

MINUTES

Braam Oversight Panel
SeaTac Red Lion, Rainier Room
SeaTac, WA
December 8, 2008

Panel Members: John Landsverk (Chair), Jan McCarthy, Jeanine Long, Dorothy Roberts, Jess McDonald

Panel staff: Carrie Whitaker

Plaintiffs' Attorneys: Casey Trupin, Bryn Martyna, Tim Farris, Bill Grimm, Erin Shea

Attorney General's Office: Steve Hassett, Carrie Hoon

DSHS Staff: Cheryl Stephani, Deborah Purce, Chris Robinson, Randy Hart, Debbie Willis, Robin McIlvaine, Lee Doran, Richard Kellogg, Yen Lawlor, Robert Nelson.

Others: Laurie Lippold, Dave Wood, Jennifer Strus, Nancy Roberts-Brown, Beth Canfield, John Morse, Alia Griffins, Paul Cavanaugh, Jeanine Livingston, Ron Murphy, Mark Supanich, Elena Selkie, Jim Theofelis, Traci Russell, Helen Lakeru.

Note: The minutes are a general summary of discussion and do not attempt to document every comment. The minutes are supplemented by the attached power point presentations made during the meeting.

The meeting was called to order at 12:05 pm.

Introduction

John Landsverk, Panel chair, called the meeting to order at 12:05 p.m. He noted that 4.5 years have passed since the Braam settlement agreement was reached in July 2004. John stated that the Panel sees this phase of the Braam process as increasingly focused on gap analysis- identifying areas in which performance falls short of expectations, and developing strategies to close these gaps. John announced that the 2009 Braam meeting dates had been set and published to the Panel's website (www.braampanel.org).

John noted that CA Assistant Secretary Cheryl Stephani had announced that she planned to move on at the end of the month. He stated that the Panel had appreciated working with Cheryl and all of her efforts in an extremely difficult position. On behalf of the Panel, John wished Cheryl well on her next steps.

Children's Administration (CA) Update

Cheryl presented an update from Children's Administration (*see CA power point presentation, slides 2-11*).

Cheryl thanked the plaintiffs for their collaboration in the development of the recent set of compliance plans.

Cheryl gave an overview of the dire budget situation, and noted a projected \$6 billion shortfall. Cheryl summarized the next steps in the budget process, indicating that the Governor's first proposal for the upcoming budget cycle would become public in the next 2 weeks, and is expected to be "ugly." Cheryl stated that CA would share information on the budget with the Panel and the plaintiffs as soon as more details become available.

Cheryl discussed activities to date related to FamLink. She indicated that the launch date (previously scheduled for December 8) had been postponed, but that CA expects the delay to be a matter of weeks, not months. By the end of December, CA plans to announce a new “go-live” date. Cheryl reported that so far staff using the new system in trainings and pilot sites has reacted very positively to the new system. Cheryl also stated that the data support unit has been redeployed to work on FamLink to ensure they are prepared to create reports using the new system.

Cheryl introduced Yen Lawlor, acting regional administrator for Region 3. Cheryl noted that CA plans to ask R.A.s to attend Braam meetings on a rotating basis in order to better understand and support the Braam process.

Cheryl thanked the Panel for its efforts and dedication to the Braam process.

Plaintiffs’ comments

Casey Trupin expressed appreciation for Cheryl’s leadership over the past few years, noting that Cheryl had worked extremely hard in an incredibly difficult job.

Casey stated that plaintiffs have seen improvements in the quality and detail included in compliance plans, and have very much appreciated the improved communication with the Department and improvements in data. He noted that there’s been a lot of positive movement, but that there is a lot more work to be done. Casey indicated that plaintiffs are concerned about the implications of the budget crisis.

Tim Farris echoed Casey’s comments in appreciation of Cheryl’s work, acknowledging the difficulty of her job and noting that it is more difficult to improve a system than to criticize it.

Reports on compliance plans related to enforcement litigation

John Landsverk noted that there were four areas that had been the subject of the recent enforcement action by plaintiffs, and that the Panel had asked for an update on compliance plans in these areas. The areas are: monthly visits, caseload size reduction, CHET screenings, and sibling visits & contacts.

