

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 #8
Covering July 1 to December 31, 1997**

**A Report to the Legislative Post Audit Committee
By the Legislative Division of Post Audit
State of Kansas
July 1998**

Legislative Post Audit Committee

Legislative Division of Post Audit

THE LEGISLATIVE POST Audit Committee and its audit agency, the Legislative Division of Post Audit, are the audit arm of Kansas government. The programs and activities of State government now cost about \$8 billion a year. As legislators and administrators try increasingly to allocate tax dollars effectively and make government work more efficiently, they need information to evaluate the work of governmental agencies. The audit work performed by Legislative Post Audit helps provide that information.

We conduct our audit work in accordance with applicable government auditing standards set forth by the U.S. General Accounting Office. These standards pertain to the auditor's professional qualifications, the quality of the audit work, and the characteristics of professional and meaningful reports. The standards also have been endorsed by the American Institute of Certified Public Accountants and adopted by the Legislative Post Audit Committee.

The Legislative Post Audit Committee is a bipartisan committee comprising five senators and five representatives. Of the Senate members, three are appointed by the President of the Senate and two are appointed by the Senate Minority Leader. Of the Representatives, three are appointed by the Speaker of the House and two are appointed by the Minority Leader.

Audits are performed at the direction of the Legislative Post Audit Committee. Legislators or

committees should make their requests for performance audits through the Chairman or any other member of the Committee. Copies of all completed performance audits are available from the Division's office.

LEGISLATIVE POST AUDIT COMMITTEE

Senator Lana Oleen, Chair
Senator Anthony Hensley
Senator Pat Ranson
Senator Chris Steineger
Senator Ben Vidricksen

Representative Eugene Shore, Vice-Chair
Representative Richard Alldritt
Representative Doug Mays
Representative Ed McKechnie
Representative Dennis Wilson

LEGISLATIVE DIVISION OF POST AUDIT

800 SW Jackson
Suite 1200
Topeka, Kansas 66612-2212
Telephone (785) 296-3792
FAX (785) 296-4482
E-mail: LPA@mail.ksleg.state.ks.us

The Legislative Division of Post Audit supports full access to the services of State government for all citizens. Upon request, Legislative Post Audit can provide its audit reports in large print, audio, or other appropriate alternative format to accommodate persons with visual impairments. Persons with hearing or speech disabilities may reach us through the Kansas Relay Center at 1-800-766-3777. Our office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday.



LEGISLATURE OF KANSAS
LEGISLATIVE DIVISION OF POST AUDIT

MERCANTILE BANK TOWER
800 SOUTHWEST JACKSON STREET, SUITE 1200
TOPEKA, KANSAS 66612-2212
TELEPHONE (785) 296-3792
FAX (785) 296-4482
E-MAIL: LPA@postaudit.ksleg.state.ks.us

July 8, 1998

To: Members, Legislative Post Audit Committee

Representative Eugene Shore, Vice-Chair	Senator Lana Oleen, Chair
Representative Richard Alldritt	Senator Anthony Hensley
Representative Doug Mays	Senator Pat Ranson
Representative Ed McKechnie	Senator Chris Steineger
Representative Dennis Wilson	Senator Ben Vidricksen

This report contains the findings and recommendations 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*.

The report includes a number of recommendations for improving the Department's compliance in future monitoring periods.

We would be happy to discuss these recommendations or any other items in the report with any legislative committees, individual legislators, or other State officials.

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 #8***

This 8th monitoring period generally covers requirements the Department was supposed to comply with from July 1 to December 31, 1997. During this period, we assessed the Department's compliance with a total of 85 requirements. Of these, only 18 requirements actually were monitored. That's because the Department conceded noncompliance with—and the parties suspended monitoring of—the 51 requirements related to Case Reviews #1 and #2. Monitoring for 16 additional requirements (related to such things as caseloads, staffing levels, and the development of services and placements) also was suspended because the parties either couldn't agree on how those requirements should be monitored, or agreed to monitor certain requirements in a future period. page 5

For the 18 requirements that were monitored, the Department was in compliance with 8 (44%), and wasn't in compliance with 10 (56%).

Our findings related to the requirements assessed this period are summarized below. In addition, pages 15 - 21 of the report present a matrix showing the Department's compliance over time with each requirement monitored to-date.

The Department inappropriately screened out some of the bona fide reports of abuse and neglect it received, which meant those allegations weren't investigated and the safety of those children wasn't assessed. Beginning in July 1995, the Department was required to maintain and implement a system to ensure that bona fide reports of abuse and neglect aren't screened out. During the time period being reviewed, Department staff appropriately screened reports of abuse and neglect 86% of the time; 90% compliance was required. page 5-7

The Department concurred with this finding and indicated it would review all the inappropriately screened reports to identify the specific reasons for noncompliance.

For most reports where the Department has confirmed that a foster parent or another placement provider abused or neglected a child, information about that abuser hasn't been entered into the Department's Central Registry database. For the 8 providers subject to this requirement this period, the system was accurate only 38% of the time. Noncompliance for the most part was because the names of those providers weren't entered into the Central Registry within a reasonable period of time (defined as 60 days). page 7

The Department concurred with this finding and indicated it was reviewing its data entry procedures to determine why the system isn't accurate or timely.

Recommendations page 7

The Department was in compliance with 6 of 8 requirements assessed in Case Review #3, which covers adoption-related activities. page 8

For this report, we read cases for two monitoring periods (#7 and #8). To be in compliance with the four requirements being assessed each period, the Department had to send all the necessary materials for a motion to terminate parental rights and to match children with adoptive homes by certain deadlines, at least 90% of the time.

For period #7, the Department was in compliance with all four requirements. For period #8, it stayed in compliance with only two of those requirements. For those two requirements, formal monitoring will stop. But the two requirements the Department fell out of compliance with in period #8—sending information to support parental termination motions to the county or district attorney within the required time limit at least 90% of the time—will be monitored again.

The Department acknowledged noncompliance with one additional adoption requirement. page 8-9

The Department is required to establish procedures to track final orders issued at hearings where parental rights are terminated, so that it can act quickly to find adoptive homes once a child is legally free for adoption. This requirement included two steps: recording the termination hearings, and checking with the courts to see if a final order has been issued. The Department was in compliance only 83% of the time with the first step, and 55% with the second step; 90% compliance is required.

Recommendations page 9

The Department made improvements in training its staff, but couldn't demonstrate that it was in compliance with important training requirements for foster parents and adoptive homes. page 9-11

The Department was in compliance with two staff training requirements—implementing a Rural Interactive Training Network, and maintaining an accurate and up-to-date Handbook of Services. For both requirements, formal monitoring will stop.

The Department couldn't demonstrate that it had complied with three other training requirements for foster and adoptive parents. All foster parents who accept children in the Department's custody must complete 16 hours of annual training before they can be relicensed, and the Department must maintain an accurate and up-to-date database to record that this training has been completed. Also, the Department must maintain an accurate and up-to-date database to record that foster and adoptive parents have completed initial training (called MAPP training) before being licensed as a foster parent or approved as an adoptive home. Since foster care was privatized, these database systems have been maintained by the Kansas Department of Health and Environment and the non-profit Kansas Families for Kids, respectively.

The Department's Internal Monitoring Unit determined that two of these three requirements were in compliance. But when we asked training providers for additional documentation that would support the information contained in a sample of foster and adoptive parents' files, that supporting documentation generally wasn't available, or when it was, it was unable to

support the Internal Monitor's finding of compliance. As a result, we concluded that the Monitoring Unit's findings in this area couldn't be relied on, and that the Department hadn't demonstrated compliance with any of the three requirements.

Recommendations page 11

The Department hasn't maintained two required computer systems to track foster care information.page 11-12
The settlement agreement requires the Department to plan, develop, implement, 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 the area office system and the FAME system were shut down in August 1997, and we don't know yet if the new FACTS system that replaced them is reliable (that system won't be formally assessed or verified until July 1998). As a result, we concluded the Department was not in compliance with these requirements.

Recommendation page 12

This period, the Department again conceded noncompliance with the 12 requirements associated with Case Review #1 that are related to investigating the safety and status of children who may have been abused or neglected. page 12
These requirements have the most direct effect on protecting children from the threat of physical or emotional injury. These requirements have not been monitored since June 1996 (period #5) and, because the Department's concession of noncompliance with these requirements covered the current monitoring period, no monitoring work was performed this period. Monitoring for these requirements resumed in March 1998, and we'll report on the Department's compliance in this area in Monitoring Report #9 (January 1999).

The Department again conceded it wasn't in compliance with the 39 case management requirements associated with Case Review #2. page 12-13
These requirements include specific actions related to developing and periodically updating case plans for children and their families, housing children in appropriate settings, arranging for visits between foster care children and their families or others, notifying courts about children's progress, and considering adoption as an alternative.

