



STATE OF CONNECTICUT
DEPARTMENT OF CHILDREN AND FAMILIES
Making a Difference for Children, Families and Communities



Joette Katz
Commissioner

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TO: The Honorable Anthony Musto, Co-Chair, Human Services Committee
The Honorable Peter Tercyak, Co-Chair, Human Services Committee
The Honorable Joe Markley, Ranking Member, Human Services Committee
The Honorable Lile Gibbons, Ranking Member, Human Services Committee
The Honorable Terry Gerratana, Co-Chair, Select Committee on Children
The Honorable Diana Urban, Co-Chair, Select Committee on Children
The Honorable Len Suzio, Ranking Member, Select Committee on Children
The Honorable Terrie Wood, Ranking Member, Select Committee on Children

FROM: Joette Katz, Commissioner 

DATE: March 13, 2012

SUBJECT: Report on Kinship Care

I am pleased to provide the Department of Children and Families' report regarding kinship care as required by section 1 of Public Act 11-116:

"Section 1. (*Effective from passage*) Not later than October 1, 2011, the Commissioner of Children and Families shall, within existing resources, convene a working group for the purpose of determining how to maximize kinship care for children in the care and custody of the commissioner. The working group shall examine Department of Children and Families practices and policies that impact kinship care, including, but not limited to, agency regulatory criteria, cultural competence in recruitment of relative homes, outreach practices and family conferencing. Not later than January 1, 2012, the working group shall submit a report, in accordance with the provisions of section 11-4a of the general statutes, summarizing existing department practices and policies impacting kinship care and proposing recommendations for increasing kinship care to the joint standing committee of the General Assembly having cognizance of matters relating to human services and the select committee of the General Assembly having cognizance of matters relating to children."

The Short Story

Leadership at the Connecticut Department of Children and Families recognizes that the safety, permanency and well-being of children and youth are best achieved within the context of their own homes and communities. When placement *is* needed, research has taught us that children placed with relatives experience much more positive results over the long term, including greater stability and less placement disruption, better prospects of remaining with siblings, greater or equal safety, and more timely permanency.

When I came to the Department in January of 2011, I quickly learned that our use of relative care had declined over time. The highest percentage of children placed in relative care occurred in January of 2000, when 24.6% of our children were placed with relatives. In January of 2011, however, that percentage had declined to a low of 15.3%. The current national average for relative placements as a proportion of all child welfare placements is about 25%.

These results were not satisfactory to me and, shortly after being appointed as commissioner, I issued policy guidance that relatives were to be viewed as the *first resource* sought when a child needed to be placed away from his or her birth family:

"It is our *obligation* to do everything possible to keep children within the family system. To this end, I am making it the expectation that all children in our care be placed with relatives and the exception that they go into non-relative care. In other words, to use language with which I am most familiar, the presumption is that they be placed with relatives. This is a culture and a norm that the children need us to operationalize *immediately* in our practice."

Following a year of intense analytic and development work with our staff, I am very pleased to report to you that we have made dramatic improvements in our use of relative care. Specifically, the proportion of child placements made to relative care has increased from 15.3% to 22.7% over just this past year. This represents an improvement of 48% over the first year of my four-year term and signals the types of changes the Department of Children and Families is capable of making, given appropriate support.

The leadership of the Department is greatly appreciative of the support accorded us by the Connecticut General Assembly. There is much work yet to do, but we are confident that – with your support and guidance – we can continue to make dramatic gains on behalf of the best services possible for this state's most vulnerable children and youth.

The Detail

The dramatic increase in the use of relatives as the first and most important placement resource for children who must be removed from their birth families is anchored in: (a) a shift in the department's vision and values base; and (b) work begun late in 2010 in partnership with the Annie E. Casey Foundation's national child welfare consulting group.

An Expanding Vision

Over the past two decades, the Connecticut Department of Children and Families has become increasingly focused on safety and protection, to the exclusion of attention to children's overall well-being. It became extremely risk averse, often failing to recognize the important resource that extended families are for all children – but especially for vulnerable children. In part, this accounts for the dramatic decline in the use of relative placements over the past 10 years.

Quickly upon establishing my senior leadership team in February of 2011, we re-framed the vision of the Department from an exclusive focus on safety to one that aims to promote and support the health, safety and learning of all children in our care and custody. This expanded vision states our belief that children can and must become successful in and out-of-school, and must be supported to develop their special talents and to give something back to their communities. This goal for the state's most vulnerable children and youth served by the Connecticut Department of Children and Families cannot occur without attention to six core strategies:

- A complete agency-wide commitment to true and respectful family-centered practice
- A dramatic increase in our understanding of the impact of trauma on children's development
- The application of the emerging neuroscience of early childhood and adolescent development
- Expanded partnerships with communities
- A renewed focus on leadership and public accountability, and
- A new emphasis on becoming a learning organization with the families and providers with whom we partner.

