

**PRELIMINARY
MINUTES**

JOINT COMMITTEE ON CHILD WELFARE SYSTEM OVERSIGHT

September 12-13, 2022
Room 112-N—Statehouse

Members Present

Representative Susan Concannon, Chairperson
Representative Jarrod Ousley, Ranking Minority Member
Senator Molly Baumgardner
Senator Oletha Faust-Goudeau
Senator Beverly Gossage
Representative Suzi Carlson
Representative Charlotte Esau
Representative Susan Humphries
Representative Timothy Johnson

Members Absent

Senator Richard Hilderbrand, Vice-chairperson
Senator Cindy Holscher
Senator Kristen O'Shea
Representative Susan Ruiz

Staff Present

Dylan Dear, Kansas Legislative Research Department (KLRD)
Iraida Orr, KLRD
Jessa Farmer, KLRD
Natalie Nelson, KLRD
Jessie Pringle, Office of Revisor of Statutes
Jenna Moyer, Office of Revisor of Statutes
Nick Myers, Office of Revisor of Statutes
Gary Deeter, Committee Assistant

Conferees – September 12

Nick Reinecker, Private Citizen
John and Nicole DeHaven, Private Citizens
Kyle Kessler, Executive Director, Association of Community Mental Health Centers of
Kansas, Inc.
Matt Atteberry, Executive Director, Labette Center for Mental Health Services, Inc.
Randy Callstrom, President and Chief Executive Officer (CEO), Wyandot Behavioral Health
Network
Stacy Manbeck, Executive Director, Spring River Mental Health and Wellness, Inc.
Allison Pate, Vice President of Residential Services, EmberHope Youthville

Dr. Lanette Madison, Director of Kansas Programs, and Merideth Rose, President and CEO,
Cornerstones of Care
Linda Bass, President, KVC Kansas
Matt Stephens, Vice President of Children and Family Services, Saint Francis Ministries
Rachelle Roosevelt, Senior Vice President of Permanency Services, TFI Family Services
Jeanette Owens, Chief Child Welfare Officer, DCCCA
Dr. Kaela Byers, University of Kansas School of Social Welfare

Conferees – September 13

Angie Malik, Safe Haven Baby Boxes
T.J. Wyssmann, Fire Chief, City of McPherson
Dr. Jennifer Hansen, Child Abuse Pediatrician, Children’s Mercy Kansas City
Kristalle Hedrick, Vice President of Kansas Services, FosterAdopt Connect
Jessie Pringle, Assistant Revisor of Statutes, Office of Revisor of Statutes
Laura Howard, Secretary for Children and Families
Kerrie Lonard, Child Advocate, Division of the Child Advocate, Kansas Office of Public
Advocates
Drew Duncan, Interim Director, Bureau of Family Health, Kansas Department of Health and
Environment

Others Attending

See Attached List for [September 12](#) and [September 13](#)

MONDAY, SEPTEMBER 12 ALL DAY SESSION

Welcome

Chairperson Concannon called the meeting to order at 10:03 a.m. and welcomed members, conferees, and guests.

Public Comment on Child Welfare System from Individuals, Providers, and Organizations

Via Web-ex Nick Reinecker, private citizen, urged members to support descheduling of cannabis, an act which he said would reduce the need for foster care ([Attachment 1](#)). He provided an example of a parent whose child is dealing with seizures; the parent could provide relief by having cannabis as an option. He further noted a pregnant woman whose use of alcohol or cigarettes could damage a fetus but would be entirely legal; however, if she resorts to cannabis, she can be cited for illegal drug use and prosecuted, an unnecessary drain on taxpayer money.

John and Nicole DeHaven testified as private citizens and as parents of a foster child they planned to adopt ([Attachment 2](#)). They explained how their attempts to follow the regulations for adoption had been blocked by a contractor for the Kansas Department for Children and Families (DCF) based on a DCF policy to keep siblings together for adoption. Ms.

