DHHS Grants Management Unit Differential Response Steering Committee Draft Meeting Minutes November 14, 2013

Videoconference Locations:

DCFS, 6171 W Charleston, Building 8 Meeting Room, Las Vegas DCFS, 2655 Enterprise Road, Conference Room 1, Reno DCFS, 1010 Ruby Vista Drive, Suite 101, Elko

Present

Elko Holly Zumwalt and Marlene Dick, FRC/DR of Northeastern Nevada Las Vegas Vicki Malone and Jennifer Pritchett, CCDFS Angela Phillips, Olive Crest, FRC/DR North Alma Spears, Boys & Girls Clubs, FRC/DR West Alicia Davisson, East Valley Family Services, FRC/DR East and Central and Pahrump Toby Hyman and Gloria Sulhoff, DHHS GMU Reno Patrick White, The Children's Cabinet DR Michael Moulian, Wylie Evanson, and Rosalynda Paez Carlton, WCSD FRC/DR Joyce Buckingham, Ron Wood FRC/DR Mary Kennerly, Lyon County Human Services FRC/DR Wendy Pearce and Karen Stoll, FRIENDS FRC/DR Kristen Monibi, WCDSS Sally Dutton and Rique Robb, DHHS GMU

Via Phone: Suzanne Wright, DCFS Family Planning Office, Carson City

Call to Order

Toby Hyman called the meeting to order at 9:05 am although there was still difficulty establishing the videoconference connection in Elko.

Public Comment

None

Approval of Minutes August 7, 2013

Alicia Davisson moved to approve the minutes of the August 7, 2013 meeting as presented. The motion was seconded by Alma Spears.

Program Updates

- Numbers Served July 1 through September 30, 2013
 Toby reported that during the first quarter of the new fiscal year, 291 families statewide had been referred to DR; five cases were returned to CPS; 261 cases closed. There were 235 open cases.
- Program Services Updates

Patrick White, Children's Cabinet: A new case manager, Olimpia Martinez, has completed her training but is off for 1½ weeks. When she returns she will start intakes on her own, and be assigned a couple of cases. Courtney has 16 cases and Chris is about at capacity. <u>Mike Moulian, WCSD</u>: Doing well, they are down a DR Case Manager but Wylie Evanson has been through the majority of training and will start UNITY next week. They may have some problems due to the new fiber optics in his office; they are no longer on satellite. Rosalynda has 19 cases. Toby stated that she has submitted the UNITY order for Wylie and will do the VPN next week.

<u>Joyce Buckingham, Ron Wood FRC:</u> Both DR Case Managers have full loads, and as soon as cases close, they fill up again. They are also busy with holiday activities, adopting families and toy drives. They have gotten a lot of improper supervision cases for families with multiple-age kids, including children five and under. She sent a few back that she felt were better served by CPS Investigators.

<u>Kristin Monibi, WCDSS</u>: Otto sends his regrets for being unable to attend the meeting. They did not implement any changes regarding the under five. They will change the policy at some point, but haven't yet. They have not seen any cases of children under five that they would send to DR. They are seeing a lot of educational neglect and mental health cases. Sally Dutton questioned whether the NAC (Nevada Administrative Code) needs to be revised to catch up to the new law. County policy changes to adapt to new codes after the NRS changes – they took out, "DCFS immediate response to threat of harm for children under five". Suzanne responded that once the NRS changes, the NAC will need to change. She doesn't think that has happened yet; she will look into it and talk to Jan.

<u>Mary Kennerly, Lyon County</u>: The two DR caseworkers' case loads are very full. Lyon County has also received cases with children under five years old. She will feel more comfortable taking cases with young children after training. Last week she attended a training at The Change Company in Carson City on motivating kids to make change.

<u>Wendy Pearce, FRIENDS FRC</u>: A case of three children all under five was referred to DR, but we felt it was inappropriate for DR, and CPS took the case back. Wendy agreed that due to the DCFS transition perhaps some additional training is needed on what are appropriate cases for DR. There are three different people assigning reports, and if they don't communicate with one another, she ends up getting too many reports. She recently ended up with 36 cases. Toby stated 20 is the limit and asked if Kelly, CPS District Manager for District 3, attends the site-specific meetings. Wendy said she was currently setting one up and will ask Kelly to attend.

