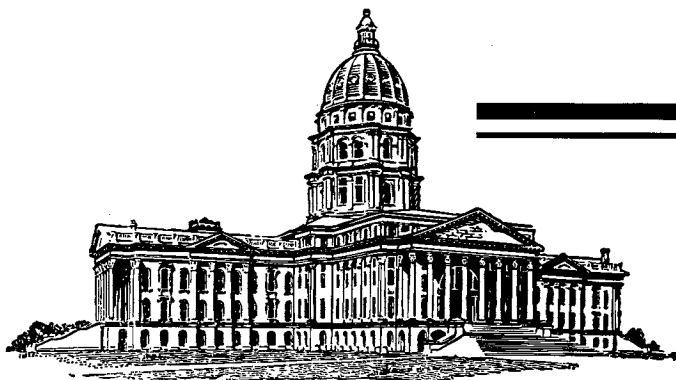




PERFORMANCE AUDIT REPORT

**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 #7
Covering January 1 to June 30, 1997**

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

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

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

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 (913) 296-3792
FAX (913) 296-4482
E-MAIL: LPA@postaudit.ksleg.state.ks.us

December 30, 1997

To: Members, Legislative Post Audit Committee

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

Senator Lana Oleen, Vice-Chair
Senator Anthony Hensley
Senator Pat Ranson
Senator Chris Steineger
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

**Question 1: Is the Department of Social and Rehabilitation Services
Accurately Reporting Its Compliance With the Terms of
The Foster Care Settlement Agreement?**

This 7th monitoring period covers requirements the Department was supposed to comply with from January 1 to June 30, 1997. page 6
During this period, we assessed the Department's compliance with a total of 80 requirements. Based on our reviews and testwork, we concluded the Department was in compliance with 12 (15%) of the 80 requirements, and wasn't in compliance with 64 (80%). We couldn't tell whether the Department had complied with four other requirements (5%), because it and Children's Rights, Inc., were still negotiating issues related to these requirements.

Our findings related to the requirements assessed this period are summarized below.

The Department has conceded it wasn't in compliance with the requirements related to investigations of alleged child abuse or neglect for the 18-month period from July 1996 through December 1997. page 9
These 12 requirements, which are assessed during Case Review 1, include conducting preliminary risk assessments, investigating allegations within established deadlines, interviewing all the appropriate parties during an investigation, reaching appropriate findings about whether abuse or neglect likely occurred, and determining whether a pattern of abuse exists in each case. These requirements have the most direct effect on protecting children from the threat of physical or emotional injury. Because the Department's concession of noncompliance with these requirements covered the current monitoring period, no monitoring work was performed. Monitoring will resume after January 1, 1998.

The Department screened out some bona fide reports of abuse and neglect, which meant those allegations weren't investigated as required. page 9
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. Based on its testwork, the Department's Internal Quality Assurance Monitoring Unit concluded Department staff appropriately screened reports of abuse and neglect 83% of the time last period, and 85% of the time this period. To be in compliance, Department staff would have to have screened reports appropriately 90% of the time.

The Department contested the Monitoring Unit's findings, but our testwork confirmed that the Unit's work was reliable.

Recommendations page 11

The Department has conceded it wasn't in compliance with the requirements related to appropriately managing the cases of children in its custody for the 30-month period from July 1995 through December 1997. *These 39 requirements, which are assessed during Case Review 2, 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.*

..... page 11

These requirements help ensure that children's cases are appropriately "managed" and don't fall through the cracks, that children and their families receive the services they need, and that children don't languish in foster homes when they should be reunited with their families or adopted. Because the Department's concession of noncompliance with these requirements covered the current monitoring period, no monitoring work was performed. Monitoring will resume after January 1, 1998.

The Department was in compliance with 7 of the 11 requirements related to the adoption process. *Department staff met these 7 requirements at least 90% of the time as follows:*

..... page 12

- *referring children to specialized adoption agencies, national directories, or developing individualized recruitment plans; considering new plans for children when motions to terminate parental rights are denied; and finalizing adoptions within 18 months of adoptive placement for 100% of the cases reviewed*
- *considering adoption finalization at every administrative review following adoptive placement 98% of the time and consenting to adoptions within the required timeframe 95% of the time*

For the four areas the Department was out of compliance:

- *it didn't send the necessary information to the County/District attorney for 14% of the cases reviewed, and didn't send that information on time for 21% of the cases*
- *it didn't send the information required to identify potential adoptive families for 13% of the cases reviewed, and didn't send that information on time for 29% of the cases.*

In either case, failing to meet the required timeframes could lengthen the time a child spends in temporary placement, and may delay the adoption process.

The Department didn't comply with many requirements related to maintaining the information needed to effectively manage the foster care system. *The settlement agreement has a number of requirements related to maintaining information and information systems. The Department was in compliance with one requirement related to handbooks on services and placements and three requirements related to the needs assessments for preventive services, placements, and services for children in the Department's custody.*

..... page 13

The Department hasn't complied with the requirements summarized below:

- For most reports where the Department confirmed that a foster parent or another placement provider had abused or neglected a child, information about the perpetrator hadn't been entered into the Department's Central Registry database.
- The Department hasn't implemented and maintained an automated, area office data system to track foster home resources and vacancies in family foster homes.
- For the sixth consecutive monitoring period, data in the FAME information system were inaccurate.
- The Department hasn't completed the development of a rural interactive training network.
- The Department hasn't provided foster parents with 16 hours of annual child welfare training, and hasn't maintained a system for recording this training or MAPP training.
- The Department's procedures aren't adequate to ensure that it learns on a timely basis of the filing of journal entries terminating parental rights.

The Department has issued corrective actions plans in most of these areas that include specific written actions the Department will take to remedy its noncompliance.

We couldn't tell whether the Department had complied with four requirements related to staffing and to services and placements. page 15
In these areas, the Department and Children's Rights, Inc., haven't yet agreed on definitions for—or methods to measure compliance with—the following requirements:

- achieving an equitable distribution of cases among social workers
- providing access to adequate preventive services to children and their families
- placing children in the least-restrictive, most family-like placement in close proximity to the child's home, consistent with his or her needs
- ensuring that children in the Department's custody receive adequate services

This period, the parties have brought these four issues before a specially appointed Task Force to help resolve their differences.

Recommendations page 16

The Department was in compliance with the requirement relating to having sufficient internal monitoring staff resources, but it needs to ensure the internal monitor is able to complete its monitoring reports on a more timely basis. page 16
The settlement agreement requires the Department to maintain an internal monitoring unit to assess compliance with sufficient comprehensiveness, frequency, and accuracy to allow reliable conclusions to be drawn about compliance.

During monitoring period #6, the Monitoring Unit indicated it was unable to complete its monitoring of three requirements because of a backlog of compliance assessments that hadn't been completed during the 5th monitoring period. Because of these delays, Children's Rights, Inc. asked us to monitor the staffing levels of the Unit.

During this period, the Monitoring Unit completed its assessment not only of all the requirements due this period, but also of all the overdue requirements from last period. However, the Monitoring Unit didn't issue any of its monitoring reports within 60 days of the compliance due date for those elements, as required by its own policy and procedures manual. Although the 60-day timeframe isn't required by the settlement agreement, it's key to the efficient monitoring of that agreement, and can help ensure that our testwork and monitoring reports are completed on a timely basis.

Recommendation		page 17
APPENDIX A: Summary of Findings Regarding the Department's Compliance With the Settlement Agreement		page 25
APPENDIX B: Compliance and Reliability Definitions		page 37
APPENDIX C: Agency Responses		page 40

This audit was conducted by Jennifer Hudgins. 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 1989, a Topeka attorney (later joined by the American Civil Liberties Union), filed a lawsuit charging that the Department of Social and Rehabilitation Services wasn't adequately caring for children who may have been victims of abuse or neglect. In May 1993, the Department and the ACLU reached an out-of-court settlement that provided, among other things, that an independent entity would act as a monitor of the Department's compliance with the terms of the agreement.

Both parties to the lawsuit wanted Legislative Post Audit to play a role in this monitoring effort, subject to the concurrence and direction of the Legislative Post Audit Committee. The Department's internal quality assurance group--the Internal Quality Assurance Monitoring Unit--also has a major role in assessing Departmental compliance.

At its May 14, 1993, meeting, the Legislative Post Audit Committee directed the Legislative Division of Post Audit to conduct an ongoing performance audit assessing the Department's compliance with the settlement agreement and the reliability of the Monitoring Unit's conclusions regarding the Department's compliance with the terms of that agreement. The Committee agreed to this commitment with the condition that the Department would pay for Post Audit's costs associated with the project. This audit addresses the following question:

- 1. 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 Quality Assurance Monitoring Unit regarding the Department's compliance, as well as the underlying support documentation developed or provided by the Department. In addition, to the extent we thought necessary we conducted independent record checks to verify the information the Department had provided. In this period, the Monitoring Unit also reviewed hundreds of case files. For the requirements subject to the case reviews, 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.