Monthly visits

Chris Robinson presented an update on the implementation of monthly visits to children in out-of-home care (*see CA power point presentation, slides 12-16*). Chris noted that the Department’s policy requiring monthly visits for children in out-of-home care had been implemented on September 1, 2008. She presented data from September and October showing that approximately 72% of children had received the required visits during these months. She noted that it would take some time for the new policy to become consistent practice, and that the Department was pleased by this level of performance from the outset.

Chris reviewed progress with respect to the specific strategies included in the monthly visit compliance plan. These strategies focus on reducing social workers’ workloads to free up time for monthly visits: identifying alternatives to workers transporting clients, identifying alternatives to social workers conducting parent-child visits by increasing the use of contracted providers, decreasing the time social workers spend waiting for court, decreasing caseloads, increasing family engagement in the decision-making process, and increasing the availability of

disclosure and discovery units. Chris also reported on regional implementation plans and resource issues.

Jess McDonald asked for an update on CA's discussions with Region X federal partners regarding the role of private agencies in providing monthly visits. Chris stated that CA's understanding from discussion with Region X is that visits by private agencies do not count toward the CFSR monthly visit standard because these agencies do not have full case management responsibilities. Chris stated that CA had just sent a letter to Washington, DC to obtain confirmation of this regional interpretation. Jess asked to receive a copy of this letter.

Jan asked for clarification regarding CA's capacity to conduct Family Team Decision Meetings (FTDMs). Chris Robinson and Randy Hart explained that FTDMs are available in every office across the state, but not at full capacity. Field staff currently must prioritize cases that would most benefit from FTDMs.

Jess asked for clarification of the strategy related to specialized staff for disclosure and discovery. Steve Hassett explained that these specialized staff do the paperwork, copying, redaction, etc required to prepare the relevant court cases for disclosure and discovery. Chris Robinson stated that this can be a huge workload issue, noting that Region 5 had at one point assigned 7 FTEs to do this work.

Bill Grimm asked for clarification on a number of issues related to CA's implementation of the monthly visit policy and related federal requirements. Bill asked whether the strategies Chris had outlined are the same as those included in Washington's federal plan. Chris clarified that these were the strategies detailed in the compliance plan approved by the Panel, and Debbie Willis confirmed that these same steps had been approved by the feds for the Annual Progress and Services Report (APSR) process. Bill also asked for clarification regarding how Washington had spent its portion of the \$40million allocated at the federal level to assist states in implementing the monthly visit requirement. Cheryl noted that this was a one-time allocation, and she could get back to plaintiffs with the information on how it had been used. Bill also requested a copy of the federal APSR report submitted to the feds, which Chris agreed to provide. In addition, there was discussion of the goals Washington had set related to monthly visits for the federal review. Cheryl noted that the federal benchmarks had been set very low for the first couple of years (approximately 8-10%), and then would increase significantly by 2011. She indicated that the feds were allowing states to begin with low benchmarks, because there are financial penalties for not meeting the benchmarks. In addition, federal measurement of monthly visits requires visits to children each and every month of the year, which is a challenging standard. John Landsverk noted that ultimately the Panel would be looking at monthly visit data in this way as well (based on visits to each child during each and every placement month), and that the data received to date is simply a snapshot of the proportion of children receiving visits during one month to provide a sense of the success of the implementation of the monthly visit policy.

Tim Farris asked whether CA was able to analyze which children are not receiving monthly visits, and whether there are patterns by region or office, caseload sizes, etc. Chris Robinson noted that higher caseload sizes appear to explain some of the situations in which children had not received visits, but that there are also differences in implementation because this is a new policy. Although CA has been able to bring on additional social workers to implement monthly visits, Chris pointed out that the recent workload study suggested that significant staff increases

would still be necessary in order for workers to perform all necessary duties. CA has placed a high priority on monthly visits.

Tim asked where CA expects performance on monthly visits to be in 6 months, assuming no changes in staffing levels. Cheryl responded that with the implementation of the 24hr/ 72hr response time policy a few years ago, they saw a steady increase during the first months of implementation, and she would expect to see a similar trajectory for the monthly visit policy. She said all CA managers are aiming for consistent implementation of this policy, so that all children are visited on a monthly basis.

