

SEN. JUSTIN CHENETTE, SENATE CHAIR REP. ANNE-MARIE MASTRACCIO, HOUSE CHAIR

MEMBERS:

SEN. PAUL T. DAVIS, SR. SEN. LISA KEIM SEN. NATHAN LIBBY SEN. LINDA SANBORN SEN. JEFFREY TIMBERLAKE REP. KATHLEEN R.J. DILLINGHAM REP. AMY ARATA REP. H. SAWIN MILLETT, JR. REP. MARGARET O'NEIL REP. TERESA PIERCE

MAINE STATE LEGISLATURE GOVERNMENT OVERSIGHT COMMITTEE

MEETING SUMMARY October 15, 2019

Call to Order

The Chair, Sen. Chenette, called the Government Oversight Committee meeting to order at 9:05 a.m. in the Cross Office Building.

Attendance

Senators:	Sen. Chenette, Sen. Davis and Sen. Sanborn Joining the meeting in progress: Sen. Timberlake Absent: Sen. Keim and Sen. Libby
Representatives:	Rep. Mastraccio, Rep. Millett, Rep. Pierce and Rep. O'Neil Joining the meeting in progress: Rep. Arata Absent: Rep. Dillingham
Legislative Officers and Staff:	Danielle Fox, Director of OPEGA Amy Gagne, Analyst, OPEGA Etta Connors, Adm. Secretary, OPEGA
Legislators: Chairs and Leads of Health and Human Services and Judiciary Committees:	Sen. Gratwick, Rep. Hymanson, Sen. Carpenter, Rep. Bailey, Sen. Moore and Rep. O'Connor

Introduction of Committee Members

The members of the Government Oversight Committee introduced themselves.

Summary of September 23, 2019 GOC Meeting

The Meeting Summary of September 23, 2019 was accepted as written.

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New Business

• GOC discussion of oversight efforts for the child protection system in Maine with the Chairs and Leads of the Health and Human Services and Judiciary Committees

Director Fox said over the year the GOC has been looking at issues with regard to the child welfare system and talking about ways to coordinate the oversight of any improvement efforts and ongoing issues, not just for the GOC, but the policy committees that deal with some of the issues regarding child welfare. The Committee talked about a way to keep track of what was going on and had envisioned a chart that would transcend, not only to the GOC and other committees, but also potentially beyond the 129th Legislative Session so there could be an ongoing document that will keep track, at a high level, of the improvements and efforts towards improving the child welfare system in the State. From the Committee's previous discussions about the elements they wanted included in the document, she thinks she has covered them all, but wants to hear from legislators in terms of whether the document is useful and meets all the elements the GOC had intended. She noted that she will be adding any executive orders, new reports, enacted legislation, etc. in the update's column. She would welcome any suggestions for changes to the document to make it more workable and useful as the document is intended to be an index so it will be translatable across Committees.

Director Fox summarized the child protection system improvements - oversight coordination/tracking document (tracking document). (A copy is attached to the Meeting Summary.)

Rep. Mastraccio thinks the tracking documents reflects what the GOC heard and is hoping that it is a document that will be able to be used.

The members of the Health and Human Services (HHS) and Judiciary (JUD) Committees introduced themselves.

Sen. Chenette explained that the reason the GOC wanted to hold the meeting with the Chairs and Leads of the HHS and JUD Committees was to have a dialogue between the Committees to make sure the GOC is aware of what they are working on in their policy committee as it relates to child protective services in relation to OPEGA reports and investigations regarding child protective services. The HHS and JUD Committees are tackling child protection in different perspectives, but they are all equally important, and why the GOC wants to have the discussion.

Sen. Chenette asked if there was anything the members of HHS or JUD Committees wanted to speak to as a recap from the last Legislative Session that their Committee zeroed in on, or relevant, to the discussion.

Rep. Hymanson said she created a document for the JUD Committee that indicated what bills and work the HHS Committee had done during the session. In her prior 4 years as a legislator the HHS Committee could not get information and wanted to thank DHHS for now providing the Committee access to needed information and dialogues with them.

Rep. Hymanson said there are federal funds that she thinks Maine should be tracking because prevention is a difficult and important part of the whole discussion around child protection. The State is getting federal funds called Families First. The funds are not for primary prevention, to prevent anything from happening with kids, but is secondary prevention meaning if a child is in danger of being removed from the household, how do you make the family healthier before the child is taken out of the household? The State has access to Families First funds for 12 different programs that are evidenced based and have evidence that they work and will be funded by the program. She thought it would be good to find a way to track that information because prevention needs to be added into the matrix and she is not aware of other federal funds, but maybe there are some available.

Rep. Pierce asked how the State initiated receiving the Families First funds. Rep. Hymanson said the federal funds come through the Executive Branch so the Legislature does not have control over them. The State had previously not been good about asking for the federal funds that are available. DHHS has now been very good about asking for funds, but unfortunately they did not get funding in the budget for a grant writer which would have helped, but the HHS Committee understands they have been reaching out to ask for funds. Families First funds are offered to all of the states. States have to put in a plan and Maine has deferred their receipt of the money until they have developed a plan. Maine is currently in the development stage of their plan and DHHS and Dr. Landry held a stakeholder meeting a few weeks ago in order to get people to be involved in the implementation of the Families First funds.

Rep. Mastraccio noted that the first time she heard about Family First funds was from Dr. Landry's presentation to the GOC. She asked if the HHS Committee will be able to provide oversight in terms of making sure that a plan for the funds is going to happen.

Rep. Hymanson thinks DHHS is excited about telling the HHS Committee about their progress. She also thinks the tracking document takes the HHS Committee's process into account and looks forward to the sequential updates.

Rep. Mastraccio said one of the GOC's concerns is oversight through committees and that there be a method for oversight that continues when current members are no longer in the Legislature. She asked if the HHS and JUD Committee members think the tracking document will be able to be used regardless of who is sitting in the chairs of the 130th Legislature. Rep. Hymanson thinks the tracking document can be used.

In response to Sen. Chenette's question of whether a full or part-time grant writer would be beneficial for some of the programs the Legislature is trying to put forward related to the child protection system, Rep. Hymanson said she would defer to DHHS to see if that position is a current need.

Rep. Millett asked Rep. Hymanson if the Family First funds were currently flowing and the potential for any State matching monies or other program implications. Was she familiar with whether or not there will be language in the Second Regular Session budget that would commit state funds and make State obligations statutorily or otherwise? Rep. Hymanson said she could not speak 100% to Rep. Millett's question, but from what she is aware of, the funds don't require state matching funds, or any other grant writing, but would defer to DHHS to answer that question.

