SharePoint site for employees with the Department of Health and Welfare to access information regarding the panel. KCS also has a webpage on the external Department of Health and Welfare site for the public to access information about the Idaho's Keeping Children Safe Panel.

RECOMMENDATION: The KCS website can be embedded in the State of Idaho website for recruitment opportunities, as well as links to resources in each region.

# Idaho "Keeping Children Safe" Regional Panel Activities During 2011

# Thank you to the following regional Keeping Children Safe Panel members!

# Region 1

Co-Chair: Verna Gabel, Sandpoint Co-Chair: Jim McCuaig, St Maries Richard Griffin, Cataldo Mary Vail, Sandpoint Beverly McCuaig, St Maries Leah Stern, Coeur d'Alene Darleen Castillo, Post Falls Fred Cruzan, St. Maries DHW Liaison: Stacy White

# Region 2

Co-Chair: Doris Ferguson, Lewiston Co-Chair: Douglas Giddings, White Bird Lura Abbott, Grangeville Kandi Borgelt, Kamiah Barbara Hershberger, Lewiston DHW Liaison: Brad Forth

# Region 3

Chris Boston, Nampa Liza Dix Warner, Caldwell Brianna Katsenberger, Nampa Linda Dripps, Caldwell Tina Freckleton, Caldwell Christy Thomas, Caldwell DHW Liaison: Tara Wright

# Region 4

Chair: Tom Turco, Boise Mary Stackle, Boise Sally Hurtuck, Boise Colleen Braga, Boise Andrea Gillman, Boise DHW Liaison: Sabrina Brown

# Region 5

Chair: Midge Fisher, Twin Falls Lorie Nebeker, Twin Falls Donna Bohrn, Twin Falls Susan Baisch, Twin Falls Melissa Rowe, Twin Falls DHW Liaison: Chris Waitley

# Region 6

Chair: Oliver Samora, Pocatello James Elbrader, Pocatello Irene Samora, Pocatello Dan McDougall, Pocatello Donna Boe, Pocatello Amanda Hadley, Pocatello Peggy Haskins, Pocatello Robert Stites, Pocatello DHW Liaison: Shawna Miller

# Region 7

Co-Chair: Gene Lund, Idaho Falls Co-Chair: Jerry Johnson, Idaho Falls Julie Hill, Rexburg Janice McNee, St. Anthony Renee Hill, Idaho Falls Melinda Drowns, Rigby Shane Boyle, St. Anthony Eileen Hancy, Rexburg DHW Liaison: Caprice Miller

# Region 1

# Speakers/Participation:

KCS Panel Members took a tour of Kinderhaven, a group foster home in Sandpoint Idaho, to learn about their programs and funding options.

Denise Rosen Deputy Attorney General met with panel members to discuss recent Idaho Code changes.

Panel members met with Beth Patzer, Children's Mental Health chief, to better understand services to children and areas lacking under the current program.

Panel members met with Kathy James during the regional review to discuss KCS activities, relationships with the Department, and share resources.

Panel members met Tonya Reynolds with the Kootenai County drug court program.

### Goals:

The region 1 panel members would like to take a closer look at the use of MDT meetings in each county within the region to determine its function, purpose, and goals. The panel would further like to examine the effectiveness of the drug testing protocol at Kootenai Medical center, determine any barriers to testing, and any need for changes to the current system in place.

# Region 2

Panel members had a monthly meeting in each field office of Region II over this past year. It provided an opportunity to meet with field office staff to gain their prospective of Child Welfare services in Region II and to learn first hand what it means to work in the field of Child Welfare. The meetings with staff were very informative and engaging for the panel members.

The majority of panel members attended the State-wide meeting in October 2010.

The panel members continue to focus their efforts on improving the Child Welfare System to accommodate children being placed with relatives more easily.

### Goals:

- 1. Support Kinship Care for children needing out of home placement.
- 2. Find various ways throughout the year to show our support and appreciation to Non-relative Foster Parents and Kinship Care Providers.

# Region 3

# Goals

This year the Region III KCS panel was focused on the following goals.

- 1. Learn how children are brought into foster care.
- 2. Learn about process of selecting fostering families for children.
- 3. Learn about the foster parent licensing requirements.

# Region 4

This year we returned to meeting monthly. The activities during the meeting included:

- Added two members to the Panel
- Presentation by Fran Frank on a case file
- Office visit to Boys and Girls club
- Discussed community involvement plan
- Attendance at the Statewide Web meeting

Members did not participate in the CQI process of quarterly file reviews with Department workers, which include interviews with biological parents, foster parents, social workers, and foster children if appropriate due to unavailability of members.

Attendance at one fatality reviews.

#### Goals:

Based upon the above activity the panel will seek to recruit new members to the panel to assist in the community building activity.

The panel will continue to participate in CQI and Fatality Reviews when requested.

Panel members will continue to shadow case workers as opportunities become available.

Panel members will be encouraged to attend and participate in PRIDE training.

Panel members will attend pertinent training opportunities, seminars, conferences, etc. as they become available.

# Region 5

Our KCS panel mostly focused on recruitment of new members, which resulted in 2 new KCS members in Twin Falls. We also spent a lot of time during our monthly meetings talking about how the Department works in order to get everyone familiar with our system. We also invited the local School Police Officers (SRO's) to come so we could talk with them about what they need in order to help some of the kids they deal with. We sent out invitations and hosted a small gathering of law enforcement and hospital personnel.

# Region 6

- 1. This year panel members had the opportunity to:
  - a. Reviewed and discuss several Child Protection cases with the caseworkers and risk assessors associated to the case.
  - b. Visit local facilities, such as Bannock House, and attend Child Protection court hearings.
  - c. Attended monthly meetings and recruit new members for the panel.
  - d. Observe a foster parent present to the panel about working with the Department and foster children.
  - e. Observe foster children talk with the panel about what it is like to be in foster care.
  - f. Review workers' case loads.

The Region VI Keeping Children Safe Panel has established the following goals for 2010:

- a. Conduct and attend monthly meetings.
- b. Invite a variety of guest speakers to present at panel meetings throughout the year: CASA, CRW, Health and Welfare Department representatives, attorneys, special interest groups, etc.
- c. Evaluate local family courts and how this system affects Region VI families.
- d. Attend a Termination of Rights Hearing.

## Region 7

Our Panel investigated a number of areas. We focused our attention on a few areas that continue to need attention and areas that are included in our two recommendations.

Over the course of the year the Region VII Panel met seven times. During those meetings sixteen cases were reviewed and four guest speakers presented about issues and programs in Region VII.

A primary focus of the team was following cases for the complete course of the investigation and the care of the children through either reunification or termination of parental rights.

Our Liaison to the Panel is Caprice Miller, partnering with Cheryl Taylor, and they provide outstanding support to the Region VII panel. Both have a great depth of experience and knowledge, and serve as an excellent resource to what must seem to them to be an unending stream of questions.