Over the past year, we have been fortunate to hire a leadership team committed to this new vision and the six strategies for change. This team is responsible for implementing a series of major policy shifts within the agency, including a move away from congregate care and the renewed commitment to better supports for family foster care. Our emphasis on relative placements as a first resource for at risk children is a core part of this policy shift. Statewide implementation of our new Strengthening Families Practice Model is also core to our ability to effect positive change for the children and families we serve. The new Practice Model emphasizes true family engagement, purposeful visits with families, the use of family assessments rather than child-only assessment, and the use of "family teaming" in which birth and foster families are equal partners with the Department in determining how to best support their vulnerable children and youth.

Learning with the Child Welfare Strategy Group

Shortly upon being confirmed as Commissioner, I learned that the department's Office of Foster and Adoption Services had already begun a process to expand the department's use of relative placements. This work began in the fall of 2010 and relied heavily on a strong learning and action partnership aided by the Annie E. Casey Foundation's Child Welfare Strategy Group. Its goal was to identify barriers that stood in the way of increasing the number of children initially placed with relatives.

To assist us in this barriers analysis, the Child Welfare Strategy Group employed an assessment model called "Business Process Mapping." Use of this methodology requires a series of very specific steps beginning with interviews of staff at all levels within one of the department's regions. An additional interview session was held with a group of relative care providers. These interviews examined how staff members identify, approve, secure waivers for and support relative caregivers, and what support relative families really need. Perceived and actual barriers were identified and a workgroup to formulate improvement strategies that address these barriers was established.

The Business Process Mapping began in December of 2010 with Region I (the Bridgeport, Norwalk and Stamford area offices). In April of 2011, the mapping process was completed in Region III (the Middletown, Norwich and Willimantic area offices). This past December, the mapping process was completed for Region IV (the Harford and Manchester area offices). Mapping was completed in January of 2012 for Region VI (New Britain and Meriden) and will be completed for the remaining two regions. These are (Region V: Waterbury, Danbury and Torrington and Region II: New Haven and Milford) over the next six weeks, that is in March of 2012.

As a vital part of this process, the Child Welfare Strategy Group also created a "Peer to Peer" learning opportunity for DCF staff. Over two days in January of 2011, department managers met with child welfare officials from Allegheny County, Pennsylvania and the State of Tennessee to learn the strategies each employed to dramatically increase their use of relative family foster care. The most important learning was that each state utilized a specialized process for recruiting and supporting *relative* families, understanding that these families were being called upon to take in extended family members with little notice and, often, a scanty base of internal family resources. Importantly, the peer-to-peer session

taught us that, with proper respect, recruitment and support, relative families will step up and can succeed in the vital task of caring for vulnerable children in times of great need.

We learned some important facts about our system during the joint Business Process Mapping and Peer to Peer consultation process. First, not all of our staff members are equally comfortable placing children with relatives. Nor do all staff members have equal levels of skill in engaging and working with relative families. As a consequence, if parents who are in the middle of child removal process do not themselves identify relatives as a placement resource, our staff members were not regularly searching any further for extended family members.

Second, we learned that the department's foster care regulations and policies are exclusionary in nature for those who cannot meet home/space requirements and/or may have past child protective services, mental health or substance abuse in their backgrounds. While a waiver can be granted in some instances, the process has not historically been widely used.

Third, relatives require a higher level of support than what they have generally received given the unique nature of the placement. Specifically, at the time of initial placement, relatives require concrete and tangible supports given the unexpected and emergency nature of the placements.

Fourth, the department can search much more effectively by utilizing available technology to locate a greater pool of potential relative providers. Additionally, the department's current data systems require improvement in order to provide accurate information on the numbers and locations for relative placements for children who are in DCF care and custody.

Action Steps for Change

Continued Learning and Support

As part of our deep attention to improving the recruitment and support for relative foster families, staff members from each area office will receive training from the DCF Academy for Workforce Knowledge and Development focused on the importance of kinship care and addressing practice issues associated with making successful relative placements. Also, we continue to participate in bi-monthly conference calls with the Child Welfare Strategy Group to receive updates on progress, identify new strategies, and provide consultation on systemic issues.

