DHHS Grants Management Unit Differential Response Steering Committee Draft Meeting Minutes February 5, 2014

Videoconference Locations:

DCFS, 1677 Old Hot Springs Road, Suite B Conference Room 1, Carson City DCFS, 6171 W Charleston, Building 8 Meeting Room, Las Vegas **Teleconference Location:** DCFS, 1010 Ruby Vista Drive, Suite 101, Elko

Present

Carson City Rosalynda Paez Carlton and Wylie Evanson, WCSD FRC/DR Patrick White, The Children's Cabinet DR Joyce Buckingham, Ron Wood FRC/DR Mary Kennerly, Lyon County Human Services FRC/DR Wendy Pearce and Karen Stoll, FRIENDS FRC/DR **Rique Robb, DHHS GMU** Suzanne Wright, DCFS Elko Holly Zumwalt, Judy Andreson and Marlene Dick, FRC/DR of Northeastern Nevada Ilene Jonas, DCFS – Elko Las Vegas Alicia Davisson, East Valley Family Services, FRC/DR East and Central and Pahrump Andrea Michaels, HopeLink, FRC/DR South Angela Phillips, Olive Crest, FRC/DR North Debbie Croshaw, CCDFS Gloria Sulhoff, DHHS GMU Via Phone: Otto Lynn, WCDSS

Call to Order

Rique Robb introduced herself as the GMU's Northern Nevada Coordinator for FRC and DR, and announced that Toby Hyman was not available to attend due to a family emergency. She called the meeting to order at 9:05 am.

Public Comment

None

Approval of November 14, 2013 Meeting Minutes

Andrea Michaels had an adjustment to the minutes; she was not listed as being present at the meeting. Patrick White moved to approve the minutes with that correction. The motion was seconded by Alicia Davisson and carried unopposed.

Program Updates

Numbers Served through December 31, 2013
Rique stated that the report usually presented by Toby was not available; however, she reviewed the numbers and, subject to confirmation, it appeared that 640 cases were

referred to DR, 576 cases closed, and 15 were returned to CPS. There were 259 open cases. Once the numbers have been confirmed by Toby, they will be added to the minutes.

• Program Services Updates

<u>Rosalynda Paez Carlton, WCSD FRC/DR</u>: The District has been going through some changes and they have been having computer issues. It is hard to do case notes. She has 18 or 19 cases and Wylie has 10. She has been in training since November and will be out in February too, but has found the training very beneficial to see how the entire system works and how DR fits into it.

<u>Patrick White, Children's Cabinet:</u> Things have been running smoothly since the last UNITY update; only one case fell off. Toby has been keeping track of these lost cases. All three case managers are currently working 15 cases; Olympia, their new worker, has 10 cases. They are seeing a lot of truancy.

<u>Joyce Buckingham, Ron Wood FRC:</u> They currently have 16 open cases and are seeing truancy and educational neglect. UNITY is working okay of late.

<u>Mary Kennerly, Lyon County:</u> They have closed a lot of cases and were down to six, but now have 9-10, receiving 2-3 per day, with lots of educational neglect. Things are running smoothly. Core takes time but it's worth it, and DCFS tried not to send any cases while we were in training. She introduced their newest supervisor, Ana Coons, Lyon County, who started a month ago and has been familiarizing herself with the DR program, the cases, and UNITY. Each carry 16-17 cases, referrals come in weekly.

Suzanne: Had nothing to report.

<u>Otto Lynn, WCDSS</u>: No updates. Kevin, the former director, was promoted to assistant city manager and they now have a new acting department director. There are a lot of changes going on.

<u>Judy Andreson, Elko:</u> They currently have five cases, DCFS was a great help through core training, doing more on the front end regarding educational neglect. She loved the motivational interviewing piece in the core training.

Andrea Michaels, HopeLink: They now are back to two case workers, and have 15 cases total. She described some UNITY problems; they are unable to get progress reports or VPN, and don't know whether it's an issue with UNITY or with the State. They do have a ticket in and hope to have it fixed this week so they can update case notes. They received their first case involving an under five child, a sibling of a 7-year old. They met with the dad and will be meeting with mom. The mom reported that the kids were left alone in the car for five minutes. It was a good referral for DR. Frank just started last week on his own; he had three cases. They also are seeing a lot of educational neglect, which presents a challenge because they have no clout to get the kids to school. Truancy officers go to the home but the kids refuse to go to school.