Because the Department's concession of noncompliance with these requirements covered the current monitoring period, no monitoring work was performed. The Department has conceded noncompliance for these requirements since July 1995 (period #4), the first period they were scheduled to be monitored. Monitoring for these requirements was supposed to begin in March 1998, but because the FACTS system isn't reliable for pulling a sample and the parties haven't agreed to an alternative method for selecting a sample, the Monitoring Unit now estimates this case review won't begin until August 1998. Consequently, the results of that review may not be reported on until Monitoring Report #10 (July 1999).

This period, the parties haven't yet agreed on what the Department must do to comply with 12 of the 16 requirements for which monitoring was suspended. These requirements can be divided into five general areas for which the Department must: page 13-14

- *take appropriate steps to achieve an equitable distribution of cases among its social work staff*
- *maintain sufficient and appropriate staff*
- *develop and implement a Statewide plan for and provide access to adequate preventive services, such as family counseling or substance abuse treatment, to individual children and families who are eligible*
- *develop and implement a Statewide plan for and place each child in the least restrictive, most family-like placement in close proximity to the child's home, consistent with her or his needs*
- *develop and implement a Statewide Plan for services, and ensure that individual children in Department custody receive adequate services*

APPENDIX A: Compliance and Reliability Definitions page 23

APPENDIX B: Agency Responses page 26

This audit was conducted by Jennifer Hudgins and Sonja Erickson. Barbara Hinton was the audit manager. If you need any additional information about the audit's findings, please contact Ms. Hudgins 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@mail.ksleg.state.ks.us.**

**Verifying Information Provided by the
Department of Social and Rehabilitation Services
on Its Compliance With the Terms of the
Foster Care Lawsuit Settlement Agreement**

In May 1993, the Legislative Post Audit Committee directed the Legislative Division of Post Audit to conduct an ongoing performance audit assessing the Department of Social and Rehabilitation Services' compliance with the settlement agreement. Legislative Post Audit's role was to verify that the information the Department's internal monitor reported on its compliance was accurate and reliable.

This audit addresses the following question:

Is the Department of Social and Rehabilitation Services accurately reporting its compliance with the terms of the foster care settlement agreement?

To answer this question, we reviewed reports prepared by the internal monitor regarding the Department's compliance, as well as the supporting documentation developed or provided by the Department. In addition, when necessary we conducted independent record checks to verify the information the Department had provided.

For the six-month period generally covered by this audit (July-December 1997), the internal monitor also reviewed hundreds of adoption case files. For the requirements subject to the adoption case review, we reviewed small samples of cases to verify that the case readers accurately recorded, analyzed, and drew conclusions about the information in the case files.

In conducting this audit, we followed all applicable government auditing standards set forth by the U.S. General Accounting Office.

Our findings begin on page 5, after a brief overview discussing the settlement agreement and the State's foster care system.

Overview of the Settlement Agreement and the Foster Care System in Kansas

In 1990, a Lawsuit Was Filed Charging That The Department Wasn't Adequately Caring for Children Placed in Its Care or At-Risk of Abuse or Neglect

Sheila A., et. al. v. Joan Finney et. al. originally was filed in January 1989 in Shawnee County District Court by Rene Netherton, a local attorney seeking additional foster care beds for Shawnee County children. In February 1990, the Children's Rights Project of the American Civil Liberties Union filed an amended petition and joined Ms. Netherton in a class action lawsuit. The class action lawsuit contended the Department didn't comply with State and federal law, and was violating the constitutional rights of Kansas children.

The Department and the ACLU Ultimately Reached An Out-of-Court Settlement, Which the Court Approved in June 1993

That settlement agreement is a 33-page document containing numerous requirements the Department had to adhere to by certain deadlines. Each requirement, or "element," was considered to be an important component of an adequate foster care system. The areas covered by the agreement included:

- services to protect children from current abuse and to prevent further abuse
- case planning and case management for children in the Department's custody
- guidelines for determining where a child should be placed when that child is removed from his or her home
- procedures to effect adoptions as quickly as possible when a child is eligible for adoption
- securing financial resources to carry out Department policies and goals
- having enough, and adequately trained staff to meet the needs of foster children
- maintaining information systems within the Department to provide adequate and accurate information about children in the Department's custody
- establishing an internal monitoring unit within the Department to assess compliance with the agreement
- procedures for assessing and enforcing compliance with the agreement

As of July 1995, Children's Rights, Inc., which is no longer affiliated with the ACLU, began to represent the plaintiff class in the Kansas lawsuit.

The Settlement Agreement Required an Independent Entity To Assess the Department's Compliance With That Agreement

The settlement agreement required the Department to establish an internal monitoring unit to assess compliance. In addition, both parties to the lawsuit wanted Legislative Post Audit to play a role in this monitoring effort. Consequently, in May 1993 the Legislative Post Audit Committee directed Legislative Post Audit to conduct

an ongoing performance audit assessing the Department's compliance with the settlement agreement, as well as the reliability of the Department's Internal Quality Assurance Monitoring Unit. The Committee agreed to this commitment on the condition that the Department would pay for Post Audit's costs associated with the project.

The Department's Monitoring Unit serves as the front-line monitor reviewing Department-generated data and case files to assess the Department's compliance with each requirement. This Unit prepares a report summarizing the information it reviewed and drawing conclusions about the Department's compliance. Post Audit staff verify the accuracy and reliability of those conclusions by testing a sample of the compliance results generated by the Unit, and by conducting other independent reviews or tests as needed.

The Monitoring Unit's reviews and the verification testwork we perform can't ensure that all the problems with the foster care system will be alleviated. However, the parties have agreed that the required activities, if effectively carried out, should benefit children and improve the foster care system in Kansas.

In general, the schedule for monitoring adherence to the settlement agreement is set up in six-month increments, with reports prepared at the end of each period. For most requirements, the Department must maintain the required level of compliance for one continuous year. At that point, monitoring for a requirement can cease, although the Department still must stay in compliance. If the Department doesn't comply with a settlement element, however, that requirement "rolls over" into the next six-month period, and the monitoring clock starts over for that area.

Both the Department's Commission of Children and Family Services And Private Contractors Have Responsibilities in Kansas' Foster Care System

When the settlement agreement was signed in 1993, the Department administered the foster care system. In July 1996, five non-profit agencies contracted with the Department to provide preventive services. In October 1996, the Department contracted with a private entity to provide adoption services. Finally, in March 1997 three non-profit agencies were awarded State contracts to manage foster care cases. The Department continues to be responsible for investigating allegations of child abuse or neglect. It also continues to have ultimate responsibility for all children placed in its custody.

Also in March 1997, the parties assessed what impact privatization would have on the monitoring of the settlement agreement. They concluded privatization would have almost no impact on the requirements in the agreement, and that monitoring should continue unchanged. The Department continues to be responsible for compliance with the terms of the agreement even though daily case-management activities have been passed on to a contractor.

Although the Department has privatized many services, the foster care system itself remains unchanged. Under this system, preventive services are provided to families where child abuse or neglect is suspected, with the goal of keeping the child in the home. However, if those services aren't successful, or if the danger to the child appears to warrant action, the Department may ask the district or county at-

torney to petition the court to place the child in the custody of the Secretary of Social and Rehabilitation Services.

Once the court puts a child in the Secretary's custody, the child may be placed with relatives or a family with whom the child has strong emotional ties, with a foster family, in a group home, or in an appropriate State-operated facility. A major goal of the program is to provide services that will help reunite children with their families. If that isn't possible, then adoption or other options are considered.

In April 1997 a Special Task Force Was Created To Help Resolve Foster Care Issues in Kansas

This Task Force was formed by Judge James Buchele, the Shawnee County District Court judge originally assigned to the foster care lawsuit. The Task Force's goal was to bring the Department into substantial compliance with the settlement agreement, and to meet the needs of Kansas foster children, within a reasonable period of time. To reach this goal, the Task Force helps mediate disagreements between the Department and Children's Rights, Inc. In addition, the Task Force has examined monitoring procedures in several areas and has made suggestions for streamlining the monitoring process.

The Task Force currently has six members including Sue Lockett, Chair of the Task Force and head of the Topeka CASA office; Joyce Allegrucci, a long-time child advocate; Johannah Bryant, Development Director for the YWCA; Paula Ellis, Chief of Social Services for the Department's Manhattan Area Office; Frank Farrow from the Center for the Study of Social Policy in Washington D.C.; and Teresa Markowitz, the Department's Commissioner of Children and Family Services.

Is the Department Complying With the Requirements of the Settlement Agreement?

The requirements being assessed this monitoring period generally were for actions the Department was required to take during July-December 1997. A total of 85 requirements were originally due for assessment. However, for the following reasons only 18 of those requirements were monitored this period:

- the Department conceded noncompliance with, and suspended monitoring of, the 51 requirements related to Case Review #1 (covering investigations of alleged abuse and neglect) and Case Review #2 (covering management of foster care cases).
- the parties agreed to suspend monitoring for 16 additional requirements. For most of these requirements, the parties haven't yet agreed on what the Department must do to comply.

