

# CT Family First Kinship & Foster Care Meeting Notes

Date of Convening: December 20, 2019

## Agenda

- Welcome & Introductions
- Reflections & Progress
- Presentations
- Break
- Kinship Cafes: Visualizing Child, Caregiver, and Birth Parent Needs
- Debrief of Exercise
- Open Discussion
- Closing & Housekeeping

## Reflections: What have you been thinking about since our last meeting?

- **Take off your hat:** One participant discussed a conversation at a RAC meeting in which they discussed the necessity to take off our “hats” when entering the door. By this, they mean leaving our agency roles and egos behind and collaborating to create this plan.
- **Agency heavy, but hopefully improving:** While the group is still overwhelmingly made up of folks from agencies (both government and nongovernment orgs), we have started bringing in more families. If you know of a family member who might be interested, we encourage you to bring them to the meeting (please let us know they’re coming) or solicit their input outside of our normal meetings.
- **Communication is key:** Please sign in to every meeting and let us know if you are not receiving emails. As a reminder, you can always reach out to us by email at [DCFCTFAMILYFIRST@ct.gov](mailto:DCFCTFAMILYFIRST@ct.gov).

## Presentation: The Current Foster Parent Service Array

Below is a summary of the questions and points that were raised during the presentation on Connecticut’s current service array for foster parents and kin. Pam Kelley and Natalia Liriano presented and responded to questions. For the full presentation, please check the DCF Family First website; it will be linked there.

- There are a variety of kinship services for non-DCF families, DCF families, and those who are no longer involved with DCF
- Connecticut’s Model Foster Family Home Licensing Standards are similar in many ways to the federal guidelines, but it differs in some respects
  - Literacy

- One person asked why our literacy standards are different from the national licensing model, pointing out that it seems like it should be required.
  - Tina pointed out that there may be grandparents or other relatives who would make good caregivers but who may not be literate, and the department does not feel they should be excluded from caring for a child solely on that basis.
  - Another group member pointed out that these families may need extra support (especially when trying to fill out paperwork), and Tina agreed, but pointed out that this support might not need to (nor should it) come from DCF.
- Trauma and Kinship Training
- The group noticed that the training standards for kin are much lower than standards for Core Caregivers (9 hours vs 30 hours). They suggested adding more supports here and encouraging more training, especially as it relates to trauma. The group pointed out that trauma is cyclical, and it can impact the ability of kin to care for the children and for themselves.
  - Someone also pointed out that kin could benefit from training both on the child's needs and on their own.
  - Another member brought up the importance of funding for in-home services, as some may not have insurance. Training in-home would help those with non-traditional schedules and would fill a big gap.
- Approach to foster/kin
- The group agreed that there should be a change in the way we think of foster and kinship care. It is best for the child to have an extension of family (not a second/replacement family). Families should be encouraged to embrace the whole child holistically.
- Ken also discussed Kinship Navigator Programs; he described their purpose and benefits as well as included links to more information on these programs.

## **Kinship Cafes**

*Activity Overview:* The workgroup was asked to split into three smaller groups and participate in Kinship Cafes. Each group was asked a series of questions that they were to answer through a certain perspective and given a large piece of paper to record their thoughts. They answered each question as either a child at risk of being removed, a parent at risk of having their child removed, or a caregiver (either informal kin caregiver or foster parent) and then came up with around three

words that highlighted the main ideas. The results are displayed in the table below (key points are summarized in bold):