This monitoring report generally covers elements due to be in compliance during the period January 1997-June 1997. During this monitoring period, we are report-

ing on a total of 80 requirements that the Department had to comply with in the settlement agreement. Our reviews showed the Department had not complied with all requirements in 64 of the 80 areas subject to review. In 4 of the 80 areas, we weren't able to determine whether the Department had complied with the requirements of the settlement agreement.

These and other findings are discussed in more detail in later sections, following a brief overview of the foster care system.

Overview of the Foster Care System in Kansas

Kansas' Foster Care System is Administered by the Department of Social and Rehabilitation Services' Division of Children and Family Services

Under this system, the Department may provide preventive services to families where child abuse 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 county attorney to petition the court to place the child in the custody of the Secretary of Social and Rehabilitation Services.

After a 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 a series of audits issued in 1990 and 1991, Legislative Post Audit identified serious flaws in the State's foster care system. In that series of audits, we identified problems with both staff support, including ineffective case management and supervision at the local level, inappropriate caseload assignments, lack of training and information systems for social workers and management, and inaccurate budget and accounting systems.

In addition, we found problems with the delivery of services, including the lack of a responsive preventive services program, numerous and frequent placements for children in the Department's care, inappropriate placements, and ineffective or incomplete services being provided to children and their families.

Partly in response to our recommendations, the Department developed a Family Agenda for Children and Youth. The 1992 Legislature also gave the Department over 200 additional social work and paraprofessional staff. In addition, the Department increased its training efforts and began work on a comprehensive automated management information system.

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 and Neglect

Sheila A., et. al. v. Joan Finney et. al. originally was filed in January 1989 in Shawnee County District Court by Ms. Rene Netherton, a local attorney seeking additional foster care beds for Shawnee County children. The Children's Rights Project of the ACLU filed an amended petition in February 1990. 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. The topics covered by the agreement include the following:

- protective services
- preventive services
- case planning and reviews
- placements
- services
- adoption
- named plaintiffs
- financial resources
- staffing
- training
- information systems
- Program Analysis Unit
- monitoring
- compliance
- termination
- enforcement

As of July 1995, Children's Rights, Inc., which is no longer affiliated with the ACLU, joined Ms. Netherton in representing the plaintiff class in the Kansas lawsuit.

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

In formulating the settlement agreement, both the Department and the ACLU agreed that compliance would be monitored by the Department's internal quality assurance staff and by Legislative Post Audit. 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. The Unit prepares a report that summarizes the information it reviewed and that draws conclusions about the Department's compliance.

The agreement calls for Legislative Post Audit to confirm the reliability of those conclusions by testing a sample of the compliance results generated by the Unit and reporting on our findings. In describing this effort to others, we've used the term "verification" audit work to help explain our role.

The verification testwork we perform in assessing compliance with the settlement agreement can't ensure that all the problems with the foster care system will be alleviated. However, the parties have agreed to activities which, if carried out, are expected to 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.

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, and its goal is to bring the Department into substantial compliance with the settlement agreement 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 in the Settlement Agreement?

During this 7th monitoring period, we assessed the Department's compliance with a total of 80 requirements in the settlement agreement. As described earlier, our role as external monitor involves verifying that the work of the Department's Internal Quality Assurance Monitoring Unit can be relied on. The requirements being assessed during this period generally were for actions the Department was required to take during January-June 1997.

For those areas where the Department didn't comply, the requirement "rolls forward" to the next six-month period. The Department must be in continuous compliance with most requirements for one full year before monitoring in those areas stops. One result of noncompliance is that it extends the length of time the settlement agreement must be monitored.

Based on our reviews and testwork, we determined that the Department's compliance status during this monitoring period was as follows:

- We verified that the Department was in compliance with 12 of the 80 requirements we assessed during this period (15%). For 7 of those requirements, formal monitoring will stop.
- The Department wasn't in compliance with 64 of the 80 requirements being assessed (80%). (As discussed below, the Department conceded noncompliance with 51 requirements related to child abuse and neglect investigations and case planning activities for children in SRS custody.)
- We couldn't tell whether the Department was in compliance with 4 other requirements (5%), because the Department and Children's Rights, Inc., hadn't yet agreed on what the Department was required to do to comply.

Two other important points:

- The Department has conceded it wasn't in compliance with the requirements related to Case Review 1 (which cover investigations of alleged child abuse or neglect) for the 18-month period from July 1996 through December 1997. It also conceded noncompliance with the requirements of Case Review 2 (which cover the Department's management of children in its care) for the 30-month period from July 1995 through December 1997.

Monitoring of the Department's compliance with these requirements initially was scheduled to resume July 1, 1997, but the parties have agreed to postpone monitoring until after January 1, 1998. That delay was intended to allow a specially created Task Force to review and revise some of the procedures being followed to measure compliance, and to give the Department time to train its field staff in practices relating to the settlement agreement.

- The parties have agreed to bring several long-standing areas of disagreement before the Task Force for resolution. These are summarized in the appropriate places within the body of the report.

The remainder of this report is divided into two sections. The first section (pages 8 to 17) describes our findings of noncompliance in more detail. Also, where the Department reported any corrective actions it planned to take to come into compliance in the future, we've included that information. The final section (beginning on page 18) summarizes the Department's compliance over time with each requirement that's been monitored to-date.

Finally, Appendix A provides a summary of our compliance assessments and the actual settlement language for each element monitored during this period. Appendix B contains the definitions of compliance and reliability we use in our monitoring work.

Summary of Findings for Monitoring Period #7

Pages 9-17 provide a detailed summary of our findings and recommendations for those elements we concluded weren't in compliance during this monitoring period. These findings include any corrective actions the Department reported it was planning to take to come into compliance in the future.

In addition, we've reported the status of all current negotiations between the Department and Children's Rights, Inc., for those elements where factors prevented us from determining whether the Department was in compliance.

**The Department Conceded It Wasn't in Compliance
This Period with Any of the Requirements
Related to Investigating the Safety and Status of
Children Who Reportedly Have Been Abused or Neglected**

Beginning in January 1995, for all reports alleging that a child has been abused or neglected, Department staff have been required under the settlement agreement to do the following (currently at least 90% of the time):

- conduct a preliminary assessment of the risk to the child or children involved
- initiate an investigation by the assigned deadline
- complete a family-based assessment and a family service plan within 45 working days of accepting the report of abuse or neglect
- take reasonable action to obtain medical services, if necessary
- interview all the appropriate parties during an investigation
- complete a protective services investigation within 25 working days of accepting the report
- have an uninvolved supervisor review and document prior reports and investigations, if there have been three or more unconfirmed reports of abuse or neglect involving the same child or family within two years and there is no clear explanation for the pattern
- request the removal of a child from the home only if the child is in imminent danger of serious injury and the child can't be protected because the alleged abuser has access and the non-abusing parent isn't able to provide protection

These requirements apply to Department actions that have the most direct effect on protecting children from the threat of physical or emotional injury. Thus, any noncompliance in these areas increases the risk that children will continue to be abused or neglected. In the previous four monitoring periods, the Department hadn't met most of these requirements.

In all, 12 requirements scheduled to be monitored this period related to the adequacy of these investigations. No monitoring was performed, however, because the Department conceded noncompliance with all the requirements relating to such investigations this period.

**The Department Screened Out Some Bona Fide
Reports of Abuse and Neglect, Which Meant Those
Allegations Weren't Investigated as Required**

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. Beginning in July 1995, the Department was required to properly screen 90% of all abuse and neglect reports it received. The Department hasn't complied with this requirement in any of the previous monitoring periods.

This period we're reporting on the Department's compliance with this requirement over the last two monitoring periods; the Monitoring Unit didn't complete its assessments last time because of staffing shortages. Based on the results of its

testwork, the Monitoring Unit concluded that Department staff appropriately screened reports of suspected abuse and neglect 83% of the time last period, and 85% of the time this period. The Department contested the Monitoring Unit's findings, but our testwork confirmed that the Unit's work was reliable. Some examples of alleged abuse or neglect reports that were screened out when they shouldn't have been are provided in the box below.

**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 indicates three young children were left alone all day in a car during winter.

Department policy would allow this report to be screened out if the children were dressed adequately for the weather. However, there was no documentation that the children were dressed appropriately.

Report alleges that a mother threw a car seat with her two-month-old baby strapped inside.