DeHaven gave details how their foster daughter had come to them as an infant and bonded with them through the three years of their care for her. However, a DCF kinship policy required her to be adopted only with her six siblings, a complex process unlikely to occur. She stated how even recommendations from a child psychologist were ignored. Mr. DeHaven, a clinical psychologist, stated in his professional opinion the child would be damaged by adoption with another family at this time. They concluded the kinship policy often ignores the welfare of an individual child.

Members expressed appreciation for the couple's testimony and discussed possible avenues to encourage other foster parents to feel safe to tell their experiences.

Two submitted written-only testimony:

- Caitlyn Eakin, State Director, Kansas CASA Association ([Attachment 3](#)); and
- Aronda Strutt, Executive Director, CASA of the 17th Judicial District ([Attachment 4](#)).

Presentation on Foster Youth Mental Health Needs

Chairperson Concannon recognized the recent death of Representative Gail Finney. Members observed a moment of silence in her honor.

Kyle Kessler, Executive Director, Association of Community Mental Health Centers of Kansas, Inc., noting the systemwide transition of the mental health system, expressed appreciation for the Legislature's passage of Senate Sub. for HB 2208 establishing the certified community behavioral health clinic (CCBHC) model in Kansas ([Attachment 5](#)). He commented this whole-person approach to mental health offers higher quality services, and he cited the implementation of a statewide crisis response system for youth and other programs to better meet the needs of youth.

Matt Atteberry, Executive Director, Labette Center for Mental Health Services, Inc., spoke of the benefits of becoming a CCBHC participant especially for improving service to youth in foster care; he also stated increased care coordination has improved all aspects of child welfare ([Attachment 6](#)). He also noted the need for more dedicated staff to support foster-care services.

Randy Calstrom, President and Chief Executive Officer (CEO), Wyandot Behavioral Health Network, also commented on the benefits of the CCBHC model ([Attachment 7](#)). He cited the ability to increase staffing, to improve the intake process, and to mitigate the need for hospitalization, residential treatment, or out-of-home placement. The resulting addition of substance-use-disorder treatment and the reduced staff turnover rate have improved services.

Stacy Manbeck, Executive Director, Spring River Mental Health and Wellness, Inc., echoed the benefits of CCBHCs ([Attachment 8](#)). Commenting care coordination and access to care have been lacking, she stated the new process promotes additional staffing, more open and timely access, and better staff training, and she provided data to illustrate the agency's services.

Allison Pate, Vice President of Residential Services, EmberHope Youthville, outlined the services of the agency's psychiatric residential treatment facility (PRTF), an evidence-based pilot program to promote family engagement. She commented on the value of the Residential Specialists and the funding that has produced a more stable workforce ([Attachment 9](#)). She illustrated the effectiveness of the services with comments from clients.

Conferees responded to members' questions:

- Mr. Kessler stated CCBHCs are seeing increased inquiries about access to care; and
- Ms. Pate stated the average stay at the residential treatment facility is 146 days.

Lunch

Members recessed for lunch from 12:00 noon to 1:35 p.m.

Foster Care and Family Preservation Contractor Updates

Merideth Rose, President and CEO, Cornerstones of Care, provided background for Cornerstones of Care services for youth and their families and announced the agency was re-certified in July 2022 for the Sanctuary Institute model of trauma treatment ([Attachment 10](#)). She expressed gratitude for the \$7 million to enhance Family First Prevention Services, enabling the agency to expand to 48 Kansas counties. She outlined the improvements in permanency service efforts to strengthen support services, eliminate overnight office stays, build community partnerships, and promote lasting connections for children. Ms. Rose referenced services for independent living and family preservation and explained a collaborative agreement with the University of Kansas to launch a Parent-Youth restorative program. To bolster workforce stabilization, she said a dyad model for team members was initiated; additionally, advanced training and bonus differentials were implemented. She noted challenges, including difficulty in accessing acute care screening for youth, efforts to expand the network of resource providers, and issues involving runaway youth.