<u>Holly Zumwalt, FRCNEN</u>: FRCNEN DR has not received any cases with five and under except when the under five child is a sibling in an appropriate DR Report. They run it by the supervisor and DCFS to get approval and proceed if the allegations do not affect the child who is under five. She has five cases and Marlene has two. Judy is working on the Truancy Board, which is still in the making. Because it's new, their case worker is working with families of truant kids which the school refers to the FRC. She noted they are not receiving as many cases of educational neglect yet.

<u>Alma Spears, Boys & Girls Clubs (L.V. West DR)</u>: Many cases carried over from the summer have been closed since Ed. Neglect students have been regularly attending school. Now the DR Case Managers have about 17-18 combined cases with various allegations of medical neglect, ed. neglect, inadequate food or supervision. The ed. neglect cases have mental health components as well as other issues with ed. neglect being the least of their problems. Toby brought up a situation Alma had called her about regarding a 15 year old girl who relocated to L.V. from California with an IEP in place. The school referred her to online school, and we didn't think it was within school rights. Angela Phillips said Christina attended a training two weeks ago to learn about the rights. The school district must honor an IEP from another state for thirty days. Suzanne said the school district honors them but has no funding for tests.

<u>Angela Phillips, Olive Crest (L.V. North DR)</u>: Each worker has 20 cases. They received 19 referrals in October. Olive Crest has moved offices and they are all settled now, with fax, phones, and emails operational. There have been some challenges with the hotline staff here assigning physical risk and abandonment cases. Toby stated that if there are issues, we need to let Debbie Croshaw know. Angela concluded by saying they also are busy with holiday programs.

<u>Andrea Michaels, HopeLink (L.V. South DR)</u>: A DR Case Manager left in October but most of her cases have been closed. A second DR Case Manager has been hired and Tom and Glenn with DCFS UNITY were able to get her trained in her first week. They received eight new cases last week; most are ed. neglect, with one lock-out, which is a repeat report from three years ago.

<u>Alicia Davisson, EVFS (L.V. East/Central & Pahrump DR)</u>: Central DR has 24 families, and they have seen a marked increase in the number of Hispanic families. East has 17 cases, and Pahrump stays the same at 9. In reference to Angela's comment regarding the hotline, she has noticed the hotline is re-labeling, and providing better explanations regarding families. They are quick to respond to questions and are more customer-friendly.

<u>Jennifer Pritchett, CCDFS</u>: She is working on SIPS stuff, catching up and planning the roll out, first in L.V. south and then elsewhere in Clark County. It was good to hear that the hotline is responsive. Toby welcomed Vicki Malone to her first meeting with the group.

<u>Rosalynda Carlton, WCSD DR</u>: She and Wylie will be giving two DR presentations next week to high school and middle school counselors, nurses and clinical aides, especially regarding bruises. Only certified staff and or nurses can look at bruises. Rosalynda is excited to have Wylie as a partner; they have similar backgrounds and can talk about cases together. Wylie stated he is excited and happy to be here and the training so far has been amazing. He is looking forward to the CPS core training.

DR and NIA and CPS Core Training – Next Steps

Toby reported that she and Sally are working with DCFS and Washoe and Clark Counties to get DR on same page, consistent with the new NIA and SIPS. In Clark County the program is called SIPS; in Washoe it is called Safe FC (Family Connection), but it's the same thing. The Nevada Initial Assessment (NIA) training introduced in Washoe and the Rurals two years ago is just now starting in Clark. It's a six-day training in the south, and DR participates in the first three days of training. The first part focuses on the needs assessment, safe or impending danger, and seems similar to what we see DR being – an assessment of the family, working with the family to access resources so we can mitigate future reports. Clint Holder, who leads the training that Toby and Sally attended, is receptive to providing a two-day statewide DR training. There is Casey funding available to pull everyone together, most likely in May. For some, this would be a duplicate training, but reinforcing. In addition, having the entire group together is always wonderful and beneficial.