Waivers

In order to deal with current regulatory challenges related to relative family foster care, we have increased the use of waivers over this past year. In the past, waivers for individuals with a substantiated child protective services history or criminal involvement in the past (which disqualified them from licensure) would need to be reviewed and ultimately approved by the Commissioner. Waivers for permanent "overcapacity status" had to undergo the same review process. As we learned through the Business Mapping Process, staff viewed the waiver process cumbersome and very time consuming; thus, such waivers were not generally sought. To address these issues, I have directed that all waiver requests pertaining to child protective services history or criminal involvement be submitted to and approved by the department's Director of the Office of Foster Care and Adoption. This has had a significant impact in both the number of waivers being issued for relatives and the timelessness of decision making. I will continue to review permanent overcapacity waiver requests.

First year results are encouraging. In calendar year 2010, a total of 35 waivers were issued related to an individual's background, with 17 of them specific to relative placements. In calendar year 2011, 64 such waivers were issued, with 36 of them specifically issued for relatives. In addition, regional foster family managers issued well over 100 waivers for both relative and non-relative homes. These addressed lower-level licensing issues also requiring a waiver.

Foster Care Regulations

The department's Foster Care Regulations were re-written in May of 2011 to make the licensing standards more inclusive of relative providers and more sensitive to a family's specific needs. For example, the new regulations are less strict regarding family income requirements. They are also less strict with regard to children sharing bedrooms. In addition, the new regulations will make the waiver process faster and more efficient for those families who have child protective services or criminal backgrounds. Final approval of these regulations is pending.

Conducting Emergency Assessments

In March 2011, the Department re-aligned staffing in the Foster and Adoption Services Units to meet the increasing demand for a very fast "turn-around" in home visits to approve a relative placement. On a daily basis, staff members are now assigned to conduct "emergency walk-through" requests from child protective services staff in order to place a child into a relative's home. Staff assignments also include back-up staff to ensure that when an appropriate relative is identified, the department can immediately visit the home to determine appropriateness for same day placement.

New Legislation

Sharing essential information with relative families (and other foster families) was severely limited until a new law went into effect in July of 2011. This statutory change allowed the Department to release a child's medical, psychological, educational or behavioral information to a current or proposed caretaker without the consent of the child's parents as long as it does not break the parent's confidentiality. This will result in a better understanding of children's needs and the supports that relatives will need in order to meet those needs.

Implementing the Fostering the Future Report on Family Foster Care

As part of its broader policy shift from congregate to family foster care placement, the Department conducted several months of intense analysis resulting in a series of reports outlining its new direction. In September of 2011 we released a major report, *We all need somebody: Supporting children, families and the workforce in Connecticut's family foster care system*. This report, available to the public online, makes recommendations for systematic improvement in the entire family foster care system.¹

Specifically, the report pointed to the need for clear, tangible and concrete supports for relative caregivers at the time of placement, with special attention to the needs of older relatives including grandparents. In January of 2012, a draft implementation plan² was reviewed with the *Juan F Consent Decree* court monitor and plaintiff's attorneys, as required. In addition, the newly established public-private DCF Continuum of Care Partnership³ has created a Family Foster Care Working Group⁴ to help

¹ *We All Need Somebody: Supporting Children, Families and the Workforce in Connecticut's Family Foster System*, September 2011. Online at -- www.ct.gov/dcf/cwp/view.asp?a=2565&Q=317714

² Online at -- www.ct.gov/dcf/lib/dcf/continuumofcare/pdf/foster_family_report_workplan_km_jg_ss_11_13_11.pdf

³ Detailed information about and resources for the Partnership can be found online at -- www.ct.gov/dcf/cwp/view.asp?a=4159&Q=488020&PM=1

implement the changes called for in the plan. This working group is co-led by Ken Mysogland, DCF Director of Foster and Adoption Services, and Kristina Stevens of the Casey Family Services, Hartford. Reports are being made by the working group to the full Partnership at its February and March meetings.⁵ A full report of the working group is expected near the end of June, 2012. In addition, an internal campaign designed to increase staff stability to support relatives and other foster families is currently underway.

Authority for Recruiting and Supporting Relative Foster Families

To better serve all children and families engaged with the Department, I requested and received legislative support for the creation of a sixth DCF region. The six-region field structure was launched in September of 2011. As part of this transformation, responsibility and authority for family foster care support was returned from the Central Office to the Regional Administrators. As part of this new structure, a Regional Program Director oversees all operations of foster care in his or her respective region. This enables the full integration of family foster care with other services provided directly or purchased by the Department at the community level. The DCF Director of Foster and Adoption Services meets regularly with a Family Foster Care Community of Practice and is in constant contact with leadership in each region to provide supports and assist in the resolution of case challenges that arise.