For the 18 requirements monitored this period, the Department was in compliance with 8 of those requirements (44%), and wasn't in compliance with 10 requirements (56%).

The remainder of this report is divided into two sections. The section below describes our findings in more detail, as well as any corrective actions the Department reported it plans to take to come into compliance. The second section (shown in the matrix beginning on page 15) summarizes the Department's compliance over time with each requirement that's been monitored to-date. Finally, Appendix A contains the definitions of compliance and reliability we use in our monitoring work.

FINDINGS FOR REQUIREMENTS THAT WERE MONITORED

The Department Wasn't in Compliance with Two Requirements Related to Ensuring the Safety of Children

The Department inappropriately screened out some of the bona fide reports of abuse and neglect it received, which meant those allegations weren't investigated and the safety of those children wasn't assessed. When the Department receives an allegation of child abuse or neglect, the staff person who receives the report must make a determination, based on the reporter's allegations, of whether the reporter is alleging abuse. If so, the staff person must "screen in" the case for further investigation. If not, the report may be "screened out."

Beginning in July 1995, the Department was required to properly screen 90% of all alleged abuse and neglect reports it received. The Department hasn't complied with this requirement in any of the periods monitored to-date. For this monitoring period, the Department properly screened in only 86% of the 811 reports the Internal Monitor reviewed.

When the Department doesn't comply with this requirement, there's an increased likelihood that bona fide incidents of child abuse or neglect won't be investigated, which could increase the number of children at risk of abuse. Some examples of reports that were screened out when they shouldn't have been are provided in the box on the next page.

The Department Inappropriately Screened Out Many Bona Fide Reports of Abuse or Neglect

The following are some typical examples of reports of abuse and neglect that were screened out:

Abuse or Neglect Alleged	Reason Why Not in Compliance
Report alleged sexual abuse of a four-year old girl by the girl's father. Mother also reports the father hits and shakes their seven-year-old son when he is angry.	This report was screened out because law enforcement had already assessed the incident and determined the child was safe. There is no evidence, though, that police assessed the safety of the child during a domestic violence investigation conducted around the time of this report.
Report alleged that the mother of two three- and four-year old children admitted to having no food or electricity in their apartment.	This report was screened out because staff determined that the children weren't children in need of care and weren't in imminent danger, and that the report was about "lifestyle issues." However, the statutes include "the likelihood of harm" in the definition of neglect, and failing to provide any food to small children likely could cause them harm.
A reporter requested Family Emergency Assistance, because she alleged her children were being sexually abused in their guardian's home, and she needed money to take the children back to live with her.	Although the Department may screen out reports that don't allege abuse or neglect, this report does allege sexual abuse and warrants further investigation.
Report alleged a four-year-old girl may have been sexually abused by her mother's boyfriend.	Department staff screened this report out because the reporter didn't give any information for locating the family. In fact, the reporter was a relative of the family and left both her home and work phone numbers, and the father's name was included in the report. There was no evidence the Department attempted to contact the reporter to get the necessary information to locate the family.
An 11-year-old girl alleged that her step-father punches her with his fist when she gets in trouble at school, and that he hits her siblings as well.	Staff screened out this report because the police had spoken with this girl to assess her safety. However, the girl also alleged that the father hits her siblings, and the police didn't assess their safety.
Reporter was told by the mother of a 5-year-old girl that the child said a man had touched her "down there," and that the girl's vaginal area appeared to be red and irritated. The mother also told the reporter that she had treated the girl for a yeast infection in the past.	This report was screened out because staff determined it didn't meet the statutory definition of a child in need of care, and indicated the child had a doctor's appointment for later that day. However, the Department is required to conduct assessments for all reports of suspected sexual abuse, and none of the exceptions to this requirement applied to this report.

The Department concurred with this finding of noncompliance. To improve compliance in the future, the Department reported it would review the cases found to be in noncompliance and, based on that review, develop an information packet to be sent to each area office.

As with last period, noncompliance with this requirement seemed to result from staff's failure to follow the standards set in the Department's policy manual for assessment and screening decisions related to allegations of child abuse or neglect. Also, for many cases in the current monitoring period, Department staff apparently weren't aware that changes to an applicable Kansas Administrative Regulation had lowered the threshold of abuse and neglect from an "imminent" or immediate risk of harm standard, to a "likelihood" of harm standard.

For most reports where the Department has confirmed that a foster parent or another placement provider abused or neglected a child, information about that abuser hasn't been entered into the Department's Central Registry database. This database is critical for ensuring that foster children aren't placed with providers who have a known history of child abuse. Moreover, other state agencies rely on the accuracy of this system. For example, the Department of Health and Environment checks this information system before issuing day care licenses.

For this period, the Monitoring Unit looked at a sample of reports against a total of 203 foster parents or other placement providers. In all, 195 of those providers' names weren't required to be entered into the Central Registry database, primarily because the abuse wasn't confirmed (151 cases), no finding was rendered (11), the perpetrator had successfully completed a corrective action plan or was in the process of doing so (11), or the perpetrator was currently appealing a confirmed finding (7).

This left only 8 providers subject to this requirement this period. For those eight providers, the system was accurate only 38% of the time. For the most part, this was because their names weren't entered within a reasonable time period (defined as 60 days). As a result, it's unlikely these people would be flagged when their names were checked against the Registry, and they could be cleared as a safe care provider.

The Department currently is reviewing its data entry procedures to determine why the system isn't accurate or timely. Once it has identified the source of the problem, the Department plans to change its procedures accordingly.

Recommendations Related to Ensuring the Safety of Children

1. The Department should provide Statewide training on assessment and screening decisions for reports of alleged child abuse and neglect. In addition, the Department should revise the applicable sections of its Policy and Procedures Manual to conform with the new "likelihood" of harm standard mandated by Kansas Administrative Regulation 30-46-10.
2. The Department should provide Statewide training on the revised Central Registry data entry procedures it develops under its corrective action plan.

This Period, the Department Moved Children Through the Adoption Process in a More Timely Manner

The Department was in compliance with 6 of 8 requirements assessed in Case Review #3, which covers adoption-related activities. When the case plan recommended for a child is adoption, the settlement agreement gives the Department 45 days to forward the necessary paperwork to the county or district attorney to terminate that child's parental rights. Once the Department receives a termination of parental rights, staff have 20 days to send all necessary materials to the central office so that approved adoptive parents can be matched as quickly as possible with children waiting to be adopted.

Because of an earlier delay in the monitoring process, our review of these requirements has, until now, been six months behind. This time the Monitoring Unit and Post Audit were able to "catch up" and monitor these requirements for periods #7 and #8. As a result, we are reporting on how well the Department complied during all of 1997.

Adoption services have been privatized but, as with other requirements now carried out by private contractors, the Department still is responsible for ensuring that the settlement requirements are met. For requirements related to adoption we found the following:

- For period #7, the Department sent information to support parental termination motions to the county or district attorney, and sent that information within the required time limit at least 90% of the time, as required. For period #8, however, the Department fell out of compliance because it met these requirements only 87% and 85% of the time, respectively. The Department is requiring each area office that didn't meet the compliance threshold to submit a corrective action plan.
- During periods #7 and #8, the Department forwarded all necessary materials to the central office (now the adoption contractor's office) within 20 days of receiving the termination of parental rights, nearly 100% of the time. Formal monitoring of these requirements will stop because the Department has demonstrated one year of continuous compliance in this area.

The Department acknowledged noncompliance with one additional adoption requirement. The settlement agreement requires the Department to establish procedures to track final orders issued at hearings where parental rights are terminated. This requirement was designed to ensure that the Department can act quickly to find adoptive homes once a child is legally free for adoption. The Department's tracking procedures involve two steps:

- When the court has a hearing to terminate parental rights, staff assigned to the case notify the Department's legal division. The area office attorney then enters that hearing date into a tracking log.
- Within six weeks, the attorney contacts the court to see if a final order terminating parental rights has been filed. After this initial contact, monthly contact is required until the final order is received. All contacts must be recorded in the tracking log.

This period, area office attorneys recorded these termination hearings only 83% of the time, and made the required court contacts only 55% of the time; 90% compliance was required.

When staff aren't aware of or don't respond to the termination of a child's parental rights, that child remains in foster care and is unable to move on to a permanent, adoptive home. The Department currently is revising its policy manual and changing performance evaluation standards for area office attorneys in an effort to meet this requirement.

Recommendations for Moving Children Through the Adoption Process More Quickly

The Department should provide training to staff in the four area offices that didn't send in all the information needed to file motions to terminate parental rights, or that didn't track final orders related to those motions, to ensure that those staff understand and comply with what's required of them in the future. If needed, the Department could identify and provide training in the procedures used successfully by the other area offices that were in compliance with these requirements.

The Department Made Improvements in Training its Staff, But Couldn't Demonstrate That it Was in Compliance With Important Training Requirements for Foster Parents and Adoptive Homes

The settlement agreement includes several requirements related to training staff, foster care providers, and potential adoptive parents. These requirements were included to ensure that the people who work closely with foster children are adequately trained to handle those kids' needs.