Chris Robinson noted that CA managers and supervisors have access to interactive spreadsheets providing information on the implementation of this policy, so they are able to see at multiple levels (by office, by supervisory group, by worker, at the case level) which children have received visits and which children have not.

Bill Grimm noted that a child who is not in care for a full month is not counted in the monthly visit data under the federal measure. Chris confirmed that this is the case in the data produced for Braam purposes as well. Steve Hassett pointed out that these children do receive social worker visits, because of the requirement that all children be visited within their first week in placement.

Jess McDonald noted a few offices in Region 3 that are performing at very high levels (87-90%) on this measure, and asked Regional Administrator Yen Lawlor whether these offices have implemented any specific strategies to achieve this level of consistency. Yen explained that these offices have been training and preparing staff for this requirement for a long time, so that they were ready for implementation of the policy in September.

Bill Grimm asked for clarification as to how children on runaway status are handled in these data. Lee Doran replied that there had been a change in federal rules on this issue to require that these children be included in the total child population requiring a visit, even if they are on runaway status the entire month.

Chris Robinson noted that, in response to a request from the Panel, CA had developed a new proposal related to a quality assurance/ review plan to confirm that monthly visits are in fact taking place. This proposal has been sent to plaintiffs for their comment. Casey Trupin indicated that plaintiffs' response will be generally positive, and they will provide written comments. It was agreed that the proposal and plaintiffs' comments would then be forwarded to the Panel for review.

Mental Health- Data Issues *(see CA power point presentation, slides 29-31)*

Richard Kellogg, Director of the Mental Health Division (MHD), and Robin McIlvaine, who manages children's mental health programs for MHD, provided an update on mental health data issues.

Richard Kellogg explained that Washington operates its Medicaid-funded mental health services under a managed care waiver. The state is required to assess all children for whom an assessment is requested, about 22,000 children per year. Approximately 59% of children assessed meet Washington's access to care standards and become eligible for ongoing services. This percentage is much larger for children served by Children's Administration. For example,

Pierce County has noted that no children in foster care have been denied services since it began operating under a fee for service system last year. Richard also explained that a process is underway to review and make recommendations to the legislature to revise the access to care standards in order to make more children eligible for ongoing services.

Robin McIlvaine explained that several data fields were added to RSN reporting requirements as of July 2007, and are important for reporting related to Braam outcomes. These data fields include dates of service request, service authorization, and treatment. She noted that these data had not been received for FY08 for several RSNs, but that MHD had followed up with these RSNs and now has complete data in these areas, with the exception of Pierce County. These data have now been provided to CA, who will be able to report on these outcomes in their performance report.

With respect to service denials, Robin noted that these notices are provided to MHD headquarters, the CA social worker, and the child's guardian. Robin compiles information on denials, and provides it to CA headquarters. Chris Robinson is in the process of reviewing this information on a child-by-child basis.

Jeanine Long noted that if there are no data provided for Pierce County, this would mean that the entire state would be considered out of compliance, based on the Panel's regional rules for performance. Chris Robinson stated that they will be working to come up with an alternative way to provide information on services to children in foster care for Pierce County.

Chris Robinson noted that, in reviewing information on mental health service denials, she has identified several categories. Many children, for example, are denied services because they have moved out of the service area. Other children are denied services through the Regional Support Network (RSN), but the CA social worker is then able to arrange for BRS and/or CA counseling services. For other children, the presenting behavioral issues have been resolved by the time of the assessment, and there is agreement that the child is not in need of ongoing services. While the Braam outcome requires a shared planning meeting (SPM) for all children denied mental health services, Chris stated that this does not make sense in all situations. She asked whether the Panel might be willing to look differently at this issue.

John Landsverk noted that the intent of the outcome is to ensure that children who are in need of mental health services receive them. Jan noted that the outcome was centered around shared planning meetings based on a suggestion from CA. The original intent of the outcome was to ensure that when a child is denied mental health services, the parties involved with that child plan together how to meet the child's mental health needs. It was agreed that the Panel would be willing to look at what CA submits on service denials, including a broader explanation of how the issue was resolved. Once this information has been received, the Panel will consider whether there could be some flexibility on the SPM requirement.