Sen. Carpenter said from the standpoint of a practitioner and someone who did not hear Dr. Landry's presentation to the GOC, he agrees with Rep. Hymanson and likes the tracking document. The problem for him is he does not know all of the acronyms. For example, in the specific initiatives column he has no idea what SDM Tool Consistency stands for. He wants to know what the policy committees, OCFS and the Legislature are doing to make the system better for kids. He is assuming that all of the initiatives, which he believes came from Dr. Landry's presentation, are good, but he does not know what they mean in terms of real cases involving real children in Sanford or Houlton, Maine. The initiatives are improvements and a step in the right direction, but what he needs to do is meet with Dr. Landry, or somebody from OCFS, and ask what they are doing. He has strong feelings about permanency, removal, assessment and case workers doing that administrative personnel should be doing in order that the case workers can do social work. He guessed that many of his concerns have already been dealt with, but does not know that.

Sen. Chenette asked if DHHS/OCFS had done presentations before JUD or if there is an ongoing dialogue regarding what role JUD plays. Sen. Carpenter said JUD arranged for a presentation by DHHS of how a child protective case went forward, but that was prior to Dr. Landry being hired. Other than that OCFS has not

briefed JUD. He said a presentation would be very helpful for him, but he may be the only one who does not know what some of the terms mean in the tracking document.

Rep. Bailey thinks it would be helpful to have dialogue between OCFS and JUD. She understands the focus has been more on case work assessment, because that is where a lot of the identifying problems are, but thinks somewhere in the mix it is forgotten that what you do over here also has an effect when it hits the courthouse steps. For example, with the decision to no longer use safety plans, we saw a massive influx of cases in the court that we did not see before. She does not know if anyone from the JUD Committee was at the stakeholder meetings when those decision were made so would like to see a dialogue and inclusion that recognizes that when talking about permanency, the right and responsibilities of parents and children, and what the case worker is doing at the assessment stage, etc. are all things that the JUD Committee oversees.

Rep. Mastraccio referred to OCFS's October 1st report noting it said the OCFS changes having an impact on the judicial system and other entities. What is hoped for coming out of this meeting is a way to facilitate the discussion and involve all of the interested parties so they are not duplicating efforts in other areas. She thinks it would be helpful for the entire JUD committee to hear, maybe not the exact presentation, but a presentation about the initiatives because it was a very comprehensive explanation of what is going on and would give JUD the opportunity to ask questions about those particular acronyms.

Sen. Chenette noted that Dr. Landry's presentation slides to the GOC are on the GOC/OPEGA's website.

Sen. Carpenter asked if once the initiatives, changes or recommendations are formulated, is there a plan for OCFS to meet with the practitioners, people who either represent parents or children, to say here is what we are proposing.

Rep. Mastraccio thinks it is an ongoing discussion and evolving as they go that involves all of the stakeholders, and as noted by Sen. Carpenter is concerned because the Judicial Branch and the JUD Committee does not seem to be involved in the planning process. Sen. Carpenter said it is not a turf issue, but is whether the people who are going to have to work with the proposals have had input. He does not know who the stakeholders involved are so does not know if they are parents, attorneys and/or guardian ad litems.

Sen. Gratwick said DHHS is a department of 3,300 to 3,500 people with some very capable administrators. There has been chaos in OCFS in the past, but what they have done for changes, including staff training and support, are encouraging. Most of the initiatives are very specific and it is the HHS Committee's prerogative to put more pressure on one particular area. He referred to OCFS's dashboard and HHS, as a Committee, thought those were important levels to be working on because you have to have a structure with data and good people in order to have an impact further down the line. Without that, you can help one person here and there, but the Committee's role is to make sure the system is working well today and is going to be able to continue on into the future regardless of who is sitting in the chairs.

Rep. O'Connor did not understand how the court cases are working and how the State gets the Families First funding. She noted the number of cases are going up and did not know why. She has received calls from people who are trying to work their way through the child protective system, but it has been difficult for them. She thinks if the Legislature does not address both of these sides equally then we are going to wind up with more problems. Charts don't equate to the human values of what is going on behind the scenes of families still struggling. She is hoping that she can better understand the judicial part, as well as the HHS part. She is also concerned with the number of bills that were carried over, noting a lot of them had bipartisan support, but had no funding and is looking forward to seeing how they can work that issue in the future.

Sen. Carpenter said if you hire more police officers you get more crime so hiring more case workers ensured that there would be more cases brought forward. The opioid crisis is absolutely fueling a bit of it and in his

opinion there is also an increase in domestic violence, which is a significant driver of some cases. Safety plans are appropriate, but you need the personnel to do the follow-up work. The tragic deaths that occurred last year might not have resulted in tragedies if OCFS had had the personnel to follow-up on them. He is an advocate of not hiring more case workers at this point, but of hiring more administrative people. The same people are running the system as were running it 5 or 6 years ago, that has not changed because of the change in the Administration or leadership. They basically have the same case workers, for those who have not burned out, and same supervisors. There has not been any substantial change in the statute as far as redefining jeopardy so he is trying to figure out where the changes are that will make children safer.

Sen. Chenette asked if the JUD Committee has heard, or seen, reports of an increase in the courts' workload.

Sen. Carpenter heard anecdotally about increased court workloads when talking to judges over the summer because in Aroostook County to get a jeopardy hearing you are looking at two months out so there is an extra two months for the parents to wait and for the children to be in limbo. At this point he thinks the District Courts are probably spending, although you should ask the Chief Justice, at least 50% of their time on child protective cases.

Rep. Bailey said the JUD Committee oversees Indigent Legal Services and saw more money being spent for defenses in child protective cases because more cases are going to the court and people are entitled to attorneys.

Sen. Chenette does not think the GOC has heard a lot on the Judiciary side regarding the child protection system. As Sen. Carpenter mentioned earlier you can increase case workers and do a lot on the HHS side, but if there are months of delay in the Judicial process that impacts potential safety concerns that families have. He asked how the JUD Committee can play a role in trying to advocate for changes on the Judicial side to improve the delays of justice.

Sen. Carpenter thought you would want to have the Chief Justice, the Chief Judge of the District Court, Judge Oram and Judge Sparaco come in to talk with the Committee because he did not feel comfortable speaking for them, but does know that the overload is serious.

Rep. Bailey thinks it is important that representatives from the Judicial Branch, parents' attorneys, guardian ad litems, foster parents, kinship placements, etc. have a seat at the table because that perspective has not been at the table for a lot of the changes internal to DHHS. For example, if you do away with safety plans, those cases are now going to end up in the courts so can we maybe talk about a way to revise the safety plan process so there is some review, or oversight, without overloading the Judicial system. As previously stated, the focus has been on how can we change things internally at OCFS? She understands why that needed to be and should be the focus, but there seems to be no one at the table who is able to say if you do that, here is the implication at the courts. She is not aware that Judicial was part of the stakeholder discussions and would like to have them be part of that process.

Sen. Chenette asked, from the HHS Committee's perspective, was there any discussion in front of their Committee about what changes they and the Department were making would impact the Courts.

