

<b>West Virginia Commission to Study Residential Placement of Children Summary Notes</b>	
<b>Group Meeting:</b> Quarterly Commission Meeting	<b>Meeting Date:</b> June 6, 2019 <b>Location:</b> Charleston Coliseum – Parlor Room A & B
<p><b>Members Present:</b> Cabinet Secretary Bill J. Crouch; Stephanie Bond; Susan Fry; Jessica Ritchie-Gibson; The Honorable Tera Salango; Rhonda Hayes; The Honorable William Thompson; Nikki Tennis (Proxy for Christina Mullins); Keith King (Proxy for Cindy Beane); Jacob Green; Frank D. Andrews (Proxy for Jacob Green); Brenda Hoylman (Proxy for Cindy Largent- Hill); Sheila Paitsel (Proxy for Susan Beck); Debi Gillespie (Proxy for William K. Marshall); Jim Jeffries (Proxy for Dr. Catherine Slemp); The Honorable Philip M. Stowers; Steve Tuck;</p> <p><b>Members Absent:</b> Commissioner Linda Watts; The Honorable Andrew Dimlich; Dr. Catherine Slemp; Dr. Steven Paine; William Marshall</p> <p><b>Guests Present:</b> Laura Barno; Jeremiah Samples; Raymona Preston; Trudi Blaylock; Renee Ellenberg Brady; Angie Hamilton Thomas; Katrina Harmon; Evan Sprigle; Mollie Wood; Betty Rivard; Marissa Sanders; Jennifer Dietz</p> <p><b>Administrative Assistance:</b> Linda Gibson and Mary Thompson</p>	
<b>Commission Meeting</b>	<b>Decisions/Notes</b>
<p><u><b>Opening</b></u></p> <p>Secretary Crouch called the meeting to order at approximately 10:30am. He welcomed everyone to the meeting.</p>	
<p><u><b>Meeting Notes</b></u></p> <p>Secretary Crouch asked if anyone had any questions regarding the meeting notes from the last commission meeting on March 7, 2019. The meeting notes were reviewed, and Secretary Crouch asked for a motion and second to approve and all in favor agreed. Notes were approved without any questions or revisions.</p>	<p><b>The meeting notes were approved and are posted on the Commission's website:</b></p> <p><a href="http://www.wvdhhr.org/oos_comm/">http://www.wvdhhr.org/oos_comm/</a></p>
<p><u><b>Family First Prevention Services Act (FFPSA) Update</b></u></p> <p>Laura Barno provided a presentation on the Family First Prevention Services Act. She and Cammie Chapman gave a presentation at the Judicial conference, but they ran out of time at the conference and thought that there would be additional questions, so she opened the floor for questions. The goal was to tie a lot of the initiatives together and explain where Family First fits into the group of initiatives currently in process. Since Family First is being established to reduce out of home care and to provide prevention services in the home for children, the presentation was primarily related to the Qualified Residential Treatment Programs (QRTPs). Several months ago, a Request for Applications (RFA) was released to solicit the Provider community an opportunity to provide QRTP. This is the first phase of the QRTP procurement. We did not get the 100 beds we wanted. Level III will remain the same but will not be considered behavioral health. The mutual goals with the Department of Justice (DOJ) require the Department of Health and Human Resources (DHHR) to reduce the number of children in congregate care in West Virginia, so we can expect the QRTPs over the next five years to be the central force in providing behavioral health treatment in the state. The RFA will help West Virginia to begin to build the QRTPs.</p> <p>A set of Judicial Rules that were revised by Judge Alsop were in the meeting packet and was sent to the Supreme Court recently for public comment supporting the QRTP. There is a lot of financial risk in QRTP for WV due to federal funding and the challenges we face with QRTP. The response from the</p>	