Dr. Lanette Madison, Director of Kansas Programs, Cornerstones of Care, noting the previous testimony of John and Nicole DeHaven, commented that agency principals will conduct a thorough review in order to address and resolve their issues. She provided a brief overview of the process following a formal grievance.

Dr. Madison and Ms. Rose responded to members' questions:

- There is an agency grievance process with established protocols, and Dr. Madison and Ms. Rose are working to understand the DeHavens' complaints more thoroughly. They provided general information on a grievance and review process.
- The agency has a bonding evaluation regarding foster parents and a child, information that should have been shared with agency principals.

- Best practices for staff case loads range from 12 to 18. The agency is presently at 18.
- In dealing with high-acuity individuals, the agency needs to develop more complex resources.
- Staff or a foster parent will transport a child to appointments.

Members expressed concern about the DeHaven case and asked for continued follow-up information. A member commented that a foster child's placement with people they know is always preferable.

Jeanette Owens, Chief Child Welfare Officer, DCCCA, testified her agency works through the Family Preservation Services programs to provide child welfare programs in the Kansas City and Wichita regions; the agency is currently serving 258 families and 632 children ([Attachment 11](#)). She said the evidence-based START (Sobriety Treatment and Recovery Teams) model is being used to improve safety, permanency, well-being, and recovery. Additionally, additional funds provided by the Legislature have enabled the agency to strengthen its child-placing agency workforce and supplement current programs.

Linda Bass, President, KVC Kansas, commented her agency, with a team of 450 child welfare and mental health professionals, is the only private organization that has been a foster care case management provider continuously over the past 25 years ([Attachment 12](#)). She expressed gratitude for the recent bonus program for staff, a program that has enabled the agency to maintain an 87 percent retention rate. Ms. Bass provided a scorecard to indicate the effectiveness of agency services in such things as improved safety, reduction in the number of children in foster care, and placement stability, and she noted areas for improvement, especially in regard to the complex needs of high-acuity youth and the paucity of PRTF beds. She concluded by providing data regarding runaway youth and youth staying overnight in offices.

Matt Stephens, Vice President of Children and Family Services, Saint Francis Ministries, outlined the services provided by the agency ([Attachment 13](#)). He expressed gratitude for the additional funds provided by the Legislature and referenced the strengthened workforce and expansion of the Family Centered Treatment services. He noted the improvements in child safety, but also the need for improvement in placement stability, especially in addressing the need for more options in placing medically fragile youth with developmental or mental disorders. He concluded by providing information on youth overnight stays in offices and runaway youth.

Rachelle Roosevelt, Senior Vice President of Permanency Services, TFI Family Services, outlined the full range of the agency's behavioral health services and commented on specific programs:

- Through its Child Placing Agency license, TFI serves 473 family foster homes with a total of 544 youth in those homes.
- TFI delivers Family First services to a 24-county area of southeast Kansas and employs Parent-Child Interaction Therapy to 228 families.
- Through the Family Preservation Provider Program, TFI provides services in 65 counties.

- Using a variety of tools and intervention strategies, TFI serves as a case management provider and has adjusted service to reduce trauma for family reunification.

Ms. Roosevelt noted the negative impact of staff shortages, especially in meeting the complex needs associated with youth requiring PRTF and qualified residential treatment program services. She acknowledged the bonus workforce funding and its positive impact on recruitment and turnover, but noted follow-up needs to provide systemwide workforce improvements ([Attachment 14](#)).

Conferees responded to members' questions:

- Ms. Bass stated the offices at which youth remain overnight always include adaptable facilities such as a sofa, rest room, and small kitchen;
- Ms. Roosevelt stated TFI has training focused on recruitment and retention;
- Mr. Stephens stated many times the delay between the termination of parental rights and adoption are beyond the control of Saint Francis. The agency is working to identify barriers in order to shorten that time lapse;
- Mr. Stephens stated the dyad model for staff services has a staff/client ratio of 2/25; and
- Mr. Stephens stated agencies will provide documentation to show funds received are used appropriately.