If an incident is known to law enforcement, and the safety of the child has been assessed, this report may be screened out. Although law enforcement investigated an incident involving this family several days before, there's no documentation that it was the same incident, or that the child was determined to be safe. In fact, the reporting officer explicitly expressed concerns for the child's well-being in his report.

A child was allegedly being sexually abused by a sibling and an unknown perpetrator.

The Department isn't required to investigate an allegation of abuse if the perpetrator isn't a caregiver. In this case however, no attempt was made to determine whether the child's brother or the unknown perpetrator were caregivers.

Report alleges that a child was being choked and beaten with a belt.

This report was screened out as a custody dispute. Although the Department may screen out a report that alleges inadequate care by an ex-spouse, it must investigate allegations of abuse.

A two-year-old child had a serious diaper rash, because the mother neglected him and refused to get medical treatment for three weeks.

This report was screened out because staff determined the child was safe with his father. Documentation in the file, however, shows that the child was still going on unsupervised visits with his mother, who had joint custody.

Reporter observed six-year-old child engaging in age-inappropriate sexual behavior and strongly suspected sexual abuse.

The Department determined there wasn't enough evidence to warrant an investigation. However, there was no documentation the child was ever questioned about sexual abuse.

In general, noncompliance seemed to result from staff's failure to follow the Family Agenda Policy Manual's standards for assessment and screening decisions related to allegations of child abuse or neglect. (The name of this manual changed to the Policy and Procedures Manual in October 1996.) In addition, for many cases in the current monitoring period, Department screeners 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.

**Recommendations Related to
Screening Reports of Abuse and Neglect**

1. The Department of Social and Rehabilitation Services should provide Statewide training on assessment and screening decisions for reports of alleged child abuse or neglect.
2. The Department should revise sections of its Family Agenda Policy Manual to conform with the new "likelihood" of harm standard promulgated by Kansas Administrative Regulation 30-46-10.

**The Department Conceded It Wasn't in Compliance
This Period with Any of the Requirements for
Appropriately Managing the Cases of Children In Its Custody**

Beginning in July 1995, Department staff have been required under the settlement agreement to take the following actions related to managing the cases of kids in its custody (currently at least 90% of the time):

- develop a case plan for providing services that meet the child's and family's needs
- house children in appropriate placements
- periodically review and revise the case plan to reflect the current needs of the child and families, and involve parents and other appropriate parties in those reviews
- arrange for appropriate visits between foster-care children, parents, siblings, and social workers
- notify the courts of the child's progress
- consider adoption as a permanent placement

These requirements help ensure that children's cases are appropriately "managed" and don't fall through the cracks, that children are placed in homes which are appropriate to their needs, that children and their families receive services that will help them deal with their problems, if possible, and that children don't languish in foster homes when they should be reunited with their families or adopted.

In all, 39 requirements in this area were scheduled to be monitored this period. No monitoring was performed, however, because the Department conceded noncompliance with all the requirements relating to case-management during this period.

The Department Was in Compliance With Most Requirements Related to the Adoption Process

Case Review 3 covers the Department's actions related to the adoption process. To assess the Department's compliance with these adoption-related requirements, the Monitoring Unit reviewed nearly half the adoption cases for this monitoring period, which covers January-June 1997. Department staff met 7 of the 11 specific requirements at least 90% of the time, as follows:

- In 100% of the cases reviewed, Department staff referred children to specialized adoption agencies or to the national adoption resource directory, or developed individualized recruitment plans when no one indicated interest in adopting the children. In addition, Department staff took these actions within the required timeframe in all cases.
- In 100% of the cases reviewed, Department staff held meetings to consider new plans for children when motions to terminate parental rights were denied. In addition, Department staff took these actions within the required timeframe in all cases.
- The Department considered finalizing adoptions at every administrative review following adoptive placement in 98% of the cases reviewed. In 100% of the cases, the Department finalized adoptions within 18 months of adoptive placement. In addition, the Department consented to the adoptions within the required timeframe in 95% of the cases reviewed.

For these 7 requirements, the Department has demonstrated one year of continuous compliance, and formal monitoring of those requirements will stop.

The areas of noncompliance are summarized below:

- Department staff sent out all information needed to file a motion to terminate parental rights 86% of the time, and sent that information on a timely basis only 79% of the time. The Department is required to send the necessary information to the county/district attorney within 45 working days of deciding to seek that motion, or within 60 working days if the Department needs additional information outside its control.
- Department staff sent out the information required to identify potential adoptive families only 87% of the time, and sent it within the required timeframe only 71% of the time. The settlement agreement requires this information to be sent to the Central Office within 20 working days of receiving the court's final order terminating parental rights, if no qualified party has indicated an interest in adopting the child. The Department has 30 working days if it needs additional outside information.

Failing to meet the required timeframes may lengthen the time a child spends in temporary placement and may delay the adoption process.

The Department Didn't Comply With Many Requirements Related to Maintaining the Information Needed to Effectively Manage the Foster Care System

The settlement agreement has a number of requirements related to maintaining information and systems that contribute to the good management of the foster care system. The Department has demonstrated compliance with four requirements in this area as follows:

- 99% of the time, Department staff had accurate and up-to-date handbooks containing information about placements and services.
- For the three requirements related to the needs assessments for preventive services, placements, and services for children in the Department's custody, the parties agreed that the Department is in compliance and that formal monitoring of these requirements this period wasn't necessary.

The Department hasn't complied with these requirements, as summarized below:

- For most reports where the Department has confirmed that a foster parent or another placement provider abused or neglected a child, information about the perpetrator hasn't been entered into the Department's Central Registry database, as required. The Central Registry is maintained as part of the Child Abuse and Neglect Information System (CANIS). When people apply for a license to work in areas that involve contact with children—such as day care—the Department is supposed to check that person's background on the System for any history of confirmed cases of abuse or neglect.

The Department originally was required to comply with this requirement in January 1995, but has acknowledged noncompliance in each of the last five monitoring periods. The Monitoring Unit didn't assess the Department's compliance this period because the Department set a new monitoring date of July 1, 1997—beyond the current period. However, Children's Rights didn't agree to suspend monitoring or to establish a new compliance date despite our correspondence dated September 5, 1997, asking the Department and the parties to address this issue. As a result, we concluded the Department couldn't demonstrate it was in compliance for the current monitoring period.

- The Department hasn't implemented and maintained an automated, area office data system to track foster home resources and vacancies in family foster homes. The settlement agreement also requires this data system to contain descriptive information for use in placing children in available, appropriate homes. This period we're reporting on the Department's compliance with these requirements over the last three periods; the Monitoring Unit hadn't completed its assessments before this period because of staffing shortages. The Monitoring Unit found that the Department's compliance rate was as follows:

- For monitoring period #5 (January-June 1996)—46%
- For monitoring period #6 (July-December 1996)—44%
- For monitoring period #7 (January-June 1997), the Monitoring Unit couldn't compute a compliance rate because the Department indicated three area offices could no longer provide the necessary documentation from their systems

The Department didn't develop a corrective action plan for this requirement because the area office data system has been replaced by a new information system, which is required in another part of the settlement agreement (X.A.). At the time of our report, however, the parties hadn't decided whether implementing the new system meant the requirements relating to the area office data system no longer applied. If the parties decide they don't apply, monitoring of this system will stop. If they do apply, we'll continue to monitor this requirement.

- For the 6th monitoring period, data in the FAME information system were inaccurate. The Department is required to implement and maintain the Family Agenda Monitoring Elements (FAME) information system to capture custody, service, and placement information for children and families in its care. This period, the Monitoring Unit reported the required information was accurately recorded only 75% of the time. The Department concurred.

The Department didn't develop a corrective action plan for this requirement for the same reason cited above: the FAME system has been replaced by a new information system. The parties also are undecided as to whether implementation of the new system would eliminate the requirements relating to the FAME system.

- The Department hasn't completed developing a rural interactive training network, as required. This training system is intended to allow staff in all parts of the State to participate in training without having to travel great distances. This network originally was required to be developed by December 1996. This period, the Department informed us the training network hadn't been completed until August 1997. Because the network wasn't completed until after the current monitoring period ended, we concluded the Department hadn't demonstrated compliance with this element.
- For the following requirements relating to training for adoptive and foster parents, the Department acknowledged it wasn't in compliance this period:

- providing foster parents with 16 hours of annual child welfare training
- maintaining a system for recording MAPP training for foster or adoptive parents
- maintaining a system for recording the annual training provided to foster parents

To come into compliance with these requirements in the future, the Department has provided specific requirements for the contractors handling adoptions and foster care to follow. These requirements relate both to the amount of training provided and to the way it's recorded.

