

NCACDSS Committee Meeting Minutes
 Children's Services Committee
 9:45 pm to 11:45 pm (virtual)
October 13, 2021

Item #	Agenda Item/Presenter	Attachments	Time	Action Needed
1	Welcome/CSC Tri-Chair(s): April Snead, DSS Director, Scotland Co		9:45 am	No
2	Approval of September 2021 Minutes	PDF Attached	9:45 am	Yes
3	<p>Child Welfare Law Changes, Lisa Cauley</p> <p>FFPSA/ Residential Care</p> <p>Domestic Violence Awareness Month Panel: Family Justice Centers in NC</p> <p>Guilford County Heather Skeens, Health and Human Services Director Catherine Joyner, Director, Family Justice Center</p> <p>Buncombe County Rebecca Smith, Social Work Director Paulina Mendez, Family Justice Division Manager</p> <p>Alamance County Adrian Daye, DSS Director Skye Sullivan, Director Alamance County Family Justice Center</p>	Presentation(s) Attached	9:50–10:15 am 10:15-10:45 10:45-11:45	No
4	Questions and Future Agenda Items			No
5	Adjourn		11:45 am	Yes

Child Welfare Law Changes: Lisa Cauley provided a legislative update, prioritizing changes that will take effect in October.

Safety and Prevention: HB 132 includes revisions to the juvenile code as recommended by the Court Improvement Program. There is a change to the caregiver definition (any adult entrusted with the care of a juvenile), relative definition (“related to the juvenile by “blood, marriage, or adoption”), and changes regarding parents participating in Medication Assisted Treatment. If a parent is using MAT prescribed by a certified practitioner, then they follow a court order. This is response to situations where Judges were issuing orders related to MAT against medical advice

Expedite Child Safety and Permanency Session Law 2021-132 encompasses several changes. The October implementation portion will be covered. This clarifies the neglect definition (no substantive changes) and gives the NC General Assembly (GA) access to some confidential records. There are restrictions on what can be accessed. This will be managed by NCDSS and will be pushed out in a policy. If there is a request for a confidential record, NCDSS should be notified and will work with the county agency and the GA to respond to the request. If there is a request that comes in before policy is issued, please contact Theresa Strom directly. There may be information in a record that can be reviewed but there may be other documents that are not able to be shared.

RIL Notification: Mecklenburg identified issues when perpetrators of human trafficking are not caretakers. This provides an option that an RIL notification does not have to be done if contrary to the child's welfare and/or would have a negative impact on a criminal case.

Another part of this bill includes relative notification. This is consistent with the Fostering Connections Act. This NC law drives what you do in 30 days to find relatives. Small group discussions will be scheduled with directors to discuss management of this. There will be some practice impacts to improve the likelihood that we will find and place with relatives. Research shows that placements with relatives are positive, stable, and can end up in more timely permanency.

Finally, there will be a change to hearings. Abuse/neglect/dependency petitions (without custody) will be referred to as “review hearings.” Hearings where children are in custody will be referred to as permanency planning hearings. The goal is to show that DSS is working toward stronger permanency outcomes. If children enter care through a review hearing, there is also direction about how that should happen.

There are several items that do not take effect until December or January. Session Law 2021-123. This bill provides the opportunity to plan with Juvenile Justice in situations where parents don't comply. Will need to capture what noncompliance looks like. This came about because children as young as 6 were involved in Juvenile Justice when the law changed it did not give Juvenile Justice the authority until age 10. The General Assembly (GA) wanted to know what would happen for children ages 6-10 as children could get reported to DJJ and they would not have authority. This will involve looking at supervision, how are the child may be delinquent, how children could be involved in the diversion program, and how they would work with DSS.

Session Law 2021-132 requires DSS to develop a plan for a CPS hotline that is due to GA by September 2022. Will include involvement of three counties, however, the division plans to engage additional counties. This is broader than previous work as it would be a development study about how we would move to a centralized hotline.

Permanency Planning: SL 2021-100 includes several items as follows:

- Requires DSS to make reasonable efforts to place siblings together (the federal law already requires this but now in state law).
- Specifies that the GAL or a juvenile over the age of 18 (or emancipated) can receiving digital copies of their records.
- Spells out when the court must inquire about whether the juvenile ages 17 or older have certain documents (e.g., birth certificate, SS card). It also includes a requirement for information regarding 18-21 be provided to the juvenile. There is a subsection that is specific about what the department must include in reports to the court after their 17 birthdays regarding what required documents have been provided. This is to ensure that young adults have this information before exiting foster care and have access to expanded foster care. Counties are doing a wonderful job in engaging the 18-21 population. Numbers statewide have gone up.
- Provides for the young adult to be able to terminate the 18-21 agreement without having to go to court now (if agency terminates court hearing still required).
- Repeals GS 7B-3807 is repealed regarding interstate compact law. We are still bound by interstate compact law but it removes the language of “do not have the effective law.” This will give more flexibility to how we comply with law.
- Change to post TPR hearings such that there no longer must be concurrent planning. As we are developing policy, expect better guidance around reunification and concurrent planning.
- Additional parameters around the use of guardianship. We are seeing cases come back when guardians wish to adopt children who are placed in guardianship at a young age.
- In addition to placing with relatives, clarifies that the agency must consider people who have legal custody of siblings.
- Changes to practice regarding parental visits and substance use. It requires a motion for review be filed when a parent has a positive drug screen and unsupervised visits. While the motion is pending, the director may impose restrictions but cannot cease unsupervised visits based on a positive drug screen alone.
- There is also some language clean up from Rylan's law. Before a recommendation of unsupervised visitation to the court, the county DSS must observe 2 visits 7 days apart at least an hour long, held no