Richard Kellogg noted that approximately 26% of RSN funds are spent on services to children. He noted that about 42% of children in CA placement receive RSN-funded services, and that if CA-funded services are included, this figure is likely over 50%. John Landsverk stated that this is consistent with national data on this issue, but that national research continues to suggest that there are children in foster care who do not receive needed mental health services.

Mental Health Action Step- Annual Mental Health/ Substance Abuse Services Review

Chris Robinson noted that the Department remained somewhat unclear as to what the Panel is seeking from the Department with respect to mental health action step 3, requiring an annual review of the status of mental health and substance abuse services for children in foster care and a plan to address service gaps that may be identified in the review

Jeanine Long stated that the Panel would like the Department to report on gaps in services—where children aren't receiving necessary services, what is the agency doing to address the problem? Jess McDonald stated that this action step requires analysis of gaps between performance and expectations, and an explanation of why these gaps exist.

Richard Kellogg noted that under HB 1088, the Department is looking at access to care standards, and is considering proposing a change in thresholds such that over 90% of children assessed would be eligible for ongoing services (rather than approximately 60%, as is currently the case). There is also discussion of a possible benefit for children with autism, as well as expanded wraparound services. He noted that these proposals could be expensive. Jeanine asked whether there had been analysis of what long-term costs could be averted with these upfront expenditures on expanded mental health services. Richard Kellogg stated that they are looking at costs and benefits, but that the current budget climate may make it difficult to rely on long-term cost savings to justify current expenditures.

Jan McCarthy stated that, with respect to the action step, the materials CA has submitted summarize a number of important processes and meetings. The Panel's question is what is being learned from all of those activities about mental health and substance abuse services for children in foster care. The Panel is asking the Department to take a step back, look at all of that information, and use it to plan for needed services.

Chris Robinson stated that this discussion helps to clarify the expectations, particularly in the context of increased availability of mental health data.

Reports on compliance plans related to enforcement litigation (continued)

Caseload size

Chris Robinson provided an update on progress with respect to the caseload size reduction compliance plan. (*see CA power point presentation, slides 17-22*)

Chris noted that the data looked at caseloads in terms of the proportion of workers with caseloads at or below 18. She noted that the Panel had approved a case weighting formula. Chris presented data, previously submitted to the Panel, showing that the proportion of workers with caseloads at or below 18 had been 50.5% in September 2008 and 51.5% in October 2008.

Chris provided an update on the strategies included in the Department's approved compliance plan in this area, which focus largely on efforts to accelerate permanency: increase adoption home studies and disclosures, increase pace of parenting plans, increase non-parental custody arrangements, increase processing of TPR petitions, and increase availability of FTDMs

Bill Grimm asked, in addition to the focus on permanency, whether there are also efforts to address the number of children entering care. Steve Hassett stated that FY08 data showed the first decrease in dependency filings in 5- 6 years, a drop of 7% from the previous fiscal year.

Bill stated that it would be helpful to receive data on the total population of children in care over time. Jan McCarthy agreed, asking for ongoing reporting on the number of children in care, entering care, and exiting care over time. Chris Robinson stated that she would work with Lee Doran and Carrie Whitaker on developing such a report. Lee Doran noted that one reason the compliance plan focused on accelerating permanency was because data analysis had shown that the increase in the placement population could be attributed to longer lengths of stay and slower exits to permanency.

Dorothy Roberts stated that it would be helpful to see a chart showing the number of reunifications over time, similar to the chart presented showing the dramatic increase in adoptions. She asked what strategies were in place to promote reunification. Randy Hart stated that parenting plans, solution-based casework, and family team decision meetings were all intended to support reunification. In addition, he noted that CA is working to comply with requirements in the federal Adoption and Safe Families Act related to timely filing of termination of parental rights petitions. Sometimes these filings end up resulting in reunification, as parents focus on meeting expectations to ensure that their rights are not terminated.

Jeanine Long asked whether the doubling of adoptions shown in the data could be sustained. Chris Robinson stated that this represented a significant effort in some regions to achieve finalized adoptions for children whose parents had already had their rights terminated, but who had not yet been adopted. Steve Hassett clarified that in some ways this was a "bubble," but that the lessons learned would be applied in the future.

