

Meeting Summary / Minutes
Family First-Fiscal and Revenue Enhancement Workgroup
February 10, 2020; 9:00-11:00 am
DCF - 505 Hudson Street
Call-in/Teleconference Meeting

Agenda:

- **Welcome**
- **Charter Document**
- **Candidacy Workgroup Update**
- **Program Workgroup Update**
- **Maintenance of Effort**
- **Ethics Issues Regarding Future Procurements**
- **Potential Use of the Federal Seed Funding**

Co-Chairs

- Cindy Butterfield, Department of Children and Families
- Dr. Allison Blake, Child & Family Agency of Southeastern Connecticut

Welcome and Introductions

- Cindy reiterated the decision to facilitate a remote meeting.
- Cindy facilitated a roll call to open the meeting. Several individuals from the larger external stakeholder community participated. Cindy reviewed today's agenda.

Charter Document

- Cindy asked if members reviewed the Charter and if there were any issues that need to be considered.
- The ratification of the Charter will be placed on hold until the next meeting.

Candidacy Workgroup Update

- JoShonda Guerrier reported that the Candidacy workgroup has completed Phase 1 of their work-- the narrow Connecticut's Family First definition for a candidate at risk for entry into foster care.
- The first Governance meeting was held on January 27th. The Candidacy workgroup rationales for the basis of their candidate at risk definition was presented.
- The Governance team kicked back two issues for the Candidacy group to reconsider and made two (2) Executive decisions specific to recommended populations.
- The Candidacy workgroup met on January 30th. The result of that meeting provided the Candidacy Workgroup Update pertaining to today's agenda item.
- The Candidacy Workgroup Update was previously shared with the Community Partnership and Youth and Family Engagement Workgroup, as well as the Programs and Service Array Workgroup. Both workgroups made recommendations regarding language refinement and wordsmithing.
- Those recommendations will be brought back to the Candidacy workgroup, as well as to the Governance team.
- JoShonda stated that while there may be some tweaking and wordsmithing of the recommendations, the tone and tenor of the candidacy definition will remain. All

recommendations provided today and by other workgroups will be considered to enhance the definition to be captured in the final report.

Candidacy Workgroup Recommended Candidate Populations

1. **Families with accepted Careline calls.** These are calls placed to the DCF Careline, where a child comes to DCF's attention due to alleged abuse or neglect and the decision is made to commence an investigation. Those youth and their families will be viewed as an eligible population of candidates for potential receipt of evidence based services. This is irrespective of which track the intake is designated: FAR (Family Assessment Response) vs. investigations or whether the report was substantiated or not. This is about the entry point into the system.
2. **Families who have been accepted for Voluntary Services.** Youth having a mental health or behavioral health diagnoses whose families reach out to DCF to request assistance and have not abused or neglected their children. Acceptance for Voluntary Services through the Department or through Beacon Health Options (in the future once Voluntary Services transitions) will be included in the Candidacy population.
3. **Pregnant and parenting youth in foster care.** This language was taken directly from the federal legislation.
4. **Siblings of children in foster care.** Siblings that remain in the home, following the removal of their brother or sister from the home. These siblings may be at risk in some way and will have access to services.
5. **Youth exiting to permanency or youth aging out of DCF foster care.** Permanency is broadly defined as adoption, guardianship, or reunification. This group of youth would also include those youth that age out of the system up until age 21.
6. **Families with certain characteristics that are identified through the community or neighborhood pathway.**
 - JoShonda stated that from a prevention standpoint, we are talking about families with whom we will have an opportunity to intervene that currently do not come to the attention of Careline or some other DCF touch point.
 - The Candidacy workgroup will be looking at how to frame the eligibility tools, infrastructure capacity, and how to track services within the system for reimbursement. This group reflects the broader community or neighborhood pathway. Specialized populations within this category include:
 - **Children who are chronically absent from preschool/school or are truant from school.** The workgroup reviewed definitions and legislation around the terms absenteeism and truancy.
 - **Children of incarcerated parents.** This addresses children whose parents are incarcerated irrespective of where the parent(s) is in their journey. There will be support to the child and their current caregiver. Broadly intended.

