# Attendees

**Goal of the Grant:** to improve behavioral health outcomes for children and youth (birth through age 21) who meet criteria for SED and their families and who have child welfare involvement. For this project, child welfare-involved families are those for whom a child abuse and/or neglect investigation results in a substantiation or services-needed finding.

**Purpose of the GMIT:** interagency team responsible for management of the grant, oversight of state and local implementation activities, and ongoing communication with the system of care governing bodies.

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| --- | --- | --- | --- |
|[ ]  Ayana Coates-Hendricks |[x]  Chris Cordell |[x]  Leslie Hughes |[ ]  Erix Delgado |
|[x]  Dee Dee Ward |[ ]  Dakota Simmons |[x]  Beth Jordan |[x]  Christa Bell |
|[x]  Joy Varney |[ ]  Jeremy Pope |[ ]  Barb Greene |[x]  Mary Carpenter |
|[x]  Kate Overberg Wagoner |[ ]  Michelle Niehaus |[x]  Kelli Root |[x]  Kenneth Fletcher |
|[x]  Kelly Bradshaw |[x]  Katie Kirkland  |[x]  Jennifer Warren |[x]  Eileen Grady Brown  |
|[x]  Kelly Dorman |[x]  Jenny Thornhill |[ ]  Sherri Staley |[x]  Amanda Metcalf |
|[x]  Lizzie Minton |[ ]  Clarissa Allen |[x]  Dyzz Cooper |[x]  Katy Mullins |
|[x]  Maxine Reid |[ ]  Chelsa Hamilton |[x]  Carol Cecil |[ ]  Veronica Sears |
|[ ]  Micah Blevins |[x]  Traci DeSimone |[ ]  Carmilla Ratliff |[x]  Melinda Vise |
|[x]  Tammi Taylor |[ ]  Randa Bush |[x]  Vestena Robbins |[ ]  Josh Swetnam |

[x]  = Present [ ]  = Absent

# Housekeeping

* April Meeting Notes were confirmed by RGMIT Members in attendance
* Post Adoptive Placement Preservation Services (Vote to include DCBS involved, post adoptive families in SOC FIVE population of focus)
	+ 18 votes for and 0 against. So, even though there may not be an open DCBS case with a newly substantiated or FINS finding, we will count this population for CANS and NOMs.
	+ They have an open subsidy case but it’s not a new open case resulting from maltreatment

Processes and protocols need to be established for screening and referral for this population. A workgroup should include the following:

* + - Adoption branch staff, Beth, Mary C. (DBHDID), and Carol C (KPFC)
		- A provider working with families in this population (Josh Swetnam, Boys and Girls Haven, if available)
		- Peer support Specialists working with families
		- Parents/Caregivers who would be impacted by this change

## Action Items

Task Description Person Responsible Deadline

A work group will be formed to discuss DBCS Dee Dee

protocols/ processes for incorporating post

adoptive DCBS clients into the SOC FIVE

service pathway.

# SIAC Ad Hoc Committee Update: Unnecessary Custody Relinquishment – Mary Carpenter, DBHDID

Partners: SIAC, DCBS, DMS, KY SPIN, AOC, BH Parent, MCO, Seven Counties, KHA & KPFC

A Charter has been developed that outlines the goals of the workgroup including:

* Reviewing the frequency of and reasons for the practice of unnecessary custody relinquishment in order to access behavioral health treatment and related services and supports
* Identifying strategies to prevent the practice
* Make policy recommendations to support youth to remain in custody of their parents/caregivers

Group work is in alignment with work happening across the cabinet. Following an adoption from foster care, a family may reach back out to DCBS for services. Children with extensive mental health needs and their parents seek assistance from the courts or DCBS due to lack of community-based services or lack of funding for services. An array of services starts once a child comes into DCBS custody.

Barriers:

* data or lack thereof, DCBS does not have capacity to measure everything
* lack of access to services along the service array
* funding streams create barriers for families, providers and the services that can be accessed

Action Steps to date:

* Review of policy brief and best practices
* Consult Peer to Peer
* Small workgroup related to diversion protocol

Next steps:

* Formalize recommendations, align effots, follw up/follow through.
* Several cross systems are working on the issue. We have buy in to make changes, feels like there is a lot of work conducive to system changes. Outcome of the workgroup is to make recommendations to SIAC, SIAC can then act on those recommendations.
* Working on finalizing those recommendations over the next two meetings.

## Action Items

Task Description Person Responsible Deadline

SGMIT members will be updated on Mary Carpenter TBD

Committee progress

# Prevention Initiatives Update – Christa Bell

Family First Prevention Services include: Family Preservation Services (FPP), Kentucky Strengthening Ties and Empowering Parents (KSTEP) & Sobriety Treatment and Recovery Teams (START)

Statewide impact:92% of children remained in home across all programs and 94% for FPP. Trends in data were displayed in a PPT and the following insights were offered:

* In 2018, out of home numbers began to rise. Children were legally remaining in custody although returned / in permanent placement – pushed #s up in early part of pandemic.
* Beginning of pandemic coincided w/ implementation of Family First, so it’s hard to tease out pandemic vs efforts of prevention.
* Feb 2016 and Feb 22 – not apples to apples. Apr 2019 rolled out new relative service array for relative caregivers to become foster parents. Courts to give custody to relative directly instead of child becoming a part of OOH care population.