<p>RFAs is expected to be released soon. Of all the requirements under the Family First Act, the QRTPs require the most restrictions. Technical assistance is being provided to some of the Providers and we anticipate having the first round of information by the middle of June. A definitive date has not been established for the second phase of procurement.</p> <p>The final set of program instructions from the federal government, which will help on the evidentiary standards for the services, should be provided soon. A meeting is scheduled with some of the prevention providers to support the community-based services needed.</p> <p>When asked how the other levels of congregate care would be paid for, the response given was that if they align with the provisions to prevent sex trafficking, it will be business as usual, nothing will change. Agencies that do not become QRTP will stay in vulnerable youth, they won't have the Medicaid rate and they will not be a behavioral health provider.</p> <p>Currently, the Title IV-E requires the minimal criminal and CPS background checks and training components, but with Family First it will add programming to prevent sex trafficking and the trauma care. The revised Legislative Rules are being reviewed by federal partners to see if they meet the standard. Once they are given a pre-approval, the Contracts will be modified to reflect this. October 1<sup>st</sup> is the deadline.</p> <p>The Title IV-B funded services will not change. Because Socially Necessary Services are funded solely with state funds, these will not change.</p> <p>We would like to have all prevention services available to DHHR direct-line staff in one location so they won't have to navigate access from multiple places. The prevention services will be added to the current matrix of services. However, staff will not see the funding for the services because this will be coded on the backside of the system to be accessed by our financial staff and managers.</p> <p>It is too early to tell if the Family First Act will affect education programming. As things shift, we may not have an on-ground school for Level 3, but it is too early to tell. Currently, if you are a vulnerable youth, placed in a Level 3 facility, Medicaid requires an on-ground school.</p> <p>West Virginia wishes to be deliberate in the changes we need to make. In terms of a metaphoric "hospital". Some will not require a high level of care, while the QTRP would be like the "intensive care unit" and include children who have Serious Emotional Disorders (SED) and need more care than those in a Level 3 facility. It will take years for this system to unfold, that's why we asked for only 100 beds. Furthermore, we will reduce the number of children we place out-of-state. It is difficult to fully monitor our children who are placed out of state. We want to have them in-state with providers in WV who we know and know what they are doing.</p> <p>There are four areas we want to work together cohesively: Family First, SED waiver, the Managed Care Organization (MCO) -HB 2010, and the Department of Justice Agreement.</p>	
<p><b><u>Department of Justice (DOJ) Update</u></b></p> <p>Secretary Crouch provided an update on the Department of Justice (DOJ). In 2014, the DOJ notified the state formally of an investigation into the Homestead Act and whether we were meeting the requirements of the American Disabilities Act (ADA). They felt we had too many kids in congregate care. The DOJ defines</p>	

residential care as being the same as congregate care. West Virginia is currently 10<sup>th</sup> in the Country with children in Congregate care, and we vowed to reduce those numbers. Other states may have different approaches on how to handle this, but ultimately, we had to use the DOJ's numbers and proceed with making changes based on those numbers.

The Memorandum of Understanding (MOU) was signed on May 14, 2019, it is not a consent decree, Secretary Crouch was firm on the fact that he would not sign a consent decree. (A Consent Decree is a settlement where you agree to certain conditions, it is filed in court, so you are essentially sued and that decree then becomes the guide of what you must do per the court). An MOU is an agreement between the DOJ and the DHHR. The DOJ will have consultants reviewing WV DHHR data twice per year, discuss with staff and others on how we are doing, and then provide a report to the DOJ. Initially they wanted consultants embedded in the DHHR full-time, but DHHR refused those terms.

The MOU memorialized the partnership between the State of West Virginia and the DOJ to provide mental health services to children in the most integrated setting appropriate, by continuing to expand community-based mental health services and reducing the number of children in residential health treatment facilities over time. DHHR and the DOJ agree that we need to provide adequate and appropriate care for our children who need that care. The MOU is on the DHHR's website.

As a result of the agreement, we have made great strides with the expansion of Safe at Home wraparound services statewide. The expansion of services, along with the implementation of the Family First Prevention Services Act, the application for the waiver for Children with Serious Emotional Disorders and the implementation of HB 2010 are all aimed at improving the child welfare system in West Virginia.

By December 2022, we are required to have a 25% reduction in congregate care. The reduction percent was set to meet the national average, but this also meets the same outcomes as DHHR and DOJ. With the DHHR and DOJ prepared to work together to achieve good outcomes for children and families, the discussions were easier and more productive. The DOJ will provide advice to West Virginia but will not dictate what we should or should not do. This arrangement allows for a more productive relationship.

Medicaid is sending the SED Waiver request to the federal government this week, they will have 90 days to review it. They are hoping it will be approved by October 1<sup>st</sup>.

General Counsel, Brian Abraham from the Governor's office also attended several negotiations and suggested Superintendent Stephen Payne, Superintendent of WV Schools and Secretary Jeff Sandy, West Virginia Military Affairs and Public Safety sign the MOU to show West Virginia's commitment to both the education and all services that benefit children and youth.