In addition to the SIPS training, it has been decided that DR staff should also participate in the Safety training. Sally took Core 3 a few months ago; she and Toby, in discussions with Jill

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Marano, concluded that DR should go through all the core modules. The northern NV DR staff will participate in Core 1 December 10 - 12, Core 2 January 14 – 17, Core 3 January 27 – 31, Core 4 February 11 – 14, and Core 5 February 25 - 27. The dates have been sent to all DR staff in the north, where core training will be provided first. It will be challenging leaving cases for a week for training, but the opportunity to participate in the CPS core training is a valuable addition for DR case managers. Toby spoke with Matt Gyger, training coordinator for NV Partnership for Training at UNLV, who coordinates the core training for CCDFS staff. Matt said that he and his trainers are going through SIPS last week and this week and he had a conversation with the North and Clint on how to incorporate it in the South. Matt will let Toby know when the southern NV DR staff will be able to participate in the southern NV Core Training.

Holly Zumwalt relayed a question from Judy regarding money for travel. Sally stated she received the request and will get back to her, adding that it depends on how it's set up, whether or not it goes through the Nevada Public Health Foundation. Joyce asked that the dates for the training in May be confirmed as soon as possible because that is her peak grant writing season.

DR Procedural Manual

Toby reported that the manual is still a work in progress. She will send a Doodle poll to reschedule the meeting originally set for the 25th to come up with a new date.

Plan of Safe Care – Suzanne Wright

Suzanne explained 2010 CAPTA which requires every state to have a plan for babies born with evidence of drugs or alcohol in their system. Nevada has to send assurances to the Feds, so she is leading an effort to create a policy that will shape the plan for safe care in NV. She talked with Toby, Sally and others regarding criteria that needs to go into the policy and to shore up specifications for DR to receive referrals of drug or alcohol exposed infants. She distributed a list of discussion items to the group for their review and suggestions. The list was divided into three categories: criteria for referral to DR, other criteria for referral to other community partners such as FRCs, and criteria for screening out a report. She stated that the first section specific to DR definitely needs to be included in the policy. The group discussed the six points in that section and found a potential issue with the last two regarding the requirements to contact child welfare immediately or within 24 hours, because it is sometimes hard to contact them. Suzanne said those response times were taken from DR's intake policy, which may need to be revised. Changes will also need to be made to UNITY.

Toby stated that the DR response is still three working days and referrals to DR need to remain low level; this must be kept in mind when DFS makes referrals. Meth-amphetamine or heroine exposed babies would not be low-level, and she suggested adding something to the policy to specifically exclude opiates. Also, doctors are not comfortable with the three-day wait for follow-up.

Suzanne concluded by saying the Plan of Safe Care was in the very early stages. The working group includes herself, Toby and Sally, Otto and Jean from Washoe, Troy from Clark, and Betsy from the Rural Office, and they have only met once. Sally asked whether DR subcommittee members should be added to the group. Suzanne asked them to send their ideas and considerations to her via email.

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Quality Assurance (QA) Review Process for DR

Sally reported that the QA workgroup, which meets monthly, is working with two different tools: the last CFSR (Child and Family Services Review) from the Feds, and a DCFS document - QA Case Review. The DCFS Family Programs office conducts biannual case studies for the CFSR to see where they are with fidelity, and the end result goes into the report. The workgroup is using those two documents to create the DR policy, and they are making progress. Their next meeting is scheduled for Thursday from 2-3 pm, but Sally has a conflict and needs to reschedule. Toby added that it's an exciting project because once the tool is complete we'll start making DR reviews similar to what DCFS does.

Public Comment

None

Additional Announcements and Adjournment

Toby announced the date of the "Big DR" meeting in the south as next Thursday at 2:00 pm. The next DR Steering Committee meeting date is February 5, 2014. The Northern location will be in Carson City. There being no further announcements, the meeting adjourned at 10:38 am.