longer than 30 days prior to the hearing where the agency recommends unsupervised visits. Will help counties to show why the child should be able to visit unsupervised with the parent. This is done long before a child is recommended for a child to go home for trial home placement (which is what Rylan's Law addresses).

- If children are in custody, there will be on a permanency planning hearing track. If not in custody, there will be a review track.
- Requires a caretaker to be allowed to address the court about the juvenile's well being even though they may not be a party to the case.

SL 2021-144/ SB 769 Foster Parents' Bill of Rights: Regulatory and Licensing (see side 11 in the deck for the details of the bill)

SL 2021-132

- The process has not been developed yet but establishes how DSS and LME approach payment of children in emergency rooms
- It also addresses the use of Rapid Response Teams.
- The goal is to create accountability for children in emergency rooms.

Next Steps:

- Counties are receiving notices of child welfare law changes and Dear County Director Letters.
- There will be webinars in late October
- Regional child welfare consultants will follow up in regional meetings and with individual counties.

FFPSA Updates (Lisa Cauley)

- The prevention plan is currently being reviewed by the Governor; however, it appears that the plan is unlikely to change. The prevention plan addresses the Evidenced Based Practices (EBP). Administration for Children and Families (ACF) does not require a plan to reduce congregate care.
- Federal IV-E reimbursements for new placements in congregate care is limited to 14 days except for extended foster care 18-21, pregnant and parenting teens, and children placed prior to October 13, 2021
- There is no change in claiming for children currently in congregate care setting.
- Children who are in a congregate care setting and move on or after October 1, this will be treated as a new entry to congregate care and are subject to 14 days of claiming.
- Children who are IV-E eligible remain IV-E eligible for administrative costs regardless of the 14-day rule.
- Budget Implications:
 - Fiscal impact on foster care program estimates to be \$5.8 million reduction in federal funding the first year and 11.1 the second year. If we continue to place children in congregate care like we are currently, the impact will be a \$15.3 million reduction.
- IV-E Revenue Bridge Funding: All budgets (i.e., Governor's, House, and Senate) include bridge funding with a two-year glide path for counties and the state to help reduce disruption due to funding loss. This allows the child welfare system to adapt to new financial incentives created by FFPSA. Counties will be held harmless for SFY 22 and there will be a 50-50 split for SFY 23. Currently DHHS has funds to reimburse counties for the lost federal share even though a state budget has not been finalized.
- Post October 1, 2021: Reducing congregate care is a transformative effort that will require resource allocation and capacity building. We will need to increase use of kinship care and family foster homes. NC recognizes that some children have needs that are better served in a non-home or non-family-based setting. QRTP's are part of a service expansion that may best serve the needs of those children.
- What will be different for Child Welfare Workers?
 - Continue typical updates for placements and payments, determining IV-E eligibility, code day sheets as Z for any client who qualifies for IV-E (but may not be receiving maintenance payments for placement cost)

- Changes: Will need to notate pregnant and parenting teens in residential facilities, make updates to DSS-5094, update “Removals and Placements” in NCFast by adding the FFPSA Exception for Parenting Support for Prenatal/Postpartum option
- What will be different for Fiscal staff?
 - CPPS reimbursements for residential homes will process as SFHF for the full period or due to an exception.
 - A system process will produce automated adjustments and create special adjustments reports to correct to IV E funding an allowed reimbursement, special sets of adjustments will process in the next period’s financial closing process
 - NCFast: The system will automatically calculate payments under the 14-Day rule and process payments accordingly. Payment screens and preliminary reports should be reviewed.

Lisa Cauley also thanked counties for their work toward getting funding out to transition aged youth. Once counties have confirmed payments, they will be sent to controller’s office for processing within 7 days.

Q: Will the State be sending counties information about how much they have gotten from the "bridge" funding as a tracking mechanism?

A: yes. You will see this on the report. Reach out to Tina Bumgarner if this is not clear.

Q: Since CEBC and Feds have not approved the kinship programs that were submitted for potential FFPSA program approval, is the state advocating for this to be prioritized and/or including them in the NC plan regardless of EBP status?

A: The kinship programs were funded with kinship navigator funding. The EBP’s are all prior to entry to foster care. A lot of our funding is connected to licensure and so our work will be on licensure and evaluating the financial incentives (and related to required background checks required by ACF).

Q: I know the PQA020 will show these placements as State will the PQA022 show the adjustments (14 day IV-E reimbursement) or will there be a different report showing special adjustments, if so how will counties access this report to reconcile payments?

