**Indiana Family Preservation Services**

**Agenda and Questions**

**November 18, 2022**

1. Concrete supports reminder—Please complete this form for any concrete spend, and send to Bridget McIntyre (*Bridget.McIntyre@dcs.in.gov*) or the Child Welfare Plan (*ChildWelfarePlan@dcs.in.gov*):

 <https://www.in.gov/dcs/files/Expense-Tracking-Agencies.xlsx>

1. Current case information: *(as of 11/17/22)*

|  |  |
| --- | --- |
| **Regions** | **Family Pres Case Count** |
| 1 | 114 |
| 2 | 50 |
| 3 | 78 |
| 4 | 97 |
| 5 | 34 |
| 6 | 36 |
| 7 | 126 |
| 8 | 113 |
| 9 | 37 |
| 10 | 150 |
| 11 | 69 |
| 12 | 62 |
| 13 | 55 |
| 14 | 35 |
| 15 | 74 |
| 16 | 98 |
| 17 | 58 |
| 18 | 83 |
| **Grand Total** | **1369** |

*Down 45 from last meeting.*

1. *Concrete Supports discussion—we really want to help you navigate any challenges you may be having with this!*
* The Service Standard states: *Providers of this service will be expected to utilize the funds received from DCS through the course of their service delivery to address any concrete assistance needs that the family may have, if failing to address these needs would result in the child(ren) having to be removed from the home.*
* If we can pay for something that would prevent the child from being removed, then we should pay for that (or assist the family in locating resources).
* This should be a team conversation and decision. What makes the most sense for this family.
	+ The team should be meeting regularly so that everyone is on the same page.
* We do NOT want providers to be taken advantage of.
	+ You do not need to pay for things unrelated to child safety or that would not result in a removal.
* FCM and/or provider should be completing a budget with the family very early on in the case to plan for the family to meet their needs without the assistance of DCS/providers as soon as possible.

*How are things going with concrete supports?*

Feedback:

* Have been able to use community resources
* CFTM’s are not being utilized often enough.
* FCMs sometimes tell families that ‘Family Pres will help you with rent/utilities/etc.’ which sets providers up for failure
* We have not had any issues with this where we were not able to come to an agreement with the team on what needs to be paid for. We also have had success with setting up payment agreements for large funding amounts that allow us to help with mitigating the problem and making a few payments while the parents get on their feet, assist with budget, obtain better employment etc... This approach also allows us to further assess root cause and address issues that are leading to the crisis at hand. We have not had any removals that was a result of not applying concrete funds.
* We have used concrete funds when it has met the criteria but we have been able to locate resources in the community in a number of cases.
* We have FCMs saying that to the family at the initial CFTM - if you need any help with anything the agency will pay for it if you say you need it. I don't think we need to let them know this policy ahead of time, it leads to abuse of funds
* I would agree to that in regard to challenges with responsiveness from FCM's. I would say it is on trend with the same things we saw pre-family pres. You have some FCM's that are very responsive and others who we won't hear from unless we include their supervisor. We have been more proactive about including their supervisor which has been more successful and also breaks down the idea that the supervisor only needs looped in when there is an issue.
1. Updated Family Pres numbers:

We’ve now served 8,491 families, and 17,317 kids.

5,964 families and 12,264 have had at least 90 days of services.

8.45% have had a substantiated repeated maltreatment event

8.93% have had a removal

REPEAT MALTREATMENT:

American Indian: can’t report (number too small)

Asian: can’t report (number too small)

Hispanic/Latino: 7.87%

Native Hawaiian or other Pacific Islander: can’t report (number too small)

Unknown: can’t report (number too small)

White: 9.14%

Black: 6.98%

REMOVAL BY RACE:

American Indian: can’t report (number too small)

Asian: can’t report (number too small)

Hispanic/Latino: 8.36%

Native Hawaiian or other Pacific Islander: can’t report (number too small)

Unknown: can’t report (number too small)

White: 9.73%

Black: 6.67%

**YOU SHOULD ALL BE GETTING MONTHLY REPORTS WITH YOUR AGENCY’S DATA. IF YOU ARE NOT RECEIVING YOUR REPORTS, PLEASE REACH OUT TO ME AND WE WILL ENSURE YOU GET THEM.**

1. Updated DCS data on case numbers…

Absence of Repeat Maltreatment was at 93.6% at launch…now it is 95.30%.

Total DCS CHINS cases—12,220, another new all-time low (going back to December 2009)

Down 49.2% from all-time high of 24,054 in September 2017 (just 62 months ago).

Down 30.0% since program launch on June 1, 20 (just 28 months ago—from 17,430 to 12,220)

1. Questions received:
2. I have families that are receiving money from DCS to purchase clothing, another family received money to pay back rent, and car seats and safety items were provided for another family. I am curious to know what the requirements and standards are across the State to utilize these resources. It is not consistent in the regions we serve, but is important to know all resources available for families and what the qualifications are for the resources. It would be helpful to have transparency especially if this is something that would overlap or be in addition to concrete assistance requirements and ultimately is supporting the preservation of the family.
	1. When you are being asked to purchase things for a family, please refer to the Service Standard of the use for concrete assistance.
	2. Have early conversations at CFTM’s to determine family needs and how to meet those needs. Is this purchase critical to preventing removal? If no, then you should not be responsible. If it is – then the provider should purchase the item/service.
	3. Family Preservation should help families find clothing as needed, for example, but does not necessarily need to pay for that clothing (or beds, etc.)
3. We had a referral that was cancelled the day after we teamed about a family. We met with the FCM, the supervisor, my team member, and myself after our initial home visit and discussed the concerns of the home and specifically calling the health department due to the home condition and us (DCS and Benchmark) not being the qualified party to determine the living conditions. We also discussed our role to meet the family where they are in terms of natural supports they may have if they need to be out of the home while there are repairs made and if not then we would have solutions available for temporary housing so that they are not “homeless”. We discussed being transparent with the family about calling the Health Department to make sure they understand the need and not to be scared or ashamed of the conditions. My team and I shared that if there was anything to come out of the assessment, we would be able to respond right away with a solution. We debriefed today about the case with the FCM, supervisor, my team member, and myself and were told it was cancelled due to us bringing up the Health Department, that our “needs” did not meet the “needs” of DCS, and that the family met the “minimum standards”. I am seeing more and more referrals that reflect home conditions as the reason for referral and I want to be prepared to respond appropriately. With that being said, I am curious to know what other providers are doing in these situations and if DCS can share what their “minimum standards” are with us?
	1. This could be an opportunity for further dialogue this with the local office.
	2. Minimum standards can depend on a lot of different circumstances such as; who lives in the home, age of the children, culture, etc.
4. Is FP required to complete daily safety visits if there is a court order for it (even though that is not part of the service standard)?
	1. We have to follow court orders. I have not heard of this before, is it safe to assume this is not the standard that the judge orders on every case in that county?

Anything else?

**Next meeting: We are moving this to Monthly meetings going forward, with the meeting to be held on the 3rd Friday of each month. Next meeting: 12/16/22 @ 1:00 Eastern**

**THANK YOU!**