Tim Farris asked about rumors about layoffs, and asked whether the non-permanent staff hired to assist with permanency efforts were being affected by this. Randy Hart stated that some non-permanent staff in certain offices had been let go as their special projects were concluded. At this point, the non-permanent staff hired to assist with these permanency efforts remain in place.

Jess McDonald stated that he appreciated the updates, and asked whether the Panel could receive monthly updates on the caseload reduction strategies.

Jeanine Long asked for clarification on the hiring freeze. Cheryl Stephani clarified that, to date, CA has been exempt from the freeze in relation to case-carrying staff. She noted that the upcoming budget process could change this.

Chris Robinson noted that the previous Panel meeting had included extensive discussion of a definition of children with special needs for the purposes of considering a lower caseload size for these children. She stated that CA's interpretation of COA's requirement in this area is that the lower caseload standard for special needs children applies to agencies directly providing therapeutic services. CA does not directly provide these services; it contracts through BRS to do so. In light of this, Chris proposed that a special needs requirement not be incorporated into the Braam caseload size expectations.

Jess McDonald asked whether there are any parts of the state in which CA provides therapeutic services directly without private agencies. Chris Robinson said that there are not. Jess McDonald and Jan McCarthy indicated their agreement with CA's proposal.

Bill Grimm objected, saying that this would be inconsistent with a case-weighting formula that considers certain cases to be less work, but does not factor in cases that represent more work. Jess McDonald stated that COA does not prescribe any particular case-weighting formula, it just requires that the agency be clear on how any case weighting is being calculated. Jess stated that of course some cases will be more complex than others, but that managing workload at that level is a supervisory issue. Jan asked whether CA policy allows supervisors to reassign cases based on workload. Chris replied that this type of management is expected of supervisors.

Panel members agreed with CA's proposal to not create a separate definition for children with special needs and to not use a different case weight for these children in caseload size calculations.

Carrie Whitaker asked for confirmation that the Department will submit a comprehensive caseload size reduction plan on December 31, as agreed to in the original compliance plan. Chris Robinson confirmed.

CHET

Barb Putnam provided an update on progress related to the compliance plan for CHET screenings (*see CA power point presentation, slides 23-26*).

Barb noted that a training had been held in October for 66 CHET screeners, supervisors, coordinators and headquarters staff. The training addressed FamLink, the new behavioral health screening tool (Pediatric Symptom Checklist 17), new program requirements related to what constitutes a complete CHET, and the new CHET database for tracking.

Jan asked for an update on the Centers for Foster Care Health. Barb noted that there have been some delays in getting these up and running, but progress is being made. Contracts for three CFCH were awarded in King, Spokane, and Cowlitz Counties in July 2008. Steve Hasset noted that these counties are home to about 20% of the placement population.

Jess McDonald asked for information about the number of children receiving EPSDT exams within 30 days of entry to care, noting that the most recent data seen by the Panel suggested that less than 50% of children receive these exams. In light of these data, Jess stated that he is even more concerned by the Department's refusal to require initial health screens for children within 72 hours of their entry into care.

Chris Robinson stated that the Department would like to do additional analysis of data on children's contact with physicians around the time of entry to care. Even if these exams are not coded as EPSDTs, it could be that a large proportion of children have some contact with a physician.

Barb Putnam provided the Panel with screenshots from the new CHET database. She stated that the database would go into use one week after FamLink is launched. Until then, CA will report on CHET screenings using its current method of data collection.

Sibling visits

Chris Robinson presented an update on progress related to sibling visits (*see CA power point presentation, slides 27-28*). She noted that CA policy requiring 2 sibling visits or contacts per

month had been implemented on September 1, 2008, and that contracts had been issued for providers to arrange and supervise these visits. In addition, CA has notified foster parents that they are eligible to receive reimbursement for the costs associated with providing sibling visits. Social workers also check on sibling visitation during their monthly visits with children in foster care.

Office of the Family and Children's Ombudsman- Mary Meinig, Director

(see Ombudsman's office power point presentation)

John Landsverk noted that the Panel periodically receives phone calls, emails and letters from foster parents, parents, or others with concerns about specific cases. While the Panel listens to all concerns, its protocol is to not investigate or intervene in individual cases, and to encourage the person who has contacted the Panel to contact the Ombudsman's office. The Panel invited Mary Meinig, Director of the Office of the Family and Children's Ombudsman, to provide an overview of how that office responds to calls and complaints.