The changes will not happen quickly. We will need to work together so we do not disrupt a child's progress being made through the appropriate least-restrictive level of care that is possible. Statistically, we want to keep children in their own homes, but when we cannot, our second choice would be to keep them with relatives/kin in closest proximity to their community. Secretary Crouch said he want everyone to be open, transparent, give feedback and help

<p>us as we move forward.</p> <p>Judge Stowers stated he likes the current data reports provided at the meetings but feels there should also be data provided quarterly that also tracks the federal targets and the numbers of kinship and residential placement. The reduction of 25% began back in 2015 so we have already made some progress. The Manage Care Organization (MCO), per HB2010, will also begin to have an impact on better outcomes. The MCO is expected to begin by January 2020.</p> <p>Jeremiah provided the following statistics:</p> <p>June 1, 2015; 1,030 of the 4,600 children in State custody were in child residential care;</p> <p>December 1, 2018; 945 out of 6,743 children in State custody were in child residential care; and</p> <p>May 1, 2019; 1,023 out of 7,095 children in State custody were in child residential care.</p> <p>Based on current numbers of children in State custody the number we need to be at 772 in congregate care to be compliant with the DOJ.</p>	
<p><b><u>Commission Legislative Responsibility and Goals Update</u></b></p> <p><b>Goal 1: Transformational Collaborative Outcomes Management (TCOM)</b></p> <p>Linda Gibson provided an update on Goals 1 and 4. TCOM includes both the Child and Adolescent Needs and Strengths (CANS) tool and the Family Advocacy Support Tool (FAST).</p> <p>TCOM is being addressed by the Service Delivery and Development (SDD) workgroup. Since Susan Fry's resignation as the Chair for the SDD, two co-chairs Renee Ellenberger Grady and Robin Renquest were appointed. Renee or Robin will provide the update going forward. They are still working on realigning the purpose of the workgroup. The next meeting is scheduled for June 10, 2019.</p> <p>It is expected that the sub-group of stakeholders that have collaborated for more than 12 years on this goal, will continue (including the Department, Susan Fry, Debi Gillespie, Tammy Pearson, etc.) will keep the SDD Workgroup informed so the SDD can report to the Commission. Typically, service providers, the Bureau for Juvenile Services, and the Bureau for Behavioral Health utilize the CANS tool. The FAST is being piloted to be utilized by Youth Service staff.</p> <p>As updates are provided provide updates to SDD and other workgroups about meeting the established outcomes.</p> <p><b>Goal 2: Provider Input at MDT and Court</b></p> <p>Brenda Hoylman provided the update on Goal 2. She stated that they are still in Phase 1 of the data collection for the MDT process (i.e., talking to stakeholders around the State) and haven't been able to get out as much as they would like but planning to get out after next week.</p> <p>Steve Tuck asked if there was a copy of the survey available that they are using but Brenda stated right now it is more informal, they want the data collection then will create a survey.</p>	

**Goal 3: Implementation of Every Student Succeeds Act – ESSA (focus on the Education of Children in Foster Care)**

Frank Andrews provided the update on Goal 3. He advised that they had a meeting on April 24<sup>th</sup> of the Out of Home Care Education Advisory Committee. During this meeting they discussed the notification of the DHHR to the Department of Education on when a child was being placed out of state or when they are out of state and then return to one of our county school districts.

*Sheila Paitzel* stated that her office has been working with the DHHR about sharing data that can be used more effectively. For a long time, her office has been receiving a monthly list of children who go out of state in the previous month. Since this list doesn't include the data of who entered or exited it may be 6-8 weeks before they realize a child has already left care (they use the data to determine if an out-of-state provider should be paid for educational costs). It is difficult for them to match the data they are receiving with the invoices for payment. They are currently working on an MOU with Management Information Services (MIS) for data sharing for several years. MIS said they could provide the data she is receiving more frequently, but this hasn't occurred yet.

They need to be aware of when a child comes back from out-of-state so they can be in-school earning credits and able to graduate. With the new SAGWIS system that is being developed, it is thought that a "portal for the Department of Education" will be available to have the ability to access real-time data. Currently, it is difficult because the data provided is "point-in-time" and isn't pulled until the end of each month.

Hopefully the new system build will help with better tracking of children in out-of-state and set up some sort of training of the workers.

Another way they track children in out-of-state placement is through their Office of Diversion and Transition Programs (ODTP). Rachel Stewart, with ODTP, assigns the out-of-state children's cases to the Regional Transition Specialists. Additionally, the ODTP asks the out of state facilities to e-mail/notify their office when a child from WV is placed in their facility. The out-of-state providers are doing a better job of notifying than the Regional Transition Specialists.