Rep. Hymanson and Sen. Gratwick both said the HHS Committee did not discuss the Judicial side of child protection. Sen. Gratwick said you are looking at a tree with all of its different roots and this is one segment and is why this meeting is a worthwhile procedure regardless of what comes up because now everyone will be aware of those issues.

Rep. Millett thinks this has been a productive discussion with some good feedback. It reflects what he thinks the GOC tried to do, and through Director Fox, can do in helping with the coordination going forward for the absence of duplication and working in silos. The GOC wanted to share with the HHS and JUD Committees a

comprehensive presentation of what they heard regarding the child protection system. He thinks using Director Fox's tracking document and perhaps inviting Dr. Landry to do a presentation jointly to the HHS and JUD Committees with the opportunity to question him on the feedback from the people who are in the trenches. If nothing else, he thinks the GOC has started a process of saying let's go forward and look at the resources that are here now and avoid the difficult situations they have seen in the past through coordination, better communication and using a tracking document. He agreed with Sen. Carpenter that if you had not heard Dr. Landry's presentation a lot of the words in the tracking document do not mean a lot to you, but if you heard it, they would be helpful tools as the two committees work together in the next session. You can always find reasons to complain that we did not do things right, but why not grab the opportunity now to do things right going forward. He was pleased with the feedback and hopes they can coordinate a way for the HHS and JUD Committees to hear what the GOC heard and to start planning for the Second Session with a checklist already in front of them because together he thinks they can accomplish more than they could separately.

Rep. Mastraccio said if the Committees did nothing else today other than to identify gaps, thinks that is important because that will eliminate a lot of the bills because of a lack in communication.

Sen. Gratwick said he realized, looking at Director's Landry's presentation dashboard, that there is no reference to the judicial system and how people are going to the courts and what happens there. The Judicial system is going to be on his list of recommendations back to OCFS because that should be another aspect and an important part of the child protective system.

Sen. Carpenter thinks the same, or a modified, presentation made to the GOC by Dr. Landry would be extremely helpful to the JUD and HHS Committees. Rep. Bailey and he work in the judicial field and also noted Attorney General Frye previously did child protective work representing parents and would be a great resource. He now has a different role, but could come at the subject in two different angles and it would be very helpful to hear from him. Sen. Carpenter would welcome such a presentation and to also perhaps invite the Children's Cabinet to the presentation.

Rep. O'Connor referred to the information regarding parents having the right and responsibility to raise their own children and noted it was only 4% of the total initiative with family engagement, tool training and community partnership for protecting children. Her concern is that it is only 4% and a lot of the problems being addressed here are starting at home. Home is where we want the children to spend most of their time and want them to be there safely. She asked if there should be more concentration in that area so that parents, who do have the right, know how to reasonably raise their children and thinks there should be more focus in that area.

Rep. Hymanson said the members of the Children's Cabinet include the directors of the Departments and the Commissioners of each of the Departments that have anything to do with children. She believes they meet once a month.

Sen. Chenette thought Sen. Gratwick's suggestion of a running list of what our action items post meeting is a good idea. He asked if there was anything heard in today's discussion, or throughout the past Legislative Session, that would be helpful to talk about today, that feedback is needed on, or any pieces of carry over legislation that anyone may have concerns with. Rep. O'Connor had mentioned some LDs that were carried over, but may not be budgeted for that she wanted to look at. He asked if there were any specific things that would be helpful in the context of the presentation from Dr. Landry, knowing that the Department is focusing on a lot of different avenues, whether there is a need for some of the carry over pieces of legislation.

Sen. Moore noted several of the DHHS bills sitting on the Appropriations Table. One was an Act to Appropriate Funds for Home Visiting Services to Provide Child Development, Education and Skills for New Parents. Another bill is to create a Kinship Care Navigator Program in DHHS because they struggle. There is also a resolve to establish and fund intervention for at-risk families and children, and another to expand access

to Head Start. Those are bills sitting on the Appropriations Table that fall in line with what is being talked about in trying to help children.

Sen. Carpenter followed up by saying he thought a presentation from Dr. Landry before the Second Session begins could be important because once session starts Committees are going to be up against deadlines.

Sen. Sanborn said some of her priorities were the same as what Sen. Moore talked about and raised concerns about Head Start and early childhood education during the GOC's meeting with Dr. Landry and was informed by him that they came under the Department of Education (DOE). She thinks keeping those bills sitting on the Table a priority. Another bill she heard about from people doing children's behavioral health that is important had to do with functional family therapy and multi-system. Rep. Hymanson said Families First funds was going to pay for those services. Sen. Sanborn noted that Dr. Landry also said at the previous meeting that there is work needed before Maine gets that funding so the bill may be needed. There is a big price tag on the bill, but it was one of the highest priorities from the people working with child protective services so would like to highlight that bill to be followed as well.

Rep. Hymanson noted that Rep. Madigan, a member of the HHS Committee, is the sponsor of the bill referred to by Sen. Sanborn and is following the bill closely.

Rep. Pierce said there are a lot of bills on the Special Appropriations Table and carried over. She was looking for some guidance from departments with regard to the Supplemental Budgets and how they see priority of the bills because there is some opportunity there as well. She would encourage people who are interested to be looking at them in lots of different ways as the Legislature tries to address the many bills that cover a lot of different departments.

Rep. Hymanson said to compartmentalize what is being talked about – we are talking about primary prevention, which is a whole other bucket. What has been talked about at this meeting is secondary and turf area prevention. What happens when a child is identified in child protection and thinks that is an important focus because there is a lot to go on. She does not want members to spread out too thin, but having said that, she is a big believer in primary prevention, Head Start, family programs, making the family unit as good as it can be and opioid prevention, etc. Why is there such despair, where are the jobs and workforce. Those are the social determinants of health. All of that is rolled up into primary prevention and what happens in the courts after the initiatives.

Sen. Chenette said one of his bullet points was to have a presentation from Dr. Landry to the JUD Committee and asked if it was possible for that Committee to meet before January. The JUD Chairs said they would try to call a meeting prior to the Session.

Sen. Gratwick said he was ignorant about many of the areas talked about and thinks many of his colleagues have no idea of what is going on so it is about persuading them and the Legislative body, as a whole, that these are important issues. How do you educate the rest of the Legislature? There could be a weekly paragraph of the top items legislators should be aware of that OCFS is working on, or some of the other departments, that gets the word out. You could have repetitive small dosages of information on an ongoing basis under the heading of education. It could be done by an hour long presentation by Dr. Landry. He thinks knowledge has to be spread more broadly.

Sen. Chenette knew that OCFS was focused on trying to inform the GOC and assumed also the HHS Committee in reference to changes and new information regarding child protections. In particular, the transparency element he finds interesting is that OCFS posts all of this information and data online and is publicly accessible. You have to know where to look and if a member of the public wanted to search for it, they might have difficulties. He thinks it is the responsibility of legislators involved in this subject to educate their colleagues and is why if the JUD Committee had a conversation with Dr. Landry about how decisions at the HHS Committee could impact the Judicial and court system, that information could educate their fellow legislators Catching the JUD Committee up and making them a part of the conversations means that we would have another body in the Legislature that is knowledgeable about what is taking place. He does not think the JUD Committee gets the updates that the HHS Committee and GOC do. So, it is figuring out what information would be relevant to the JUD Committee and what information they want to be getting. They may want to get all the information or it might be just a tailored version of what could impact the courts.