Question	Child	Parent	Caregiver
<p><i>What do I need to make my family whole?</i></p>	<p>A safe, stable place to live</p> <p>Adequate food</p> <p>Reliable adults</p> <p>My parents to make enough money</p> <p>A safe school</p> <p>Health services</p> <p>That my voice is heard</p> <p>A safe neighborhood</p> <p>My parents to have a support system</p> <p>School/teachers that are sensitive to my needs and situation</p> <p>Get a good night's sleep</p> <p>To feel loved</p> <p><b>Love, cared for, safety.</b></p>	<p>Financial support</p> <p>Parenting education</p> <p>An understanding of how to navigate a complex system</p> <p>Advocate/mentor</p> <p>Housing</p> <p>In-home treatment, flexible to my schedule and my needs</p> <p>Streamlined services</p> <p>Engagement with <u>both</u> parents</p> <p>Help bridging the gap with paternal family</p> <p>Help for the whole family system</p> <p>Faster access to services</p> <p>Transportation</p> <p>Respect for who I am as a parent; I am the expert on my child</p> <p>Cross-system collaboration among state services</p> <p>Streamlined availability of services (one central location where I can look for what will help me)</p> <p>Support/resources for children with complex needs</p> <p><b>Resources, support, compassion.</b></p>	<p>Establishing roles/boundaries with birth families and keep expectations clear, especially as it relates to bio parents' relationships. Also help resolving conflicting values. All this should be done as early as possible.</p> <p>A clearer subsidy process</p> <p>Education around addiction (break out of "bad life choices" framework)</p> <p>Community-based education &amp; support</p> <p>Better staff messaging and staff training—a look at DCF's narratives during the removal process and how this influences family opinions of birth parents</p> <p>Bridging the gaps that occur within families and avoiding taking sides</p> <p>Culture shift and breaking the way people have been trained</p> <p>List assessment: doing more family-specific training on the front end. In particular, identify what trainings would be beneficial for the family</p> <p>Integrate bio families sooner (through icebreakers/cafes)</p> <p>Help with relationship managing (on the adult side)</p> <p><b>Consistency w/ support from DCF, balancing conflicting relationships, training.</b></p>

Question	Child	Parent	Caregiver
<i>What is missing?</i>	<p>Safety, consistency, security, regulation, structure, and resources</p> <p>Don't always understand what's happening—need someone to explain things at my level.</p> <p>Hierarchy of needs (ranging from food/shelter to emotional support, etc).</p> <p>Need parents to be okay and to be heard—genuinely care for their wellbeing.</p> <p>Community to pay attention</p> <p>Father figure and a system that engages fathers</p> <p>Teachers that understand the difference between trauma and behavioral issues</p> <p>That people talk about my family respectfully (I observe/absorb this) and are kind to me—the way folks talk about my family impacts my self-image.</p> <p>That I am included in the decision-making process</p> <p>People I can trust that believe in me and see the best in me</p> <p>More education on psychology (so I can understand issues like parentification and how it impacts me). People who can explain why my norms may be unhealthy.</p> <p>People who understand me and can tailor services/therapy to my needs</p> <p><b>Safety, a voice, mutual trust</b></p>	<p>Adequate income</p> <p>Affordable housing</p> <p>Transportation</p> <p>Affordable access to healthcare</p> <p>Reliable, healthy support system</p> <p>A positive person in my life</p> <p>One-stop shop for services</p> <p>After hours services</p> <p>A safe neighborhood</p> <p>Schools that are safe and adequately resourced</p> <p>No judgement</p> <p><b>Equitable, accessible resources.</b></p>	<p><b>Kin:</b></p> <p>Mental health support for family system (don't put me in the middle)</p> <p><b>Caregivers:</b></p> <p>Assistance navigating the parent relationship</p> <p>Be a part of the matching process</p> <p><b>Kin &amp; Caregivers:</b></p> <p>Access to birth family to develop/strengthen relationship</p> <p>Legal support &amp; advocacy</p> <p>Parent advocate</p> <p>Consistency of services regardless of entry (DCF, probate, informal)</p> <p>Compassion, valued as a team member</p> <p>Increased awareness of available services</p> <p>Respite and childcare support</p> <p>Respect</p> <p><b>Respect, resources, support, and the same things as birth parents.</b></p>