When students with disabilities are out of state, the county where the child resides is responsible for a part of that students out-of-state tuition through their special education allocation. When they don't have this data on a regular basis, they are charged for the education annually which is difficult to know how much to set aside.

Furthermore, there have been situations when an out-of-state facility has been paid, but because the system case record was not updated timely by the case worker, the county schools paid for students that had been returned to WV and no longer at the facility. Requesting "back-pay" from out-of-state facilities that were overpaid has its own issues.

Legislature met and are planning to look at the payment side and educational outcomes for the children in Foster Care. Although these children are placed out-of-state, they have constitutional rights like other children. Several providers have approached them with concerns about it and the fact that county boards and those in the transition unit for Education aren't getting the information needs to be addressed immediately. Jeremiah requested that they set something up before Legislature begins so at the least, they can be educated about these

**Linda will follow up to see if MIS on the status to provide the data more frequently (from a month to weekly) and will correspond with Sheila.**

<p>issues.</p> <p>Frank Andrews discussed the study on children in foster care. An updated report will be available for the Commission meeting in September, showing 2017-2018 information. That will allow a 2-year comparison.</p> <p>One of the highlights of the Out-of-Home Care Education Advisory Committee meeting was a presentation by the University of Minnesota regarding a program of children in Out of Home care. The purpose of this highly structured mentoring program is to keep children in school, keep them engaged and better educational outcomes. The results of this program have been nationally validated and are spectacular. We are piloting this program with Clay County schools. The mentors are being paired with students in Out of Home care and going to college. The WVDE is looking for the funding to expand that program. It is not expensive to operate but searching for the resources is what is key at this point.</p> <p>The next meeting will be in August.</p> <p><b>Goal 4: Transitioning Youth from Foster Care</b></p> <p>Linda Gibson, Renee Ellenberger Grady and Robin Renquest provided an update on the Transitioning Youth from Foster Care. Instead of having two groups working on similar goal, the SDD felt that the Family First Stakeholder group, Youth transitions from Foster Care to Adulthood, once led by Christina Bertelli-Coleman (now led by Carla Harper) should also address the Transitioning Youth from Foster Care. This group is doing amazing work. The plan is to have the Family First Stakeholder group, Youth transitions from Foster Care to Adulthood to provide updates to the SDD workgroup who can then provide updates to the Commission.</p>	
<p><b><u>Other Commission Member Updates</u></b></p> <p>Judge Stowers spoke on how he feels it was good to remove the moderator/mediator from the meetings, so the Department and Judges can discuss matters important to them and reach common ground in finding ways to be more beneficial to the Commission and the community.</p> <p>Judge Stowers also recommended that Family First funding be utilized to provide education for Judges. This provision in Family First is funded at “dollar for dollar”. There are currently about 30 Judges with less than 2 years of experience and now would be a great time to provide training. Judge Stowers felt there was a common belief by the Department that Judges are addicted to removing children because “that’s the only way to handle these children”. He said this is not how most Judges feel. If other parties haven’t done their homework, the Judges must decide based on the information provided. He said there needs to be opportunities for the interaction between the new and old Judges for training purposes. An example provided by Judge Stowers was to have a separate Judicial conference with the Department to learn what’s available, what’s necessary, and what Judges need to learn about community services. He felt an incentive for them to be willing to give up their time should include meals and lodging depending on how long the conference would last. This would also improve on the relationship between the department and the judicial branch. Additionally, he stated that there isn’t a kid in care that wasn’t placed there by a Judge, so we all need to find middle ground on how to educate and teach things like the SED waiver and other services that can achieve better outcomes.</p>	<p><b>Secretary Crouch welcomed the three new Judges that have joined the Commission. The Honorable Andrew Dimlich who was unable to attend today, the Honorable Tera Salango and the Honorable William Thompson.</b></p>

Secretary Crouch also felt that the message he was getting from Judges is that they want to work with the Department, and he is committed to making this happen.

Stephanie Bond spoke on the Family Treatment Courts. Family Treatment Courts are utilized when a child has been adjudicated due to a substance abuse issue. A referral is made to the Family Treatment Courts who then keep both the youth and family accountable. Thanks to Secretary Crouch and Commissioner Linda Watts, there will be a designated DHHR CPS worker assigned to each of Family Treatment Court programs. Other team members include, Case Coordinators, community-based mental health centers and other stakeholders who will help parents address any issues they are having timelier, which will help the family achieve permanency quicker. The Family Treatment Courts will include:

- Parents coming before the Court weekly;
- Parents will address what has been done and what has not; and
- Parents will be drug-screened 3 times per week.