Mary Meinig discussed the history and statutory authority of the Ombudsman's Office. She noted that the office is independent of Children's Administration.

Mary explained that when the office receives a call, they immediately determine whether it is an emergent (posing an immediate risk to child safety) or non-emergent complaint. All calls are reviewed by the Director and assigned to an Ombudsman for further investigation and follow up. The Ombudsman's office can access case records in CAMIS in order to learn more about what has happened with a particular child or family. Mary provided examples of the types of calls received by the Ombudsman's offices, as well as the types of intervention and follow up the office may pursue. Mary noted that sometimes the office monitors a case for a period of time before closing it, to ensure that the planned corrective action has taken place.

John Landsverk noted that the Panel does not directly forward complaints or inquiries to the Ombudsman's office; rather, it encourages callers to get in touch with that office themselves. Mary stated that her office prefers to hear directly from complainants. Jeanine Long noted that the downside to this approach is that the Panel never knows what happened with the complaint. Dorothy Roberts agreed, but observed that there is no better alternative while still protecting the confidentiality of those contacting the Panel.

Mary noted that her office would soon release a report covering its activities over the past two years (2007-2008), which will detail the number and types of complaints and the outcomes of the Office's investigations. The Office also makes systemic recommendations based on patterns and concerns identified in their investigations. She noted that recent legislation had expanded the Office's duties, giving them responsibility to review all information-only referrals by mandated reporters; all cases with three founded referrals within one year; and the recommendations of child fatality reviews.

Chris Robinson noted that in many cases, the Ombudsman's office finds that the complaint does not warrant action by the office. Mary agreed. Chris stated that the Department is somewhat concerned that the Panel may be influenced by the complaints it receives, even though the Panel has very little information about the circumstances of the case. It may be easy for the Panel to assume that the complaints are verified, but this is not necessarily the case. John Landsverk stated that this is an important point, but that he does not believe that the Panel has

been influenced in this way. He observed that the Panel has no way of knowing whether a concern relates to an individual child or is a broader systemic issue.

Jess noted that in his experience in Illinois, he would learn of particularly concerning cases through the work of their inspector general. These cases sometimes revealed “pockets of practice” that were very problematic. He asked CA how they respond to and learn from these cases. Cheryl stated that she and Mary meet on a monthly basis, and that CA is able to use the findings from the Ombudsman’s office to remind staff of policy and practice expectations or inform training needs.

Solution Based Casework (SBC)

John Landsverk noted that the Department is in the process of training staff and implementing the solution-based casework practice model. John noted that a number of the compliance plans submitted by the Department in response to the Panel’s most recent monitoring report included SBC as a strategy to improve performance on Braam outcomes.

Chris Robinson provided a presentation on SBC (*see SBC power point presentation*). Chris’s presentation discussed the theoretical foundation of the model, CA’s reasons for choosing the model, basic features of solution-based casework, research on SBC, and implementation timelines and plans.

Jess McDonald noted that supervisors have now been trained in SBC, and asked whether a written manual is available. Chris said that there is a resource guide, which includes tools, examples, and training materials. Jess asked whether SBC is the practice guide for supervisors, and asked how often supervisors are expected to review cases. Chris stated that supervisory reviews are expected to occur on a monthly basis, and that there is still discussion about what exactly is expected in these case consultations. Jess stated that it sounds as if supervisors are expected to integrate what they’ve learned in training on their own without guidance from management, and he stated that it seems unlikely that the model can be consistently implemented if this is the case. Cheryl noted that SBC provides a qualitative and clinical framework, but that CA policies and procedures remain in place and provide further detail with respect to specific expectations of staff. Chris noted that there is a quality assurance plan designed to ensure model fidelity, and she stated that she’d be happy to share that with Jess.

John Landsverk stated that he does not see SBC as being strongly evidenced-based, but that he feels that implementing a practice model is a very positive step. He noted that in some of CA’s proposed compliance plans related to Braam outcomes, it is difficult to see the link between the practice model and the expected outcome. Chris noted that CA is working with Partners for Our Children to evaluate the practice model. She stated that future compliance plans could be more specific by defining the logic model through which SBC connects to the outcome.