Sen. Gratwick said HHS Committee gets information through OCFS's liaison, Molly Bogart, who translates a lot of what goes on and he would encourage that kind of interaction to other committees.

Sen. Carpenter agreed with Sen. Gratwick and looked to Rep. Millett and Sen. Millett and the Children's Caucus. One of his complaints since returning to the Legislature is that they don't make good use of their time at the beginning of the session. He noted that the Children's Caucus meets every Tuesday and is attended by a diverse number of legislators and thinks an extended 2 hour presentation by Dr. Landry about the initiatives that OCFS is coming forward with could be immensely helpful because you would have people from all different perspectives and parties. All legislators are receiving complaints from constituents regarding the child protection system so such a presentation by Dr. Landry, or Ms. Bogart, would be very helpful.

Rep. Mastraccio said communication is the big issue and we need to figure out how we can get that information to everybody else so the continuity will be there when we are not here any longer. A GOC function is not to tell the policy committees what do, it is just to let them know what the information is so we can make government work better. She thinks a lot of those issues have been addressed today.

Neither Rep. Hymanson or Sen. Gratwick recalled having a joint meeting with the JUD Committee to discuss the child protective system.

Rep. Pierce thought the continuity did not swim over to the JUD Committee when other committees were working on child protection system and wanted to make sure that was not missed again. She asked if there may be another root that needs to be addressed so this does not happen again.

Sen. Chenette listed what he had for action items and asked other legislators to jump in if he missed anything.

- It would be helpful to have a presentation by Dr. Landry in front of the JUD Committee prior to the January start of Session. Also a good suggestion is that in January when legislators return, in an effort to educate the rest of their colleagues, is to have a similarly tailored presentation from Dr. Landry in front of the Children's Caucus. One of the presentations will be prior to session and the other when session begins and to invite colleagues who are not part of these conversations.
- As suggested by Rep. Bailey, we need a Judicial impact meeting with a new round of stakeholders that include district judges and other folks to see how the increased number of child protective cases at DHHS is impacting courts and the delay of justice. That meeting can be in front of JUD, GOC or a joint meeting with JUD and GOC, but someone has to have that conversation. We can follow-up after today's meeting about the details for that meeting to happen, but somebody has to have that conversation.

Sen. Carpenter suggested combining 1 and 2. If the JUD Committee gets approval to have a meeting with Dr. Landry, or somebody else, they could invite the Judicial Branch to attend so that would save one presentation. Sen. Chenette thought that was a great idea and others agreed. Those two meetings will be combined in front of the JUD Committee.

• This action could be for the HHS Committee moving forward – understanding and evaluating the courts' role in any stakeholder groups moving forward. Throughout the development of the child welfare initiatives there were a number of staff and stakeholder engagement meetings and stakeholder steering cabinets and he is not familiar with what the makeup of those stakeholder groups are. It might be a good follow-up for the GOC and HHS Committee to understand if it would be helpful to have someone that represents Judiciary to be a part of any steering committees, or stakeholder group, that are relevant to the discussion of the child protective system.

Sen. Carpenter asked if Sen. Chenette was talking about the JUD Committee or the Judicial Branch. Sen. Chenette said he was talking about the Judicial Branch.

- At today's meeting they also talked about the data dashboard and thinks Rep. Hymanson mentioned reaching out to the Children's Cabinet to make sure that we expand the number of data points, particularly those that impact courts. There may be a way of getting data on the website so it could be tracked.
- At this meeting there was a wide discussion around prevention, particularly tracking Family First federal dollars to see how it is flowing from the Federal Government to Maine and how that money is being spent. Subsequently, Sen. Moore led a discussion around bills on the Appropriations Table that might be relevant to preventative actions relevant to the DOE. As mentioned by Rep. Pierce, there may be another branch that we are missing and DOE may be one. Keeping an eye on the bills on the Appropriation's Table, how we are funding those and how that fits into the puzzle piece might be an important 5th point.

What has been identified today are gaps in the discussion and in potential areas that we need to focus on and engage certain folks that were not part of the stakeholder groups previously. To try to reduce de-silo approaches that have historically been the case when it comes to child protective services. Sen. Chenette said that is what he has for notes for the high level actionable items that they can take moving forward. He asked if anyone else had other points that need to be added to the action item steps.

Sen. Gratwick agreed with what Sen. Chenette listed, but wanted to emphasize what Rep. Hymanson said at the beginning of the meeting of making sure federal funds are followed and that they were not inventing anything new. Many legislatures have dealt with these issues in the past and asked if NCSL was a reasonable resource to try to deal with what Rep. Pierce was asking about of how we can do this best? Is our current structure really designed to optimize our role? There have been good ideas suggested at this meeting, but thinking about their basic structure, asked if there was some other outside input they can look at. It is a separate topic, but thinks a very important piece.

Rep. Bailey would like one more bullet point and that would be that there be communication between the HHS and JUD Committees and how to facilitate that. She doesn't know if it makes sense, for example, to have a subcommittee for child protective matters made up of members from each Committee, if it is just the Chairs communicating better, or should we have a point person on HHS and JUD Committees who communicate.

Sen. Chenette added, as Sen. Gratwick suggested, as number 6 to the list of there may be a best practice from NCSL or maybe they could make a suggestion of how to make that partnership happen.

Rep. O'Connor said they talked about the HHS and JUD Committees and thought about the Criminal Justice and Public Safety Committee because they deal with the laws that affect what goes before the Judiciary. You also have the Education and Cultural Affairs Committee because that is the root of how we education our children and families. All legislators should be informed because they all have constituents who are affected by the child protection system. She has been contacted by individuals outside of her district because they needed answers and because she is on the HHS Committee so thought she would know how to navigate the system. She hopes that the Legislature can work together on this and come up with some good action items. Sen. Chenette thought Rep. O'Connor's suggestion got to Rep. Pierce's point around should there be other branches. He thinks there have been discussions at GOC meetings of using this as the catalysts for those discussions because there really is not a clearinghouse to have such dialogue in a way that it can transcend every policy committee besides the GOC. The GOC can do that in an effort to make sure that everyone is communicating effectively.

After Rep. O'Connor's statements, Rep. Hymanson was thinking about constituent concerns and although she knows who to call, many people don't, so call her. It might be good to have an understanding of how legislative aides work their magic with constituent concerns and that they have the right information so there is a seamless phone call and response.