A member expressed gratitude for those agencies that provided a report card to document placement stability.

Presentation on Runaway Foster Youth Study

Emily Hermes, TFI Family Services, speaking for Ms. Roosevelt and Dr. Kaela Byers, University of Kansas School of Social Welfare, presented information regarding youth absences from care ([Attachment 15](#)). She reported the research was prompted by TFI's desire to identify and correct factors affecting child absences from foster care and focused on family history and connections and life experiences. Based on both administrative data and personal interviews, the key finding was a youth losing family connections produced instability that often resulted in a runaway. She noted one further important factor to promote stability was allowing a child some involvement in welfare decisions. Based on these findings, Ms. Hermes recommended focusing on building and maintaining family involvement and prioritizing a youth's preferences and needs. She also suggested evaluating rules and policies governing placement quality.

Adjourn

The meeting was adjourned at 4:10 p.m.

**TUESDAY, SEPTEMBER 13
ALL DAY SESSION**

Presentation on Baby Boxes

Angie Malik, Safe Haven Baby Boxes, appeared before the Committee to emphasize the significance of providing baby boxes for newborn infants as a service to mothers who might otherwise abandon their unwanted child in unsafe conditions ([Attachment 16](#)). She noted seven states currently use baby boxes and 121 such boxes are functioning in the country. She explained Safe Haven baby boxes permit a mother in crisis to safely and anonymously surrender her newborn child in a climate-controlled device where the child will receive prompt attention and care. She urged members to provide statutory changes to allow such boxes. She stated seven states currently use baby boxes and three states have passed legislation to allow for baby boxes, but do not currently have any installed. She explained private funding for such boxes has been successful wherever they have been promoted. She referenced additional information: a baby-box information packet ([Attachment 17](#)) and a list of frequently asked questions and answers ([Attachment 18](#)).

T.J. Wyssmann, Fire Chief, City of McPherson, recounted a story of an infant abandoned in a dumpster in McPherson and the emotional impact the event had in the community. He stated current law (KSA 38-2282) is inadequate to address these situations; he and colleagues are pursuing legislation to amend this statute to allow baby boxes to be installed and used in the state ([Attachment 19](#)). He also included the police report of the abandoned infant ([Attachment 20](#)) and a news article about the incident ([Attachment 21](#)).

Ms. Malik and Chief Wyssmann responded to members' questions:

- The language for the proposed bill will be similar to a bill that failed to make it through the 2022 legislature (SB 490). Assistant Revisor of Statutes Jenna Moyer explained the bill would allow the surrender of an infant into a rescue crib and any suitable institution to have one installed at its facility.
- There are various ways fire personnel can respond appropriately to baby abandonment situations, even when they are dispatched at the time a baby was surrendered
- Response time for any call is almost immediate, rarely more than a few minutes.
- Baby boxes are promoted by private citizens or entities who have a vested interest in saving babies.
- Maintenance and upkeep costs in McPherson will be borne totally by the fire department and will be included in the department's budget.
- Police stations, hospitals, and emergency facilities are among the many possible sites for baby boxes. A two-stage alarm eliminates most nuisance alarms where the baby box is opened for reasons other than surrendering a child.

- No cameras are allowed in placing baby boxes; off-site cameras might inadvertently record a mother's approach to a baby box.
- A mother is not required to leave any information about herself or the baby; however, an information packet is included in the box to facilitate a mother contacting an agency if she chooses.
- Individuals or groups interested in installing a baby box advertise their intentions and readily find those who will help underwrite the project.

Ms. Moyer responded to a question regarding what the current law provides regarding abandonment:

- When a child is abandoned, after a 30-day grace period, the child is placed under the authority of the court. A parent who wants to reclaim the child must go through court proceedings. After the child is adopted, no further recourse is allowed for the birth parent(s).