Integrating Relative and Therapeutic Foster Care

The Department currently licenses 18 agencies to recruit, train, license and support Therapeutic Foster Homes for children. This program was, until the fall of 2011, quite disconnected from the department's overall family foster care system. Acting on recommendations in the September 2011 *We All Need Somebody* report, the Department issued guidelines in November specifying that children who require therapeutic foster care services can be placed on an emergency basis with relatives who then receive that intensive level of in-home support, frequency in visitation, and therapeutic oversight. The guidelines also clarify the training necessary for a relative to be fully licensed as a therapeutic family foster care placement.

Generations United

In December, 2011 Generations United joined with the Child Welfare Strategy Group and the Department of Children and Families to assist in exploring Connecticut community resources for relative caregivers. This partnership will interview community stakeholders, gather information about agency programs, and develop a resource guide for relative caregivers. Generations United has submitted a draft report that will be disseminated to DCF staff to expand awareness of community resources available to relatives.

First Year Performance Data: Results to Date

Over the past year, we have increased the proportion of children served in relative placements by 48%. In January of 2011, just 15.3% of all children removed from their birth families were living in relative care. Each month since January 2011, the Department has seen a positive increase in both the number and percentage of children placed into relative care. On January 1 of this year (2012), 22.7% of all children in placement were placed in relative care.

⁴ Online at -- www.ct.gov/dcf/cwp/view.asp?a=4159&Q=494102&PM=1

⁵ All materials and meeting notices are posted online and updated regularly. Go to the DCF Website at -- www.ct.gov/dcf -- Click on About DCF and scroll down to Continuum of Care Partnership. Or use the specific URL -- www.ct.gov/dcf/cwp/view.asp?a=4159&Q=488020&PM=1

While percentages are important, the number of children served through relative families tells the more important story. In January of 2011, 731 children were placed with relatives. By January of 2012, that number had increased to 1,035. Over this same time period, the Department also increased the total number of licensed relative providers from 456 to 545.

The Department has also seen a dramatic increase in the number of children *initially placed* with relatives upon first being removed from their home. From January through December 2010, 2691 children entered care, but only 12% of them were placed into relative homes as a first time placement. From January through June 2011, a total of 1,200 children entered care and 21% of them were placed into relative homes as a first time placement. This represents an increase in the use of relatives as a first-time placement of 71%.

Next Steps

Moving forward the Department will continue to partner with the Child Welfare Strategy Group, the Continuum of Care Partnership's Family Foster Care Committee and other stakeholders in Connecticut communities to increase the number of children placed into relative care *and* the supports offered to relative care providers. We list below a set of target dates and benchmarks established to guide our work this calendar year.

March 2012: The Generations United resource guide will be disseminated and incorporated into our work and the work of the Continuum of Care Partnership.

April – May 2012: The Department will have updated all policy pertaining to relative family foster care, completed an Electronic Tabloid focused on relative care, and launched a public campaign entitled "Support is Everyone's Job." This campaign is being designed by foster parents, the Department, community providers and the Child Welfare Strategy Group. In addition, department staff will begin training entitled, "Placement: Why not with Kin? It is the Work?" This training is being designed by representatives from the Child Welfare Strategy Group, the Office of Foster Care and Adoption Services, The Academy for Workforce, Knowledge and Development and Area Office staff.

June 2012: The Continuum of Care Partnership's Family Foster Care working group will report out a final set of recommendations for improved recruitment and support for foster families, including relatives.

July 2012: New Lexus-Nexus software will be fully available for use utilized by the Department. This high end search tool will allow the Department to access names, addresses and other information on relatives and related people to children in care. This will generate a greater pool of individuals to be accessed, which we believe will increase the number of placement resources available. Security protocols and staff training are now in development. Also in July, Geographic Information Software (GIS) will be installed, enabling the Department to map out potential relative providers in a mapping format. The software will also provide visual information on services, including schools, in each community of the state.

September through December, 2012: The Department will have fully implemented a Child and Family Team Meeting process. Utilizing this model, a multidisciplinary team of DCF staff, the children, the child's birth parents, relatives, and extended family, and other supports the youth and family identify, along with the child's foster parent, will come together at key points during the life of a case to exchange information, problem solve, discuss provision of services and develop a plan to

ensure safety and achieve permanency for the child. These meetings will include discussions of what supports are needed by caregivers in order to achieve these goals. The Department will also implement Structured Decision Making tools for all foster and adoptive homes including relatives. These tools are designed to guide staff in the level of support they should be offering a foster home based on the caretaker's characteristics, levels of experiences, knowledge of the child's behaviors as matched with the child's age, behavioral characteristics, and services required. Based on this assessment, a support plan will be developed to insure the family has the proper in-home and community supports

By December 2012: All department staff will have completed training in the Strengthening Families Practice Model. The Practice Model is equally applicable to foster families as to the birth families on the department's caseload.

cc: Office of Governor Dannel Malloy
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