- **Trafficked youth.** Youth who do not rise to DCF attention, but present somewhere else in the community. By virtue of calls placed to the Careline, many of these youth will be served under category #1.
- **Unstably housed/Homeless youth.** Unstably housed was used to be broad and to represent any child or family experiencing unstable housing or homelessness, and those presenting at a shelter in the community.
- **Families experiencing Interpersonal Violence (IPV).** This objective was initially presented to the Governance team as being in the broader bucket. The made its decision based on data that indicated that IPV was not a high indicator of a child being at risk of removal.
 - Even though the IPV data stated that less than 3% of youth fall within the removal category, Governance sent the population back to the Candidacy group for further consideration.
 - As a result of additional follow-up and a look at alternate, more enhanced data, IPV was included in the narrow definition of Family First, as opposed to the broad, five year plan.
- **Youth who have been referred to the Juvenile Review Board (JRB) or have been arrested.** Everyone agreed that we need to serve youth that are/were juvenile justice or delinquency involved. The difficulty lied in how far upstream should the system intervene with these youth in a way that is divergent without the youth being already too far in the system. Based on the data currently known, the JRB seemed to be the best solution for now, until analysis in done, and a future update the plan is needed.
- **Caregivers who have, or have a child with, a substance use disorder, mental health condition or disability that impacts parenting.** The Candidacy workgroup was split about who should or should not be included from this grouping. Debate lasted at least two meetings. There were discussions about stigmas and projections by virtue of having a diagnosis or disability implying that parents having one of the above diagnosis or impairments cannot parent their child. Governance made the decision that the population listed in this group would be included. It was recommended to frame this population around what drives the parents' struggles. JoShonda stated the she will bring this one back to Governance and Candidacy in an effort to make the wording easier to digest and read. Additionally, she will attempt to separate the aspects of the parent and child in working definition.
 - Comments: Concern was expressed regarding the broadness of the language (i.e. impact of substance use on parenting and the stigma associated with the term mental health) used to describe this population.

- Questions: Can the last three (3) words 'that impacts parenting' be more clearly defined? Also, can the word "disorder" be changed to the word diagnosis?
 - Response: JoShonda questioned if it would be helpful to drop the last three words? JoShonda also stated that being broad was intentional.
 - Finally, she stated DCF's involvement with parent-child relationships will be to create funding opportunities for families.
- Question: How does reimbursement intersect with the existing set of services primarily for adults?
 - Response: Implementation is unknown until services have been identified.
- Question: How do you balance the discretionary nature of some of the definitions with the entitlement nature of the funding?
 - Response: We have to fiscally model the services selected to serve the candidate population, after everything is done, to figure out what we can ask for and manage to support in the State.
 - Member stated that a possible solution may be to have a new vision of Voluntary Services. JoShonda clarified that all that has been talked about in this continuum is of a voluntary nature. Families have to want to participate.
- **Infants born substance-exposed** (as defined by the state CAPTA notification protocol). Governance asked specific questions about words used in this description. Clarification was requested from the Candidacy group.
 - Connecticut has its own CAPTA definition that is different from the Federal definition. It was decided we would use Connecticut's existing definition to ensure alignment.
 - Cindy and Dr. Blake agreed to include Connecticut's CAPTA definition along with the meeting minutes.

The next Governance meeting is scheduled for the beginning of March. At this meeting, Governance will be presented with, to provide approval for, all changes based on feedback collectively received from each of the other workgroups.

The candidacy definition (as previously approved by the governance committee) has been shared with the Program and Service Array workgroup.