Sen. Chenette envisioned the GOC having a follow-up conversation to this one to check if all of the action items have taken place and where we need to fill any gaps in the child protective services issues. Maybe that is something to be done after the start of the Session so it will give the JUD Committee enough time to meet, have their conversations with the Judicial Branch and Dr. Landry and then the GOC can follow-up with Rep. Hymanson and Sen. Gratwick as well.

The GOC thanked the members of the JUD and HHS Committees for coming to the meeting to discuss the child protection system and appreciated hearing their concerns and ideas.

RECESS

The Chair, Sen. Chenette, recessed the Government Oversight Committee at 10:30 a.m.

RECONVENED

The Chair, Sen. Chenette, reconvened the GOC meeting at 10:35 a.m.

• OPEGA's Proposed Project Direction for the Review of CPS: Out of Home Placements for Children Removed From Care by DHHS/OCFS

Director Fox referred members to the OPEGA Recommendation for Project Direction. (A copy is attached to the Meeting Summary.)

When the GOC assigns a review to OPEGA they begin by conducting preliminary research which is the general understanding of the program or areas the Committee has asked to be evaluated. Once that work is complete, OPEGA comes back to the GOC with what that preliminary research identified for areas and would recommend to the Committee whether it be looked at in more depth.

Rep. Mastraccio asked the Director to provide some context of this process being done before for those members who had not been on the Committee before.

Director Fox said the Sunshine Daycare Facility was a case regarding the licensing of child care facilities that came before the GOC. There was a request that the Committee direct OPEGA to do an evaluation of licensing child care facilities. It was such a high-profile matter that changes were being made concurrently, so the GOC decided that they would hold off until they could see what the effects of those changes were. There is a precedent for what OPEGA is suggesting the Committee take for action on today. As with the child care licensing issue, rather than have OPEGA evaluate things that had already changed, they would wait until some of those changes were implemented and could then determine whether to evaluate them.

Sen. Chenette said you have to wait for changes to be implemented before we evaluate those changes. Director Fox agreed.

Rep. Mastraccio said when she first became a member of the GOC that was the process the Committee was going through with the licensing of child care facilities. They were receiving regular reports and updates from OPEGA. The Committee did not finish the evaluation in the way that was probably envisioned in the beginning.

Rep. Millett said he thinks OPEGA's rational for delaying an evaluation of a moving target makes sense and that the GOC will get updates. He also likes the data collection of what is going on with regard to home placements and related licensing issues. He would suggest that maybe a little more specificity on the data placements and perhaps remove the word periodically and replace it with frequent, regular or monthly, updates because he is anxious to get regular updates on data rather than unknown periodic updates. He likes the recommendations and feels they are appropriate, but would want more specificity on updates to the GOC on the data collection.

Director Fox said those updates would probably come when complete. OPEGA would be collecting information periodically, but as part of OPEGA's process, do not disclose their preliminary research until their report is done. OPEGA would be collecting the data, but would not necessarily be providing reports on what is being collected much like they would not do that in the course of any other evaluation OPEGA does. That work, by design in statute, is a confidential process. Although OPEGA would have the information for the purpose of this evaluation, would not be providing updates.

Rep. Millett was not interested in trying to pin down an every month update, but was hoping that if the data that OPEGA sees from OCFS shows that things are getting off the rails or that out of home placements are going in directions that we probably would not want to see happen, that at least there be some sort of communication with the GOC. That was the only issue he was pushing for.

Director Fox said that may inform when OPEGA provides the project direction statement and could expedite when OPEGA asks the GOC to have them look at something as well. That is a possibility depending on what OPEGA receives for information.

Rep. Mastraccio said the GOC does not have to take any action on OPEGA's Recommendation and the topic will be left on the work plan. Other members agreed with the Recommendation on DHHS/OCFS out of home placements.

• Discussion of approved projects list – special project assigned June 28, 2018 regarding (prior Administration) strategic initiatives to improve child welfare system

Director Fox referred to the Special Project: Office of Child and Family Services topic on the work plan. The Summary of Strategic Initiatives was provided by the prior Administration with regard to things they were looking at for improvements to the Child Welfare System. She brought up to the GOC on previous occasions that OPEGA anticipated an updated list of strategic initiatives from the Department with regard to what they were going to tackle in regard to improvements to the system. Those improvements would be informed by ideas of the previous Administration, by the PCG reports, by other reports, including OPEGA's reports and by OCFS's own internal surveys and reviews. More information was now available and was culminated into the report that Dr. Landry presented at the last GOC meeting with regard to the planned improvements to the system. This is a topic the Committee did not want to take off the work plan until they heard from Dr. Landry because wanted to ensure he did indeed provide the GOC with a prioritized list of strategies for improvements to the child welfare system.

More than a year ago the GOC added to the work plan an assessment of the strategies that were proposed by the past Administration and for OPEGA to monitor the progress of them. The strategic initiatives list in Dr. Landry's presentation are not yet the adopted strategies for moving forward through the system, they inform of the ones that have been proposed.

Director Fox said if there is a topic on the work plan that OPEGA is not working on, or if the GOC does not have intentions for OPEGA to work on, it would be helpful if it were no longer on the plan.

Rep. Mastraccio said the GOC put the topic on pause and did not remove it from the work plan because wanted to wait and see where the Department was going before deciding if the topic was needed.

Motion: That the Government Oversight Committee remove the Special Project: Office of Child and Family Services (voted on to the list on June 28, 2018) from the GOC's work plan. (Motion by Rep. Mastraccio, second by Sen. Sanborn)

Discussion: Rep. Arata noted that on the strategic initiatives it mentions out of home safety plans and this came up in the discussion earlier in the meeting where Sen. Carpenter had concerns about them. She asked if eliminating the out of home safety plan was done by the previous GOC, legislation or an internal idea, and are we throwing the baby out with bath water because obviously there were some problems with that strategy. Is that something that we should look at again? If it is a strategy that could work, she would hate for them to element it based on the GOC's work here.

Sen. Chenette said the GOC cannot remove department level initiatives. This is just in reference to the work of OPEGA in evaluating initiatives. It seemed, from the Committee's discussion this morning, she is correct, the safety plan kept coming up, particularly from members of the JUD Committee. He thinks that could be something that the GOC looks at and maybe has a follow-up conversation with OCFS over how they arrived at that change and why it occurred. Before the GOC decides to do a comprehensive analysis of strategies that have already been abandoned, they should have a conversation around that particular subset. That is one bullet point in a multipage strategy that is not utilized. To direct OPEGA to work on strategies that are not being implemented is a disservice when they could be focusing their time on relevant and current matters that everyone agrees are priorities. His thought is they could call OCFS to have a conversation regarding safety planning with the JUD Committee. Some of the conversations the GOC is trying to have with multilevel Committees is to have those discussions to see that nothing is falling through the cracks. Subsequently, if the GOC decides that particular subset is an area for OPEGA to shine a spotlight on, then the GOC takes a vote and investigates that particular subset rather than one bullet point on a multipage document.

Rep. Arata said she just wanted to make sure that by taking the topic off the work plan they are not abandoning that discussion.

