



# PERFORMANCE AUDIT REPORT

Verifying Information Provided by the  
Department of Social and Rehabilitation Services  
On Its Compliance with the Terms of the  
Foster Care Lawsuit Settlement Agreement

Monitoring Report #12  
Covering July 1 to December 31, 1999

## *Executive Summary* *with Conclusions and Recommendations*

A Report to the Legislative Post Audit Committee  
By the Legislative Division of Post Audit  
State of Kansas  
August 2000



# ***Legislative Post Audit Committee***

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## ***Legislative Division of Post Audit***

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LEGISLATURE OF KANSAS

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August 11, 2000

To: Members of the Kansas Legislature

This executive summary contains the findings, conclusions, and the agency responses from our completed performance audit, *Verifying Information Provided by the Department of Social and Rehabilitation Services on Its Compliance with the Terms of the Foster Care Lawsuit Settlement Agreement, Monitoring Report #12*.

The report also includes a number of corrective actions the Department plans to take to improve its compliance in future monitoring periods.

If you would like a copy of the full audit report, please call our office and we will send you one right away. We would be happy to discuss our findings or any other items in the report with you at your convenience.

Barbara J. Hinton

Legislative Post Auditor



# EXECUTIVE SUMMARY

LEGISLATIVE DIVISION OF POST AUDIT

## ***Is the Department of Social and Rehabilitation Services Complying with the Terms of the Foster Care Settlement Agreement? Monitoring Report #12***

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**Only 59 of the original 153 settlement requirements (39%) remain to be monitored.** . . . . page 5  
*To-date, 94 have either been found in compliance (78), been removed by party agreement (8), or are monitored directly by Children's Rights, Inc. (8).*

**For the 6-month period generally covered by this audit (July-December 1999), only 49 requirements were monitored.** . . . . page 5  
*The Department was in compliance with 8 (16%) and wasn't in compliance with 41 (84%).*

**This period, the Department was in compliance with 1 of the 7 remaining requirements related to investigating reports of child abuse or neglect (Case Review #1).** . . . . page 5  
*Department staff interviewed everyone they should have during an investigation. However, they didn't take appropriate actions as often as required. These included completing service plans for the family, taking action to obtain medical services for the child, having an uninvolved supervisor review prior reports of abuse or neglect to look for patterns of "unconfirmed" reports, and meeting certain criteria before emergency court or law enforcement removal is requested.*

**The Department reported it wasn't in compliance with 25 of the 31 case-management requirements we assessed for Case Review #2.** . . . . page 6  
*The family case plans we reviewed this period had appropriate permanency goals and steps to meet those goals. The Department also made specific social workers responsible for making regular visits to children in out-of-home placements. However, the Department didn't come into full compliance for the other 25 requirements.*

**The Department was in compliance with 1 of 2 adoption requirements due this period.** . . . . page 6  
*The Department sent information to support motions to terminate parental rights by the required deadline 91% of the time, but it didn't track final orders terminating parental rights as often as required.*

*To come into compliance in the future, the Department will meet monthly with area attorneys to review proper policies and procedures in this area.*

**The Department inappropriately screened out some of the bona fide reports of abuse and neglect it received** *Beginning in July 1995, the Department was required to properly screen 90% of all alleged abuse and neglect reports it received. This period, the Department made the proper screening decision for 86% of the 251 reports the Internal Monitor reviewed.*

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*As with last period, the Department will continue to review compliance reports and train new staff on screening procedures. It will also develop "success" plans for areas that aren't in compliance, using procedures from areas that consistently are.*

**During this period, Department staff entered into its Central Registry database only 2 of the 7 foster care providers whose abuse or neglect of a child had been validated.** *The Department's compliance rate this period was only 29%. Since our review, however, the Department has entered all 7 providers.*

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*To improve compliance, the Department has automated the process of entering names into the Registry. It also plans to implement a system to remind areas to update findings of abuse and neglect in its foster care information system (FACTS).*

**The Department wasn't in compliance with 3 training requirements for foster parents and adoptive homes.** *All foster parents must complete annual training before a child in the Department's custody can be placed in their home, and the Department is required to track this training. The Department also must track the initial "MAPP" training completed by foster and adoptive parents.*

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*The Department acknowledged that only 35% of the foster parents due for annual training this period completed that training. In addition, it reported that none of the systems it uses to track annual and MAPP training met the requirements for being accurate and up-to-date.*

*To comply with the annual training requirement, the Department will develop a system to remind contractors when foster homes are due for that training.*

*To improve the accuracy of its training database, the Department made a single person responsible for entering training information. In addition, the Department plans to get direct access to a licensing database maintained by the Kansas Department of Health and Environment and use that link to more quickly update its own system.*

**The Department wasn't in compliance with 4 foster care information system requirements.** . . . page 13  
*This period, the Department was required to maintain timely information about prior abuse and neglect allegations, screening decisions, risk assessments, and investigations in its new computer system (FACTS). The Department acknowledged that none of these requirements were met.*

*In addition, the Department hasn't maintained 2 other computer systems—one system that tracks foster home resources and vacancies, and another that tracks specific information about each foster child. These 2 systems are required until FACTS is determined to be fully in compliance. However, the Department shut down both systems when FACTS came on-line and the parties wouldn't agree to suspend monitoring of them. As a result, the only possible finding we could make is noncompliance.*

*To come into compliance in the future, the Department will have FACTS data entry training and meet every other month with staff to address problem areas. In addition, it will require each area office to submit a corrective action plan to improve compliance.*

**APPENDIX A: Compliance and Reliability Definitions** . . . page 24

**APPENDIX B: Agency Responses** . . . page 27

This audit was conducted by Jennifer Wagner. Barbara Hinton was the audit manager. If you need any additional information about the audit's findings, please contact Ms. Wagner at the Division's offices. Our address is: Legislative Division of Post Audit, 800 SW Jackson Street, Suite 1200, Topeka, Kansas 66612. You also may call us at (785) 296-3792, or contact us via the Internet at [LPA@lpa.state.ks.us](mailto:LPA@lpa.state.ks.us).