The Department was in compliance with two staff training requirements. This period, it developed and installed a Rural Interactive Training Network, which is a computer training program for area offices. The network now is fully operational, and offers continuing education courses to social workers near where they work and live, making this training much more accessible than before.

In addition, all individual area offices maintained accurate and up-to-date Handbooks of Services and made them available to appropriate staff 100% of the time. These Handbooks provide staff with information about placements and services. Meeting compliance with this requirement helps ensure that staff provide more consistent services for children Statewide.

Because the Department has demonstrated compliance with both of these staff training requirements, formal monitoring of them will stop.

We concluded the Department couldn't demonstrate that it had complied with three other training requirements for foster and adoptive parents. These requirements are summarized on the next page.

- All foster parents who accept children in the Department's custody, must complete 16 hours of annual training before they can be relicensed. This training provides continuing education to help keep their parenting skills up-to-date.
- To track this training, the Department is required to maintain an accurate and up-to-date computer system.
- In addition, the Department must maintain an accurate and up-to-date computer system to record the initial training (MAPP training) parents must complete before being licensed as a foster parent or approved as an adoptive home.

Since privatization, the Department of Health and Environment has taken over the task of approving foster parents for licensure and maintaining the foster parent database. Kansas Families for Kids, a private agency, now approves adoptive homes and tracks this information on its own database. The Department still is responsible for ensuring that these requirements are met at least 90% of the time, however.

To assess compliance with these requirements, the Monitoring Unit reviewed information in these two agencies' licensing and approval files. For the most part, that information was simply a social worker's statement or "attestation" that a foster or adoptive parent had received the training required. Based on that information, the Unit concluded that two of the three requirements had been complied with—the MAPP training database systems were accurate more than 99% of the time, and 96% of all foster parents had completed their annual training requirement. The Unit also concluded that the annual training computer system was accurate only 88% of the time.

In our opinion, however, the documentation in these files wasn't sufficient to support the claims being made or the Monitoring Unit's conclusions. For a 10% sample of cases the Monitoring Unit had reviewed, we requested additional supporting documentation—such as training statements or certificates of training completion—to verify that the training had in fact been completed and that the databases were accurate.

The additional documentation we reviewed showed the following:

- For 41% of the foster parents in our sample, there was either no documentation that they completed 16 hours of annual training, or the documentation showed that the training actually wasn't completed in time.
- For 57% of the foster parents in our sample, there was no supporting documentation to prove that the annual training database was accurate, or the documentation showed that the database actually wasn't accurate.
- For 10% of the foster parents in our sample, there was no supporting documentation to prove that the MAPP training database was accurate.

Because the additional source documentation we looked at frequently didn't support the information originally contained in the files, we determined that the Monitoring Unit's conclusions were unreliable and that the Department hadn't demonstrated compliance with all three requirements.

This situation apparently arose because the Department hadn't informed the two new agencies that they needed to request and maintain documentation supporting claims that training had been completed, and by when. Both agencies now are requiring proof of training through certificates of training completion before they issue foster home licenses or approve adoptive homes. The Monitoring Unit has indicated it will review this source documentation as it assesses compliance in the future.

Recommendations for Improving Training

The Department of Social and Rehabilitation Services should verify that the Department of Health and Environment's and Kansas Families for Kids' procedures require certificates of training completion to be filed with applications for foster home licensure and adoptive home approval. In addition, it should verify that these contractors' staff are aware of those procedures, and should periodically ensure that those procedures are being followed.

The Department Hasn't Maintained Two Required Computer Systems to Track Foster Care Information

The settlement agreement requires the Department to plan, develop, implement, and maintain a timely and accurate automated computer system to provide all the information it needs to manage the foster care system. Because the accuracy of the system won't be assessed until July 1998 (monitoring period #10), the Department is required in the meantime to maintain two existing systems. One is an area office data system to track foster home resources and vacancies. The other system—FAME (the Family Agenda Monitoring Elements system)—is supposed to track the following information:

- whether staff have assessed the strengths and needs of the child's family before the child is taken into the Department's custody
- what services have been provided for each child, and how long the child has been receiving those services
- how long the child has been in Department custody, and where she or he has been placed
- case specific outcomes
- each child's individual placement history

In August 1997, the Department shut down the FAME and area office data systems and began implementing a new system called FACTS (the Family and Child Tracking System). This new system's accuracy won't be formally assessed or verified until July 1998 (Monitoring Report #10). The Internal Monitor has done some limited testing and determined that the new system isn't yet accurate enough even for Case Review #2 sampling purposes. The Department has developed a plan to improve the accuracy of data entered into FACTS, which is scheduled to be implemented by June 30, 1998.

Because the two systems have been shut down, there essentially was nothing for us to monitor. As a result, the only possible finding we could reach was noncom-

pliance. In addition, because FACTS hasn't yet been validated, we have no way of knowing if the required management information is being tracked accurately, or at all.

Recommendations for Improving the Accuracy of the Department's Foster Care Information System

The Department should continue working to validate its new information system—the Family and Child Tracking System—in order to meet the settlement agreement's July 1998 monitoring date. If the system can't be validated by that date, the Department should develop a plan for gathering the required management information in the interim.

STATUS OF REQUIREMENTS RELATED TO CASE REVIEWS #1 AND #2

This period, the Department again conceded noncompliance with the 12 requirements associated with Case Review #1 that are related to investigating the safety and status of children who may have been abused or neglected. Beginning in July 1995, the Department was required to consistently and thoroughly investigate 90% of the bona fide reports of child abuse or neglect it received. The settlement agreement included the following requirements for the investigation process:

- assessing the risk of the child(ren) involved
- taking action to obtain medical services for the child, if necessary
- investigating the complaint by the assigned deadline, including interviewing all the appropriate parties; and completing the investigation within 25 days of accepting the original report of abuse
- assessing the needs and strengths of the child's family and developing a plan to improve conditions within that family
- having an uninvolved supervisor review any prior reports of abuse or neglect involving the same family or children to determine if there is any pattern of unconfirmed reports of abuse
- requesting that the child be removed from the home if the child is in imminent danger of serious injury and the alleged abuser has access to that child

The Department has conceded noncompliance with these requirements since July 1996, which means they haven't been monitored since then and no one knows the extent to which they are being met. Noncompliance in these areas could increase the risk that children will continue to be abused or neglected.

Case reviews for these requirements resumed in March 1998, and we'll report on the Department's compliance in this area by January 1999 (Monitoring Report #9, which reports on the January-June 1998 period).

The Department again conceded it wasn't in compliance with the 39 case-management requirements associated with Case Review #2. To serve the needs of a child in foster care, the settlement agreement included many requirements for managing that child's case properly. These requirements were designed to ensure

that staff closely monitor each child's case to determine the best course of action in a timely manner, provide whatever services are needed to help the family reunite, or move the child on to an adoptive home as quickly as possible. They included the following:

- developing a plan outlining what services are needed for the child and her or his family
- ensuring the child is placed in appropriate housing
- regularly reviewing the case plan to make sure it is still the best course of action for that child
- arranging appropriate visits between the child in foster care, parents, siblings, and social workers
- notifying the courts of the child's progress
- considering whether adoption should be the child's permanent placement

Beginning in January 1996, Department staff have been required to comply with these requirements 90% of the time. Although private contractors have been largely responsible for meeting these requirements since privatization, the Department still is accountable for compliance.

Because the Department has conceded noncompliance with these requirements since July 1996, these requirements have never been monitored and reported on, and no one knows the extent to which children's cases are being effectively managed, children are being placed in stable home environments, or children are languishing in foster care.

Case reviews for these requirements were supposed to have resumed March 1998. But because the FACTS system isn't reliable for pulling a sample and the parties still haven't agreed to an alternative method for selecting a sample, these case reviews hadn't begun as of June 1998. The Monitoring Unit now estimates this case review won't begin until August 1998. As a result, we're not certain whether we'll be able to report on the results of Case Review #2 in our next monitoring report.

STATUS OF REQUIREMENTS WHERE MONITORING WAS SUSPENDED BY AGREEMENT OF THE PARTIES

This Period, the Parties Haven't Yet Agreed On What the Department Must Do to Comply With 12 of the 16 Suspended Requirements

For these 12 requirements, the parties hadn't yet agreed on definitions for them or methods to measure compliance with them. These requirements can be divided into five general areas.

In the first area, the settlement agreement requires the Department to take appropriate steps to achieve an equitable distribution of cases among its social work staff. The Department originally was scheduled to be in compliance with this requirement in January 1995. However, the parties have never agreed on whether the Department actually had to "achieve" an equitable distribution of cases, or whether it just had to take appropriate steps in this area.

Because of these definitional problems, this is the fifth consecutive period we were unable to monitor this requirement. This issue is currently before the Task Force for resolution.

