



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 #11
Covering January 1 to June 30, 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
February 2000**

Legislative Post Audit Committee

Legislative Division of Post Audit

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LEGISLATURE OF KANSAS
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February 2, 2000

To: Members of the Kansas Legislature

This executive summary contains the findings and conclusions, together with a summary of our recommendations 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 #11*.

The report includes a number of corrective actions the Department plans to take to improve its compliance in future monitoring periods. We would be happy to discuss these actions or any other items in the report with you at your convenience.

If you would like a copy of the full audit report, please call our office and we will send you one right away.

A handwritten signature in black ink that reads "Barbara J. Hinton". The signature is written in a cursive, flowing style.

Barbara J. Hinton
Legislative Post Auditor

**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 #11**

**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?**

Only 59 of the original 153 settlement requirements (39%) remain to be monitored. 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). page 4

For the 6-month period generally covered by this audit (January-June 1999), only 16 requirements could be monitored. For these 16 requirements, the Department was in compliance with 1 (6%) and wasn't in compliance with 15 (94%). page 4

Our findings are summarized below. The matrix beginning on page 12 shows the Department's compliance over time with each requirement that's been monitored to-date.

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). Department staff completed family service plans when they were needed. However, they didn't take appropriate actions as often as required. These included interviewing all the appropriate parties during an investigation, 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. We'll report on these 7 requirements again next period. page 4-5

The Department acknowledged it wasn't in compliance with 2 Case Review #2 requirements from last period, and reporting for the 31 requirements due this period was delayed. Case Review #2 requirements cover the management of foster care cases. Last period, the Department placed children in appropriately licensed homes 78% of the time, and there was documentation that the foster or adoptive parents for those homes had been appropriately trained only 57% of the time. In both situations, 90% compliance was required. page 6

The Department wasn't in compliance with 2 adoption requirements due this period. The Department sent information to support motions to terminate parental rights by the required deadline only 88% of the time. It also didn't track final orders terminating parental rights as often as required. page 6

Proposed Corrective Action for Tracking Journal Entries. To come into compliance in the future, the Department will meet monthly with area attorneys to review proper policies and procedures in this area. This the same corrective action taken last period. page 6

The Department inappropriately screened out some of the bona fide reports of abuse and neglect it received page 7
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 87% of the 389 reports the Internal Monitor reviewed.

Proposed Corrective Action for Screening Reports of Abuse and Neglect. page 7
As with last period, the Department plans to gather monthly compliance results, develop area-specific corrective action plans, and train staff on screening procedures.

During this period, Department staff entered into its Central Registry database only 8 of the 16 foster care providers whose abuse or neglect of a child had been substantiated or validated. page 8
The Department's compliance rate of 50% this period is a significant increase over last period, when none of the names were entered as required. But it's still below the required compliance level of 90%.

Proposed Corrective Action for Entering Names in the Central Registry. page 8
As with last period, the Department is automating the process of entering names into the Central Registry to come into compliance in the future. In the meantime, it will track any cases in noncompliance to ensure they get entered into the Registry.

The Department wasn't in compliance with 1 training requirement and delayed monitoring of 2 other important training requirements for foster parents and adoptive homes. page 8-9
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.

The Department acknowledged that only 39% of the foster parents due for annual training this period completed that training. The "MAPP" and foster parent training systems weren't monitored because the parties are negotiating issues related to them.

Proposed Corrective Action for Annual Foster Parent Training. page 8-9
To improve compliance in the future, the Department plans to update its annual training database to accurately identify the foster parents who are due for training. This is the same corrective action taken last period.

The Department hasn't maintained 2 required computer systems to accurately track information about the children in foster care. page 9-10
The settlement agreement requires the Department to develop and maintain a timely and accurate automated computer system to provide all the information it needs to manage the foster care system. The Department implemented this system—called the Family and Child Tracking System (FACTS)—in September 1997. However, until that system is determined to be timely and accurate, the Department is required to maintain two existing systems—an area office data system to track foster home resources and vacancies, and the Family Agenda Monitoring Elements (FAME) system.

*Both systems were shut down in August 1997, and we don't know page 10
yet if the new FACTS system that replaced them is reliable (monitoring of
that system was delayed this period). Because the parties haven't agreed
to suspend monitoring of the defunct systems, we concluded the Depart-
ment wasn't in compliance with these requirements.*

**The parties agreed to delay monitoring of the 12 requirements page 10
related to its new information system-FACTS. This period, the Depart-
ment was required to maintain accurate and timely information in FACTS.
We didn't assess this system, however, because the parties hadn't yet
agreed on how it should be monitored. Monitoring of FACTS will resume
next period.**

APPENDIX A: Compliance and Reliability Definitions page 20

APPENDIX B: Agency Responses page 23

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 (785) 296-3792, or contact us via the Internet at: LPA@lpa.state.ks.us.