<u>Alicia DAvisson, EVFS East, Central and Pahrump:</u> Central always has a full case load, currently 19-20 cases between the two case managers. Allegations run the gamut. They have had several cases with children under five but all have worked out well so far. East has 19 cases, and Pahrump remains constant with 10 cases. They have seen an increase in the number of Hispanic families and intend to add a Hispanic caseworker. They are reorganizing the department.

Debbie Croshaw, CCDFS: Nothing to report.

<u>Angela Phillips, Olive Crest:</u> They are full, both workers have 20 cases each. It's been constant over the past year. They received 8 on Sunday. They are experiencing the same UNITY problem as Pat, and have had about 7 cases drop off. Any time she does anything in UNITY, they lose one. When it comes back, it's missing notes or some other issue. When

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> they talk with UNITY, they don't get any answer other than to check to be sure they are using the most recent update, which they are. Otto added that Alanne retired last week, so don't send emails to her; get a new email address. He stated that Toby has been working with Paul to resolve the issue. Rique suggested everyone use the generic help desk email until we get the name of a new contact.

DR and NIA and CPS Core Training

Rique reported that four to six workers in the south were attending SIPS training. In the north, the majority of the workers were there. All supervisors attended the Core 3 safety training. Many elements don't pertain to DR, but it is valuable information in the long run. The presence of DR program workers at training is beneficial in that they now know who we are and help to introduce the DR into the curriculum. Toby had additional information on SIPS which she can share when she returns.

Plan of Safe Care – Suzanne Wright

Suzanne worked with Toby and Sally on creating a policy. CAPTA regulations and Governor Assurances are close to completion. It has taken over six months to put together a policy for the State on fetal alcohol and drug exposed infants. The law states that they conduct an evaluation of the family to determine if a referral is warranted. Social workers are investigating, but it may be more appropriate for DR. The Plan is written and is currently going through legal. It will then go through more re-writes before coming to the group for review. DR will be a huge player in the process with these families. In describing "evaluation" they are using the same language as the Feds to determine needs of family and of child. Las Vegas sees the most, with 34 of these cases last year. Debbie thought that figure seemed low and was probably much higher. The policy still gives DR the leeway of a 72 hour response time. Rique commented that training and policy have not yet caught up to the new NRS regarding under-five and that "appropriate cases" shouldn't be placed with DR just because the DR worker is capable of handling them. Suzanne stated that the policy is clear it has to meet DR policy/criteria first. The due date for completion was October 1, so they hope to launch as soon as possible. In response to a question from Debbie regarding an education plan for local hospitals, Suzanne said she will work with Toby on that, and have Toby speak to her supervisors once the new plan is launched.

Wendy said some hospitals have lock downs and questioned procedures for evaluating and contacting the family within 72 hours or once released from the hospital. There was some discussion regarding heroin versus marijuana, and Suzanne stated that DR will not get the more severe drug cases. Rique and Suzanne have been working with "Ages and Stages" regarding training on evaluating infants, but are not comfortable. Andrea asked whether there had been any thought given to the idea of training workers on the disease of addiction and how to work with those families. Suzanne replied that there is specialty core training; also the in-home people once that partnership is secured.

Rique mentioned the Nevada Partners in Training, which all DR workers will be able to attend. Because these are half-day sessions, they are not as overwhelming to fit in. She said they are also looking at web-based or modules, and asked the group to email any further suggestions for training to her or Toby. They hope to set up regular trainings twice a year to accommodate new workers. DR Steering Committee DRAFT Meeting Minutes 2-5-14 Page 4 of 4

DR Procedural Manual

Rique said it's been a challenge trying to reschedule the meeting over the holidays. The next meeting will probably not take place until the first or second week of March. It was confirmed that the members of the workgroup included everyone attending this meeting.

Quality Assurance (QA) Review Process for DR

Rique and Toby have been organizing Sally's notes and work on the QA Review process, and probably will not have anything for the group until mid-March. The individuals working on this project include herself and Toby, Deb Croshaw, Otto, and Pat.

Public Comment

None

Additional Announcements and Adjournment

Alicia asked when core training would be held in the south. Andrea commented that HopeLink was going through it.

Rique announced the next DR Steering Committee meeting date as May 7, 2014. The northern location will be in Reno and Otto announced he had already booked the room. There being no further announcements, the meeting adjourned at 9:47 am.