

Child and Family Services Reviews: Addressing Mental Health Needs of Children and Families in Child Welfare

Special Forum

July 16, 2008
4:00 pm – 5:30 pm



Overview of Agenda

- CFSR Overview and Findings
 - Kim Helfgott, Technical Assistance Partnership for Child and Family Mental Health
- Experience in North Carolina - Using the CFSR to Understand and Address Challenges
 - Candice Britt, CFSR Coordinator, North Carolina, Division of Social Services
- Facilitated Discussion
 - Mary Armstrong, Louis de la Parte Florida Mental Health Institute, University of South Florida

Purpose

1. To provide an opportunity for interactive discussion on issues related to meeting the mental health needs of children in the child welfare system and their families.
2. To develop recommendations for policy and technical assistance at the federal, state, and/or local levels regarding the issue.
3. To provide information for a policy paper that will present the key recommendations for federal, state, and/or local policies and technical assistance.

**Child Welfare Resource Specialist,
Technical Assistance Partnership for
Child and Family Mental Health**



Kim Pawley Helfgott

Child and Family Services Review – CFSR

- The Children's Bureau, Administration for Children and Families (ACF), U.S. Department of Health and Human Services administers the review system.
- States are assessed for substantial conformity with Federal requirements for child welfare services and systems.
- The reviews assess two areas:
 - Child welfare outcomes for children and families in safety, permanency and child and family well-being
 - Systemic factors - The administration of State programs that directly affect their capacity to deliver services

CFSR/SOC Practice Principles

- Family-Centered Practice
- Community-Based Practice
- Individualizing Services
- Strengthen Parental Capacity
- Family Driven/Youth Guided
- Individualized/Strengths Based
- Community-Based
- Culturally and Linguistically Competent
- Interagency Collaboration
- Accountability

Child Welfare Outcomes

Safety

- Children are, first and foremost, protected from abuse and neglect
- Children are safely maintained in their own homes whenever possible and appropriate.

Permanency

- Children have permanency and stability in their living situations
- The continuity of family relationships and connections is preserved for children

Child and Family Well-Being

- Families have enhanced capacity to provide for their children's needs
- Children receive appropriate services to meet their educational needs
- Children receive adequate services to meet their physical and mental health needs

Resonance Between CFSR and SOC Outcomes

Child & Family Services Review

System of Care

Children are protected from abuse and neglect.

Build safety plans into service/support plans.

Children are safely maintained in their homes whenever possible and appropriate.

Prevent out-of-home placements, keep families intact.

Children have permanency and stability in their living arrangements.

Minimize disruption in children's lives and promote continuity and smooth transitions.

The continuity of family relationships and connections is preserved for children.

Core value - family focus

Families have enhanced capacity to care for their families' needs.

Strengthen the resiliency of both families and youth and enhance natural helping networks.

Children receive appropriate services to meet their educational needs

Focus on all life domains, including education.

Children receive adequate services to meet their physical and mental health needs

Holistic approach, broad array of services and supports

Systemic Factors

- ✓ Training
- ✓ Quality assurance
- ✓ Foster and adoptive homes
- ✓ Case review
- ✓ Statewide information system
- ✓ Service array
- ✓ Agency responsiveness

Service Array

- Assess the strengths and needs of children and families to determine service needs
- Services are accessible
- Services are individualized to meet unique needs of children and families

