

JOINT COMMITTEE ON CHILD WELFARE SYSTEM

Matt Stephens

November 16, 2022

INTRODUCTION

Chair Concannon, Vice-Chair Hilderbrand, and Ranking Member Ousley

My name is Matt Stephens, and I serve as Vice President of Foster Care Homes for Saint Francis Ministries. Founded as Saint Francis Boys' Home in Ellsworth, we have dedicated ourselves to the care and protection of Kansas children and families for more than 77 years. As an independent not-for-profit, we provide a broad range of programs and services that include case management for children in both foster care and after care and two residential programs (Psychiatric Residential Treatment Facility and Qualified Residential Treatment Program). Additionally, we provide children and parents with innovative and evidence-based behavioral health and substance use treatment services through Family First Prevention Services Act programs.



Comprised of more than 1,000 passionate and professional case managers, social workers, therapists, and support staff, Saint Francis Ministries serves in 66 Kansas counties from 18 offices locations. Guided by our mission to provide healing and hope to children and families, we also serve in five other states as a multi-faceted child and family services ministry.

We appreciate the opportunity to share insights about our work and role in providing for the needs of children and their caregivers in Kansas. As we will share, that same work offers both opportunities and challenges. Below in the testimony I have done my best to answer the questions received by Chair Concannon:

Placement Stability Data

Below you will see Saint Francis Placement Stability outcomes. Although placement stability remains a critical priority for Saint Francis, it continues to be a challenge.

PLACEMENT STABILITY			
AREA	FY 20	FY 21	FY 22
Area 1	6.9	5.1	5.3
Area 2	7.2	5.6	8.2
Area 7	9.8	5.4	6.9

Performance metric < 4.4 moves/1000 days in care



We have implemented several approaches to decrease the number of moves that children experience while in care including:

1. Saint Francis Ministries has begun placing children in the recently added Therapeutic Foster Care Home level of care. This program went into effect on July 1, 2022.
2. Participating in and benefiting from the recently rolled out Failure to Place (FTP) beds initiative. This program allows financial incentives to foster care homes and their licensing CPA for maintaining beds specifically for children who may not have placement. The program requirements will decrease the amount of moves by expecting the youth to remain in the FTP bed until a long-term option is found. This program was initiated in early October.
3. Over this fiscal year Saint Francis is working to intentionally increase Kinship placement from 39% to 50% by June 30, 2023.
4. Saint Francis continues to use Team Decision Making (TDM). TDM is a collaborative practice used by child welfare agencies that includes family members in all decisions involving child removal, change of placement, reunification, or other permanency plans. Last quarter (July – Sept), we conducted 258 TDM staffings, involving 295 youth. As a result:
 - a. 32% maintained current placement.
 - b. 11% moved to a less restrictive placement.
 - c. 43% moved to a lateral placement.
 - d. 14% moved to a more restrictive placement.

Understanding Placement Stability

To increase placement stability, it is important to understand “who” in the child welfare system is experiencing placement instability.

National research indicates that older youth have elevated risks of placement instability. Kansas statewide data mirror that, in that those experiencing placement instability are older youth (13-18) with higher levels of disability/needs. According to the collaborative work done by Capacity Building Center for States, the State of Kansas, and case management providers, placement instability is related to the following key points: inadequate community prevention, lack of community support, limited services for youth with complex needs in foster care placements, and too wide a front door into foster care. This can be attributed in part to children being removed from their homes based on an inadequate understanding of the role of foster care. At Saint Francis over the last six months, our data indicate that close to 37% of new referrals to foster care were for non-abuse/neglect reasons: Family in Need of Assessment (FINA). Most often, the referral was a result of the child’s behavior.

Youth who come into care for reasons not related to abuse or neglect such as running away, truancy, or crime often continue the same behaviors in foster care - which leads to more placement moves. Simply placing a child into foster care for such behaviors lacks effectiveness because most of those behaviors result from past trauma. Placing a child into Foster Care causes *additional* trauma and may increase negative behaviors rather than improve them. Addressing the behavior's cause in a trauma-based therapeutic setting would lead to better outcomes.