- The Department's procedures aren't adequate to ensure that it learns on a timely basis of the filing of journal entries terminating parental rights. This requirement was designed to ensure that the Department can act quickly to find adoptive homes once a child is legally free for adoption. For this period, the Monitoring Unit found the Department had recorded these termination hearings 83% of the time, and had met its own promptness standard 44% of the time. For the previous period, those compliance rates were 73% and 20%, respectively. (The Unit hadn't monitored this requirement the last period because of staffing shortages.)

The Department concurred with these findings and developed a corrective action plan in October 1997. This plan makes an attorney in each area office responsible for monitoring compliance with this element, including contacting the case manager for each child with a plan of adoption and arranging for notices of hearings on motions for termination of parental rights. In addition, the attorney is required to document all contacts with the case manager and the court regarding the filing status of the journal entries that result from the hearings.

We Couldn't Tell Whether the Department Had Complied With Four Other Requirements Related To Staffing and to Services and Placements.

In the four areas discussed below, the Department and Children's Rights, Inc., haven't yet agreed on definitions for—or methods to measure compliance with—these requirements:

In the first area, the settlement agreement requires the Department to regularly monitor workers' caseloads and 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 requirement has never been monitored. As a result, we're reporting for the fourth consecutive monitoring period that factors prevented us from assessing compliance. The parties have been actively negotiating this issue for the past 24 months. This period, they brought the issue before a specially appointed Task Force to try to get it resolved.

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

- provide access to adequate preventive services to individual children and families who are eligible
- place individual children in appropriate placements (i.e., the least-restrictive, most family-like placement in close proximity to the child's home, consistent with his or her needs)
- ensure that individual children in Department custody receive adequate services

The Department originally was scheduled to be in compliance with these requirements in July 1995. However, the Monitoring Plan agreed to by the parties doesn't provide 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.

**Recommendations Related to
Staffing and Service/Placement Needs**

1. The Department of Social and Rehabilitation Services and Children's Rights, Inc., should continue to work with the Task Force to resolve the differences of interpretation related to settlement element VIII.C., which addresses the equitable distribution of social workers' workloads.
2. The Department and Children's Rights, Inc., should continue to work with the Task Force to develop a way to measure whether the Department has provided access to adequate preventive services, appropriate placements, and services for children in the Department's custody at least 90% of the time.

**The Department Was in Compliance with the Requirement
Relating To Having Sufficient Internal Monitoring Staff Resources,
But It Needs To Ensure That the Internal Monitor Is Able
To Complete Its Monitoring Reports on a More Timely Basis**

The settlement agreement requires the Department to maintain an internal monitoring unit to assess compliance with sufficient comprehensiveness, frequency, and accuracy to allow reliable conclusions to be drawn about compliance. Children's Rights, Inc., has asked us to monitor this requirement because the Monitoring Unit was unable to complete its review of numerous requirements during the last two monitoring periods (#5 and #6).

Last period, the Monitoring Unit was reorganized for the third time and moved into the Department's Audit Division. To try to catch up with a severe backlog of work left undone from monitoring period #5, the Department gave the Unit four additional staff members and made other staff from the Audit Division available to assist the Unit.

Monitoring Unit staff have told us the delays in their monitoring work last period were the direct result of the backlog of work from the previous period. They said they didn't expect their work to be delayed in the future. During this period, the Monitoring Unit completed its assessment not only of all the requirements currently being reviewed, but also of all the overdue requirements from last period.

Although we concluded the Department was in compliance with this requirement, we still have some concerns with the timeliness of the Monitoring Unit's reports. The Monitoring Unit's policy manual requires it to complete its monitoring reports within 60 calendar days after the compliance due date for any given element.

For most requirements that were assessed this period, the Unit didn't meet this deadline. Because of the backlog of work left over from last period, however, we allowed the Unit until October 15 to complete its work. In all cases, that October deadline was met.

As a general practice, accepting the Monitoring Unit's reports so late in a monitoring period leaves us almost no time to complete our verification testwork. Although the 60-day timeframe isn't required by the settlement agreement, it's key to the efficient monitoring of that agreement, and can help ensure that our testwork and monitoring reports are completed on a timely basis.

Recommendation Related to Monitoring Staff Resources

The Department of Social and Rehabilitation Services should ensure that the Internal Monitoring Unit has enough staff to comply with its policies and procedures requiring monitoring reports to be issued within 60 days after the compliance due date for any given settlement element.

Summary of Compliance for Monitoring Periods #1 - #7

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 = Case review
- C = In compliance
- N = Not in compliance (i.e., the Department didn't do what was required or didn't do what was required often enough)
- 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)
- 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
- INC = The Monitoring Unit hasn't completed its assessment
- NA = Not assessed (i.e., the requirement isn't due for an assessment this period)

	MONITORING PERIOD							Monitoring Stops?
	#1	#2	#3	#4	#5	#6	#7	
	Jan- June 1994	July- Dec 1994	Jan- June 1995	July- Dec 1995	Jan- June 1996	July- Dec 1996	Jan- June 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	
2. Maintain the Family Agenda Monitoring Elements (FAME) system until the new information system (KSSIS) is implemented.	D	N	N	N	N	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.	C	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	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.	D	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

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

	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	
Actions First Required During 2nd Monitoring Period								
28. 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		
29. Same as above, for placement needs.	N	N	N	N	D	C		
30. Same as above, for service needs for children in custody.	N	N	N	N	D	C		
31. Conduct annual studies to determine the actual caseloads of each Youth Services social worker and supervisor.	P	C	C	NA	C	NA		
32. Evaluate the effectiveness of paraprofessional staff (are social workers doing non-social-work activities that paraprofessionals could do?)	N	N	N	N	D	D		
33. Maintain up-to-date and accurate Handbook of Services that includes information about placements and services, and make it available to appropriate staff.	C		N	N	N	C		
34. Provide basic core curriculum training to staff within first six months of employment.	C	N	C	C			Y	
35. Provide training to supervisors within six months of becoming a supervisor.	C	N	C	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.			N	N	D	N	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	
43. Same as above, for placement needs.			N	N	N	D	D	
44. Same as above, for services for children in custody.			N	N	N	D	D	
45. Implement an area office data system for family foster homes.			N	INC	N	N	N	
46. Enter confirmed reports of abuse/neglect by foster parents or other providers in CANIS.			N	N	N	N	N	
47. Monitor workers' caseloads and take steps to achieve an equitable distribution of cases among social work staff.			P	P	P	P	P	
48. Maintain sufficient staff to comply with caseload guidelines and the settlement agreement.			P	P	P	D	D	
49. CR1. Conduct a preliminary risk assessment as part of protective services investigation.			N	N	N	N	N	

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

	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	
50. CR1. Initiate a protective services investigation by the assigned deadline.			N	N	N	N	N	
51. CR1. Complete an assessment of the family's strengths and needs.			N	N	N	N	N	
52. CR1. Complete a family-based assessment within the required timeframe.			N	N	N	N	N	
53. CR1. Complete a family service plan, if required.			N	N	N	N	N	
54. CR1. Complete a family service plan within the required timeframe.			N	N	N	N	N	
55. CR1. Interview all the appropriate parties during a protective services investigation.			N	N	N	N	N	
56. CR1. Complete protective service investigations within the required timeframe.			N	N	N	N	N	
57. CR1. Take reasonable action to obtain medical services if they're necessary.			P	P	P	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.			N	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.			N	N	N	N	N	
60. CR1. Request ex parte order or law enforcement removal only if kids are in imminent danger of serious injury, the perpetrator has access to them, and they can't be protected by the non-abusing parent.			C	N	C	N	N	
61. CR1. Review reports from law enforcement to determine if further SRS investigation is necessary.			C	C				Y
62. CR1. Document whether further investigation of these reports is necessary.			C	C				Y
63. Provide advanced, client-centered management training to eligible staff.			C	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	
70. Place children in least-restrictive, most family-like placement.				P	P	P	P	
71. Provide access to services for children in custody.				P	P	P	P	
72. CR2. Develop a written case plan for children in Dept. custody.				N	N	N	N	
73. CR2. Develop a written case plan for families of children in Dept. custody.				N	N	N	N	
74. CR2. Complete a written case plan within the required timeframe.				N	N	N	N	