In the four other areas, the Department is required to do the following at least 90% of the time:

- maintain sufficient and appropriate staff
- develop and implement a Statewide plan for and provide access to adequate preventive services, such as family counseling or substance abuse treatment, to individual children and families who are eligible
- develop and implement a Statewide plan for and place each child in the least restrictive, most family-like placement in close proximity to the child's home, consistent with her or his needs
- develop and implement a Statewide Plan for services, and ensure that individual children in Department custody receive adequate services

Because the Monitoring Plan agreed to by the parties doesn't include a way to measure compliance with these requirements, and the Monitoring Unit can't develop one without guidance from the parties, the parties have asked the Task Force to help them develop methods to measure compliance with these requirements.

Summary of Compliance for Monitoring Periods #1 - #8

The following pages summarize the Department's compliance over time for each requirement that's been monitored to-date. The legend below provides explanations for the symbols we used in the chart.

- CR = The requirement was monitored in a case review
- C = In compliance (we reported compliance percentages, when available)
- D = Monitoring or reporting has been suspended or delayed by agreement of the parties (i.e., the parties have agreed to delay reporting or have agreed to monitor this requirement at a future date)
- INC = The Monitoring Unit hasn't completed its assessment
- N = Not in compliance (we reported compliance percentages, when available)
- NA = Not assessed (i.e., the requirement isn't due for an assessment this period)
- P = The parties are negotiating issues related to this requirement (i.e., the parties are defining settlement language or the parties haven't yet agreed to a methodology to measure compliance)
- Y = The Department has demonstrated continuous compliance and formal monitoring of this requirement will stop

	MONITORING PERIOD								Moni- toring Stops?
	#1	#2	#3	#4	#5	#6	#7	#8	
	Jan- June 1994	July- Dec 1994	Jan- June 1995	July- Dec 1995	Jan- June 1996	July- Dec 1996	Jan- June 1997	July- Dec 1997	
Actions First Required During 1st Monitoring Period									
1. Develop caseload guidelines, using reasonable professional standards, which identify a workload workers can handle effectively.	D	N	N	N	N	D	D	D	
2. Maintain the Family Agenda Monitoring Elements (FAME) system until the new information system (FACTS) is implemented.	D	32% N	83% N	86% N	87% N	N	75% N	N	
3. Maintain the required level of Flex Funds (\$ for services that help children remain home or return home, rather than enter custody).	N	P	P	C					Y
4. Implement the revised Family Emergency Assistance Plan (provides emergency assistance to needy families with kids under 21).	C		P	C					Y
5. Review current placements and plans for plaintiffs Brooks and Darrell B.	N								Y
6. Maintain funding for emergency shelter grants.	N		C						Y
7. Maintain funding for services at \$6.5 million.	N	C							Y
8. Contract for an assessment of Statewide and regional preventive service needs.	C								Y
9. Same as above, for placement needs.	C								Y
10. Same as above, for service needs for children in custody.	C								Y
11. Maintain the staffing and caseload levels of the Family Preservation Unit.	92% C	93% C							Y
12. Maintain the maximum payment to foster parents caring for children requiring extraordinary care.	C	C							Y
13. Maintain at least 146 therapeutic foster home beds.	C		C						Y
14. Maintain Community Resource Development Unit.	C	C							Y
15. Assign attorneys to every area office.	C	C							Y
16. Complete an assessment of adoption-matching policies and practices.	C								Y
17. Review certain case-handling requirements for the named plaintiffs Sheila and Thomas A., and Brooks and Darrell B.	C								Y
18. Assess current capabilities, future needs, and planned modifications of the Child Abuse/ Neglect Information System (CANIS).	C								Y
19. Continue KU Client Outcomes Project	C								Y
20. Maintain the Program Analysis Unit to provide ongoing management information about Youth and Adult Services programs.	C		C						Y
21. Provide Family Agenda training to social workers, paraprofessionals, and attorneys.	D	93% C							Y
22. Design a new strategy for recruiting prospective adoptive parents.	D	C		C					Y
23. Maintain Training Development Committee to develop a competency-based training system.	D	C							Y
24. Provide Family Agenda Policy Manual training to social workers, paraprofessionals, and attorneys.	83% C	91% C							Y
25. Use good-faith efforts to obtain State and federal funding at the required levels.	D	N	C						Y
26. Complete the Manhattan pilot project which uses current resources to contract for adoptive-home assessments.	D	C							Y
27. Maintain an accurate and up-to-date personnel training recordkeeping system.	D	C	C						Y

C = In compliance; CR = Case review; D = Monitoring or reporting has been suspended or delayed; INC = the Monitoring Unit hasn't completed its assessment; N = Not in compliance; NA = Not assessed; P = The parties are negotiating issues related to this requirement; Y = Formal monitoring of this requirement will stop

	MONITORING PERIOD								Monitoring Stops?
	#1	#2	#3	#4	#5	#6	#7	#8	
	Jan- June 1994	July- Dec 1994	Jan- June 1995	July- Dec 1995	Jan- June 1996	July- Dec 1996	Jan- June 1997	July- Dec 1997	
Actions First Required During 2nd Monitoring Period									
28. Conduct annual studies to determine the actual caseloads of each Youth Services social worker and supervisor.		P	C	C	NA	C	NA	D	
29. Evaluate the effectiveness of paraprofessional staff (are social workers doing non-social-work activities that paraprofessionals could do?)		N	N	N	N	D	D	D	
30. Maintain up-to-date and accurate Handbook of Services that includes information about placements and services, and make it available to appropriate staff.		93% C	54% N	63% N	64% N	86% N	93% C	100% C	Y
31. Assess Statewide and regional preventive service needs, evaluate effectiveness of Family Preservation Unit staffing, and identify strategies to help area offices develop resources.		N	N	N	N	D	C		Y
32. Same as above, for placement needs.		N	N	N	N	D	C		Y
33. Same as above, for service needs for children in custody.		N	N	N	N	D	C		Y
34. Provide basic core curriculum training to staff within first six months of employment.		80% C	88% N	93% C	94% C				Y
35. Provide training to supervisors within six months of becoming a supervisor.		100% C	71% N	100% C	100% C				Y
36. Don't discourage establishment of Citizen Review Boards or CASAs.		C		C					Y
37. Maintain an internal quality assurance system.		C	C						Y
38. Provide an After Hours Consultation Directory to law enforcement agencies.		C	C						Y
39. Develop written long-term foster care and independent living policies.		C							Y
40. Develop a brochure on the case planning process for parents and other participants.		C							Y

Actions First Required During 3rd Monitoring Period									
41. Properly assess and screen reports of alleged abuse and neglect.			71% N	66% N	D	83% N	85% N	86% N	
42. Develop a plan for preventive services that considers existing and potential resources, lists steps to develop them, sets goals to address needs, lists steps to achieve goals, and gives a timetable to implement the plan.			N	N	N	D	D	D	
43. Same as above, for placement needs.			N	N	N	D	D	D	
44. Same as above, for services for children in custody.			N	N	N	D	D	D	
45. Implement an area office data system for family foster homes.			N	INC	46% N	44% N	N	N	
46. Enter confirmed reports of abuse/neglect by foster parents or other providers in CANIS.			64% N	11% N	38% N	N	N	38% N	
47. Monitor workers' caseloads and take steps to achieve an equitable distribution of cases among social work staff.			P	P	P	P	P	D	
48. Maintain sufficient staff to comply with caseload guidelines and the settlement agreement.			P	P	P	D	D	D	
49. CR1. Conduct a preliminary risk assessment as part of protective services investigation.			77% N	64% N	67% N	N	N	N	

C = In compliance; CR = Case review; D = Monitoring or reporting has been suspended or delayed; INC = the Monitoring Unit hasn't completed its assessment; N = Not in compliance; NA = Not assessed; P = The parties are negotiating issues related to this requirement; Y = Formal monitoring of this requirement will stop

	MONITORING PERIOD								Moni- toring Stops?
	#1 Jan- June 1994	#2 July- Dec 1994	#3 Jan- June 1995	#4 July- Dec 1995	#5 Jan- June 1996	#6 July- Dec 1996	#7 Jan- June 1997	#8 July- Dec 1997	
50. CR1. Initiate a protective services investigation by the assigned deadline.			73% N	72% N	75% N	N	N	N	
51. CR1. Complete an assessment of the family's strengths and needs.			73% N	83% N	81% N	N	N	N	
52. CR1. Complete a family-based assessment within the required timeframe.			75% N	80% N	82% N	N	N	N	
53. CR1. Complete a family service plan, if required.			65% N	73% N	81% N	N	N	N	
54. CR1. Complete a family service plan within the required timeframe.			68% N	72% N	77% N	N	N	N	
55. CR1. Interview all the appropriate parties during a protective services investigation.			61% N	60% N	70% N	N	N	N	
56. CR1. Complete protective service investigations within the required timeframe.			46% N	51% N	60% N	N	N	N	
57. CR1. Take reasonable action to obtain medical services if they're necessary.			P	P	P	N	N	N	
58. CR1. Review previous unconfirmed reports when there are 3 unconfirmed reports on the same family or child within a 2-year period.			22% N	19% N	22% N	N	N	N	
59. CR1. Document the results of the review of 3 unconfirmed reports on the same family or child within a 2-year period.			22% N	19% N	22% N	N	N	N	
60. CR1. Request ex parte order or law enforcement removal only if children are in imminent danger of serious injury, the perpetrator has access to them, and they can't be protected by the non-abusing parent.			100% C	89% N	100% C	N	N	N	
61. CR1. Review reports from law enforcement to determine if further SRS investigation is necessary.			97% C	100% C					Y
62. CR1. Document whether further investigation of these reports is necessary.			97% C	100% C					Y
63. Provide advanced, client-centered management training to eligible staff.			97% C	98% C					Y
64. Complete a study of the feasibility of decentralizing the adoption program.			C						Y
65. Contact all County/District attorneys and request that they pass on reports of abuse and neglect.			C						Y
66. Establish a minimum number of hours of competency-based pre-service training.			C						Y
67. Establish a minimum number of hours of competency-based annual training.			C						Y
68. Develop a competency-based training system.			C						Y