Rep. Mastraccio said all the Committee is doing is saying they are not going forward with an evaluation of initiatives that no longer exist. The Special Project is out of date and the GOC can address the out of home safety plan separately if they have questions when OCF is in front of the Committee. All the GOC is doing today is saying this particular evaluation that they put into effect doesn't have a need anymore. It does not mean that the Department is not addressing some the issues, it is just that they are not the same initiatives right now.

Director Fox noted that during the earlier discussion regarding safety planning with the HHS and JUD Committees it was asked if there could be some discussion with regard to middle ground between what was a tool that had been used for safety planning and the more formal PPO process where it is a direct route to court. She has recorded that as something that is a gap in terms the initiatives chart and is something that OPEGA will certainly be gathering information on and including in the updates. It would be an addendum to this chart separate from the strategies that were listed by OCFS, but OPEGA would be providing updates in terms of whether there were meetings or discussions in the other two Committees regarding it as well.

Sen. Chenette said both Sen. Carpenter and Rep. Bailey indicated that the safety plan issue is something they are going to bring up to Dr. Landry when he is before the JUD Committee prior to January and that way it gives the JUD Committee an opportunity to weigh in and ask those probing questions.

Vote: The above motion passed by unanimous vote of 9 - 0.

Unfinished Business

None

Report from Director

• Status of projects in process

Director Fox believes there will be several reports presented to the GOC during the Second Regular Session. OPEGA is intending to have the **Tax Expenditure Evaluation: BETE and BETR** evaluation review to be presented to the Committee. OPEGA will be coming back to the Committee in December with a Project Direction Statement with proposed scope questions for the review of **Maine Commission on Indigent Legal Services** for the financial oversight aspects of that program. OPEGA anticipates reporting out the review of the **Maine Citizen Initiative Process** in the early part of the Second Session. OPEGA may in December also be taking the Committee through the **categorization and scheduling of tax expenditure reviews** that will determine which ones we take on next and in what order. OPEGA is into fieldwork on the **Maine Capital Investment Credit** review and will give the GOC another update in December that may give them some idea about when they could report that review out. OPEGA will be asking the Committee to approve the parameters of the **Seed Capital Investment Tax Credit** review.

Director Fox noted that OPEGA made a presentation to the Taxation Committee on the Employment Tax Increment Financing Report and TAX is going to be holding a work session on October 29th with regard to the recommendations made in the OPEGA evaluation with regard to ETIF. OPEGA will be at that meeting if members of the Taxation Committee have questions.

Planning for upcoming meetings

See below.

Next GOC meeting date

Rep. Mastraccio noted that the Committee is not scheduled to meet in November and their next meeting is scheduled for December 10, 2019 at 9:00 a.m. It has been heard that the Legislature may be holding bill signing on December 19th. If so, the Chairs would recommend holding the December 10th date, but when a date for the bill signing is known, would not object to moving the GOC's December meeting to that day so members would not have to be in Augusta on 2 different days. For now members should keep December 10th on their calendars until more information is known about the bill signing date. Sen. Chenette said that members will be polled once the bill signing date has been announced.

Rep. Mastraccio reminded Committee members that for January, February and March the GOC will be meeting the second and fourth Fridays of the month. Further discussion regarding session meetings will be discussed at the next meeting.

Director Fox is going to review the clearinghouse web page that OPEGA has put together with regard to child welfare improvements to make sure that there is everything on it she promised and that it is easy to navigate. She will also make sure the tracking document is added to the web so that if any other committees want to use it as a resource it will be there and that updates will be added when they occur. Also, the presentation by Dr. Landry, including the audio will be available. She will re-send the audio information to the HHS and JUD members should they want to listen to it. If you don't see the information in a perfect format right away please note that OPEGA is working on making it as readable as possible,

Adjourn

The Chair, Sen. Chenette, adjourned the GOC meeting at 11:02 a.m. on the motion of Sen. Timberlake, second by Rep. Pierce, unanimous.

This	document, prepared by OPEGA, is in	tended to help facilita	te and coordinate l cument will be subj	egislative oversight o ect to periodic change	-oversight coordination/tracking c f strategies to improve the child protection sy es pursuant to new information and planned FOBER 15, 2019	stem as developed by OCFS and presented to the GOC 9/23/19.
0	Strategies See OCFS presentation page 31	Related LDs or Enacted laws	Related 129 th Biennial Budget initiative	Reports that have related finding, reference or recommendation*	OCFS updates/date	Specific initiatives See OCFS presentation page 32
		Safety				Guiding Principle:I.Child Safety, first and foremostII.Parents have the right and responsibility to raise their own children
1	Address Intake processes and improve staffing	128th PL 2017 c. 471 (emergency)	(new positions) PL c. 343 pp. 319-320	PCG 7/19		 ARP Reassessment Increase Caseworker Skills and Communication with Parents
2	Re-assess the Alternative Response Program			PCG 7/19 PCG 2/19	9/23/19: ARP contract amended re Em. Dept. supervision	 Tighten Assessment Practice Home Visitation Education Program
3	Enhance Assessment Processes	128th PL 2017 c. 472 (LD 1920); PL 2017 c. 473 (LD 1921); PL 2017 c. 470 (LD 1922) 129th LD 1378 - PL c. 162; LD 1792 - PL c. 300		PCG 7/19 PCG 2/19 Ombudsman		 5. 24-Hour Supervisory Intake Report Review 6. Intake Process and Staffing Improvements 7. Judiciary Casework Practice Training 8. Clarify Child and Parent Rights for Staff 9. Background Check Unit Improvement 10. Rapid Safety Feedback 11. SDM Tool Consistency 12. Family Engagement Tools Training 13. Community Partnership for Protecting Children
		Permanency				 Guiding Principle: III. Children are entitled to live in a safe and nurturing environment IV. All children deserve a permanent family
1	Develop a Permanency Review Process			PCG 7/19		14. Family Treatment Drug Court 15. Diligent Search Policy Training
5	Monitor the Family Visit Coaching pilot to develop best practices	128th PL 2017 c.471 (LD 1923)		Ombudsman PCG 7/19		 16. Visitation Policy Training - Contracted 17. Visitation Frequency and Quality Tracking 18. Transportation Service Utilization Improvements