A: More information will be forthcoming. Lisa Cauley will ask Tina Bumgarner to follow up.

Electronic Links Shared:

Here is a link to all of the laws signed by the governor this year
<https://www.ncleg.gov/Legislation/Bills/WithAction/2021/400/B>

Dr. DePasquale's summary: <https://civil.sog.unc.edu/s-l-2021-100-amends-the-juvenile-code-related-to-abuse-neglect-dependency-and-termination-of-parental-rights/>

Domestic Violence Awareness Month Panel: DSS and Family Justice Center (FJC) Partnerships

Guilford County Model: Family Justice Center is a one stop shop for families experiencing different forms of assault, violence, and exploitation, including the Children’s Advocacy Center. Serve people across the life span. Coordinating over 100 professionals including 17 different disciplines. DSS staff are placed in both FJC in High Point and Greensboro. Worked tirelessly to improve individual experiences and limit exposure to systemic trauma. CMEs are coordinated. Collaboration works well.

Alamance County Model: The Family Justice Center is a part of DSS. Skye Sullivan (Director) is a part of the DSS management team. FJC was in development for years, starting in 2005 (opened in 2010). There was a group interested in solving issues with interactions with criminal justice and better coordinate services. Currently there are 11 on site partners and provides opportunity to access many different services. Must work to dispel myths

that cause fear (e.g., reporting to law enforcement or CPS). There is a CPS team in the FJC and a supervisor. There is also someone who can connect visitors to DSS economic services.

Buncombe County Model: Family Justice Center started out under DHHS but has moved under Family Justice Center department, however, DSS and FJC are colocated which helps with collaboration. Are also implementing the Safe and Together Model, training all child welfare staff and FJC. An organizational assessment was a part of this implementation. The FJC is housed in a county building and director is county funded but also engage other service providers on a contract basis.

Examples where collaboration between DSS and FJC changed the engagement and/or outcome:

Guilford: Had not had medical providers for CME for 12 years and were starting to crisis triage because of the lag time in access to services. Because of those partners, were able to get involved earlier and intervene earlier (e.g., legal consult). Now there is a relationship-based response, versus following a protocol. This leads to a more family-oriented response.

Alamance: In situations where there is severe DV and/or human trafficking; there is a high-risk team screening (evidenced based practice) that occurs early on to identify how the FJC services can be wrapped around the client to provide support. Engage family in safety planning and even in how the investigation is conducted (e.g., identifying a time when the DV perpetrator will not be home so that the family can meet with CPS).

Buncombe: A recent success involved a youth in foster care who had run away and was missing. There were concerns about her safety and health. This youth reached out to her SW and disclosed that she had been sexually assaulted while she was missing. They were able to connect with FJC, she was able to go there within an hour and be seen and receive services. The FJC also has a process for case reviews. Rebecca Smith currently chairs this.

Examples of challenges:

Guilford: A challenge has been a lack of medical provider to complete CMEs in the county which has made scheduling difficult. The Advocacy Center is run by a different provider than the provider for the CME's and there has been work done to ensure that CMEs are consistent, collaborative in nature, and are funded appropriately. Another challenge has been transitions. There are regularly new people joining and requires time to make sure that the right people are involved, ready to engage, answer questions, and collaborate.

Alamance: A challenge has been ensuring that service providers in FJC are able to provide services during the hours that the county is operating. Sometimes non-profit schedules are different, particularly around holidays. The FJC also engaged with partners regarding joint decision making. Turnover in partner agencies can also be a challenge. They are serving more people than ever before, and the learning curve can make it difficult. COVID had been it significantly more difficult because of closures the need to still provide access to victims.

Buncombe: Communication, on-going collaboration, COVID have all been challenging at times. Figuring out how to provide services during a pandemic (e.g., small waiting area). VOCA funding impacts have also been substantial with some agencies operating with reduced funding that could impact the work of FJC.

Any advice for counties considering the model? Where to begin?

Guilford: The first step is to hire a director who is passionate and committed to services. The director must have a vision, strong leadership, able to fund raise, negotiate, etc. Will need support and excellent communication. Being able to problem solve and have a collaborative nature. Eleven counties in process of establishing and planning. Money and space are the two biggest challenges. It is important to note that counties are already spending money in child welfare, responding to law enforcement calls, jail time, etc. Will need community champions. Ultimately, it's not about money or space, it's about institutionalizing the partnership.

Alamance: Agree. Need a FJC director who is a passionate leader in this work. Currently, the county is funding the FJC and reductions in funding can be challenging if totally grant dependent. Ensuring that the county manager/leadership understands the importance and value that can be provided. Including all the community partners is also important. The space question will be solved. In planning, the team did think about the fact that

the needs of the community will change. It's important to keep in mind that the services needed today may change over time or not fit in with the model anymore. Plan for the long term.

Buncombe: Building staff capacity around DV informed practice so that they can come to the table as experts alongside the FJC partnerships is important. Agree with the institutionalization of partnership. Get survivors to the table early. Move with an intentional sense of urgency. Know that sexual assault and domestic violence are problems in the community and want to build a model that will stand the test of time.