

CT Family First Candidacy Meeting Notes

Date of Convening: December 19, 2019

Agenda

- Desired Results
- Introductions
- DC & Utah Discussion
- Charter Review
- Current System & Candidacy
- Action Items
- Data & Info Raised to Date

Desired Results

- Visual: Orienting our charge
 - 1st Goal: Define Family First eligible population (small circle)
 - 2nd Goal: Define broader population CT should target for prevention efforts (large circle). How does Family First fit into this broader picture?

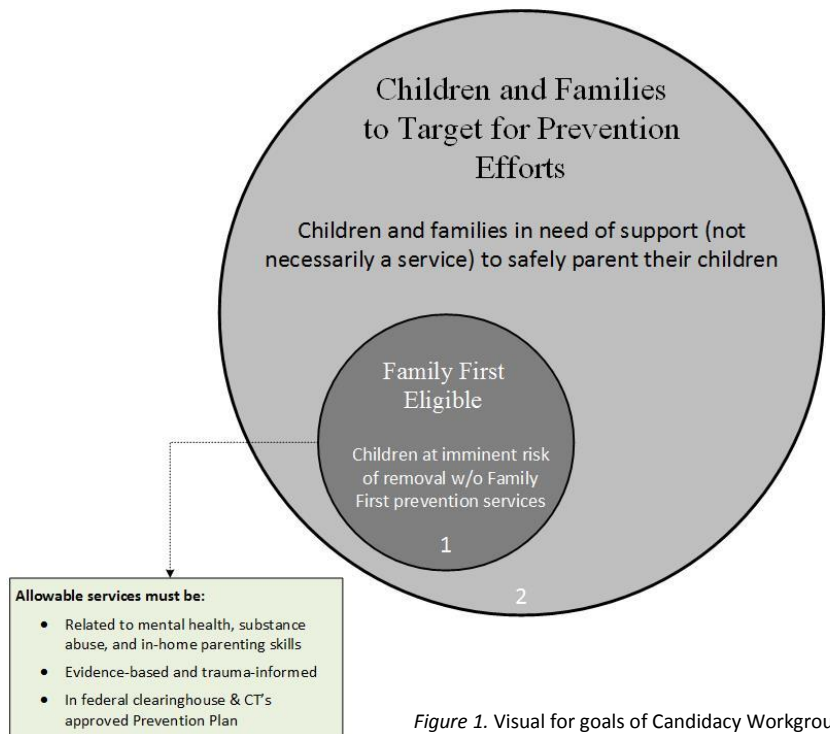


Figure 1. Visual for goals of Candidacy Workgroup

- Parking Lots
 - We will likely discuss several topics, data points, or questions that are not relevant to this particular group and its definition of Candidacy; however, we feel this input is still important to the process, so if we feel the group getting off track, we will add these points to one of our “parking lots,” or flipchart pages dedicated to the other workgroups. These issues will then be brought to the appropriate group for further discussion.

DC and Utah's Plans: Compare & Contrast

- Utah and DC are very different from Connecticut: Geographically and population-wise, there are a lot of factors that make these plans inapplicable to Connecticut.

While we can certainly look to draw from parts of their plans, we will need to approach our Prevention Plan in a way that specifically addresses CT's population and concerns.

- **Juvenile Justice:** Juvenile Justice was discussed in the DC Prevention Plan, but Juvenile Justice in CT is quite different from DC.
 - Differs in its approach to group care (moving towards group care settings)
 - Should we be furthering those conversations? Should be involving Juvenile Justice more in these discussions?
 - One person brought up Abby Anderson, who may be able to serve as Juvenile Justice's voice for the group.
 - Juvenile Justice is still in the process of reforming their system. We should keep an eye on their legislative recommendations as well as children's behavioral health.
 - One person asked if we should think about slowing down their processes so that their reforms better align with the work we are doing here for Family First.
 - Another explained that part of our goal should be to import Juvenile Justice's work here, meaning that Juvenile Justice catches a lot of kids on the back end, whereas perhaps with a more preventative approach, we could be able to keep kids out of the Juvenile Justice system entirely.
 - Along with that, one thing we might need more data on is what kind of DCF involvement increases the likelihood that children will end up in the Juvenile Justice system. Someone else also mentioned that the correlation may have changed recently and it is now going down.
- **Changes to Families with Service Needs (FWSN) laws:** Perhaps these discussions could be relevant to our definition of candidacy.
 - A participant mentioned FWSN because it works to eliminate youth truancy without processing them through the court system.
 - Their candidacy pool might help inform ours and determine whose needs should be addressed.