Program Workgroup Update

- Explained Connecticut's Continuum of Services that Strengthen Families is a slide authored by Dr. Elisabeth Cannata, Co-chair of the Programs and Service Array Workgroup (PSAWG) to frame the workgroups efforts from meeting to meeting.
- JoShonda reported that the PSAWG Co-Leads, Dr. Elisabeth Cannata and Elizabeth Duryea, have been brainstorming around what is available in Connecticut's service array.
- PSAWG has compiled inventories of programs; reviewed service barriers; and identified missing providers.

- The referenced slide/visual assisted PSAWG members in the process of identifying prevention programs and intervention populations.
- The second half of this visual, which addresses Kinship & Aftercare, has been tabled until PSAWG can address the first two objectives/buckets. This was based on the fact that PSAWG knew the Candidacy initial work-product would be the narrow definition of candidacy.
- Last week, PSAWG heard the full definition of Candidacy and began to conceptualize and map services by breaking a part the six (6) recommendations for candidacy into characteristics groupings.
- Prior to their next meeting, PSAWG will engage in off-line work to answer key fundamental questions:
 - What services map to a grouping?
 - What's missing?
 - What current services exist, that we were not aware of, that address the characteristics outlined in the Candidacy definition?
- National research will be done to identify models available in Connecticut that can be selected for integration into our plan.
- As access becomes the focus, it will be essential that these two workgroups work together to align their efforts to make access to services easy for families.

Maintenance of Effort (MOE)

- The Department of Children and Families is contracting with Don Winsted, who is an expert in Family First and other Federal funding sources. We will work with him to determine if our application for MOE calculation is correct.
- Reason for setting MOE year for 2014 was re-explained.
 - Question: In regards to setting the minimum spending on prevention activities, will this be inclusive of Medicaid reimbursement, grant money and DCF?
 - Response: Cindy stated that there is a lot outside of DCF (TANF programs, etc.) to consider. These are the types of issues that we hope Don Winsted can provide guidance and expertise around. This is also complicated, because DCF is not part of an umbrella agency. In the past, the minimum has been spent on prevention. Cindy asked members to communicate any concerns they may have regarding pitfalls and concerns about MOE.
 - Question: Will the budget information be broken up by agencies and program type?
 - Response: Yes.

Potential Use of Federal Seed Funding

- It has not been confirmed, but DCF's share of the \$500 million in federal seed funding will be \$3 million.
- There are two potential uses for this funding:
 - Bridge the loss in income sustained on services that currently receive federal reimbursement.
 - Investment to fund plans. There is no current plan around how the funds will be spent.

- Concern was expressed regarding whether seed funding will be used for service system enhancement/providers rather than the State agency and Beacon Health.
- Ken mentioned that there will be a 6th workgroup specifically for providers with congregate care facilities. The focus will be on QRTP federal guidelines.
- An email will be sent out to all Family First group members once a date has been determined regarding the QRTP Workgroup. Group members may participate in multiple workgroups.

Ethics Issues Related to Potential Procurements

- Cindy stated that members have inquired about when they will need to discontinue their participation in the plan in order to be able to participate as a vendor in the RFP process.
- Cindy reviewed the State Contracting Procurement Rules.
- Cindy stated that we are early in the process where we do not have the issue of potential procurement.
- The Office of Policy and Management (OPM) has been contacted to provide definitive guidelines for providers participating in the workgroups.
- Cindy re-iterated the openness associated with this workgroup (i.e. published minutes, open member enrollment, etc.).

Questions/New Items

- Attempts will be made to have more information regarding MOE for next meeting. It will probably not be the entire mapping of the funding stream, but maybe services applicable for MOE.
- Anticipating framework from Program and Service Array Workgroup.
- Cindy asked for feedback regarding the continuation of remote meeting until the receipt of actual information to begin fiscal process.
- Remote vs. In-Person meetings? Members agreed to remote meetings.
 - Question: Member asked if Cindy would include remote vs. in-person meeting question when sending out the next agenda. Member stated that as more information is being disseminated from other workgroups, there may be a desire to meet and discuss additional ideas.