Presentation on CARE Providers

Dr. Jennifer Hansen, Child Abuse Pediatrician, Children's Mercy Kansas City, reported on the development of the CARE provider network, a medical model to address child abuse and neglect ([Attachment 22](#)). She said a proviso in the 2022 legislative budget initiated the program; she recommended statutory authority be established in 2023. A training curriculum is being created for the pilot program with a triage system and an electronic database being developed to provide the most effective range of services. Dr. Hansen explained training that has been developed for providers and stated more physicians are waiting for future training. She urged members to assure a payment system be in place as a part of the statutory authority.

Update on Behavior Intervention

Kristalle Hedrick, Vice President of Kansas Programs, FosterAdopt Connect, outlined the intensive one-on-one services of the Behavioral Intervention Program, which provides stability for traumatized children ([Attachment 23](#)). She explained the program was created to prevent hospitalization for children and to support foster families pre- and post-discharge from high level treatment settings. She stated 31 children were served in the Kansas City metro in the past year, and she stated 39 percent were in foster care, 39 percent were with their adoptive family, and 22 percent were with their biological family, and 77 percent of those children were able to stay at home while receiving these services. She cited the challenges of recruiting front-line staff to carry out the program ([Attachment 24](#)) and ([Attachment 25](#)).

Overview/Status of JCCWSO-Related Legislation

Jessie Pringle, Assistant Revisor of Statutes, provided background for members and reviewed the following 2022 pertinent legislation ([Attachment 26](#)):

- HB 2632 would have required a referral for an examination as a part of an investigation of child abuse or neglect. The bill died in the Senate Committee on Public Health and Welfare.
- SB 460, similar to HB 2632, would have required a forensic medical evaluation of an alleged victim of child abuse or neglect. It died on Senate General Orders.
- HB 2510, the omnibus bill, appropriated \$757,000 from the State General Fund (SGF) to the Child Abuse Review and Evaluation program to train health-care providers to recognize signs of child abuse. The bill became effective June 2, 2022.
- HB 2582 would have directed DCF to share certain information with law enforcement agencies. It died on Senate General Orders.
- SB 425, like the previous bill, would have directed DCF to share certain information with law enforcement agencies. It died in the House Committee on Judiciary. Its contents were inserted into the committee report for Senate Sub. for HB 2495.
- HB 2471 authorized the establishment of city or county death review boards. It died in the House Committee on Corrections and Juvenile Justice.

Approval of Minutes

Representative Johnson moved, Senator Gossage seconded, and the Committee unanimously approved the Committee minutes for April 19, 2022.

Kansas Department for Children and Families Update

Laura Howard, Secretary for Children and Families, updated the Committee on the agency's system of oversight for child welfare ([Attachment 29](#)). She reported the number of children in foster care has continued to drop, to some extent a result of the Family First implementation in 2019. Regarding Child Protective Services, she stated 37 percent of reports of child abuse or neglect required services by DCF or law enforcement. She explained the new information on child abuse from the state's abortion providers: a 2013 requirement (KSA 65-445) for abortion providers to file an annual report regarding child sexual abuse had been overlooked until earlier in 2022; updated information is now available from 2011 through 2016 ([Attachment 30](#)) and from 2017 through 2022 ([Attachment 31](#)). Secretary Howard said DCF accepted responsibility for the failure to gather such reports. She answered questions related to this data and explained this includes all reports from abortion providers, which includes allegations related to sexual assault but also includes other reports.

Secretary Howard outlined some of the programs that focus on prevention: services provided under the Family First Prevention Act and the creation of Family Resource Centers to promote thriving families by using a Support Specialist Liaison to work with school districts in Hutchinson and Wichita for early intervention. In reviewing the services for foster care, she highlighted three counties (Saline, Wyandotte, and Reno) with significant reductions in the need for foster care, but she noted a continued need to work toward placement stability, especially in

regard some youth with high acuity needs who require therapeutic foster homes. She said there is an agreement with child placing agencies to develop a network to address failure-to-place issues, and a partnership with the Annie E. Casey Foundation to provide a permanency option is in the planning stages to create a circle of caring adults trained to support a youth into adulthood.