Question	Child	Parent	Caregiver
<p><i>What have I found helpful in keeping the family intact?</i></p>	<p>Having the right information at the right time</p> <p>Honesty and transparency</p> <p>Privacy</p> <p>Normalcy, consistency (esp. as it relates to providers)</p> <p>Visits with my parents without DCF; being able to go into the community</p> <p>Recognition that my parents are good people</p> <p>Sibling interactions and knowledge of their wellbeing</p> <p>Safety &amp; security</p> <p>Therapy—and my influence in the process</p> <p>Support in my home</p> <p>Time to just be a kid—and being treated like any other kid</p> <p>Enrichment activities</p> <p>Resources—financial, transportation, etc—basic needs met</p> <p>Freedom of expression</p> <p>Adults in my life respect my family situation</p> <p>Cultural sensitivity</p> <p><b>Respective normalcy, transparency/privacy, and safety/security.</b></p>	<p>Accessible services (in my community that work)</p> <p>Affordable, safe, stable housing</p> <p>Partnership: sharing power/coparenting</p> <p>Nonjudgmental people</p> <p>Child (as a resource/support)</p> <p>Affordable childcare</p> <p>Programs without waitlists, especially those that help me function in my own home</p> <p>Affordable, safe, and reliable transportation</p> <p>Faith-based organizations and other support networks (natural supports)</p> <p>Clear communication—what is going well and what’s not? I need good facilitation that keeps me fully informed.</p> <p>Trust</p> <p>Time</p> <p>Free &amp; reduced lunch</p> <p>In-home supports</p> <p>“That one worker” – a person who really listens to my side and believes in me.</p> <p><b>Effective resources, natural supports, and partnership.</b></p>	<p>A worker who listens and respects me</p> <p>Being an integrated team member</p> <p>Assistance navigating family</p> <p>Quick access to services for kids</p> <p>Self-care/respice</p> <p>Empathy</p> <p>Cultural understanding</p> <p><b>Respect, inclusion, support.</b></p>

## Debrief of Kinship Café Exercise

- New information/what you learned
  - Folks noticed that the child's list was generally the longest no matter the question.

## Call to Action: What's Next?

- Taking feedback from this activity and compiling it for recommendations
- Review blue folder materials (including presentations & data) before next meeting
- One person mentioned that it would be helpful to have a clearer outline of their goals. In addition to clear goals for each meeting, a reminder of the deliverables and how the meeting agenda fits into that would provide some helpful structure. They would like a better understanding of how this brainstorming will be refined and turned into recommendations. Clearer objectives were also requested.
- Another person pointed out that while the “top three” points to highlight in the table above is important, we should also look at the full list of everything that was written in the table, as there is a lot of wisdom in everything that was written.
- Reminder: April 24<sup>th</sup> is the goal for our planning deadline; the work does not stop there—we still need to have the plan approved, implement it, and revise as necessary.
- Communication/updates on other groups:
  - Members agreed that it would be helpful to hear what is going on in the other groups, especially if there are highlights that will specifically inform this group's recommendations. Members also stated it would be beneficial to get a better understanding of the fiscal side of things and understand what's feasible. While the co-leads agreed that communication with other workgroups is important, they explained that the fiscal aspect has been purposefully left out. They want to emphasize that our goal is to build the funding around the needs and not the other way around. They feel that focusing on what we currently think is feasible would inhibit our ideas, and they would rather identify needs and solutions, then have the fiscal group identify other funding streams we could use to implement those ideas (such as Medicaid, DSS, etc).
  - All groups have had their kick-off meeting, but few groups have gone much past that besides candidacy. JoShonda gave an update on the Candidacy Workgroup's status. They had met three times as of this meeting, and they had developed a group charter and began brainstorming entry pathways. This group has also started using “Parking Lots,” which are flipcharts labeled with the other workgroups' names; when Candidacy discusses something that is important but maybe not pertinent to

their charge, the topic will be added to the Parking Lot for the relevant workgroup and brought up for discussion at their meeting.

- Clarification on group format: this group is a recommending body. The Governance Workgroup will have the final decision-making power when it comes to the Prevention Plan that is submitted.
- We also want to make sure that we bring others into these meetings and don't go too narrow. The space is still rather provider-heavy, and we want to make sure all perspectives are fully involved in the process. Members are encouraged to invite families to meetings and solicit opinions when possible.

**Next Meeting:**

- The next meeting will be held on **Friday, January 10, 2020 at Beacon Health Options from 9 am – 12 pm**. The group's homework is to review the information in the blue folders that they got at the meeting.