

West Virginia Commission to Study Residential Placement of Children

STATUS REPORT

for the period

May 1, 2006 through February 28, 2007

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Submitted to

The Joint Committee on
Government and Finance

Submitted by

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This report reflects the work of the Commission for the period May 1, 2006 through February 28, 2007, and serves to provide an update of the status of the Commission's work including a status on the implementation of Commission recommendations.

Overall Work

The Commission thanks the West Virginia Legislature, its Joint Committee on Government and Finance, and Select Committee A; particularly the co-chairs Delegate Virginia Mahan and Senator Billy Wayne Bailey. The continued interest and commitment of the Legislature is fundamental in our effort to reduce the number of children placed out of state. Appreciation is also extended to other initiatives in place to improve the capacity and quality of facilities and services in West Virginia that can help our children in our own state.

Since publishing its summary report, *Advancing New Outcomes* last year, the Commission has been busy implementing its recommendations. Through periodic meetings, the Commission has used a formal tracking and monitoring process to ensure its work is achieved. Further, every effort is made to continue to enhance the working relationships among the key agencies involved in the Commission's work. The Commission has continued to communicate its work to a variety of audiences.

Effective cooperation and communication among the participating entities (Circuit Judges, the State Supreme Court, the Division of Juvenile Services, the Department of Education, the Prosecuting Attorneys Institute, the Department of Health and Human Resources and others) continues at a high level, especially agency-to-agency interaction outside of the direct Commission work. The on-going commitment of Supreme Court Chief Justice Robin Davis to the needs of children is profound.

As noted in the past, our intention is not to interfere with the discretion or ability of the Circuit Courts to place a child in a facility, which is in the best interest of the child. However, we do want to provide the Courts with new and additional options to meet the needs of children in facilities *closest to his or her home, regardless of a local border*. Likewise, we want to make sure that all agencies involved in these issues are respected for their own specific missions. Working collaboratively, and with a focus on the child, we can make a difference in how we look at, and ultimately solve issues regarding, the placement of out-of-home children.

Commission Membership/Working Groups

A few changes in membership have occurred primarily due to retirements. Matt Kittle, new Superintendent for the Office of Institutional Education Programs (OIEP) with the Department of Education, has replaced Frank Andrews following his retirement. Likewise, Jason Najmulski, Interim Commissioner of the Bureau for Children and Families has replaced Margaret Waybright at her retirement. Dale Humphreys, newly appointed Director of Juvenile Services, has replaced Cindy Largent-Hill. Attendance at meetings continues to be strong, and overall interest in achieving implementation of the recommendations remains high.

The Commission continues to rely on active working groups who are composed of many individuals focused on specific recommendations. These working groups see that actions are taken as planned and have been very dedicated to addressing issues, developing new processes and carrying out other activities that help the Commission achieve its work. We are indebted to them for their service.

Other Supportive Initiatives

The Reaching Every Child Task Force, an implementation group led by the Department of Education, continues to work on actions from its original work. Matt Kittle is chairing this on behalf of the Department of Education, and Sue Hage from the Department of Health and Human Resources has agreed to co-chair this task force with Superintendent Kittle. This reflects the significant relationship and foundational work between the Commission and the Task Force, and promotes the effective coordination of the working groups. Furthering this commitment, a cooperative agreement for Sharing of Data to Meet the Education Needs of Children and Youth in Out-of-Home Care has occurred between the Department of Health and Human Resources and the West Virginia Department of Education.

The West Virginia Comprehensive Behavioral Health Commission, established by the West Virginia Legislature during its 2006 regular session, is now fully in operation supporting seven major working groups. Although this Commission has a major emphasis on the entire behavioral health system, its successful efforts will undoubtedly continue improvement work in areas that include some of the children in the out-of-state population our Commission is addressing.

Department of Health and Human Resources representatives are joining Court representatives at the Children Summit in New York in early March 2007, another positive collaborative activity. This “team” will work together at the Summit to develop strategies to expand collaboration between courts and child protection agencies. The results of these efforts will directly benefit the Commission’s work. The participants will be provided the following:

- an opportunity to hear to hear from youth and young adults about their personal experience in foster care and the impact that the child protection system and court processes have had on their lives
- three states expediting appeals
- alternative approaches to resolving child protection disputes
- effective approaches for data sharing
- means for defining and implementing performance measures
- technical assistance resources
- methods to foster local collaboration
- approaches for overcoming other challenges

A special website is being developed for use by the Commission and others involved in the important work of the Commission. This site will house many of the working documents from outcomes of clinical reviews to status of working groups. These will be excellent resources as our work continues.

Accomplishments/Actions

I am pleased that the following are included in the Commission’s list of accomplishments or actions underway in the past year:

- ◆ **Changes in the West Virginia Certificate of Need Summary Review process** have been made to simplify it allowing more timely program reconfiguration and/or expansion to address identified needs, gaps, and barriers.
- ◆ The **WV Child Placement Network (WVCPN)** website continues to be an excellent resource in tracking the daily availability of beds across West Virginia. Of the seventy-one providers identified, fifty-eight are required based on their contract to participate in providing information. In November 2006, it was reported that thirty-four of these providers had 100% participation levels regarding to use of the site, while the rest of the providers ranged from under 60% to 99% participation levels. In February 2007, there were 1001 current registered users on the site.
- ◆ Work continues on implementing **uniform statewide protocols for timely and appropriately pre-reunification and discharge services** for all children in out-of-state placement.
- ◆ The initial **clinical review of youth in out-of-state placements** was completed. This work resulted in a written report that was distributed to the Commission and will be available on the Commission’s website. From this first clinical review process, improvements are being made to enhance the tools used in the review work. In addition, plans are being developed for conducting on-going standard, objective clinical reviews of youth at risk for out-of-state or regional placements. The review has taught us a lot about the youth we serve, in particular those youth placed out of state. Several outcomes identified were:
 - 55% (71 of the 128) youth reviewed required no new services in state and/or upon return. Further analysis at the regional and local levels around issues such as bed

availability, timely intake procedures, providers accepting difficult youth, training issues, utilization of MDT's and CAPS, Regional Clinical Review Teams, and local relationships needs to occur to determine if these were in place;

