



Commission on Improving the Status of Children in Indiana

Task Force:	Child Health & Safety		
Meeting Date:	9/27/2021	Meeting Time:	9:00 am – 11:00 am ET
Minutes By:	Kate Schedel <i>MCH Programs Director, IDOH</i>	Location:	Microsoft Teams

Committee Members		
Name:	Organization:	Attendance: (where x is present)
Sarah Sailors: <i>co-chair</i>	DCS	X
Kate Schedel: <i>co-chair</i>	IDOH	X
Angela Reid-Brown	ISC	X
Carey Michels	FSSA	X
Sandy Runkle	Prevent Child Abuse	X
Mark Fairchild	Covering Kids & Families	X
Rachael Fisher	Community Health Network	X
Kristen Dauss	DOC	X
Christina Commons	FSSA	X
Chris Daly	IARCA	
Susan Elsworth	INOFAS	
Maureen Greer	IPQIC	
Terri Lee	IDOH	
Angela Smith-Grossman	DCS	
Deanna Szyndrowski	SCAN, Inc.	

Agenda & Notes

1. Welcome
 - Introduction of new Co-Chair Kate Schedel, Programs Director – Maternal and Child Health at IDOH
2. Subcommittee Reports
 - 1.1 **Increase access to and use of community-based collaborative efforts that promote wellness in the first year of life, especially in the black communities.**
 Team Lead: Dr. Kristen Dauss
 - Looking at access and utilization of resources before first birthday in Black communities to reduce infant mortality rate
 - Dr. Dauss and Jack Turman are partnerin to assess service utilization through focus groups
 - Transportation is biggest barrier to access and utilize services

- Has contacted FSSA about the need
 - This work was paused in August but will be restarting in this week
- Dr. Dauss will review templates about presenting to the Commission

1.2 Reduce the incidence of child abuse and neglect in Indiana. (Primary Prevention)

Team Co-Lead: Sandy Runkle and Hannah Robinson

- Working with state agencies, schools, more to create child abuse framework – this has been ongoing for about 15 months
- The toolkit, now being developed with Transform, will have a close to final draft that local communities can use, try, see how it works and be able to adapt if needed to work best for communities
- The toolkit being created was really driven by stakeholders (creating the goals, mission, values, and survey) – they have been critical to this work
- On Thursday 9/30: stakeholders will be convened to discuss progress on the toolkit and next steps
 - Next goal: do some type of focus group to assess how to best use toolkit, ask what else is needed, and make improvements.
- Hoping to present to The Commission at October meeting on progress

1.3 Reduce the number of substantiated reports of abuse of children in state care.

Team Lead: Chris Daley

- Absent, no update from this subcommittee

1.4 Identify and encourage adoption of effective and promising models for reducing the sexual victimization of adolescents.

On Hold

- Kate will re-engage some people to lead this subcommittee and follow up at the next meeting

1.5 Identify and encourage adoption of effective and promising ways to support adults caring for vulnerable children.

Team Lead: Shannon Schumacher (absent, written update from Angela Smith-Grossman)

- This work with adult caregivers is really owned by The Villages and they already have an existing workgroup for supporting kinship caregivers
- Shannon Schumacher just recently took over at The Villages and is working to integrate this subcommittee into her work
- Sarah Sailors will meet with Shannon and Angela Smith-Grossman before the next meeting
- This is Kinship Caregivers week – be on the lookout for fun things going on and social media posts
- *Is the per diem for certified foster parents set by state or federal policy?*
 - This is a state policy, there is no per diem unless court ordered; state can only have one type of license;
- *Is subcommittee looking at policies? Seems like most appropriate place to explore for a recommendation.*
 - Angela is out but she can see how it interplays. Around 50% of kids are in relative care and it is increasing with kinship champions
 - This does not include other families supporting kids not involved through the courts – how can support them? How can we serve those families upstream?
- August 2021 data for out-of-home placements
 - 49.1% Relative Care
 - 44.2% Non-Relative Foster Care
 - 4.7% Residential Treatment
 - 2.0% Other

1.6 Increase access to healthcare and developmental screens by decreasing the child uninsured rate.

- Decrease the uninsured rate.

Team Lead: Mark Fairchild

- At last Commission: presented health coverage rule with CHIP coverage – after losing coverage elsewhere, there is 90-day wait period before enrolling in CHIP. The subcommittee looked at dropping the 90-day rule.
- Able to change this, but Dr. Sullivan left FSSA

- Dr. Dan knows about this, has documentation, and will follow up on implementation of this. He is interested in making sure this happens.
 - Mark will set a meeting in next months to set new priorities – looking at health coverage for immigrant children who are lawfully residing here must wait 5-years before enrolling in CHIP or Medicaid
 - Increasing access to and the use of developmental screens during the first year of life.
Team Co-Lead: Christina Commons and Kristi Linson
 - Looking at data in 2017 related to children with CHIP and Medicaid insurance: developmental screens were rarely being billed
 - Screens are being done in many different places – how do we ensure they aren't being screened repeatedly at the same age while making sure they have information they need
 - Working with Kristi Linson and INVHAB to understand who is doing developmental screens and what tool they are using. Most using ASQ and ASQ-SE
 - Thinking about how to keep better records of screens: Putting together campaign about how to do it, what tool to use, and where to store data – potentially in CHIRP
 - Also planning look at all children who do developmental screening, not just those on public insurance
 - May be work discussing plans with Indiana Family Medicine Group
3. Executive Director Updates
- Next Commission Meeting: Oct 20 from 10 – 12pm
 - Plan is to meet in person at state library; encouraged to attend and watch
 - Last meeting is now online
 - Family YES: This will be virtual: Oct 22 – 23
 - Friday will be for professionals to hear from families about state systems and challenges
 - Saturday will be for families to learn advocacy skills, storytelling, and engagement
 - You can sign up for one or both days – it is critical to include this voice in programs, policies, and the work we do
4. Presentation: Pregnancy PROMISE (Promoting Recovery from Opioid Misuse: Maternal Infant Support and Engagement) by Carey Michels, FSSA
- Support by CMS and HHS grant
 - Indiana's MMRC Report in December 2020 showed that OUD is increasing in Indiana and most common contributing factor to pregnancy-associated deaths (over half)
 - PROMISE is a free, voluntary programs for pregnant Medicaid members who use opioids or have used opioids in the past
 - Must be 1) pregnant or within 90 days of the end of pregnancy, 2) identify as a current or previous opioid user; and 3) be currently receiving or eligible for Medicaid
 - This is statewide
 - Partnered with all four MCEs – Matched with case manager; case manager coordinates care for all resources, prevention negative impacts of opioid use for mother and infant
 - Program Experience: MCE's identify pregnant member with OUD or via a referral (no wrong door approach); initial assessment or screening, care plan development, frequent engagement pre- and postpartum; periodic review/reassessment/referrals; care coordination through 12 months for mother/infant; transition/program exit
 - Address health-related social needs; initiation of OUD treatment; access to family-planning (LARC); infant outcomes
 - Created three IU ECHO Projects: treating OUD in pregnancy for providers; caring for infants with NAS/NOWS; Supporting OU in pregnancy for case managers and home visitors
 - Went live July 1 – 80 are fully enrolled.
 - www.pregnancypromise.in.gov
 - Pregnancypromise@fssa.in.gov
 - Toll free line: 888-467-2717
5. Next Meeting: Monday November 29th, 2021, from 9 am – 11 am