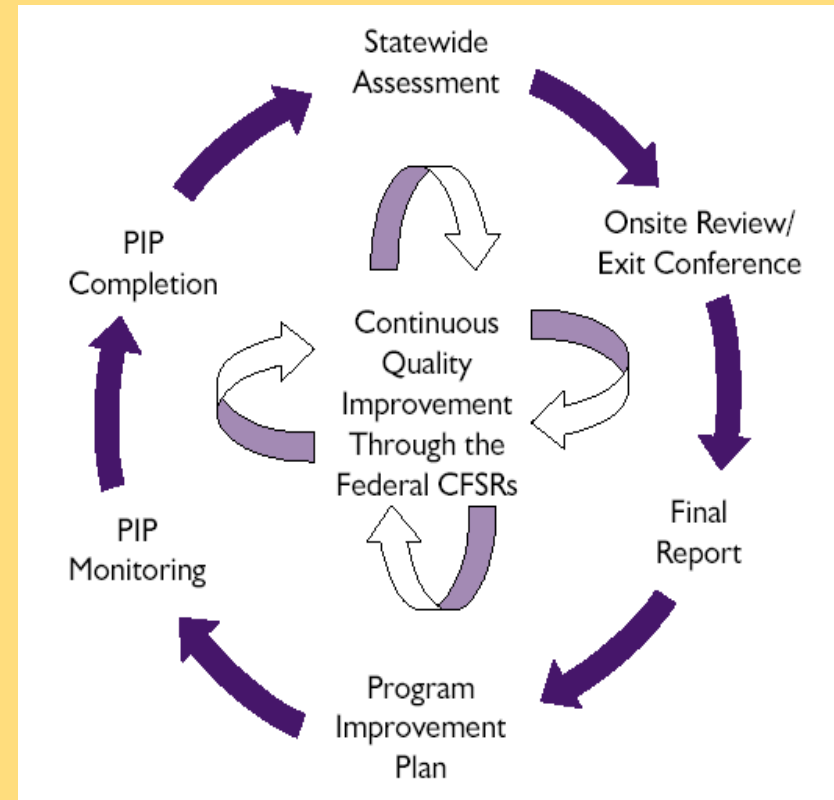
Agency Responsiveness to the Community

- State engages in ongoing consultation with tribal representatives, consumers, service providers, foster care providers, juvenile court, and other public and private child serving agencies.
- Agency develops annual reports of progress to share with stakeholders.
- Services are coordinated with services of other Federal programs serving the same population.

The Review Process

Each CFSR is a two-stage process consisting of a **Statewide Assessment** and an **Onsite Review** of the child and family service outcomes and program systems.

Source: Supporting Improvements in Child Welfare Systems Through the CFSRs: A Resource for State Legislators



Statewide Assessment

- 6 months before on-site review State receives data profiles
- 60 days before on-site review State submits Statewide Assessment:
 - Narrative assessment
 - Requires meaningful stakeholder involvement
 - Use of data

On-site Review

- Three sites in State:
 - Largest metropolitan area
 - 2 sites selected using Statewide Assessment
- Outcomes:
 - 65 case record reviews
 - 25 in-home and 40 foster care
- Systemic Factors:
 - Stakeholder interviews

Program Improvement Plan

- Addresses all areas of non-conformity
- Emphasis and opportunity for collaboration:
 - Requires meaningful stakeholder involvement
 - Provides opportunity to work on common goals and develop shared vision
 - Promotes shared accountability by evaluating shared outcomes

State Onsite Review Schedule Round Two (2007-2010)

2007	2008	2009	2010
Delaware North Carolina Vermont Minnesota Oregon Indiana Kansas District of Columbia Georgia Massachusetts Arizona Oklahoma Alabama New Mexico	Texas New York Pennsylvania Arkansas West Virginia Tennessee California Nebraska Connecticut Alaska South Dakota Colorado Kentucky North Dakota Ohio Wyoming Montana Idaho Florida	Michigan New Hampshire South Carolina Hawaii Utah Iowa Maine New Jersey Washington Puerto Rico Wisconsin Illinois Virginia Nevada Missouri Maryland	Rhode Island Louisiana Mississippi
14 states	19 states	16 states	3 states

CFSR Findings – Areas Needing Improvement

- Services to protect children and prevent removal from home
- Comprehensive needs and strengths assessment and identification of community-based services to address needs
- Active involvement of children and parents in case planning
- Meet educational, physical, health and mental health needs of children and families

Access to Mental Health Services

- Child and Family Service Reviews (CFSRs)
 - Inconsistent practice in providing MH assessments of children entering foster care (40 States)
 - Scarcity and inconsistent provision of MH services for children in child welfare (50 States)
 - Shortage of MH providers experienced in working with children in child welfare (most States)
- Program Improvement Plans (PIPs)
 - Addressed assessment of child/family MH needs (36 states)
 - Collaborative strategies for system-level problems and improve access to MH services (37 states)
 - System of care replications (16 states)
 - Collaboration has led to positive results - better access to MH care, blended funds, development of community based service systems (20 States)

(Child and Family Service Reviews 2001-2004: A Mental Health Analysis)

**CFSR Coordinator,
North Carolina Division of Social Services**



Candice Britt

Achieving Positive Outcomes Requires Core Beliefs:

- Accept that the face of child welfare is constantly changing
- Acknowledge that only the highest standards of performance are acceptable and nothing less will do due to the population we serve
- Accept that you will always have to work to achieve those high standards
- Have a true passionate belief that we can achieve better outcomes if we all work together
- Acknowledge that we cannot “own” this ourselves and we must collaborate with partners

Why North Carolina Wanted Change in Child Welfare?

- Too many years of being prescriptive, process focused
- Tired of being adversarial
- One size does not fit all
- Families are unique and distinctive
- Families are more likely to engage and carry out a plan that they truly have taken part in the development of a plan

Why Change?