- 53% of youth reviewed were aged 18 years and older and another 36% of the youth were 17 years old. These youth will be in need of support to ensure a successful transition into adulthood; and
- 17 of the 128 youth reviewed needed services for the Mentally Retarded (MR)/Mentally Impaired (MI). Service development, reconfiguration and training workgroups need to begin immediately analyzing availability of resources in West Virginia for youth falling in the Borderline to Mild MR Functioning Range.

For a complete report of the findings:

<http://www.wvdhhr.org/bcf/documents/reviews/Final%20Version%20OOS.swf>

- ◆ **Funding to continue the current Region II System of Care** activities has been made. As part of its work, Region II will assist in implementation of a “**System of Care**” statewide model. To this end, initial hirings have occurred with the Regional Clinical Coordinators. The Commission and the WV System of Care Implementation Team members executed a formal Memorandum of Understanding (MOU) in December 2006 that commits the full involvement of all parties in the implementation of the “System of Care” model statewide. The System of Care Implementation Team includes members from Department of Education; Department of Health and Human Resources (Bureau for Children and Families, Bureau for Behavioral Health & Health Facilities, Bureau for Medical Services); Military Affairs & Public Safety (Division of Juvenile Services); WV Supreme Court of Appeals (Probation Services); Providers; Mountain State Parents, Children & Adolescent Network (MSPCAN); and West Virginia System of Care.
- ◆ Regarding the concerns to **ensure on-going training of all clinical staff across all service providers**, the Commission has a specific training workgroup that has offered some training in particular areas. The Training Workgroup works in conjunction with the other Workgroups in development and implementation of training identified. Training workshops have included: Methamphetamine Use/Abuse; Increasing Client Engagement & Motivation in Substance Abuse Treatment; Work With/Caring for Abuse Reactive Youth; Understanding the Role of Youth in Prevention, Intervention, Treatment & Service Development for Adolescent Substance Abuse; Childhood Grief & Loss; Legal Issues Surrounding Children & Mental Health; Effective Home Visiting /Role of Fathers; Family-to-Family: Finding Our Voices, Sharing Our Strengths. The membership of the training workgroup is expanded to include individuals with an expertise in the training being developed.
- ◆ Significant work is happening in the **Multidisciplinary Treatment Teams (MDT) arena**. This is a critical area in the process. The Commission’s MDT workgroup is combining forces with the **Court Improvement Program (CIP) Training Grant Subcommittee** and the Children’s Justice Task Force. The CIP Training Grant Committee’s task is to
 - develop and implement Judicial Leadership Roundtable (JLR) sessions and judge-led cross-training, best-practice seminars;
 - re-evaluate and update multidisciplinary treatment team training;
 - provide continuing education to judicial officers; and
 - continue to provide cross-disciplinary basic and advanced training on child abuse and neglect law and procedure.

Commission members serving on the CIP Training Grant Subcommittee include Circuit Judge Gary Johnson and Family Court Judge Jane Charnock-Smallridge. Commission member

Judge Alsop, along with Judge Swope and Judge Sharp, will be members on the **CIP Judicial Leadership Roundtable Subcommittee**.

The **mission of the Children's Justice Task Force** is to "identify barriers to the successful resolution of child abuse and neglect issues and to educate and advocate for change". The Task Force examines statewide policy and legislation regarding the investigative, administrative, and judicial handling of cases of child abuse and neglect. This review, in turn, helps make the legal process less traumatic for victims. The Task Force works in collaboration with several organizations and agencies in the child welfare realm. Commission member Andrea Darr, with the WV Prosecuting Attorneys Institute, serves on the Children's Justice Task Force. This collaborative effort should be a significant positive step in providing support for improving the MDT process throughout the state.

- ◆ The **Bureau for Behavioral Health and Health Facilities** announced on December 19, 2006, the **funding availability for two projects**, one in the northern part of the state and one to be located in the southern part of the state. This funding will provide a **continuum of care to transitioning adults** (youth aged 17 to 21). The proposed project will be a phased process of gradual independence for those individuals who have not received any previous training or preparation for independence and who require substantial planning (phase I). Individuals who do not require the full range of services and have some preparation will enter the program based on an assessment of skills, abilities and level of readiness, and may be placed at the program phase/level for which they are best suited. A review of the proposals has been completed and an announcement is expected to be made during March 2007.
- ◆ The **Department of Health and Human Resources** is planning to release a **Request for Applications for group homes for adolescent children with co-existing disorders**. Consideration will be given to applicants that will provide permanency via the development and implementation of a children's residential program that would provide care, support, supervision, and treatment on a local level. The purpose of this request is to establish a means for the treatment of children with multiple disabilities in local communities and to promote opportunities for permanency for these children at the local level. The Request for Applications is expected to be released during March 2007.

Closing

The Commission still has work to do including defining an oversight group to sustain the monitoring and continued improvement of the system. The continuing support of the Legislature remains essential as well. Working together, we can make a difference in the lives of these children.