Currently, the Family Treatment Courts are being piloted in three counties (Boone, Randolph and Ohio counties), but the hope is to expand the Family Treatment Courts statewide. There are 18 Judges who have requested to be a part of this process.

Secretary Crouch will go to the Legislature to discuss the need for additional funds to support the Family Treatment Courts and the additional case workers needed for this program.

Susan Fry gave an update on the Youth Transition Project. This project will be offered to youths who are aging out ages 16-23. Working partnerships include the WV Department of Education, Office of Diversion and Transition; Wayne County Board of Education and three High Schools; Marshall University (MU) Social Work program; MU Center of Excellence for Recovery and their Sustainability program; Coalfield Development corporation; the Wayne County economic development corporation; Cabell Huntington Hospital; Toyota, Anthem's WV Health Plan; and Braxton International.

The project includes the construction of tiny homes for a "village" setting. The tiny home village is based on research where assistance and supports are provided in a village environment that provides a sense of community. By bringing the entire community in through these partnerships it gives these youth a sense of connection.

The first tiny home will be delivered late July, early August. The National Guard is assisting with the delivery. Prunytown inmates are building this home and it is funded by the WV Department of Education. While this project is helping youth in the program, it also helps the inmates to gain a skill. The 2<sup>nd</sup> tiny home will be delivered the beginning of December and was designed by engineering students at Wayne High School and built by students in Tulsa High School. The 3<sup>rd</sup> tiny house is being built in Prunytown and it will be delivered in December as well.

In addition, a hydroponic garden will be part of the village. A key piece of this program is food security. Anthem funded, donated and provided everything needed for a 1200 sq. ft. hydroponic garden. Those assisting the young people in gaining knowledge from the hydroponic garden are also trauma informed. The hydroponic garden is scheduled for the first August.

<p>The Department of Education is putting a Task Center on grounds for the village and the first technical career education certification will be for agriculture. Later the plan is to provide certification for culinary, hospitality and tourism programs. Marshall University students are going to be sending interns and have the gardeners teach gardening skills.</p> <p>Additional plans are underway for an addiction prevention and treatment is being planned through a partner who will fund evidence-based models for youth in care; Coalfield and local businesses will provide job readiness, paid internships and employment; Integrated health; and partnering with veteran's groups.</p> <p>Ribbon cutting ceremonies will be after the first of the year and the Commission members and guests are invited to attend.</p> <p>The program has six 17-year olds, two 19-year olds, six 16-year olds, and one 18-year-old.</p> <p>Nikki Tennis, with the Bureau for Behavioral Health (BBH) provided an update on the initiative of the Mobile Crisis Response program. Secretary Crouch and Deputy Secretary Samples provided the support for two Announcements of Funding Availabilities (AFAs) for Children's Mental Health Wraparound, to be expanded statewide, and Mobile Crisis Response.</p> <p>The Children's Mental Health Wraparound has been a pilot for the last couple of years and been shown to be beneficial. The Mobile Crisis Response program is being pilot statewide.</p> <p>The applications are due June 14<sup>th</sup> for both programs and although it will be very busy trying to get these two programs out of pilot status to statewide, they are planning training, collaborating with other peers in the departments, The Bureau of Behavioral Health(BBH), Bureau for Public Health (BPH), and the Bureau for Medical Services (BMS) all share resources to work together and help families thrive.</p> <p>The BBH is also working on the Expanded School Mental Health Initiative, various prevention initiatives for substance abuse and for suicide prevention, and six regional Youth Service Centers that include outpatient mental health and substance use treatment and recovery services. Many of the BBH's programs are aimed toward early teens to early 20s and have been doing very well. They are working hard to change the culture of working with the family prior to removal.</p>	
<p><b>Meeting Adjourned:</b> Secretary Crouch thanked everyone for their input and time and stated that he was glad we could come together and continue this work toward helping the children and families of our State.</p> <p>Secretary Crouch adjourned the meeting at 12pm.</p>	
<p><b>Next meeting: June 6, 2019</b></p> <p><u>2019 Approved Quarterly Meeting Dates</u></p> <p>March 7, 2019    June 6, 2019    <b>September 5, 2019</b>    December 5, 2019</p>	