

**Foster Parent 1624 Statewide Consultation Team  
Video-Conference Meeting  
MINUTES April 21, 2014**

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
<p><b>Welcome: Bernice Morehead</b> Attendance: Regional sites will send attendance sheets to Meri. Olympia participants: Jennifer Strus, Debbie Lynn, Molly Herzog, Peggy Hays, Ruben Reeves, Arthur Fernandez, Mike Canfield, Beth Canfield, Bernice Morehead, Meri Waterhouse, Darcey Hancock. Jeff Kincaid Kerry Bryant, Melissa McDougal, Amber Sherman, Nicole Labelle, Shannon Boniface, Ryan Mendoza, Reg. 1 South: Maria Tovar, Monica, Jan Hinkle, Ken Nichols, Reg. 2 North: Kathy Ramsay, Shala, Sheri Rego, Marie Fuji, Sandy Kinney Reg. 2 South: Yolanda Marzest, Joyce Thomas, Diane Kidner, El-Freda Stevenson, Reg. 3 North – John March, Hermenia Jackson, Joel Odimba Phone: Amy Gardner</p>				
<p><b>Old Business: Work Group Reports / Follow Up</b></p>				
<p><b>Parenting Plus Mandatory Training –FP impacts in child care &amp; transportation costs discussion with CA Leadership Team</b> Workgroup has met twice and includes: UW Alliance training &amp; fiscal staff, CA fiscal, Program and DLR representation. Goal is to implement recommendations in July. <b>Question:</b> <i>Adoptive families can receive one training a year per their Adopt. Support Agreement. Could AS \$ be used for FPs, or are they dedicated funds to AS?</i> <b>Comment:</b> <i>have heard those funds in AS were suspended?</i> <b>Notes:</b></p> <ul style="list-style-type: none"> <li>• Alliance Training: is open for FPs and adoptive parents can access any Alliance training as well.</li> <li>• The once-a-year training specified in the Adoption Support Agreements isn't an automatic approval– Adoptive Parents (APs) need to access training through the Alliance now. CA recognizes some family circumstances are unique – and if APs need specific training – submit request for the specific training to their AS worker. The request will go through Melanie to review the training request.</li> </ul> <p>Beth indicated somewhere there is a statement that training transportation is</p>		<p><b>Beth Canfield –</b> send info to Meri that states training transportation is covered.</p> <p>Meri – Schedule next mileage/child care workgroup meeting.</p>		

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
covered?				
<p><b>Utilization of DDA providers – can they provide respite care in their own home could the approval process be shortened to assist with respite care?</b>            DDA - Are they qualified to serve as respite providers for foster parents?            Respite under DDA is different – they have contracts through health care agencies, SEIU union workers and paid on a very different scale, hours are limited in how long they can provide respite rates \$10 – \$25.00 per hour. This is not equitable with CA rates. Not likely the DDA providers will agree to what CA pays. Other items like background check are the same. The pay issue isn't the same. Respite has daily and hourly rate in FamLink, so there is some flexibility in the rate – Reg. 3 North indicates they have had to pay daily and hourly rates in order to obtain respite for high level kids.            DDA could provide respite for CA foster parents, if they are willing to accept CA's rates outside of their DDA contract.</p>	Talk with DLR Management team on messaging information to the regions that DDA providers can choose to provide respite (if they will accept the CA rates)	<b>Darcey - May</b>		
<p><b>Review original 1624 legislation to identify system collaboration; identifying what responsibility CA and foster parents have.</b>            a. Better ways to facilitate the meetings to keep them on track            b. Better representation by CA management at the state level and regional meetings            c. Focus on FP reps issues            Jennifer has directed CA leadership to attend. Leadership is represented at this meeting and at the regional meetings.            Kerry commented on initial 1624 meeting with the regional reps speaking. Regional agenda items should be brought to the Agenda Building Meeting, this ensures they are understood and CA is able to seek information and have staff needed to respond to topics brought forward.</p>	Regional reps should read /present their topic at state meeting	Molly Herzog has agreed to co-facilitate the meeting with Bernice Morehead		Completed
<p><b>The Affordable Care Act and foster children having medical coverage. FPs are concerned about foster children not being covered under the ACA.</b>            This will be reported in the May Caregiver Connection</p>		Meri – article to appear in Caregiver Connection		May edition - Completed
<p><b>DDA clarification</b> (HCS/DDA/CA Memo of Understanding is a resource - look at attachment E) This is the Medicaid Personal Care guidelines on how these</p>	Share info at agenda building conference	Michelle Bogart		