Secretary Howard gave a brief legislative update regarding performance-based contracts (SB 12, which died in a conference committee), workforce enhancement appropriations (\$7.5 million for DCF and contractors), and a policy clarification regarding what information DCF is permitted to share with law enforcement.

Secretary Howard responded to members' questions:

- Regarding Ms. DeHaven's testimony, two options for an appeal might be available, through either DCF or the Child Advocate. DCF wants to provide avenues to assure foster parents are heard.
- Kansas is the first to consider working with the Annie E. Casey Foundation.
- Further information will be provided regarding the reduction in foster homes in the state.
- Case management provider contract renewal occurs in 2024, at which time an array of factors will be reviewed before renewing a contractor's agreement. Every contractor is currently under at least one improvement plan requirement.

Lunch

Members recessed for lunch from 12:20 p.m. to 1:35 p.m.

Division of the Child Advocate Presentation and Report

Kerrie Lonard, Child Advocate, Division of the Child Advocate, Kansas Office of Public Advocates, provided background information regarding the Advocate Office, which was created to provide independent oversight and accountability for the state's child welfare services. She reviewed the Division's strategic plan ([Attachment 27](#)) and its first annual report ([Attachment 28](#)). She explained the Division of the Child Advocate will deliver impartial, independent reviews of child welfare policies, procedures, and practices and investigate concerns voiced by children, families, and other entities. She commented on three types of investigations: special cases, systemwide issues, and agency-initiated concerns; these actions may include intervention, assistance or monitoring, but she noted certain actions for which the agency does not have authority. Ms. Lonard offered details to illustrate outcomes for investigations, purposes for which will strengthen the child welfare system and improve service delivery.

Ms. Lonard responded to members' questions:

- At times the Child Advocate will bring parties together to seek solutions.

- She has met with many of the case management provider contractors to alert them to the Child Advocate's Office.
- The Child Advocate's Office is presently assessing effective technical support and best practices.

A member requested a list of complaints and what responses were made. Another member commended Ms. Lonard for the services offered by the Child Advocate Office.

Childcare Provider Appreciation Bonus Program

Drew Duncan, Interim Director, Bureau of Family Health, Kansas Department of Health and Environment (KDHE), provided information on the Child Care Workforce Appreciation Bonus Program ([Attachment 32](#)). He explained any eligible childcare worker can apply for a one-time appreciation payment and receive up to \$2,500, administered through KDHE with technical assistance by grant navigators Child Care Aware of Kansas. He reported as of September 6, 2022, KDHE has received 7,772 applications and has routed 4,729 applications to be dispersed, a total of \$11,316,250; to date \$951,250 has been sent to applicants.

Mr. Duncan replied to members' questions:

- Employment evaluation is not included in assessing an applicant.
- An applicant must be working for a licensed childcare facility to be eligible.
- A total of 21,846 workers are eligible, as determined by KDHE.

A member objected to excluding a worker who, sidelined by COVID, may not currently be working and thus ineligible.

Representative Johnson read a letter from a constituent (on behalf of Trinity Lutheran Family of Faith Church Day Care) who expressed appreciation for the bonus program ([Attachment 33](#)).

Adjourn

Chairperson Concannon invited members to recommend areas of concern that could be addressed in subsequent meetings. Following are member comments:

- The Committee and the Legislature should be proactive and timely in creating legislation to authorize baby boxes.
- Codifying the Division of the Child Advocate would provide a more permanent authorization for its services.

- There is a need to more thoroughly assess the process from foster care to adoption in order to address the areas of delay.

The meeting was adjourned at 3:03 p.m.

Prepared by Gary Deeter

Edited by Jessa Farmer and Natalie Nelson

Approved by the Committee on:

(Date)

Draft