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

	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	
75. CR2. Update case plans for children in Dept. custody within the required timeframe.				N	N	N	N	
76. CR2. Include services to prevent out-of-home placement in the initial case plan.				N	N	N	N	
77. CR2. Describe the reason for agency involvement in the initial case plan.				N	N	N	N	
78. CR2. Identify a planning goal in the case plan for children in Dept. custody.				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	
80. CR2. Include steps to meet the objectives of the case plan.				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	
82. CR2. Include a discussion of compliance with the previous case plan in the administrative review.				N	N	N	N	
83. CR2. Specify in the case plan the projected date for achieving the case planning goal.				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	
85. CR2. Adhere to Department policies on long-term foster care and independent living plans.				N	N	N	N	
86. CR2. Provide case planning brochure to parents and other participants prior to the first administrative review.				N	N	N	N	
87. CR2. Notify parents and appropriate parties of the time, date, and place of the administrative review within the required timeframe.				N	N	N	N	
88. CR2. Schedule administrative reviews to maximize participation.				N	N	N	N	
89. CR2. Train third parties in the case planning process.				N	N	N	N	
90. CR2. Train other SRS participants in the case planning process.				N	N	N	N	
91. 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	
92. 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	
93. CR2. Ensure that children are placed only in licensed homes, or homes meeting certain exceptions.				N	N	N	N	
94. CR2. Develop a written parent/child visitation plan, when appropriate, with visits scheduled at the required frequency.				N	N	N	N	
95. CR2. Specify the time, location, and duration of visits in the parent/child visitation plan.				N	N	N	N	
96. CR2. Schedule unsupervised visits unless court ordered or for reasonable cause.				N	N	N	N	
97. CR2. Schedule supervised visits in the most home-like setting possible.				N	N	N	N	
98. CR2. Develop a written visitation plan for siblings and schedule visits at the required frequency.				N	N	N	N	
99. CR2. Develop a written visitation plan for worker/parent and schedule visits at the required frequency.				N	N	N	N	

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

	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	
100. CR2. Specify the time, location, and duration of visits in the worker/parent visitation plan.				N	N	N	N	
101. CR2. Develop a written worker/child visitation plan and schedule visits at the required frequency.				N	N	N	N	
102. CR2. Specify the time, location, and duration of visits in the worker/child visitation plan.				N	N	N	N	
103. CR2. Designate the worker who will be the primary contact for worker/child visitation.				N	N	N	N	
104. CR2. When a child has been in out-of-home placement for one year, consider a plan of adoption.				N	N	N	N	
105. CR2. If a plan of adoption is not established, document the basis for the decision.				N	N	N	N	
106. CR2. Determine if relinquishment is appropriate when adoption is established as the permanency plan.				N	N	N	N	
107. CR2. Discuss relinquishment with parents, if appropriate.				N	N	N	N	
108. 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	
109. 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	
110. 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	
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				C	C			Y
115. Provide pre-service training to eligible staff.				C	C			Y
116. Provide annual training to eligible staff.				C	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	
119. Same as above, for placement needs.					P	D	D	
120. Same as above, for services for children in custody.					N	D	D	
121. Maintain accurate and up-to-date MAPP training record system.					INC	N	N	
122. Implement an maintain accurate and up-to-date annual foster parent training record system.					INC	N	N	
123. Provide annual child welfare training to all foster parents.					INC	N	N	
124. Make diligent efforts to learn promptly of filing of journal entries terminating parental rights.					N	N	N	

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

	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	
125. CR3. Send information for motion to terminate parental rights to County/District attorney.					D	C	N	
126. CR3. Send information for motion to terminate parental rights, within the required timeframe.					D	N	N	
127. CR3. Send complete Adoption Referral Packet to Central Office, where appropriate.					D	C	N	
128. CR3. Send complete Adoption Referral Packet to Central Office, within the required timeframe.					D	N	N	
129. CR3. Develop an adoption recruitment strategy, where appropriate.					D	C	C	Y
130. CR3. Develop an adoption recruitment strategy, within the required timeframe.					D	C	C	Y
131. CR3. Conduct a staffing when a motion to terminate parental rights has been denied.					D	C	C	Y
132. CR3. Conduct a staffing when a motion to terminate parental rights has been denied, within the required timeframe.					D	C	C	Y
133. CR3. Consider approval for finalization of adoption at all administrative reviews subsequent to placement in a prospective adoptive home.					D	C	C	Y
134. CR3. Approve finalization of adoption within the required timeframe.					D	C	C	Y
135. CR3. Provide consent to adoption within the required timeframe.					D	C	C	Y
136. Provide Family Agenda Practice Handbook training to eligible staff.					C	C		Y
137. Provide MAPP pre-placement training to foster parents before relicensure.					C			Y

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

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

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

APPENDIX A

Summary of Findings Regarding the Department's Compliance With the Settlement Agreement

The following pages summarize our findings for the requirements reviewed during this monitoring period and include the specific settlement language applicable to each element. Those portions of the requirements not yet due for assessment appear in italics.

Items Related to Protective Services

I.A. [Screening] SRS agrees to maintain a system by which it shall assure that all reports to the Department about suspected abuse or neglect are properly assessed to assure that bona fide reports are not screened out. In doing so, SRS agrees to comply with the provisions of sections 1500, 1600 and 4920 (4) of the SRS Family Agenda Policy Manual. SRS will document the basis for determining the report is not abuse or neglect for purposes of a subsequent protective services investigation.

I.D. [Initiation of Investigations] When SRS accepts a report alleging that a child appears to be abused or neglected, SRS agrees to conduct a Preliminary Risk Assessment and initiate a protective services investigation consistent with the Preliminary Risk Assessment criteria and provisions of sections 1610, 1611, 1612, and 4920 (4). SRS agrees to document the actions required by this paragraph in the case file.

I.E. [Completion of Family Based Assessment/Development of Family Service Plan] When SRS accepts a report alleging that a child appears to be a child in need of care, the Department shall complete a Family Based Assessment consistent with the provisions of sections 1000, 1100, and 1200 of the SRS Family Agenda Policy Manual within 45 working days of acceptance of the report. SRS agrees to complete a family services plan, when indicated, within the same period unless exceptional circumstances are documented in the record. [footnote: A family service plan is a case plan for the family, whether or not any of the children is in custody, pursuant to the Family Agenda Policy Manual section 2000 and 2100.]

I.F. [Content of Investigations] When SRS conducts a protective service investigation, it shall assure that appropriate persons be interviewed as provided in section 1613 of the SRS Family Agenda Policy Manual.

I.G. [Provision of Protective Services] When SRS conducts an investigation of a report of suspected child abuse or neglect, if the Department determines medical services are necessary, SRS will take all reasonable action to obtain the same.

- **Our testwork showed the Department wasn't in compliance with this element.** The Monitoring Unit concluded the Department achieved only 85% compliance this period and 83% compliance the previous period; 90% compliance was required for both periods.
- We concluded the Unit's assessment was reliable.

- **The Department conceded noncompliance with this element.**

- **The Department conceded noncompliance with this element.**

- **The Department conceded noncompliance with this element.**

- **The Department conceded noncompliance with this element.**

Settlement Element Requirement

Assessment of Compliance

I.H. [Completion of Investigations] When SRS conducts a protective service investigation, it shall complete the investigation within 25 working days of the date mandated for the initiation of the investigation unless a delay is requested by law enforcement or a court or for similar exceptional circumstances documented in the case file. For purposes of this provision, an investigation shall be deemed completed when the worker makes a written finding, entered in the record, consistent with the provisions of sections 1620, 1621, 1622, and 1623 of the SRS Family Agenda Policy Manual.

- The Department conceded noncompliance with this element.

I.I. [Multiple Unconfirmed Reports] When, after investigating three separate incidents of alleged abuse or neglect within two years on the same family or child, where the Department's findings are unconfirmed on each investigation and there is no clear explanation for the pattern, then all prior reports and investigations will be reviewed by a supervisor not involved in the case. The result of the review will be documented in the case file.

- The Department conceded noncompliance with this element.

Items Related to Preventive Services

II.A. [Needs Assessment/Plan for Preventive Services]

The Department shall conduct a formal needs assessment of its statewide and regional needs for preventive services (preventing out-of-home placement), including intensive family-preservation services. SRS agrees to contract with one of the state universities or another appropriate entity to conduct this assessment. The contractee shall take into consideration any other data already compiled and shall consider the effectiveness of the staffing of the Family Preservation units. The contractee shall identify strategies to assist area offices and communities in the development of resources. Following good-faith consideration and review of this assessment and of current and potential resources, SRS agrees to develop and implement a plan by which individual children and families who are eligible for preventive services have access to adequate preventive services.

Needs Assessment

- The parties agreed the Department was in compliance with this requirement.

Access to Services

- Factors prevented us from determining whether the Department was in compliance with this requirement.

II.F. [Ex Parte Orders or Law Enforcement Removal Requested by SRS] SRS staff shall request an ex parte order or removal by law enforcement of children from their homes only when the children are in imminent

- The Department conceded noncompliance with this element.

Settlement Element Requirement

Assessment of Compliance

danger of serious injury and they cannot be protected due to the perpetrator's access to the children and the non-abusing parent's inability to protect them.

Items Related to Case Planning and Reviews

III.B. [Case Plan Time Lines] Each family and child shall have a written case plan that shall be developed in full within 20 working days of the completion of the Family Based Assessment as required in section 2300 of the SRS Family Agenda Policy Manual but no later than 30 working days after the child enters SRS custody.