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
agencies agree to care for kids.  <b>Report out with info from Michelle Bogart on update for training</b>	call			
<b>Visitation: There needs to be a way for foster parents to get a report of how the visit went?</b>  <i>Visitation items were all combined for discussion when Carrie Kendig can participate in meeting (See Reg. 1 North - Topic 1 below)</i>				
<b>The long wait for intake. Reports of up to 45 minutes just to make a referral continue</b> Joel updated information - Region is reviewing and is a long term fix; it will be managed under DRA – Debbie Lynn and is a priority assignment. 1 <sup>st</sup> meeting shared with info. Making progress – larger issue around resources, managing issues and collecting data, Debbie will look at management issue that can help reduce the pressure points. Illness, vacancies and retirements have put pressure on response time frames. Wait time is less in morning – peak is in afternoon. Could referrals be emailed to intake staff? Joel – they can email intakes and coordinates with law enforcement to help manage the referrals. If the referral isn't urgent (needs to be reported, but it isn't a crisis – could they be sent via email?	<ul style="list-style-type: none"> <li>FPs urged to call in morning whenever possible.</li> <li>Follow up on question about sending referrals via email if not emergent</li> </ul>	Joel to follow up on issue of emailing concerns.		July
<b>Regional Administration Participation - Randy will review regional supports at 1624 meetings.</b> Randy to review original intent of 1624 Team. Regional leadership is to attend meetings based on legislation and amended charter. Lack of foster parent attendance was also an issue – Reg. 3 South working on encouraging foster parents to attend. 10 FPs attended last regional meeting. Placement coordinators have helped encourage foster parents to attend. Knowing they can call in is helpful. Who is responsible for getting info out to the caregivers about the regional meetings?	Tabled until debriefing meeting with Randy H.	Randy will report back in May		
<b>Support for foster-adoptive parents related to developmental, behavioral,</b>	1624 foster parent	<b>Molly Herzog</b>	Pending –	

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
<p><b>mental health problems that arise after the adoption. Refer issue to Melanie Meyer for discussion, workgroup and reporting back. Have work group begin to identify how other states are responding in this area.</b></p> <p>Melanie – Adoption Support (AS) provides medical/dental, monthly cash payment, nonrecurring costs, counseling payments and some work limited to families in crisis. If adoptive family (AF) requires referral for services, make sure CA intake staff is made aware the child is adopted. AS staff is available for FTDMs/staffings; please share info at meeting this is AS case.</p> <p>Concern brought to 1624 related to failing adoptions and child had extreme acting out behavior. AF felt they were not supported &amp; treated badly when CA was contacted for help. AF may have called CA seeking another placement in trying to keep child safe. Unsure if call came through AS or Intake.</p> <p>AS recently completed performance audit – National Resource Center will work with CA to develop an AF friendly website and help adoptive parents access mental health services and Regional Support Networks. Forms will be available on-line. CA needs a AF friendly website and will have a stand-alone page.</p> <p><i>Suggestion:</i> AS respond in a more family friendly manner when AF calls. AFs view AS responses as combative/negative. Encourage AS staff to help AF feel they are on same team.</p> <p>Legislative cutbacks set maximum AS cash payment of <b>up to 80 %</b> of FC rate child receives at time of AS negotiation. Some AFs report the child’s FC rate is lowered shortly before AS negotiation happens. AS requests itemization from AF and only considers extra-ordinary expenses of child - the tone of negotiation is negative to AF.</p> <p>AS is holding monthly meetings to build consistency. AS staff turn-over has been significant. Supervisor focusing on customer service with AFs and would welcome a 1624 Rep. to participate in AS training. AS program and negotiation process was centralized at direction of legislature.</p>	<p>will be notified of training and participate in the Adoption Support training.</p>		<p>based on schedule for training</p>	