6 7 8	Improve SDM tool consistency Develop family engagement tools and training Improve resource parent outreach and support	Well-being 129th LD 195 - PL c. 130 129 th LD 1792- PL c. 399; LD 115 - Table c/o; LD 633 – Table c/o; LD 1039- Table c/o; LD 1417- Table c/o		Ombudsman PCG 7/19 PCG 12/18 PCG 7/19 PCG 12/18 PCG 7/19		 19. Emergency Placement Improvements 20. Online Application and Licensing Improvements 21. Onboarding Process for Resource Parents 22. Resource Parent Outreach Strategy 23. Resource Placement Matching Tool 24. Family Visitation Pilot 25. A Family for ME 26. Heart Gallery 27. Statewide Adoption Pilot 28. Wendy's Wonderful Kids 29. Adoption Preservation Services 30. Permanency Reviews 31. Residential Reviews
	Staff t	raining and supp	ort			Guiding Principle: V. How we do our work is as important as the work we do
9	Develop policy and training plan for new processes and tools	128th PL 2017 c. 471 (emergency)		PCG 7/19 PCG 2/19		32. Quality Circles33. Staff Practice and Policy Feedback Loops34. OA Staff Practice and Policy Feedback Loops
10	Establish workforce wellness teams and education			PCG 7/19		35. Internal Data Dashboard 36. OOI Team Development
11	Update caseload size standards and ratios	128 th PL 2017 c. 471 (LD 1923); 129 th LD 821 -PL c. 34 (emergency)	(new positions) PL c. 343 pp. 319-320	PCG 7/19	 10/1/19: Report complete pursuant to LD 821, PL c. 34 9/23/19: ARP contract amended to include Em. Dept. supervision (of children pending placement) 	 37. Supervisory Support Enhancements 38. Update Caseload Size Standards and Ratios 39. Workforce Wellness 40. Update Workload Analytic Tool 41. MACWIS Replacement 42. Motivational Interviewing Training 43. Training Plan for New Processes and Tools 44. Case Management Activities Time Analysis
12	Procure MACWIS replacement	128th PL 2017 c. 471 (LD 1923)	PL c. 343 Pt. S	PCG 7/19 PCG 2/19		 44. Case Management Activities Time Analysis 45. Case Closing Summary Model Development Workgroup 46. Child Welfare Policy Manual Updates 47. TDM Policy and Practice

*Notes: 1. The strategies above align with many of the perspectives reported by OCFS in the OPEGA report: Frontline Workers in the State Child Protective System: Perspectives on Factors That Impact Effectiveness and Efficiency of Child Protective Work. Thus, it is referenced here, rather than repeated in the "report" column for all 12 strategies. It should also be noted that the perspectives report did not make findings or include recommendations.

2. OCFS reported that they conducted internal surveys and sought input from staff at all levels across the state in mapping their strategic initiatives –those internal reports are not referenced in "report" column of this chart.

3. PCG produced 3 reports for OCFS:

December 2018 – Behavioral Health Services Assessment. February 2019 – Child Welfare Business Process Redesign (permanency and adoption).

OPEGA Recommendation for Project Direction

Prepared for the Government Oversight Committee October 15, 2019

DHHS Office of Child and Family Services Out of Home Placements

Background

The Office of Child and Family Services' Out of Home Placements project was voted onto OPEGA's work plan by the Government Oversight Committee (GOC) on March 22, 2019. OPEGA began preliminary research in April of 2019. OPEGA's preliminary research for this project included:

- reviewing issues discussed by the GOC at the March 22, 2019 meeting;
- seeking input from GOC members and members and staff of the Health and Human Services Committee on concerns, or questions, regarding out of home placements;
- interviewing the current director, management, and operational staff located in the Office Child and Family Services (OCFS) within the Department of Health and Human Services (DHHS);
- interviewing representatives of agencies regarding their roles related to out of home placements, including:
 - o agencies representing kinship, foster, and treatment foster families; and
 - staff located in crisis stabilization programs, psychiatric hospitals, and emergency departments.
- determining availability of and limitations to data collected by OCFS related to out of home placements;
- reviewing relevant statutes, legislative history, rules, and relevant departmental guidance documents;
- reviewing OCFS child welfare and behavioral health initiatives;
- reviewing child welfare and behavioral health reports developed by Public Consulting Group;
- reviewing concerns related to this review captured in the OPEGA Special Project: Frontline Perspectives of CPS Workers; and
- reviewing reports submitted by OCFS to the U.S. Department of Health and Human Services Administration for Children and Families, and other reports related to the performance of Maine's out of home placement system.

Summary of Preliminary Research

The summary that follows contains OPEGA's observations and understanding, based on various methods of collecting information during the preliminary research phase of this project.

Overview of Out of Home Placements

The Office of Child and Family Services (OCFS) within the Maine Department of Health and Human Services (DHHS or the Department) is responsible for child welfare activities that support child safety, well-being, and permanent homes for children. The Child and Family Protection Act in Title 22 Chapter 1071 is the principle statute that governs child protection activities of DHHS. It authorizes the Department to protect and assist abused and neglected children, children in circumstances that present a substantial risk of abuse and neglect, and their families. Statute directs the Department to establish rules regarding child protection. OCFS's child welfare activities related to out of home placements are regulated on a federal level by the Social Security Act and the Indian Child Welfare Act.

Maine statute provides a child will be removed from the custody of the child's parents only where failure to do so would jeopardize the health or welfare of the child. It requires that reasonable efforts¹ be made to rehabilitate and reunify families as a means to protect the welfare of children, while preventing needless delay for permanent plans for children when rehabilitation and reunification is not possible. State statute requires the Department to give placement preference to an adult relative over a nonrelated caregiver, provided they meet all relevant standards, subject to exceptions, and to make reasonable efforts to place a child with siblings, unless contrary to the safety or wellbeing of the child or siblings. The Department is required to use due diligence to identify relatives when a child has been removed and to conduct a background check.

An out of home placement is needed any time a child is removed from their home by the Department. Removal of a child from home into Department care happens by means of a court order. When a preliminary protection order is issued, the Department is given legal custody of the child. Until December 2018, a process known as a "safety plan" may have been used to place a child with a non-custodial family member prior to the issuance of court order. Out of home placements are also sought when a child's current out of home placement is disrupted and an alternative is needed, or the child needs a different level of care.

There are two major categories of out of home placements: resource family placements and non-family placements, as well as temporary settings:

¹ 2018 Public Law, Chapter 470 made the following change to 22 MRSA §4003, sub-§3: **3. Rehabilitation and reunification.** Give family rehabilitation and reunification priority Require that reasonable efforts be made to rehabilitate and reunify families as a means for protecting the welfare of children, but prevent needless delay for permanent plans for children when rehabilitation and reunification is not possible;

Resource families	 family foster care: parental care provided within a family setting in a private dwelling on a regular 24-hour a day basis by a qualified foster parent(s). <i>kinship placements</i>: family foster care provided to children who are related by blood, marriage, or adoption to the caretakers -or- fictive kin, which are caretakers that are unrelated but have an emotionally significant relationship with the child. <i>treatment foster care</i>: family foster care using the foster home setting/parents as primary agents in improving the behavioral and emotional function of foster children.
Non-family placements	• <i>residential treatment centers</i> : Residential child care facility staff provide care and supervision of children, mental health treatment, and education to children with emotional, intellectual, or behavioral handicaps.
Temporary settings	 short-term crisis settings: these include emergency departments, psychiatric hospitals, and crisis stabilization units. hotels: used as a temporary placement for children awaiting placements.