Actions First Required During 4th Monitoring Period									
69. Provide access to adequate preventive services.				P	P	P	P	D	
70. Place children in least-restrictive, most family-like placement.				P	P	P	P	D	
71. Provide access to services for children in custody.				P	P	P	P	D	
72. CR2. Develop a written case plan for children in Dept. custody.				N	N	N	N	N	
73. CR2. Develop a written case plan for families of children in Dept. custody.				N	N	N	N	N	
74. CR2. Complete a written case plan within the required timeframe.				N	N	N	N	N	

C = In compliance; CR = Case review; D = Monitoring or reporting has been suspended or delayed; INC = the Monitoring Unit hasn't completed its assessment; N = Not in compliance; NA = Not assessed; P = The parties are negotiating issues related to this requirement; Y = Formal monitoring of this requirement will stop

	MONITORING PERIOD								Monitoring Stops?
	#1 Jan- June 1994	#2 July- Dec 1994	#3 Jan- June 1995	#4 July- Dec 1995	#5 Jan- June 1996	#6 July- Dec 1996	#7 Jan- June 1997	#8 July- Dec 1997	
75. CR2. Update case plans for children in Dept. custody within the required timeframe.				N	N	N	N	N	
76. CR2. Include services to prevent out-of-home placement in the initial case plan.				N	N	N	N	N	
77. CR2. Describe the reason for agency involvement in the initial case plan.				N	N	N	N	N	
78. CR2. Identify a planning goal in the case plan for children in Dept. custody.				N	N	N	N	N	
79. CR2. Include services in the case plan to meet the child's needs, to reinforce family strengths and, where applicable, to reunify the family.				N	N	N	N	N	
80. CR2. Include steps to meet the objectives of the case plan.				N	N	N	N	N	
81. CR2. Identify in the case plan the type of placement, its appropriateness and, if applicable, how recommendations of the court were considered.				N	N	N	N	N	
82. CR2. Include a discussion of compliance with the previous case plan in the administrative review.				N	N	N	N	N	
83. CR2. Specify in the case plan the projected date for achieving the case planning goal.				N	N	N	N	N	
84. CR2. Include in the administrative review a discussion of the continuing need for placement and services.				N	N	N	N	N	
85. CR2. Adhere to Department policies on long-term foster care and independent living plans.				N	N	N	N	N	
86. CR2. Notify parents and appropriate parties of the time, date, and place of the administrative review within the required timeframe.				N	N	N	N	N	
87. CR2. Schedule administrative reviews to maximize participation.				N	N	N	N	N	
88. CR2. Provide reports to the court on the child's progress and current placement and, if applicable, progress toward adoption or long-term placement.				N	N	N	N	N	
89. CR2. Provide reports to the court when the child is removed from the home or parental rights are terminated, within the required timeframe.				N	N	N	N	N	
90. CR2. Ensure that children are placed only in licensed homes, or homes meeting certain exceptions.				N	N	N	N	N	
91. CR2. Develop a written parent/child visitation plan, when appropriate, with visits scheduled at the required frequency.				N	N	N	N	N	
92. CR2. Schedule unsupervised visits unless court ordered or for reasonable cause.				N	N	N	N	N	
93. CR2. Schedule supervised visits in the most home-like setting possible.				N	N	N	N	N	
94. CR2. Develop a written visitation plan for siblings and schedule visits at the required frequency.				N	N	N	N	N	
95. CR2. Develop a written visitation plan for worker/parent and schedule visits at the required frequency.				N	N	N	N	N	
96. CR2. Develop a written worker/child visitation plan and schedule visits at the required frequency.				N	N	N	N	N	
97. CR2. Designate the worker who will be the primary contact for worker/child visitation.				N	N	N	N	N	
98. CR2. When a child has been in out-of-home placement for one year, consider a plan of adoption.				N	N	N	N	N	

C = In compliance; CR = Case review; D = Monitoring or reporting has been suspended or delayed; INC = the Monitoring Unit hasn't completed its assessment; N = Not in compliance; NA = Not assessed; P = The parties are negotiating issues related to this requirement; Y = Formal monitoring of this requirement will stop

	MONITORING PERIOD								Monitoring Stops?
	#1 Jan- June 1994	#2 July- Dec 1994	#3 Jan- June 1995	#4 July- Dec 1995	#5 Jan- June 1996	#6 July- Dec 1996	#7 Jan- June 1997	#8 July- Dec 1997	
99. CR2. If a plan of adoption is not established, document the basis for the decision.				N	N	N	N	N	
100. CR2. Determine if relinquishment is appropriate when adoption is established as the permanency plan.				N	N	N	N	N	
101. CR2. Discuss relinquishment with parents, if appropriate.				N	N	N	N	N	
102. CR2. Only place children in homes where the foster/adoptive parents have been MAPP trained, or where the parents meet Dept. exceptions.				N	N	N	N	N	
103. CR2. Only place children in satellite homes where foster parents have completed the required number of hours of child-welfare training prior to placement.				N	N	N	N	N	
104. CR2. Only allow children to remain in satellite homes where foster parents have completed the additional required number of hours of child-welfare training, within the required timeframe.				N	N	N	N	N	
105. CR2. Provide case planning brochure to parents and other participants prior to the first administrative review.				N	N	N	N	N	
106. CR2. Train third parties in the case planning process.				N	N	N	N	N	
107. CR2. Train other SRS participants in the case planning process.				N	N	N	N	N	
108. CR2. Specify the time, location, and duration of visits in the parent/child visitation plan.				N	N	N	N	N	
109. CR2. Specify the time, location, and duration of visits in the worker/parent visitation plan.				N	N	N	N	N	
110. CR2. Specify the time, location, and duration of visits in the worker/child visitation plan.				N	N	N	N	N	
111. Develop a competency-based curriculum for pre-service training.				C					Y
112. Develop a competency-based curriculum for annual training.				C					Y
113. Establish a policy requiring staff to provide case planning brochures to parents and other participants in the case planning process.				C					Y
114. Provide case planning training to eligible social workers				87% C	94% C				Y
115. Provide pre-service training to eligible staff.				81% C	96% C				Y
116. Provide annual training to eligible staff.				91% C	95% C				Y
117. Develop a competency-based curriculum for training in case planning.				C					Y

Actions First Required During 5th Monitoring Period									
118. Implement the plan for preventive services.					N	D	D	D	
119. Same as above, for placement needs.					P	D	D	D	
120. Same as above, for services for children in custody.					N	D	D	D	
121. Maintain accurate and up-to-date MAPP training record system.					INC	N	N	N	
122. Implement and maintain accurate and up-to-date annual foster parent training record system.					INC	N	N	N	
123. Provide annual child welfare training to all foster parents.					INC	N	N	N	
124. Make diligent efforts to learn promptly of filing of journal entries terminating parental rights.					N	N	N	N	

C = In compliance; CR = Case review; D = Monitoring or reporting has been suspended or delayed; INC = the Monitoring Unit hasn't completed its assessment; N = Not in compliance; NA = Not assessed; P = The parties are negotiating issues related to this requirement; Y = Formal monitoring of this requirement will stop