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
<p><b>Reg. 1 North - Topic 1: Visitation providers and contractual issues on what the contractor can tell caregivers related to the visit – did it go well, or were there any issues?</b></p> <p>Carrie Kendig, CFWS Program Manager shared information on modifications planned to visitation contracts that will improve information shared back to caregivers. Training has been created for contract providers that is required before providing a visit service. It covers what information needs to be given to the caregiver about the visits. These changes will provide greater support to caregivers in receiving basic feedback on the visits.</p>				
<p><b>Reg. 1 North - Topic 2: concerns regarding the process by which feedback is being solicited for the draft and final version of the 'visitation handbook'</b></p> <p>Notes: Material distributed to 1624 team was only initial rough draft to develop a document on visitation. It was marked specifically as a “<i>draft-do not distribute</i>” and was only intended to gather comment and feedback from the 1624 members. Sending this material out to other FPs will only create greater confusion. This material was not a finished product. FPAWS acknowledged 1624 representatives have earlier asked CA to include a FP when developing policy that impacts FPs, and not just receive completed policy without input. This material was an early draft and was responsive to their requests but they really didn’t know what to do with it. CA will not be able to devote much time to this document now before July due to legislative policy work that has higher priority.</p>	<p>Include FP in visitation material development – beginning after July policy roll out.</p>			
<p><b>Reg. 1 South - Topic 1: Please provide reminder to Supervisors and Social Workers about the need to respond timely to caregivers calls/emails/contacts.</b></p> <p>Jennifer has discussed issue of responding to caregivers with CA Leadership Team. It is important everyone CA works with needs to be treated with care and respect.</p> <p><i>Questions: Where does communication break down? What is the feedback from workers? A: Timely response to FPs continues to be an ongoing issue</i></p>	<p>All supervisors’ conference is set for summer 2014 and relationships with FPs is a topic to be addressed.</p>	<p>Jennifer’s designee</p>	<p>After supervisor’s conference</p>	

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
<p>and Regions continue to work on it.  <i>Suggestion: Train foster parents to use the subject line on their email to help their messages stand out (i.e. Question - Info only - Urgent – HELP!).</i>            FPs are being trained to use chain of command. SWkrs may be concerned about long phone conversations with FP that they can't help with. If disagreement exists with a SWkr, FPs may not get a call back. Sometimes FPs just need to talk and process.            Reg. 3: All-staff email supports returning calls and teaming with foster parents. Peggy Hays is sharing info to regional management team to make sure they hear first-hand what the issues are from caregivers. Joel expects response from staff at all levels.            FPs with high-needs children have behaviors that escalate that are taxing on FPs. SWkrs need to be responsive to talk with caregiver and discuss resources and next steps to meet needs of child. When child explodes at 10 p.m. there is no one to access. It is helpful to FP to have at least one worker at the office that could respond to a return call or text message.</p>				
<p><b>Reg. 1 South - Topic 2: No other items this quarter</b></p>				
<p><b>Reg. 2 North - Topic 1: Foster parents have asked for training hours for attending networking or round table support groups. These types of groups discuss resources, supports in their area and make respite connections.</b>            Darcey: Only Region 2 North gave credit for support groups - other regions were not. Support Groups/Hubs hold a 1 hr. training with balance of meeting being support group. Agendas for training were approved in advance. Curriculum work group has discussed issue; recommendation was to not include the support group component for training credit. The hour of specified training approved by licenser is approved for 1 hour of training credit. FP training now identifies specific competency areas under the training curriculum for FPs. FPs have opportunity to identify training based on the identified competencies.  <i>Question: When will this info on training changes and competencies be released?</i> Parenting Plus is still offered, but is no longer a mandatory training requirement. The new Caregiver Core Training (CCT) began April 1<sup>st</sup>. CPAs are</p>	<p>Updated information about training needs to be shared with FPs</p>	<p><i>No designation Alliance?</i></p>		