- The Department conceded noncompliance with this element.

III.C. [Case Review Time Lines] Case plans shall be periodically reviewed and updated at case planning conference reviews which shall be conducted at least every 180 days as required in section 2300 of the SRS Family Agenda Policy Manual.

- The Department conceded noncompliance with this element.

III.D.1. [Case Plans] Initial case plans shall describe the services considered to prevent placement and assess the circumstances that necessitated intervention. All case plans shall identify a permissible planning goal, shall include the specific services to reinforce the strengths of the family and meet the needs of the children, and, where applicable, services to reunify the family and shall identify the specific steps to be taken by SRS staff, other service providers, children and their parents toward meeting the short-term and long-term objectives of the plan. All case plans shall also discuss the type and appropriateness of any setting in which a child has been placed and the method by which SRS will comply with any recommendations of the court or document the reasons recommendations will not be followed.

- The Department conceded noncompliance with this element.

III.D.2. [Case Review Content] Case planning conference reviews shall, at a minimum, ensure discussion of the case plan elements, including compliance with any prior case plans, the continuing need for placement and services, progress being made toward the goals and objectives of any prior plan and a likely date by which the goal will be achieved.

- The Department conceded noncompliance with this element.

III.E. [Long Term Foster Care and Independent Living Plans] The Department shall *develop* and adhere to reasonable written policies defining the circumstances

- The Department conceded noncompliance with this element.

Settlement Element Requirement

Assessment of Compliance

under which long-term foster care and independent living may be used as planning goals. *[Requirements in italics were assessed in a prior monitoring period.]*

III.F. [Notification of Case Review] Prior to the first administrative review (at which the initial case plan is developed), parents and other participants in the case planning process shall be provided with a brochure explaining the nature and purpose of the process. At least 10 days prior to each administrative review, SRS agrees to provide parents and all other appropriate parties (including the child, unless inappropriate, all those providing placement or services to the family, and a third party as defined by section 2400 (2) of the SRS Family Agenda Policy Manual) with notice of the date, time, and place of the review. Reviews will be scheduled and arranged to maximize participation by parents and appropriate parties.

- The Department conceded noncompliance with this element.

III.G. [Case Planning and Permanency Planning] All social workers, other SRS participants in the case planning process, and third parties as defined by section 2400 (2) of the SRS Family Agenda Policy Manual shall be adequately trained in the case planning process. All of the appropriate parties to the (case planning) process shall be offered training in permanency planning for children. SRS will either provide this training or contract with a state university or other qualified entity for the training. *[Requirements in italics were assessed in a prior monitoring period.]*

- The Department conceded noncompliance with this element.

III.I. [Reports to Courts] SRS agrees to provide courts timely and accurate reports, consistent with sections 3230 of the SRS Family Agenda Policy Manual, for periodic judicial reviews.

- The Department conceded noncompliance with this element.

Items Related to Foster Care Placements

IV.A. [Handbook of Services] SRS agrees to maintain an up-to-date and accurate Handbook of Services, which shall include information about placements and services, and shall make the Handbook available to all applicable workers.

- We concluded the Department was in compliance with this element. The Department achieved 99% compliance; 90% compliance was required.

IV.B. [Needs Assessment/Plan for Placement Needs] The Department shall conduct a formal needs assessment of its statewide and regional placement needs. SRS agrees to contract with one of the state

Needs Assessment

- The parties agreed the Department was in compliance with this requirement.

Settlement Element Requirement

Assessment of Compliance

universities or another appropriate entity to conduct this assessment. The contractee shall take into consideration any other data already compiled and shall identify strategies to assist area offices and communities in the development of resources. Following good-faith consideration and review of this assessment and of current and potential resources, SRS agrees to develop and implement a plan by which individual children shall be placed in the least-restrictive, most family-like placement in close proximity to their parents' home consistent with their needs.

IV.G. [Area Office Data System] Pending implementation of the integrated information system provided for by section X (A), SRS agrees to implement and maintain an automated, area-office, PC-based data system that will track foster-home resources and vacancies in SRS family foster homes and shall include descriptive information that will be used to place children in available, appropriate homes.

IV.I. [No Placements in Unlicensed Homes] SRS agrees to assure that no child in its custody shall be placed in a placement that is unlicensed, except as provided in sections 3120 or 3150 of Volume III of the SRS Policy Manual or, when they become effective, the corresponding sections of the SRS Family Agenda Manual, which shall be consistent with sections 3120 and 3150.

IV.J. [Confirmed Abuse/Neglect Reports on Providers] When SRS confirms a report of suspected abuse or neglect by a foster parent or other placement provider, SRS agrees, subject to the due process requirements of K.S.A. 65-516, to enter that information into the Central Registry unless it determines that the foster parent or provider should be offered a post confirmation corrective action plan pursuant to section 1624 of the SRS Family Agenda Manual. The Department's decision to offer such a plan shall be governed by section 2351 of the SRS Policy Manual or by the corresponding section of the SRS Family Agenda Manual when it becomes effective.

Access to Services

- **Factors prevented us from determining whether the Department was in compliance with this requirement.**

- **The Department acknowledged it wasn't in compliance with this element.** The Monitoring Unit concluded the Department achieved only 44% compliance last period and only 46% compliance in Monitoring Period #5. The Unit didn't assess compliance with this element this period because three area offices couldn't provide the necessary documentation from their information systems. Ninety percent compliance was required for all three periods.

- **The Department conceded noncompliance with this element.**

- **The Department acknowledged it wasn't in compliance with this element.**

Items Related to Foster Care Services

V.A. [Needs Assessment/Plan for Services] The Department shall conduct a formal needs assessment of its statewide and regional needs for services for children in Department custody. SRS agrees to contract with one of the state universities or another appropriate entity to conduct this assessment. The contractee shall take into consideration any other data already compiled. The contractee shall identify strategies to assist area offices and communities in the development of resources. Following good-faith consideration and review of this assessment and of current and potential resources, SRS agrees to develop and implement a plan by which individual children in Department custody receive adequate services.

Needs Assessment

- The parties agreed the Department was in compliance with this requirement.

Access to Services

- **Factors prevented us from determining whether the Department was in compliance with this requirement.**

V.G.1 and V.G.2 [Parent/Child Visitation]

[1.] Specific plans for parent/child visitation, worker/child contact and worker/parent contact, including the time, frequency, location, duration, and supervision (if any) shall be part of the family service plans and case plans and shall provide for visitation or contact within the parameters of this section. The Department shall also develop in case plans or family services plans visitation plans for siblings if such visitation is appropriate.

[2.] For those children with a goal of reintegration and for whom unsupervised visitation is appropriate, in-person visitation with the parent(s) for whom reintegration is the plan shall be at least once per week. For those children with a goal of reintegration and for whom supervised visitation is appropriate, in-person visitation with the parent(s) for whom reintegration is the plan shall be at least twice per month. For those children with other planning goals, if SRS determines that in-person visitation remains appropriate, visitation shall be at least twice per month. *[Subsections (a) through (f) of this section list the specific requirements related to the time, frequency, location and duration of parent/child visitation plans.]*

- **The Department conceded noncompliance with this element.**

V.G.3 [Child/Sibling Visitation] SRS agrees to do the following:

[a.] Siblings are defined as children who share at least one parent or who have resided in the same household

- **The Department conceded noncompliance with this element.**

Settlement Element Requirement

Assessment of Compliance

and have formed an emotional bond.

[b.] The responsibility for arranging visitation with siblings residing with parent(s) rest with the parent(s) and should occur with the same frequency as provided for parent/child visitation under the plan unless joint visitation among the parent, child and siblings does not further the goal of reintegration.

[c.] Visitation between siblings in the custody of SRS shall occur at least quarterly unless there are valid social-work reasons for increasing or decreasing the frequency of visitation documented in the case record.

[d.] If an SRS employee has to travel more than two hours to effectuate the visit, the visitation plan shall identify the frequency, which shall be at least once each six months.

V.G.4 and V.G.6 [Worker/Parent Contacts]

[4.] Except as provided below, in-person worker/parent contact with those parent(s) with whom reintegration is the plan shall be monthly. Such contact may be with the child's worker or with a paraprofessional who is part of the child's case planning team. *[Subsections (a) and (b) of this section list the specific requirements relating to contact and frequency of worker/parent visitation plans.]*

[6.] If either the child or the parent with whom reintegration is the plan is located outside of Kansas but not located in the Kansas City Metropolitan Area, SRS shall not be obligated to comply with the relevant worker-child or worker-parent sections of this agreement. In such cases SRS agrees to communicate to the state in which the child or parent is located the required frequency of visitation and shall ask the state to comply with that frequency.