	MONITORING PERIOD								Monitoring Stops?
	#1 Jan- June 1994	#2 July- Dec 1994	#3 Jan- June 1995	#4 July- Dec 1995	#5 Jan- June 1996	#6 July- Dec 1996	#7 Jan- June 1997	#8 July- Dec 1997	
125. CR3. Send information for motion to terminate parental rights to County/District attorney.					83% C	86% N	93% C	87% N	
126. CR3. Send information for motion to terminate parental rights, within the required timeframe.					73% N	79% N	91% C	85% N	
127. CR3. Send complete Adoption Referral Packet to Central Office, where appropriate.					88% C	87% N	100% C	100% C	Y
128. CR3. Send complete Adoption Referral Packet to Central Office, within the required timeframe.					56% N	71% N	100% C	97% C	Y
129. CR3. Develop an adoption recruitment strategy, where appropriate.					100% C	100% C			Y
130. CR3. Develop an adoption recruitment strategy, within the required timeframe.					100% C	100% C			Y
131. CR3. Conduct a staffing when a motion to terminate parental rights has been denied.					100% C	100% C			Y
132. CR3. Conduct a staffing when a motion to terminate parental rights has been denied, within the required timeframe.					100% C	100% C			Y
133. CR3. Consider approval for finalization of adoption at all administrative reviews subsequent to placement in a prospective adoptive home.					96% C	98% C			Y
134. CR3. Approve finalization of adoption within the required timeframe.					100% C	100% C			Y
135. CR3. Provide consent to adoption within the required timeframe.					91% C	95% C			Y
136. Provide Family Agenda Practice Handbook training to eligible staff.					83% C	97% C			Y
137. Provide MAPP pre-placement training to foster parents before relicensure.					97% C				Y

Actions First Required During 6th Monitoring Period									
138. Develop a rural interactive training network to provide statewide training.						N	N	C	Y

Actions First Required During 7th Monitoring Period									
139. Conduct an annual statewide assessment of placement needs.							D	D	
140. Same as above, for service needs for children in custody.							D	D	
141. Maintain internal monitoring system to provide reliable conclusions on the Dept.'s compliance.							C		Y

C = In compliance; CR = Case review; D = Monitoring or reporting has been suspended or delayed; INC = the Monitoring Unit hasn't completed its assessment; N = Not in compliance; NA = Not assessed; P = The parties are negotiating issues related to this requirement; Y = Formal monitoring of this requirement will stop

APPENDIX A

Compliance and Reliability Definitions

This appendix provides the definitions of compliance and reliability that we used in our assessments.

• Foster Care Settlement Agreement •

**Rating System for SRS' Compliance with
the Settlement Agreement**

COMPLIANCE DEFINITIONS

**IN
COMPLIANCE**

In compliance--For an element to be "In Compliance," all criteria must be met:

- SRS' source documents were accessible
- SRS met the required specifications in the settlement agreement completely

**FACTORS
PREVENTED
VERIFICATION
OF COMPLIANCE**

Factors Prevented Verification of Compliance--An element is categorized as "Factors Prevented Verification of Compliance" if either of the following conditions existed:

- the parties haven't agreed on the criteria necessary for compliance and no monitoring has taken place. (i.e., the parties are defining settlement language)
- the Internal Monitoring Unit hasn't yet completed it's review, and LPA lacks the resources to engage in full, direct monitoring of an element

**NOT IN
COMPLIANCE**

Not in Compliance--Any of the following problems causes an element to be "Not in Compliance":

- SRS didn't meet the required specifications in the settlement agreement
- SRS provided the documentation/analysis spelled out in the Monitoring Plan which it said showed it had complied with the Settlement Agreement; however, in our opinion, that documentation, or additional testwork we performed, didn't provide evidence that the Department had complied with the Settlement Agreement
- SRS failed to provide the Internal Monitoring Unit with the documentation necessary to complete its review, or otherwise prevented an assessment
- SRS source documents weren't available for review
- source of SRS data was unreliable
- SRS has acknowledged noncompliance (SRS has prepared a corrective action plan for coming into compliance together with a new remonitoring date)

• Foster Care Settlement Agreement •

**Rating System for the Reliability of
the IQAMU's Monitoring Work**

RELIABILITY DEFINITIONS

RELIABLE

Reliable--For an element to be "Reliable," all criteria must be met:

- all IQAMU documentation required was completed for review
 - IQAMU accurately reflects SRS' performance for the items we verified within sampling constraints
 - IQAMU's analyses and/or calculations we verified were performed correctly
 - IQAMU's conclusions reasonably related to the information in the SRS files
-

**FACTORS
PREVENTED
DETERMINATION
OF RELIABILITY**

Factors Prevented Determination of Reliability--An element is categorized as "Factors Prevented Determination of Reliability" if either of the following conditions existed:

- IQAMU, or other contracted entity, had not performed review work required
 - IQAMU source documents were not available for review
-

**NOT
RELIABLE**

Not Reliable--Any of the following problems causes an element to be "Not Reliable":

- facts/data reported by the IQAMU were not substantiated by source documents or by Legislative Post Audit's reasonable interpretation of the facts in the source documents
- Conclusions of the IQAMU regarding compliance were not supported

If interpretation discrepancies arise after the IQAMU has completed its work and the IQAMU changes its conclusions because of the parties' decisions, our assessment of the IQAMU's reliability will not be affected.

APPENDIX B

Agency Response

On June 16, we provided copies of the draft audit report to the Department of Social and Rehabilitation Services and to Children's Rights, Inc. Their responses are included in this appendix.

We carefully reviewed both responses. In two areas, the Department's response suggests we should only report using language from the settlement agreement or to which the parties have agreed. However, we thought it was important to provide additional explanations so the reader could understand the real implications of compliance or noncompliance.

While we didn't make all the changes the Department suggested, we did make a number of changes to improve the accuracy and clarity of the report. These changes didn't alter the report's findings or conclusions.



KANSAS DEPARTMENT OF SOCIAL
AND REHABILITATION SERVICES

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

ROCHELLE CHRONISTER, SECRETARY

June 22, 1998

Ms. Barbara J. Hinton
Legislative Division of Post Audit
800 SW Jackson Street, Suite 1200
Topeka, KS 66612-2212

RE: Comments to the Draft copy of the Performance Audit Verifying Information Provided by the Department of Social and Rehabilitation Services on its Compliance with the Terms of the Foster Care Settlement Agreement Monitoring Report #8, covering the period of July-December 1997.

Dear Ms. Hinton:

The Department is in receipt of the draft report completed by Legislative Post Audit and distributed for comments. Comments are attached to this letter.

Overall we are pleased with the change in format in this draft report. We have always believed the reports on our compliance with the Settlement Agreement should be presented in a manner that allows the public to understand the complexities of the Agreement, and report both compliance and noncompliance findings in the same fashion. Your efforts toward this goal are appreciated. All of the requirements agreed to in the Settlement are expected to benefit children and families and the public deserves to have specific information on those areas of compliance as well as those in noncompliance. As such, we request serious consideration be given to incorporating the attached comments into the final report. Adopting these comments will move closer to reaching the goal of an accurate and objective representation of the status of compliance with the Settlement Agreement.

We continue to value the work of the Task Force, which has led to resolution of many issues. We are excited that discussions on reaching compliance and ultimately completing the Settlement Agreement are in progress with Children's Rights, Inc. It is the intent of both our agencies that children and families of Kansas will continue to be offered quality services following successful completion of the Settlement Agreement.

Thank you for the opportunity to review and comment on this draft report. Please contact us if you have any questions regarding the attached comments.

Sincerely,

A handwritten signature in cursive script that reads "Rochelle Chronister".

Rochelle Chronister
Secretary

Attachment
cc: Deputy Secretary Schalansky
Teresa Markowitz

Page 2, The Department and the ACLU Ultimately Reached...: The second sentence states "Each requirement, or "element", was considered to be an important component of an adequate foster care system, and was included to ensure that the needs of foster children in Kansas were being met". The Department requests this sentence read only ***"Each requirement, or "element", was considered to be an important component of an adequate child welfare system"***. The activities in the Settlement Agreement describe adequate protection responses for all the children in Kansas.

Page 3, Kansas' Foster Care System Now Is Administered by...: The title of this section references the "Department's Division of Children and Family Services". The correct title is the ***Commission*** of Children and Family Services.

While the Department agrees a brief description of the privatization of three of the child welfare programs of Family Preservation, Adoption and Foster Care is acceptable in this report, the title and first paragraph, as currently written, may be misleading to the reader. The Department continues to administer the child welfare system in Kansas. The Department requests clarification in the final report.

Page 5, Is the Department Complying With the Requirements of the Settlement Agreement?: The draft report states that a total of 79 requirements were originally due for assessment, with 18 of those requirements monitored during this period. The Department requests reconciliation of these numbers with the information in the Summary of Compliance on pages 16-21.

The Department requests the first bullet be changed to read only ***"the parties agreed to suspend monitoring of the 45 requirements related to Case Review #1 (covering assessments of alleged abuse and neglect) and Case Review #2 (covering case planning activities of children in custody). For these requirements, the Department conceded noncompliance"***.

The Department requests the second bullet to read only ***"the parties agreed to change compliance dates to 1998 for 16 additional requirements."*** (See correspondence of February 16, 1998)

Page 5, The Department screened out...: The Department requests the heading and first paragraph of this discussion state as in Audit Report #7, ***"The Department Screened Out Some Bona Fide Reports of Abuse and Neglect, which Meant Those Allegations Weren't Investigated as Required"***, and ***"The settlement agreement requires the Department to maintain a system to ensure that bona fide reports of abuse and neglect aren't screened out and are accepted for a protective services investigation"***. This offers a clearer description to the reader of the requirements of this element.