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
being trained in May to provide CCT. FPs still believe they must complete the Parenting Plus curriculum. The change hasn't been well messaged to FPs.				
<p><b>Reg. 2 North - Topic 2: We are losing many foster parents right after taking their first placement. Children coming into care more often than not come with behaviors new foster parents have a difficult time managing and it is such a bad experience for them they are done before the end of the weekend. It was asked that when newly licensed foster homes receive their first placement if the R &amp; R Liaisons could be notified so they can check in with the family and help them through their first placement. Placement staff said it was confidential information and they cannot share placement information. Is there any way to support these new families so they stay fostering and have the information shared between placement and the retention contract liaisons?</b></p> <p>Placement Desk staff participated in a conference call to review supports for new foster parents with first placements. Olive Crest staff will begin receiving contact information for existing and prospective foster parents (unless they request to opt-out of sharing their information). Placement desk staff are supportive of this request and with direction will include the Olive Crest Regional Coordinator and the local liaison on an email regarding the placement of children with a newly licensed family. Names of the children will not be included to protect children's privacy. This information will go up to CA management for a decision.</p>	Forward request up CA chain for decision to allow this effort to support new foster parents with first time placements.	Meri – forward request by debriefing meeting.		Request has been forwarded.
Reg. 2 South - Topic 1: No agenda items this quarter – all have been resolved at the regional level	CONGRATS			
Reg. 2 South - Topic 2: No agenda items this quarter – all have been resolved at the regional level	CONGRATS			
Reg. 3 North - Topic 1: No agenda items this quarter – all resolved at the local level and foster parents have not reported any concerns about fear of retaliation	CONGRATS			
Reg. 3 North - Topic 2: No agenda items this quarter – all resolved at the local level and foster parents have not reported any concerns about fear of	CONGRATS			

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
retaliation				
<p><b>Reg. 3 South - Topic 1:</b> Foster parents are frequently unable to obtain medication management and prescription services for children who are not also receiving counseling services. This is a significant service gap which needs to be addressed. While primary care physicians are sometimes willing to continue established prescriptions for some medications, many are reluctant to do so, particularly when the prescriptions are for psychotropic and/or combined medication regimens typically prescribed and monitored by a specialist in pediatric psychiatry, or when the doses/regimen needs adjustment. This is an issue for foster and adoptive parents alike. The Fostering Well Being Unit was suggested as a possible resource for foster parents facing this issue, and this problem needs to be brought to their attention. Foster parents who have been struggling with this for years are doubtful that there is a current solution however, and therefore feel it should be discussed by the Statewide 1624 Committee.</p> <p><i>Mark Nelson</i> from DBHR attended meeting and shared info on children receiving psychotropic meds and managing care/counseling together. He will provide further information to team.</p>				
<p><b>Reg. 3 South - Topic 2: Foster parents report they are requesting support through in-home services for very difficult children and they are not getting the services, or they are simply denied. Often this can result in youth being moved into BRS services, requiring an additional move, when they could have possibly stabilized in the original home, if the proper services had been authorized. These services are especially void for the first 30-60 days of placement, and for children who are sexually acting out, or autistic, it can be devastating.</b></p> <p>Tim Kelly, CA Program Manager: In-home services are developed and implemented to serve families dealing with abuse/neglect issues to prevent a child from entering out of home care. Though a newly placed child may have very difficult behaviors, this program is not intended to serve FPs as there is no abuse/neglect in the foster home. The appropriate service referral is to the</p>	Request Olive Crest to re-share info across regions to ensure swkrs are knowledgeable about services available to FPs.	Meri – make request to Olive Crest.		