Data tables were displayed comparing SFY 2019, 2020 & 2021 prevention, out of home care and adoption expenditures.

* Prevention expenditures increased by $9.6m, out of home care expenditures decreased by $58.1m
* Impacts of prevention services led to additional $20m appropriation of state general fund for this state fiscal year
* Increased FPP contracts by 25% and increased flex funds to $1,000 per family
* Added client assistance funds

**Thriving Families, Safer Children**

Joint initiative by Children’s Bureau, Casey Family Programs, Annie E. Casey & Prevent Child Abuse America, KY was selected as a round two jurisdiction—no funding but will receive technical assistance, consultation, and peer support. (Intended to be a movement) Priorities include developing network of community-based prevention supports, creation of formulized structures to serve families ‘screened out’ by the child welfare agency, clearly differentiating poverty/neglect, development of a statewide collaborative primary and secondary prevention plan and the creation of a parent advisory council.

**Successes:** KY received a grant to launch community based primary prevention supports, preparing to launch community response pilot in four counties, senate bill 8 adds language to statue to differentiate poverty and neglect, a formal collaborative primary and secondary prevention plan has been developed, & Parent Advisory Council is coming soon.

**Community Response**

 < 40% DCBS reports meet criteria. These families will be referred to a community-based agency to offer supports/resources. Moving away from focus on tertiary to secondary – reduces future reports to agency. Reduces burden on staff (shortage) – would allow Child Protection staff to focus on cases where safety is critical. Pilot counties are Barren, Clark, Montgomery, and Perry

**Prevention Collaborative**

Convenes quarterly, includes community stakeholders and families with lived experience, developed formal primary and secondary prevention plan, aligns efforts across agencies, community based, and family driven.

**Senate Bill 8**

Creates state child abuse and neglect prevention board, expands use of trust fund money for prevention, amends neglect definition to differentiate from poverty, expands definition of fictive kin, requires Medicaid or MCO to pay for cost of medical exams by Children’s advocacy centers, extends age to recommit to foster care to age 20.

**Birth Parent Advisory Board**

Recruitment is underway for those with lived experience, opportunity for feedback/co-design & voice in policy making.

**Pandemic effects on DCBS reporting?**

DCBS reports have not skyrocketed as a result of the pandemic. Economic supports for families (child tax credit, PEBT, etc.) poured into states to help struggling families. There is a lot of evidence to support that economic and concrete supports provided to families drive down reports.

## Action Items

Task Description Person Responsible Deadline

N/A

# Health Equity Assessment of FFPSA – Update with Dr. BKP

Four main parts: Stakeholder Engagement, Documentation, Proposal and Sustainability

**Stakeholder engagement:** Staff, Coordinating Team, HELA Sessions/Executive Leadership, included quarterly stakeholder meetings/ meetings with frontline staff, Youth (focus groups and interviews conducted March-May 2022), Parents (those experiencing children removed from their home), Play Cousins Collective/KYA

(Still need judges and Family Resource (FRYSC))

**Youth stakeholder engagement:** included those from across the state however the group was intentional to include youth of interest from: Cumberland, Jefferson Southern Bluegrass, Northern Bluegrass, and Salt River Trail

* 100 + youth applied over two week’s timeframe
* 90-minute youth focus groups. Youth stakeholders included those who either aged out, adopted from care, in care—smallest group were those reunified with their families
* Youth discussed how they entered child welfare system and looked for systemic issues (Root Cause Analysis)

Went through up and downstream – how can we stop this pain in our community by really focusing upstream, around community?

* Conversation was so impactful
* Talking about topics uncomfortable but impact future generations

## Action Items

Task Description Person Responsible Deadline

SGMIT will be updated as the Dr. Brandy Kelly Pryor TBD

Assessment continues

# Interactive Map for SOC FIVE Services –Eileen Grady Brown, UK HDI

Eileen Grady Brown UK-HDI showcased a digital interactive service map for all of SOC FIVE. The map will serve DCBS workers, grant partners, and program evaluators in all regions by helping identify where services exist. The interactive map includes contact information for providers as well as definitions of the services that may be provided. This web-based product can be easily accessed from any device (mobile, tablet, etc.) Although information will be updated quarterly, the info button includes a feedback form if any changes or corrections are needed.

The map can be accessed on the SOC Five website or directly through this link: <https://socv.hdiuky.net/>

## Action Items

Task Description Person Responsible Deadline

 N/A

# Mental Health Awareness Month Activities

* CMHA Day – Carol Cecil saved links

June 7th is KPFCs open house

## Action Items

Task Description Person Responsible Deadline

 N/A

# Agency Updates

Due to limited time, updates were not provided during the meeting.

## Action Items

Task Description Person Responsible Deadline

 N/A

**Next Meeting:** June 10th, 2022,via Zoom: [June S-GMIT Meeting](https://us02web.zoom.us/j/82154195143?pwd=anYrVjlJRXQ4ejgxaDRYeDFCQ0IrUT09)