- **Washington’s Title IV-E Plan to address specific districts:** Is this protective or does it treat certain districts unfairly? Washington highlights two districts that they want to focus their attention on. These districts are the most DCF-involved, and Washington therefore selected them as a focus for their prevention efforts.
 - The group questioned this approach. On the one hand, it makes sense to focus on areas that have the most involvement as it seems they would benefit the most by prevention efforts. On the other hand, by focusing DCF efforts in certain areas, this may unfairly target that district, increasing surveillance and involving more children with DCF than would otherwise be involved.
 - We should take into account that Washington, DC is demographically different than CT, and this approach might not make sense for that reason. Additionally, DC has a rather unique existence in this country (including their approach to incarceration), which also means their approach may not be replicable.
 - However, we should also note that both DC and CT have high rates of wealth and income disparity, which does make them similar. We should push back on the notion that the two places are too different to compare, since that disparity has a major impact in both places. We should use age, racial, and geographic data to determine where our systemic discrepancies are.
- **Washington’s Waiver Program also gave them good data to pull from:** Their waiver program was in effect before Family First, and this meant they were able to learn from the data and consider that when drawing up their prevention plan. They had a good perspective on foster care, their philosophy being that it should be a temporary solution that leaves the children better than before. The group liked this approach to foster care.
- **DC had clearly defined subpopulations:** Folks complimented DC’s decision to craft specific definitions for their subpopulations (driven by data), whereas they felt Utah’s felt more broad and subjective.

Discussion on the System and the Group Task

- The current pipeline starts with schools
 - Schools' first approach to problems seems to be to call DCF
 - This is a mindset that we want to break. For better prevention efforts, we want schools to have tools to refer kids to services rather than referring them to DCF
 - Goal is to identify risks earlier
- Youth incarceration
 - Very closely tied to DCF contact
 - One person mentioned looking at Waterbury, as they have been increasingly arresting more kids. This was a concern, but someone else responded that this was not an indication of more crime but rather how Waterbury is currently treating kids with behavioral problems.
- What data might be important?
 - Susan Smith was brought up as someone who might have useful data.
 - The group would like more information on early intervention efforts
- Racial/ethnic disparities are present at every entry point (juvenile justice *and* child welfare), which we should keep in mind.
 - We should note that algorithms can be subject to the biases of their creators, and we should take data with a grain of salt for this reason.
 - We need to be wary of data and algorithms adversely impacting people
- *Question: Should our candidate be children or families?*
 - We should be family-oriented; however, funding is by child. Our service continuum should be designed for families.
- **How do we get to the big circle?** One person brought up that we seem to be still focused on people after they have trouble rather than stopping it before it happens.
 - We still seem to be focused on the people we already have contact with
 - However, we are currently working within a system, and it is hard to dismantle the system and work across groups.

- Keep in mind that for now, we are trying to focus on the small circle (Family First candidates), not the big circle.
- In response, some argued that the task for the small circle is already done. The federal legislation, Utah plan, and DC plan all seem to use very similar, specific language in their definition of a candidate. What else is there to add?
- Susan Reilly responded to this point. The language used to define the candidate may be rather similar across states/plans; however, the states still have a large amount of discretion when deciding how they will identify this population and who will be considered. The federal level is being broad, and the states' job is to narrow down this definition through its operationalization. States craft their definition when deciding on the “who,” “how many,” and “where” questions of Family First. When we say we are defining a candidate, we are not just talking about a traditional definition—we are talking about the strategy of actually identifying these folks.
- One person mentioned that it could be beneficial to discuss a kind of “eligibility screen,” or a set of questions we would want to ask a potential candidate. By talking through what that screen would look like, we could then work backwards to construct the candidate definition. For example, we could start with the SDM (safety assessment tool) and refine from there.
 - In this suggestion, we would start broad with a tool and then use this to narrow in on a more specific definition.
 - Along with the SDM discussion, perhaps eligibility could be determined by a combination of system involvement and risk.
 - DCF staff then clarified the SDM for those who are not familiar with our terminology. The SDM tool assesses the safety level of the child and the risk level for future involvement. If the child is not safe, they could be removed. If they are at risk for future

involvement, we generally do not remove the child as long as they are safe. This tool was implemented to standardize the decision-making process when it comes to removals.