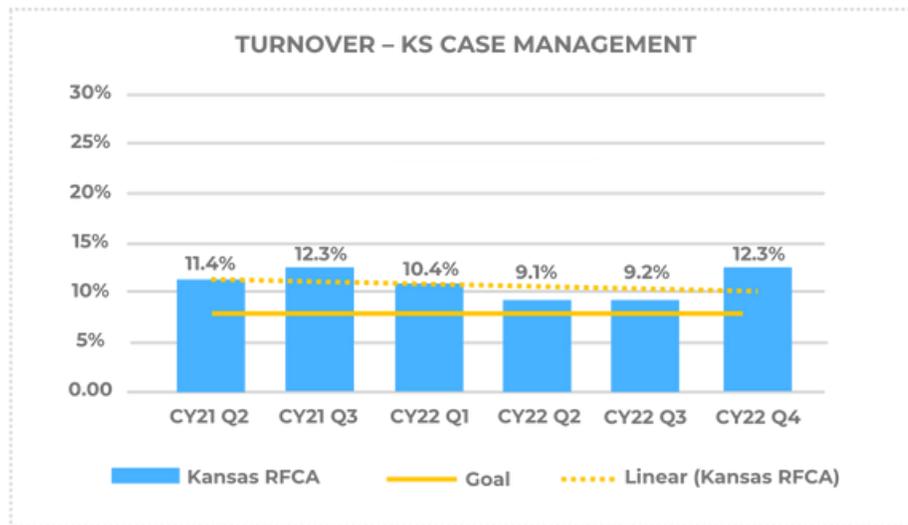
Next Steps Placement Stability

For placement stability to stabilize and eventually improve, there must be a collaborative intentional effort to “right size” the foster care population. Proportionately, Kansas has a high number of children in foster care. This does not seem indicative of the quality of Kansas parents, but either an indication that community support is inadequate or that children referred to the foster care system would be better served through another system (Mental Health/Substance Abuse, Juvenile Justice). To ensure that the population of foster care continues to decrease, a multifaceted approach should be deployed that includes:

- Decreasing referrals to out of home placement:
 - Increase availability of services in communities by expanding FFPSA services.
 - Consider limiting how children come into out of home placement (40% of statewide referrals came from sources outside of DCF).
 - Consider limiting the reasons of referrals to only reports that include Abuse/Neglect
 - and ensuring that children who enter foster care are appropriate for the child welfare system.
- Increase timely permanency:
 - Increase access to mental health and substance use treatment.
 - Stabilize workforce for continuity of services.

Employee Turnover

Hiring and retention of qualified staff has long been identified as a struggle for child welfare organizations (NASW, 2021), with national turnover rates remaining between 20-50%, according to the National Child Welfare Work Institute (2020). Over the last 12 months, Saint Francis Case Management provider staff experienced a turnover rate of 41%.



Saint Francis Ministries (SFM) recognizes the benefits of a stable child welfare workforce and remains committed to increasing workforce retention. From a compensation perspective, SFM has recently implemented tuition reimbursement, increased available 401k contributions, and continues to assess wages to remain competitive in the workforce market. Our efforts to understand the turnover has revealed that many employees leave because of an insufficient work life balance and/or because the job did not match their expectations. To alleviate those work life balance challenges, we are growing our workforce so we can lower caseloads, while distributing specialized work to after-hours and transportation staff. Additionally, we will begin surveying the workforce to gain a better understanding of employee engagement. We will use that information to support our retention efforts and to ensure that our policies and practices support the changing workforce.

Financial Audits

For the convenience of Committee members, I have provided audits for FY 19, FY20, and FY21. These were completed by the independent accounting firm of KCoe Isom. Individually, these audits demonstrate tremendous work that has been completed by Saint Francis Ministries to improve compliance, timely filing, and financial viability. Collectively, they provide context to the vast improvements that have occurred over recent years. I encourage members of the Committee to read the written narrative in which management addresses issues and concerns. Those narratives can be found on pages 37 and 38, FY19; pages 36 and 37, FY20; and pages 37 and 38, FY21.

Long-term placement strategies

Long term placement is in the best interest of everyone interacting with the child welfare system. Long-term placement allows children to have stability and access services more effectively than if they experience placement disruptions.

- Increase Kinship from 39% to 50% by June 30, 2023. National data shows that children placed in kinship care experience fewer behavioral problems, develop better cultural and familial connections, and are less likely to re-enter foster care (May 26, 2021, Foster-America).
- Collaboration with DCF to ensure kinship options are included on referrals.

Timely Adoption (Wichita)

DCF data indicates that Wichita (Area 7) is achieving the performance standard and is a leader in the state in this metric. SFM has worked hard to increase the number of adoptions occurring within 12 months of the child becoming legally available for adoption. The current processes, which include collaboration and partnership with DCF, the court system, and other stakeholders are providing the desired results. If, however, there are case specific concerns that need addressed, I am willing to be a point of contact for members of the Committee to investigate and report back issues.

ADOPTION WITHIN 12 MOS OF TPR - 45.8%							
Area 1 SFM	Area 2 SFM	Area 3 KVC	Area 4 TFI	Area 5 COC	Area 6 KVC	Area 7 SFM	Area 8 TFI
36.2%	43.6%	43.3%	39%	32%	46.9%	46.2%	29.1%

CMP Data Snapshot - June 22



Thank you for the opportunity to provide this information. I am happy to answer questions at the appropriate time.