Traci Russell asked whether child-placing agencies (CPAs) would be trained in the model. Chris said there are resource issues related to availability of trainers. Chris stated that there had been a series of phone calls with CPAs, and that the level of interest in SBC among the agencies was mixed. For now, training for CA staff is the priority.

A stakeholder asked how supervisors have responded to the training. Chris stated that the initial response was that three days seemed like a long time to train on what appeared to be very

simple concepts. Since then, however, many supervisors have learned how difficult these concepts can be to implement, and have asked for additional support.

Jan McCarthy agreed with the importance of having a consistent practice model, and she noted that the Panel had discussed the need to have system factors in place (such as manageable caseloads) that allow that practice model to be fully implemented.

Jim Theofelis asked whether there were differences with respect to SBC for Child Protective Services (CPS) and Child Welfare Services (CWS) workers. Chris said that these workers do face different challenges, but that all of them work with issues related to abuse, neglect and child safety. As such, all of these workers will be trained in SBC together. The one group that may be trained somewhat differently will be Division of Licensing Resources (DLR) staff.

Mary Meinig noted that the Ombudsman's office often hears of cases in which there have been staff changes. Chris Robinson noted that hopefully SBC will promote better consistency during these types of transitions, because all workers will have been trained in the same practice approach.

Jeanine Long asked about the link between the practice model and the Braam outcomes for which SBC had been included in compliance plans. Cheryl noted that some pieces of the model do have a strong research basis, even if the full model has not been subject to as rigorous an evaluation. Cheryl noted that several pieces of the SBC model had been practiced in other contexts, and what Kentucky had done was to integrate these components in a child welfare context. She also noted that CA is working with Partners for Our Children to evaluate fidelity and outcomes. Jeanine Long noted that she was not convinced that the model would lead to the desired outcomes. Jan McCarthy pointed out that no compliance plan submitted by the Department related to the Braam outcomes relied solely on SBC and that instead, the model is one of several strategies for achieving compliance.

Chris clarified that the reason SBC had been included in the placement stability compliance plan was that several findings of a recent evaluation appeared to show promise in this area. For example, foster parents served by workers trained in SBC were more likely to report that they had the resources they needed to care for the children in their homes.

Sexually Aggressive Youth (SAY)/ Physically Aggressive Youth (PAY)

John noted that the Panel had begun discussing the compliance plans submitted by the Department in response to the 5th Monitoring Report, and had some concerns regarding the plan for the SAY/ PAY outcomes.

Dorothy Roberts noted that these outcomes showed a significant gap between 2007 performance and the benchmark.

Dorothy noted that there had been debate in the written correspondence between plaintiffs and CA regarding the significance of the regional variation for this outcome. Chris noted that, because these data come from the foster parent survey, and because this is a sample of a relatively small population, some regions had only about 10 respondents on these questions. This means that the differences by region may be just a matter of one or two children. Steve Hassett noted that regions do share strategies and information, but that CA did not feel the

regional differences were significant enough that a compliance strategy made sense in this area.

Dorothy also noted that some of the strategies in the compliance plan rely on FamLink. Jess McDonald asked why these children cannot be identified without FamLink, and Chris Robinson noted that CAMIS does not track SAY and PAY. Jess stated that these children still need to be identified so that they can be supervised and monitored, and expressed concern that there doesn't seem to be any procedure in place to do this that does not rely on the new data system.

Jan noted that new policy and a supervision plan would be incorporated into FamLink, and that the basic question is whether an interim approach is needed until FamLink is launched. John observed that, given that it sounds as if FamLink will be launched within the next few months, there will not be time to develop and implement an interim approach.

It was agreed that the Panel would need to discuss these issues further and make a decision on the compliance plan.

Stakeholder comments

Jim Theofelis expressed appreciation for Cheryl Stephani's leadership, and offered his best wishes for her in the future. He noted that at a recent youth summit, for the third year in a row, youth identified sibling visits as one of their most important issues. While this is just anecdotal, they noted challenges in being able to maintain relationships with their siblings. Chris Robinson noted that there has been a lot of effort in this area recently, including implementation of new policy, contracts, and funding designed to promote sibling visits.

John Landsverk adjourned the meeting at 5:15pm.