The Department also requests statistics be included in the discussion of this element, such as, ***"The internal monitors reviewed a sample (811) of the reports screened out May through October 1997 and found that 14% of those sampled did not clearly document the reason for not accepting the report for further assessment."***

The Department continues to request the removal of the atypical anecdotal examples used to illustrate noncompliance of the screened out reports. The descriptions are taken out of context and could perpetuate public misunderstanding of the definition of children in need of care. Our review of the screened out reports, determined by the auditors to be noncompliant, found that in many cases the screen out was appropriate, but there was missing documentation to support the action, or the auditors did not understand the criteria to screen out a report. The Department is following up with clarifications to both field staff and auditors.

Page 7, Confirmed Providers in the Central Registry, 2nd Paragraph: The Department requests clarification of the last explanation of a valid reason why a confirmed provider should not have been entered in the registry. The reason given, "the perpetrator had appealed the confirmed finding" could mean the perpetrator successfully appealed the finding and the finding was overturned, or it could mean the finding was currently in the appeal process.

Page 7, Recommendations Related Ensuring the Safety of Children: The draft report makes references to the Family Agenda Policy Manual (FAPM). The name of the Commission of Children and Family Services policy manual changed from the FAPM to the Policy and Procedures Manual (PPM) in 1996.

Page 8, The Department was in compliance with 6 of 8 requirements...: The Department requests this sentence be removed for two reasons. First, only four requirements related to Case Review 3 were assessed during 1997; and second, the Department was found in compliance with all requirements for January-June 1997.

The Department requests the second bullet read only ***"During periods #7 and #8, the Department forwarded all necessary materials to the central office (now the adoption contractor's office) within 20 days of receiving the termination of parental rights nearly 100% of the time."***

Page 9, 1st, 2nd Paragraph: The Department requests combination of these paragraphs to read only ***"This period, area office attorneys recorded these termination hearings 83% of the time and made the required court contacts 55% of the time. In order to be in compliance, the Department had to demonstrate these activities at least 90% of the time. The Department currently is revising its policy manual and changing performance evaluation standards for area attorneys in an effort to demonstrate compliance with this requirement."***

Page 9, The Department was in compliance with two staff training requirements: The Handbook of Services is not a staff training requirement, therefore the Department requests this clarification in the final report. The Department also requests the discussion on the Handbook of Services state ***"The Department maintained an up-to-date and accurate Handbook of Services that includes information about placements and services, and made it available to appropriate staff 100% of the time during this review period. The Department has demonstrated one year continuous compliance with this requirement and formal monitoring will cease"***.

The Department requests the sentence ***"Formal monitoring of this requirement will cease"*** added to the discussion of compliance with the Rural Interactive Training Network.

Page 9, 1st Bullet: The first sentence of this bullet indicates that "all foster parents must complete 16 hours of annual training before they can be relicensed". This is incorrect. The Kansas Department of Health and Environment (KDHE) criteria for relicensure of foster parents includes completing six hours of training. The Department agreed in the Settlement to require 16 hours of annual child-welfare training before a child in SRS custody can be placed in a foster home. Therefore, the Department requests this sentence read ***"All foster parents must complete 16 hours of annual training before a child in the custody of SRS can be placed in the home"***.

Page 10, 1st Paragraph: This paragraph, as currently written does not accurately reflect foster home licensing responsibilities. KDHE always has, and still retains, responsibility for issuing the license for foster homes. The activities of recruitment and assessment of foster homes transferred from the Department to KDHE through a Memorandum of Agreement with the Department in 1996.

Page 10, 3rd Paragraph: The Department requests the final report include the actual number of foster and adoptive training records reviewed by Legislative Post Audit.

Page 10, Last Paragraph: The Department request the first sentence of this paragraph read ***"This situation apparently arose because the agencies did not require supporting documentation to be forwarded with the request for licensure or approval"***.

Page 11, The Department Hasn't Maintained Two Required Computer Systems...: The Department requests the final report clarify this discussion. The draft report states that since the "deadline" for implementing the new system isn't until July 1998, "the Department is required in the meantime to maintain two existing systems". This is incorrect. In the Settlement Agreement, the Department agreed to maintain the two systems mentioned ***until*** the implementation of the new system. While the new system will not be reviewed for compliance until after July 1, 1998, the Department implemented the system in September 1997. As such, the two systems in question are no longer maintained.

The second paragraph of this section includes the sentence "The Internal Monitor has done some limited testing and determined that the new system isn't yet accurate enough even for sampling purposes". This is incorrect. The Internal Quality Assurance Monitoring Unit (IQAMU) has validated, with the concurrence of Legislative Post Audit, the system for sampling of Case Review 1. Case readings for Case Review 1 have been in progress for over three months. IQAMU is currently in the process of validating the system for sampling for Case Review 2.

The first sentence of the last paragraph on page 11 states "the parties required us to monitor...". This is not entirely correct and may be misleading to the reader. The parties did not reach agreement to ***not*** monitor these requirements.

Page 12 & 13, Status of Requirements Related to Case Reviews #1 and #2: The parties agreed to "not report noncompliance on each individual element of Case Review 1 and 2", and that Audit Report #8 should "only state the Department conceded noncompliance with all elements in Case Review #1 and #2 for the period covered by the audit" (see correspondence of February 16, 1998). Therefore, the Department requests this section be rewritten to only reflect the agreement of the parties. Any further comments may mislead the reader and deviate from the objectivity of the report.

Page 13, 3rd Paragraph: The Department requests clarification of this paragraph in the final report. As currently written, the draft report indicates the information system is not reliable to pull a sample and the parties lack of agreement to an alternative method were the reasons for not beginning the readings for Case Review 2 prior to June 1998. Both the Department and Children's Rights, Inc. intended to begin the readings for Case Review 2 in the period of the review rather than following the period of review. IQAMU informed the parties that this was not possible for Case Review 2 due to the complex sampling criteria when sampling within the review period. Therefore, the readings for Case Review 2 would begin after the review period. As stated above, IQAMU is in the process of validating the system to pull a sample to begin the readings for Case Review 2. Readings are expected to begin following the end of the review period of January-June 1998.

Page 13, Status of Requirements Where Monitoring Was Suspended...: The Department requests this section be eliminated. It is inaccurate and misleading as currently written. The parties agreed to a change in compliance dates of these elements (see correspondence of February 16, 1998). These elements relate to staffing and assessing and planning for services and placements.

Page 15, Summary of Compliance for Monitoring Periods #1 - #8: The Department requests the addition of "*(we reported compliance percentages, when available)*" follow "C = In Compliance", which is the same comment after "N = Not in compliance".



404 PARK AVENUE SOUTH, NEW YORK NY 10016
212-683-2210 • FAX: 212-683-4015
E-mail: info@childrensrights.org

June 22, 1998

BY FAX TO (785) 296-4482 AND MAIL

Ms. Barbara J. Hinton
Legislative Post Audit
800 S.W. Jackson, Suite 1200
Topeka, KS 66612-2212

Re: Sheila A. v. Finney: Monitoring
Report No. 8

Dear Ms. Hinton,

I am writing, on behalf of the plaintiff children in Sheila A. v. Finney, to comment on the performance audit, Verifying Information Provided by the Department of Social and Rehabilitation Services on Its Compliance with the Terms of the Foster Care Settlement Agreement: Monitoring Report # 8. The audit report raises serious concerns about continuing problems in training, both for SRS staff and for foster parents.

It is crucial that the Department immediately retrain its assessment and screening staff about the proper standards for screening incoming reports of abuse and neglect. The Department's continued failure to apprise its staff of changes in the regulatory standard, which mandates investigation where there is "likelihood of harm" is particularly troubling. This is such a basic issue of child safety that it must be of highest priority.

In addition, the CRU must receive timely notification of reported abuse by foster parents or other placement providers. Children cannot be put in danger because the contracted providers do not inform the CRU in a timely manner about this reported abuse. The Department's corrective action plan to improve the data entry system and to train providers on this improved data entry methodology must be made an immediate priority.

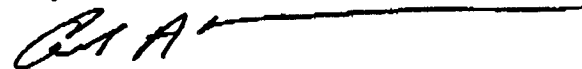
Moreover, the failure to train foster parents timely, which the report highlights, seems to be another area where contracted providers have failed to properly supervise and train their workers and where the Department has not fulfilled its own monitoring responsibilities. The Department must actively monitor its contractors, for documentation of training, rather than

Ms. Barbara J. Hinton
June 22, 1998
Page Two

simply rely on the attestations of the contractors. As KDHE will no longer rely on the attestations without receiving supporting documentation, this problem will also be monitored by the state agency which is directly responsible for licensure of foster and adoptive parents. This dual approach is necessary to solve this serious problem.

Thank you for the opportunity to comment.

Very truly yours,

A handwritten signature in dark ink, appearing to read "Carol A. Marcus", followed by a horizontal line.

Carol A. Marcus
Attorney for Plaintiffs