Levels of care

At the time of placement, an initial determination is made by OCFS regarding the level of care needed for the child. The goal of the Levels of Care process is to ensure that all children are regularly assessed in a standardized way that matches the child's needs to the appropriate level of care and services in the least restrictive placement. The initial level of care determination is completed by the caseworker and supervisor at the time of placement. Subsequent to this, the Levels of Care Assessor completes a comprehensive review of the child's needs within 90 days of entry into care based on information gathered from a variety of sources, which include the child's caregivers, school, other providers and the OCFS caseworker. Based on this analysis, the child is assigned a level of care that corresponds to the type of placement necessary to meet their identified service needs. There are six levels of care, including an exceptional medical level of care. Re-assessments of children's needs by OCFS are completed periodically.

How children are placed

The first preference is for the child to be placed in a kinship home. If a potential kinship relative is identified, a kinship assessment will begin to determine the safety and appropriateness of the placement. If no appropriate and safe kinship home is available, the next option is a licensed family foster placement.

A community care worker in the resource unit of the DHHS district works on matching the child to a family foster home based on that worker's knowledge of the available foster homes in the district. If a placement cannot be found within the DHHS district, a placement will be looked for in other DHHS districts. The program administrator (PA) will contact the other district PAs to coordinate and ensure any currently open placements are not being lined up for another child. If a child is in need of the higher level of care of treatment foster care, the worker contacts treatment foster care agencies to find and coordinate a placement.

Various circumstances are taken into consideration when selecting the resource placement, including whether other children are in the home and their needs, the needs of the child being placed, the skillset of the resource family, and whether the child is a member of a federally recognized tribe. If a child is determined to need a residential treatment level of care, the worker begins the intensive temporary residential treatment process to receive approval from MaineCare for placement. Children in crisis may enter crisis stabilization or psychiatric hospitalization for a short-term stay before being placed in a long-term resource family or non-family residential setting.

At times, a placement has not yet been found or the process for placement has not been completed, before the end of the day that the child was placed in Department custody. In this case, the child will be placed in a temporary foster home or in a hotel with CPS worker supervision. If a child is in an emergency department awaiting placement, CPS staff will supervise the child. If a child is a member or eligible for membership in a federally recognized tribe, the worker must follow Indian Children Welfare Policy requirements.

Oversight

Multiple levels of OCFS personnel, from CPS workers to Central Office staff, are involved in monitoring cases in which children have been placed out of the home. Children must receive monthly face-to-face visits by caseworker. OCFS Central Office reviews weekly reports of children in crisis settings, residential placements, and awaiting placement. Additionally, monthly reports of where children are placed and lengths of stay in placements are monitored by the Central Office.

GOC decision to consider review of out of home placements

Following the release of the <u>Frontline Workers in the State Child Protective System</u> review and testimony received during the public comment period related to foster parenting, GOC members expressed concerns generally related to out of home placements, temporary placements, and supports to foster parents. When considering potential next steps for the GOC regarding the child protection system, OPEGA referenced DHHS contracts with Public Consulting Group Inc. (PCG). At this time, OPEGA understood the focus of those PCG studies to largely be policies, procedures, and practices internal to OCFS operations — areas that may not have directly addressed GOC concerns about out of home placements.

As a result, at the March 2019 GOC meeting, OPEGA was directed to begin preliminary research for a review of out of home placements, with a focus on the following areas:

- the availability and types of out of home placement options;
- the extent to which hoteling occurs;
- the recruitment, retention, training, and licensing of foster parents;
- responsibilities of foster parents; and
- the extent to which OCFS provides various supports to foster parents.

OCFS Current Efforts

OCFS strategic initiatives

In July 2019, OCFS began developing a map of major initiatives and strategies, either planned or ongoing, along with a strategic framework to guide priorities for improving the child welfare system. The initiatives were largely a result of the recommendations from PCG, with whom OCFS contracted in 2018 to provide a comprehensive study of the child welfare system and the children's behavioral health system. The initiatives, which were presented to the GOC in September 2019, impact many areas within OCFS, including the intake and assessment process, improving permanency practices, engaging with and training resource parents, developing policies and training for staff, adjusting caseload sizes, and aligning to best practices and federal quality standards. With staff and stakeholder input, OCFS has prioritized the initiatives that they have determined to have the greatest potential impact on outcomes for children. OCFS is currently in the process of developing a work plan to implement the prioritized strategic initiatives.



Some of the recent or planned changes and strategies that were reported to the GOC and to OPEGA since the out of home placements project was added to the list of reviews include:

- implementing the resource parent outreach team, to improve support to foster families;
- LD 1526 was signed into law in June 2019 and removed the statutory requirement of a Fire Marshal inspection in the licensing process of foster homes;
- renewal of a foster care recruitment contract to provide a statewide recruitment program to meet the placement needs of children currently in foster care, expected to enter foster care, and those needing a legal permanent family;
- sixty-two additional OCFS staff positions were included in the biennial budget, and hiring of these new staff began September, 2019;
- contracted staff through ARP agencies are assisting in staffing children in state custody at emergency departments;
- a replacement system for MACWIS is being reviewed for approval by the federal Administration for Children and Families;
- the OCFS data dashboard went live in September, 2019, providing current metrics related to out of home placements, including: numbers of children in state custody, rates of victimization while in state custody, permanency within 12 months, and success in permanency; and
- beginning the planning stages for the Families First Prevention Services Act, consisting of funding to support the prevention of child abuse and neglect, including funding for kinship programs and new requirements related to children in State custody placed in residential treatment facilities.

OPEGA's Recommendation

During the course of preliminary research, OPEGA identified potential areas appropriate for further review. Somewhat concurrently, these areas have been largely identified and described in the PCG studies or otherwise noted by OCFS and are being either actively addressed, in planning to be addressed, or likely to be significantly impacted by larger Departmental initiatives focusing on family supports and the prevention of child abuse and neglect.

Conducting a full review at this time would mean examination and evaluation of practices and policies that are in the midst of change and could be substantially different by the time a report would be presented to the GOC. Thus, the value of a review at this time is limited. The changes to the system that have been initiated, or will soon be, will not have been in place long enough to conduct a meaningful review of their effectiveness.

As a result, OPEGA recommends delaying a further, detailed review for one year. This is the same strategy that was employed by the GOC in the review of Childcare Licensing, an office that also experienced a great deal of change at the time that review was being considered.

In addition to the results of any oversight or monitoring of OCFS' progress conducted by the Judiciary and Health and Human Services Committees and the GOC, OPEGA would propose periodically collecting data from OCFS related to out of home placements and system performance. Using this information, OPEGA will then reevaluate and seek to identify risks which will inform the development of possible scope questions and a project recommendation at that time. A year from now, OPEGA's proposed scope questions could potentially assess the extent to which specific initiatives have been implemented and how well they are addressing identified concerns about the placement of children under the care of the Department.