- Acknowledge that we won't be involved forever, need to build support network of extended family and community partners
- Knew there was a better way to work with families – “How would you want this to be if it were happening to you?”
- Findings of Child and Family Services Review (March 2001)
 - Engage families
 - Consistent practice

Multiple Response System (MRS)

North Carolina's Child Welfare Reform

1. Strengths based structured intake
2. Choice of two assessment responses for reports of child neglect and dependency
3. Coordination between Work First (TANF) and child welfare
4. Coordination with law enforcement on cases of abuse
5. Redesign of CPS In-Home Services
6. Child and Family Team (CFT) meetings throughout the life of the case
7. Shared Parenting meetings

What is Family Centered Practice

North Carolina's Child Welfare Reform Based on
Six Family Centered-Practice Principles of Partnership

1. Everyone desires respect
2. Everyone wants to be heard
3. Everyone has strengths
4. Judgments can wait
5. Partners share power
6. Partnership is a process

Systems of Care in NCDSS

- Received a SOC Grant from the Children's Bureau to build infrastructure to improve child welfare outcomes
- Implemented in Alamance, Bladen and Mecklenburg Counties
- SOC values now incorporated in statewide policy manuals and training
- Procedures developed for reimbursing family/youth for their time spent participating in work groups
- NCDSS now has a state funded position dedicated to moving forward with SOC

Systems of Care Works

What families said:

- More foster parents, relatives, and service providers attended Child and Family Teams in SOC counties
- In System of Care Counties:
 - More felt they had a say in who came to their CFT
 - More were encouraged by their SW to bring supports to their CFT
 - More felt the purpose of their CFT meeting was clearly explained in SOC counties

System of Care Works

What the 2007 CFSR indicated:

- NC has adopted a family-centered approach to casework, which is apparent in child and family teams meetings and in the consideration of the needs and services of all children in the family in in-home services cases
- High level of involvement of mothers and youth in case planning
- NC does a better job accessing mental health services for children in foster care
- Stakeholders interviewed in Mecklenburg County were more positive about mental health services and suggested that SOC Grant was helping

How Did We Get These Outcomes?

- Family Partners
- Training
- Systemic change at local and state level

Child and Family Team Meetings

- Recognize and respect the family as the experts of their own children and that no one knows a family's strengths and needs better than the family
- Moves away from traditional child welfare service planning which is deficits based and assumes child welfare worker is the professional by trusting and believing that families can solve their own problems
- Values the supports (both formal and informal) that the family brings to the table
- Is guided by a neutral facilitator to give voice to both the family and the professionals

Program Improvement Plan Themes and Work Groups

- Child, Youth and Family Involvement
 - Interagency Collaboration
 - Cultural Competence
 - Court Involvement
 - Accountability

True partnership with State Collaborative

- Serve as our stakeholder group for CFSP and CFSR
- Developed 2nd PIP with the State
- Charter acknowledges Child and Family Teams are preferred approach (One Child, One Family, One Plan)

Involving Community Partners, Parents and Youth

- Stakeholder recommendations shaped NC's PIP
- Achieving good outcomes for children and families is a shared responsibility
- On a local level, ask to participate in child and family team meetings
- Join the Community Child Protection Team (CCPT)
- Check out www.nccollaborative.org

Indications of Solidifying PIP/System Reform

- When champions leave, system reform effort stays in place
- All child serving agencies agree on how to define Child and Family Teams
- Cross-training module developed for every child-serving agency regarding Child and Family Teams
- DMH/SAS/DD has System of Care coordinators across the state

**Director of the Division of State and Local
Support,
Department of Child and Family Studies
Louis de la Parte Florida Mental Health
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Mary Armstrong

Facilitated Discussion

1. Goal: provide an opportunity for interactive discussion.
2. To develop recommendations for policy and technical assistance at the federal, state, and/or local levels regarding the issue.
3. To provide information for a policy paper that will present the key recommendations for federal, state, and/or local policies and technical assistance.

Discussion Questions

- What are the challenges you face in your state/community/tribe in meeting the mental health needs of children and families in the child welfare system?
- What solutions have you implemented in your state/community/tribe? Impact and outcomes of your solutions?

Discussion Questions

- How does (or how could) the CFSR and PIP process encourage cross system collaboration?
- How has your state involved the mental health system specifically in the CFSR process (challenges and solutions)?

Discussion Questions

- What state- and community-level policies would encourage cross system collaboration in the CFSR process to meet mental health needs of children and their families?
- What technical assistance would be helpful to strengthen collaboration across systems to improve identification, assessment and services to meet the mental health needs for children and families in child welfare?

Next Steps

- How this discussion will be compiled and shared more broadly
- Other ideas for sharing lessons learned