Defining the Charter

- This section details the discussion around the group’s charter, which was drafted prior to the meeting. The content of the charter is not summarized here. For more information on its content, please refer to the charter itself.
- The group must define candidacy for IV-E funds and inform Connecticut’s larger prevention system efforts.
- We are partnering with each other to form this workgroup because families interact with different parts of the system in different ways. We want a variety of perspectives from all points in the child welfare system, and to be good partners, we need to work together and be respectful of each other’s experiences and expertise.
- As far as meeting format goes, some folks had difficulty with the structure. There is tension between those that want more data as quickly as possible and those who worry that without refining the data, we will drown in facts and figures before we can even begin. Those who want to look at the data argue that they are struggling to come up with a definition because they do not have the facts necessary to back up that definition. However, others worry that by starting off with too much data, we will become overwhelmed with info that is not relevant to the group and will have a hard time knowing where to start. Everyone agreed that it would be beneficial to have data (particularly about those on the cusp of involvement and removal—why some and not others?), but the group was unsure when would be the best time to get into the data.
 - Along with this, it was suggested that we should consider what’s getting assessed (what data points we will use) vs who’s getting assessed (which will start broad and get more nuanced).
 - To that point, we should also be considering a strengths-based approach and rethinking our framing. Instead of looking at deficiencies, we should

be asking whose communities need more supports as well as acknowledging that trauma is a common denominator in child welfare.

- Another point was brought up regarding trauma: the possibility of community trauma after tragic events (ex. Newtown) and catastrophes outside the system—we should also be working to prepare for situations like these.
- Working with kids outside of Careline
 - The group discussed the fact that part of prevention means that we want to assist families that have not had contact with our Careline. There were a few implementation questions and data requests regarding this:
 - Who would be the one to decide eligibility in these cases, if not a DCF employee (or at least a Careline employee)?
 - Could we use a CME approach?
 - How do we leverage existing infrastructure?
 - Is there a non-DCF referral method we could use? How would we then move families to another track if necessary?
 - Could we get more information on the disposition of Careline calls? How do those calls normally go and what can we learn from that?
 - Jeff suggested we try to visualize these pathways—first by viewing the kids who touch the system while exploring what additional questions we have about them. To do this, we used a case flowchart (a visual aid which provides an overview of the way cases flow through DCF, including stats on # of calls, # of cases on each track, etc)
 - While looking at the flowchart, one person requested more information on Careline calls and why referrals were not made in those cases. Out of 105,126 total calls in 2018, 59,152 were referrals, and only 28,825 of those were actually accepted. A DCF staff member explained that referrals are made on the basis of statutory requirements. We do receive calls that indicate possible issues within the household but do not meet the statutory

requirement for abuse or neglect. In these cases, we are not able to accept the referral. This might be a key area to look into, both in terms of data and consideration for a candidacy definition.

- Another point on the flowchart interested workgroup members—the fact that out of the 59,152 referrals to the Careline, 84.2% came from mandated reporters. DCF knows who mandated reporters are (often teachers or other school employees or medical personnel). However, some asked, “Could we get more information about their characteristics? For example, where are they calling from?” One person brought up the fact that part of why so many intakes are from mandated reporters is that there is a great amount of angst amongst them (mandated reporters) due to fear of punishment for not reporting. This means that mandated reporters tend to report everything—even things that are not really abuse/neglect—just to be safe. On that note, it was suggested that this group also take this as an opportunity to educate mandated reporters and create a statewide intervention; this would give them a better understanding of the other resources available to them so they would not always need to call DCF.

More Information and Resources the Group Needs

- The next meeting will focus on presentations regarding the information the group feels is necessary to define candidacy. Data has been requested at previous meetings, but participants had one final discussion on what additional information they wanted to request.
- One member brought up an example of a previous task force designed to investigate child deaths. The group looked at trends over time, the characteristics involved in these cases, and with that data, they were able to flag kids that were at risk so that they could be identified earlier on. They suggested that a similar strategy be used here to determine what children are at risk of removal.