V.G.5 and V.G.6 [Worker/Child Contacts]

[5.] Except as provided below, in-person worker/child contact shall be at least once a month, and such contact may be with the child's worker or with a paraprofessional who is part of the child's case planning team. SRS agrees to designate the social worker or paraprofessional to be the primary contact. *[Subsections (a) through (c) of this section list the specific requirements relating to the time, frequency, location and duration of worker/child contacts.]*

[6.] If either the child or the parent with whom reintegration is the plan is located outside of Kansas but not located in the Kansas City Metropolitan Area, SRS

- The Department conceded noncompliance with this element.

- The Department conceded noncompliance with this element.

Settlement Element Requirement

Assessment of Compliance

shall not be obligated to comply with the relevant worker-child or worker-parent sections of this agreement. In such cases SRS agrees to communicate to the state in which the child or parent is located the required frequency of visitation and shall ask the state to comply with that frequency.

Items Related to Adoption

VI.D. [Consideration of Adoption after One Year of Placement] At the first administrative review that occurs after the one-year anniversary of the child's initial out-of-home placement, adoption will be considered. If adoption appears appropriate, the Department will consider whether relinquishment is appropriate, and, if so, shall thereafter discuss it with the parent(s). If another goal is selected, the worker will document in the record the basis for determining adoption is not appropriate or necessary to achieve permanency.

VI.E. [Information to Attorneys re: Termination of Parental Rights] Within 45 working days of the staffing at which SRS decides to seek termination of parental rights, SRS agrees to send all information necessary for a motion to terminate parental rights to the county/district attorney, unless the Department needs to collect additional information not under its control, in which case it shall have 60 working days to send the required information.

VI.F. [Request for Approved Families] Unless the foster parent(s) or other qualified person(s) have agreed to a plan of adoption, SRS agrees to send to central office all material necessary to receive approved families within 20 working days of receipt of the journal entry terminating parental rights, unless the Department needs to collect additional information not under its control, in which case it shall have 30 working days to send the required information.

VI.G. [Specialized Recruitment] If no approved family has indicated agreement to the adoption process by initiating pre-placement visits within 90 working days of the sending of the material to central office..., the Department shall refer the child to specialized adoption agencies and/or the national adoption resource directories and/or develop individualized recruitment plans. In those

- **The Department conceded noncompliance with this element.**

- **The Monitoring Unit concluded the Department wasn't in compliance with this element.** The Department achieved only 86% compliance with the first requirement, and 79% compliance with the second; 90% compliance was required for both.

- **The Monitoring Unit concluded the Department wasn't in compliance with this element.** The Department achieved only 87% compliance with the first requirement, and 71% compliance with the second; 90% compliance was required for both.

- The Monitoring Unit concluded the Department was in compliance with this element. The Department achieved 100% compliance with both requirements; 90% compliance was required.
- We concluded the Unit's assessment was reliable.
- The Department has demonstrated one year of continuous compliance with this element. Formal

Settlement Element Requirement

instances in which the pre-placement process disrupts, the Department shall have another 90 working days, unless the Department concludes for legitimate therapeutic reasons that referral is not in the child's best interest.

VI.H. [TPR Denial Staffing] Within 30 working days of receiving the journal entry denying the motion for termination of parental rights, the Department agrees to conduct a staffing to consider the plan for the child. The Department shall make diligent efforts to assure that it learns promptly of the filing of journal entries terminating parental rights.

VII.I. [Post Placement/Finalization] At the first administrative review following placement of the child in a prospective adoptive home and at each subsequent administrative review, the Department shall decide whether to approve for finalization of the adoption. The Department shall approve for finalization within eighteen months of placement, unless specific circumstances are documented in the case record. Within 30 working days from the date the adoptive placement is approved for finalization, SRS agrees that the Commissioner or the Commissioner's designee will consent to the adoption.

Items Related to Staffing

VIII.C. [Equitable Workload Distribution] Using the annual studies provided for by section VIII (B) and other appropriate sources, SRS agrees to regularly monitor worker caseloads and shall take appropriate steps to achieve an equitable distribution of cases amongst its social-work staff. SRS shall have total discretion to determine how to effect the equitable distribution provided for by this section.

Assessment of Compliance

monitoring of this element will stop.

Staffing

- The Monitoring Unit concluded the Department was in compliance with these requirements. The Department achieved 100% compliance with both requirements; 90% compliance was required.
- We concluded the Unit's assessment was reliable.
- The Department has demonstrated one year of continuous compliance with these requirements. Formal monitoring of these requirements will stop.

Filing of Journal Entries

- **The Department acknowledged it wasn't in compliance with this requirement.** The Monitoring Unit concluded the Department recorded termination hearings only 83% of the time and met its own promptness standard only 44% of the time this period. Last period compliance with these requirements was only 73% and 20%, respectively; 90% compliance was required for both periods.

- The Monitoring Unit concluded the Department was in compliance with this element. The Department achieved 98% compliance with the first requirement, 100% compliance with the second, and 95% compliance with the third; 90% compliance was required.
- We concluded the Unit's assessment was reliable.
- The Department has demonstrated one year of continuous compliance with this element. Formal monitoring of this element will stop.

- **Factors prevented us from determining whether the Department was in compliance with this element.**

Items Related to Training

IX.A.3. [Rural Interactive Training Network] The Department shall complete the development of a rural interactive training network and curriculum in conjunction with the Kansas State University or another qualified institution. This will enable staff in all parts of the state to participate in training without traveling great distances.

- The Department acknowledged it wasn't in compliance with this element.

IX.B.1. [MAPP Pre-Placement Training and MAPP Training Records] The Department shall not place any child in a foster or adoptive home unless the foster parent(s) have successfully completed MAPP Pre-Placement Training or have been granted a MAPP equivalency exception, or unless the child is being placed in a foster home pursuant to section 3120 or 3150 of Volume III of the Youth Services Manual or is being placed for adoption in a relative's home. The Department shall maintain an accurate and up-to-date information system by which it shall record whether foster or adoptive parents have completed the mandated MAPP training, have obtained a MAPP equivalency exception or are otherwise exempted from training pursuant to this section.

MAPP Pre-Placement Training

- The Department conceded noncompliance with this requirement.

MAPP Training Records

- The Department acknowledged it wasn't in compliance with this element.

IX.B.2. [Satellite Foster Home Training] The Department shall not permit the placement of any child in a satellite foster home unless the foster parent(s) have first completed a minimum of 6 hours of child welfare training and shall not permit the continued placement of children unless the foster parent(s) have completed an additional 10 hours of such training within six months of a child being placed in the home. Any foster parent who has completed the MAPP Pre-Placement Training will be deemed to have satisfied this requirement.

- The Department conceded noncompliance with this element.

IX.B.4. [Annual Child Welfare Training for Foster Parents] All foster parents shall be required to complete a minimum number of 16 hours of annual child welfare training. Upon development of the competency-based training program for foster parents, the Department may modify the content of this training or may increase the minimum number of hours required.

- The Department acknowledged it wasn't in compliance with this element.

Settlement Element Requirement

Assessment of Compliance

IX.B.5. [Foster Parent Training Records] The Department shall implement and maintain an accurate and up-to-date standardized system for recording the annual training provided to all SRS foster parents.

- The Department acknowledged it wasn't in compliance with this element.

Items Related to Information System

X.B. [FAME] Pending implementation of the information system provided for by section X (A), [KSSIS], the Department shall implement and maintain the Family Agenda Monitoring Elements [FAME] system in each area office. That system shall accurately measure whether a family-based assessment occurred prior to custody; general services provided in specific cases; duration of services, custody, and placement; case-specific outcomes; and children's individual placement histories.

- The Department acknowledged it wasn't in compliance with this element. The Monitoring Unit concluded the Department achieved only 75% compliance; 90% compliance was required.

Items Related to Monitoring

XII.D. [Internal Quality Assurance System] Should the parties agree that the monitor will not engage in full, direct monitoring but instead will monitor indirectly, (for instance, through verification audits of Department documents, reports, or other information), the Department shall implement and maintain an internal quality assurance system that collects and analyzes data concerning compliance with sufficient comprehensiveness, frequency, and accuracy to permit reliable conclusions to be drawn concerning compliance with provisions of this agreement that impose obligations upon the Department...

- We concluded the Department was in compliance with this element.

APPENDIX B

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 its 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)

revised 4/1/97

• 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 C

Agency Responses

On December 4, 1997, 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. While we didn't make all the changes the parties 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.

In its response, the Department asked that the Legislative Post Audit Committee delay release of this report until such time as actual monitoring of the case review requirements are resumed. The Chairman of the Committee decided to release the report as scheduled, for the reasons outlined below.