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
<p>Foster Parent Critical Support and Retention Program operated by Olive Crest. This offers services to FPs for children who are sexually aggressive, physically assaultive, or who have other high risk behaviors. Referral is made by the child's swkr. Olive Crest has made significant efforts to share info about this program across all regions. Swkr makes referral, but often doesn't tell family they've been referred and FPs turn down services. Turn-over in swkrs also limits info about program.</p>				
<p><b>FPAWS Topic 1:</b> No agenda items this quarter</p>				
<p><b>FPAWS Topic 2:</b> No agenda items this quarter</p>				
<p><b>Children's Topic 1: Prudent Parenting (Jennifer Strus)</b>  <b>Legislature passes Senate Bill 6497</b>  <b>Licensed foster parents and unlicensed relative caregivers with children placed in their care will have greater authority to allow these children to participate in normal childhood activities based on a reasonable and prudent parent standard. Senate Bill 6497 was based on a recommendation from foster youth at the 2013 Foster Youth Alumni Summit, where current and former foster youth indicated their experience as a foster youth would have been much more normal if their caregivers had been allowed to decide what activities they may participate in, rather than waiting for their social worker to approve the activity. Other states, such as California and Florida, have adopted similar standards.</b>  <b>Senate Bill 6479 was passed by Washington's 2014 Legislature and signed into law by Governor Jay Inslee on March 27.</b>  <b>Children's Administration is developing the policy and procedures that will guide Children's staff in implementing this new law. Watch for more information about the development of the Prudent Parenting policy in the next Caregiver Connection.</b></p> <p>Jennifer: Many people favored this legislation and it takes effect June 12, CA is now developing policy; <b>it applies only to dependent youth.</b> Brought forward by youth in Mockingbird's program. Historical problems waiting for swkrs to sign permission for normal activities. CA supported with liability protection for</p>	<p>Send info about Prudent Parenting out to CA staff; continue info as policy is developed</p>	<p>Meri</p>		<p>Completed – April 23rd</p>

AGENDA TOPICS	TEAM DECISION	ASSIGNMENTS (lead &/or workgroup members/due date)	REPORT TO TEAM	COMPLETE DATE
<p>DSHS and caregivers. Caregivers act as decision makers to allow normal activities, and school activities or other things typically requiring parent's approval. Early version contained language about abiding by the parent's wishes; CA didn't agree with that requirement. FPs needed to be able to approve normal activities for kids.</p> <p>Law is now being messaged broadly to caregivers. Info will continue monthly as policy development takes place.</p> <p><b>Suggestion:</b> recommended overview and info about legislation should be shared with swkrs with same level of messaging as quickly as possible.</p> <p><i>Question: Is over-night camp a normal activity?</i></p>				
<p><b>Children's Topic 2: 6<sup>th</sup> Annual We Are Family Event with Seattle Mariners – Sunday, April 27<sup>th</sup>. Over 1,000 tickets already sold; tickets still available. Morning recognition ceremony begins at 10:00 a.m.</b></p>			Over 1300 attended	Completed 4/27/14
<p><b>Debriefing Conference Call: Monday, May 19, 9:00 – 10:00 a.m. Call in Line: 605-477-3000 Participant Code: 186895#</b></p>				
<p><b>Agenda Building Conference Call: Monday June 23, 2014 9:00 – 10:00 a.m. Call in Line: 605-477-3000 Participant Code: 186895#</b></p>				

**Future Regional 1624 Meetings:**

Regional Offices	Meeting Date / Time Location	Meeting Date / Time Location	Meeting Date / Time Location
Region 1N. - Spokane	Tuesday May 20, 2014	Need September Date	Need December Date
Region 1 S. - Yakima	Need June Date	Need September Date	Need December Date
Region 2 N. - Everett	June 9, 2014	September 8, 2014	December 8, 2014
Region 2 S. - Seattle	June 12, 2014	September 11, 2014	December 11, 2014
Region 3 N. - Tacoma	June 9, 2014 10 – 12 p.m.	Sept. 8, 2014 10-12 p.m.	December 8, 2014
Region 3 S. - Tumwater	June 10, 10-12 p.m. Vancouver	September 9, 10-12 p.m. Kelso	December 9, 10-12 p.m. Centralia