- This was not exactly a data request, but one person emphasized the need to keep workforce capacity in mind. It is hard enough as it is to find qualified workers; we need to make sure that the network is strong enough to implement the changes we are suggesting. Along with that, we need to make sure we're keeping an eye on private practitioners with low oversight and isolation.
- The group requested data on FAR track¹ families. Specifically, the group is curious about repeat FARs over time and trend lines regarding how often those kids end up in foster care. Repeat contact with DCF in general and specific to the FAR track would be beneficial.
- The group is curious what tends to happen to referrals on the FAR track. Possible outcomes include:
 - Family does not need anything
 - Family does need something and accepts either ongoing services or goes to a community partner agency
 - Family does need something but refuses services

The group would like more information on all of the above possible outcomes, especially on the outcomes for families who refuse services.
- One person wondered whether we should be looking at the sliver of kids who are in foster care. Those kids' information and the circumstances around their removals might help us determine who is at risk of entering care.
 - Candidacy is a small group—let's not get overwhelmed. Starting here might help us begin with a narrow focus.
 - Consider: what level of data is needed for this group?
- Connecticut in context: It may be useful to observe national trends and compare Connecticut with the broader picture.
- One person requested a visual of the percentages of those removed by race

¹ When a DCF accepts a referral, the case goes either on a FAR track or an investigation track. The FAR track is for families that need support but have low risk in the household, whereas the investigation track is for families with higher risk. A family on the FAR track can have continued involvement in DCF through ongoing services, but many are also referred to community partner agencies. A case can switch between a FAR and an investigation depending on the circumstances.

- Juvenile justice: what do we need to know? In our earlier discussion on juvenile justice, we discussed things that might be useful to know. Here, we synthesized those points to come up with a few questions or topics we'd like more information about.
 - DCF involvement and juvenile justice—what is the relationship (might be a UConn study on this topic?)
 - Juvenile Justice/DOC—what's happening here?
 - We've lost data on this subject after the closing of CJTS
 - Along with juvenile justice, we should look into the increase in homeless youth and examine how that might relate to DCF involvement.
 - We've got snapshots of the above but not the full picture.
 - Furthermore, we should look at those in the pipeline who might be *at risk* of involvement with the juvenile justice system and examine these shared risk factors at a younger age (ex. Suspended/expelled multiple times, early arrests, 3rd grade reading scores, etc)
 - ICAPs & Extended Day data might be good resources for all of the above
- Data outside of DCF (ex. Non-reported cases, Office of Early Childhood data)
 - Education system data—especially on those with disabilities
 - 211 line data
 - Data from the Adoption Assistance Program (through UConn)
- Educational neglect data—what was the referral for vs what was the actual situation?
- Considered removal data
- Parents w/ cognitive limitations (data about them)
- Data on cases through courts
- Question for Fred North—can he look at specific program outcomes?
 - His answer is a tentative yes, but it depends on what program and outcomes you are looking at

Final Thoughts

- **Connecticut has a lot of good resources going for it.** We have many EBPs already in place and a variety of funding mechanisms.
- **Cross-group communication is key.** Workgroup members are encouraged to read through the minutes from other groups (posted on the website) and see what is being worked on.
- **Families should be more centered in these discussions.** One member emphasized the importance of centering families when making recommendations.
- **A packet would be helpful for next week's meeting.** Since the upcoming meeting will be presentation-heavy, members would appreciate receiving any materials in advance (when possible).
- **This is an iterative process.** Keep in mind that we are crafting a 5-year plan and it will be open to adjustment. As more data is brought to the table, we can reassess and revise. We should not ever feel like we are creating a final product; things will change as needed.

Next Meeting:

Our next meeting is **Thursday, January 2nd from 9 am – 1 pm.** We will be meeting at **The Village at 1680 Albany Ave, Hartford.** The group's homework is to read any packets about the meeting before coming (we are not certain whether we will be able to compile materials in advance, but we will do our best). If you have not already read the Washington, DC and Utah reports, please do so. Enjoy the holidays!