First, the Department expressed concerns about the potential for public confusion or misunderstanding if the report didn't include specific information on the activities where the Department has demonstrated compliance, or on the Department's work with the Task Force. To help alleviate those concerns, additional information was included in the final report about the requirements Department staff have complied with, and about the role and work of the Task Force.

Second, the Department noted that the Task Force and the parties had agreed that the 51 requirements related to Case Reviews 1 and 2 weren't scheduled for compliance monitoring during this 7th monitoring period. As a result, the Department suggested, the report should discuss only those requirements that were formally reviewed, which would raise the Department's overall compliance percentages from 15% to 41%.

Although the parties did agree that these requirements didn't need compliance monitoring this period (or for periods #6 and #8), the reason was that the Department had conceded noncompliance with these requirements, not that those requirements were no longer in effect or that the compliance dates had been suspended. Our monitoring reports have always covered all the requirements the Department had to comply with for the period being reported on—regardless of whether those requirements needed to be formally monitored to determine if the Department had complied with them. Because these requirements still were in place, and in accordance with a written agreement by the parties dated March 25, 1997, they needed to be reported on. The Department's compliance percentages shown in our report are accurate.

Finally, the Department asked us to remove the anecdotal examples we used to illustrate bona fide reports of abuse or neglect that Department staff screened out. The examples we provide in this report—which are typical of those we found during our reviews—show that those problems ranged from apparent misunderstandings

about how to handle reports of abuse or neglect when custody disputes are involved, to missing documentation to support staff workers' actions. We think giving people "real-life" examples helps foster a better understanding of the types of situations Department staff are faced with, and can help promote improvement rather than work against it.

Children's Rights, Inc., had comments regarding the Department's policy for investigating reported abuse and neglect by non-caregivers. In our report, we stated that the Department wasn't required to investigate an allegation of abuse if the perpetrator wasn't a caregiver. Children's Rights asserted it wasn't aware of any current law or administrative regulation that limited the Department's investigation responsibilities only to caregivers. Monitoring period #7 covers actions the Department was required to take from January to June 1997. As of January 1, 1997, Kansas Administrative Regulation 30-46-10 defined abuse as "an act or failure to act by a person responsible for the care of a child." That same regulation also lists the individuals who are considered "responsible for the care of a child." Because this regulation was in effect during this monitoring period, no change is needed in the report.

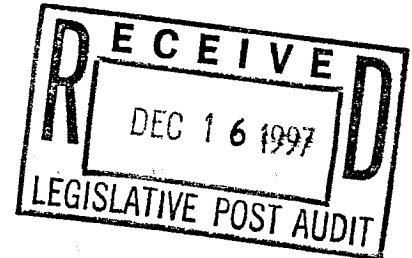


KANSAS DEPARTMENT OF SOCIAL
AND REHABILITATION SERVICES

915 SW HARRISON STREET, TOPEKA, KANSAS 66612

ROCHELLE CHRONISTER, SECRETARY

CHILDREN AND FAMILY SERVICES
WEST HALL 300 SW OAKLEY
TOPEKA, KS 66606
PHONE: (785) 296-2023
FAX: (785) 296-4849
December 16, 1997



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 #7, covering the period of January-June 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.

We are pleased with the work being done with the Task Force established by Judge Buchele. The reasonable, balanced and objective approach taken by the Task Force has allowed the Department to increase the efficiency of the work of the Department while maintaining high quality services for children and families of Kansas.

Unfortunately, release of this report, without specific information on the activities where the Department has demonstrated compliance as well as work done by the Task Force, may result in public confusion or misunderstanding. For example, with the agreement of the Task Force and the parties sixty-two percent of the requirements (51) which relate to Case Read 1 and Case Read 2, were not scheduled for compliance monitoring during this period although they were reported on. If one were to look at only those requirements which were scheduled for review, the report would reflect that the Department was in compliance with 12 of 29 requirements during this period, which is 41% rather than the 15% reported. We therefore request that the Legislative Post Audit Committee delay the release of this report until such time as actual monitoring of the activities are reviewed.

We also request the removal of the atypical anecdotal examples used to illustrate noncompliance with Documentation Project 1, the use of which are the antithesis of being able to appreciate the larger issue of continued improvement being made on this project.

Thank you for the opportunity to review this draft report. I'm sure you share our satisfaction with the work of the Task Force, especially as it will allow a more streamlined approach in monitoring the Settlement Agreement. We look forward to Audit Report #9 that will cover the period of January-June 1998 when monitoring resumes of the case review activities.

Sincerely,

Rochelle Chronister

Rochelle Chronister
Secretary

Page 5, Is the Department Complying With the Requirements in the Settlement Agreement?: In the second bullet, the last sentence states in part, "...and the handling of children in SRS custody". The Department requests the words "handling of" be replaced with "case planning activities for".

Page 7-16, Summary of Findings for Monitoring Period #7: As this section is a summary of findings for the monitoring period reviewed, a detailed summary of findings where the Department demonstrated compliance are not included. As all of the requirements agreed to in the Settlement Agreement are expected to benefit children and families, information where the Department has demonstrated compliance should be in as specific detail as those in noncompliance.

Page 8, Requirements Related to Investigating the Safety and Status...: The last bullet details the three criteria for an SRS request of Ex Parte Order of Custody or Law Enforcement Protective Custody agreed to in the Settlement. The last criteria is preceded by "or". This should be "and" as all three criteria must be present before SRS makes the request.

Page 9, Screen Out Examples: As specific examples of noncompliance are not part of any other discussion of compliance, we request the examples of screen outs be removed from this section in the final report.

Page 10, Family Agenda Policy Manual: 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 11, Compliance with Requirements Related to the Adoption Process: As all activities related to the Adoption Process are expected to benefit children and families, the Department requests detailed information be provided on the seven (7) requirements found in compliance. Without this information, the reader will not have a clear understanding as to the activities agreed to and monitored around the adoption process.

Page 12, 1st bullet, 2nd paragraph: This paragraph includes the statement that "Children's Rights didn't agree to a new monitoring date". The Agreed Procedure in Connection with Findings of Noncompliance does not require Children's Rights to concur with the plan to remedy noncompliance when the Department concurs with a noncompliance finding by IQAMU. The Department requests reference to this Documentation Project be removed from the final report.

Page 19, #28-30: The draft report indicates the assessments for preventive services, placement needs and service needs for children in custody are in compliance. It was the Department's understanding that as the parties agreed these assessments were due in October 1997, these assessments would not be reviewed until the monitoring report that covers the period of July-December 1997.

If it is determined to report these compliance findings in this report, the Department requests that specific detailed information be provided in the narrative that discusses the progress made and the conclusion of the compliance with these elements. As past reports have discussed the controversy around these assessments and the parties progress toward resolution, without a discussion around compliance a reader may not be able to ascertain the impact of these findings.

Page 25, II.A., Page 29, IV.B., Page 31, V.A.: See above comments related to compliance findings for the needs assessments.

Page 30, IV.C., Page 31, V.B.: The assessment of compliance states that as a result of "testwork" conducted by Legislative Post Audit, the Department was found in noncompliance. The Department questions the use of the word "testwork". No documentation was submitted for this compliance finding and no review was conducted by the Internal Quality Assurance Monitoring Unit as the Department had a verbal agreement with Children's Rights this would not be monitored at this time. By using the word "testwork", a reader may conclude testwork was actually done by Legislative Post Audit when no such activities were performed.

Page 33, IV.F.: The assessment of compliance should only state "The Department conceded noncompliance with this element".



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

December 17, 1997

By Federal Express

Barbara Hinton
Executive Director
Legislative Division of Post Audit
800 SW Jackson, Suite 1200
Topeka, KS 66612
Fax (913) 296-4482

Re: **Comments on "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 #7"**

Dear Ms. Hinton:

On behalf of Ms. Rene M. Netherton and myself, I write to clarify and comment upon Legislative Post Audit's 7th monitoring report, as follows:

1. **Clarification of Plaintiff representation, page 4.** Ms. Rene Netherton is the Topeka attorney who filed the case and who was joined in the case by the ACLU. Ms. Netherton remains on the case and Children's Rights, Inc. represents the plaintiff class with Ms. Netherton.
2. **Investigation of abuse allegations by non-care givers, page 9, chart: allegation 3.** Plaintiffs are not aware of any statute or administrative regulation now in effect which limits SRS' investigational responsibilities in abuse allegations to acts only by the child's "care givers." Indeed, the Attorney General rescinded such an administrative regulation at the urging of CASA and law enforcement. The rescinded regulation may have been in effect at the time of the case reading.

Thank you for the opportunity to comment.

Very truly yours,

Carol A. Marcus,
Attorney for Plaintiffs

