

**Hennepin County Child Protection Citizen Review Panel (CRP)
2019 Annual Report**

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I. MISSION STATEMENT

Our panel's mission continues to be:

As citizen volunteers we collaborate to understand, communicate and recommend improvements to the child protection systems and engage our communities to ensure the safety and well-being of all our children and families.

II. PANEL COMMITTEES AND PROJECTS

In 2018 the panel conducted three projects, as well as devoting effort to learning more about the child welfare system and recruiting new panel members. Our three projects for this year included:

- Workforce Retention and Secondary Trauma (year two of a three-year project)
- How and How Effectively is Kinship Care Being Used in Hennepin County? (year two of a two-year project)
- Complex Cases in Hennepin County (year one of a two-year project)

III. OVERARCHING THEMES AND RECOMMENDATIONS

In our report last year, we addressed five themes that were common across our projects and in our work with the Citizen Review Panel (CRP). Two of those themes are again prominent this year, and for that reason, we are repeating our concerns.

We remain concerned that too often Hennepin County social workers lack awareness of the roles and functions of external agencies that they either work with or should be working with to help serve child protection clients. Part of this is due to the large caseload size which limits a worker's ability to seek out and learn about community resources. Training for new staff also may not adequately stress the importance of developing and maintaining community relationships. **We would encourage Hennepin County to emphasize the importance of working with community partners during the induction process and also invite staff from outside agencies to present to Hennepin County staff on an ongoing basis.**

The Citizen Review Panel continues to struggle with recruiting new members and it has been especially difficult to recruit people from diverse cultures and backgrounds. Last year was particularly challenging as the required background checks deterred some prospective applicants and other applicants dropped out due to the lengthy time it took to process the background checks. Hennepin County did agree to eliminate some of the background check forms and the application process seemed to go more smoothly. However, even with that, we have had difficulty attracting new members. **We will continue to look for help from Hennepin County**

Children and Family Services and also will be connecting with nonprofit agencies to try to increase panel membership. Recruitment efforts are especially critical now as five of our panel members will be leaving the panel at the end of 2019 due to term limits.

IV. PROJECT REPORT: WORKFORCE RETENTION AND SECONDARY TRAUMA

IV.A. PURPOSE OF PROJECT

The purpose of the study is to examine **how the Induction process impacts the retention and satisfaction of the new employees, including how the County addresses the risk of secondary trauma.** This report represents the 2nd year of a 3-year project. Induction is the training program for newly hired child protection workers, who are ultimately assigned to units for Investigation, Field Work, or Indian Child Welfare Act (ICWA). The overarching objective of this project is **to explore how the Induction process supports staff retention, which in turn provides better services to families and children involved in the child protection system.** This report offers recommendations for development and maintenance of an effective system of orientation, in order to enhance professional performance and retention of staff.

IV.B. METHODOLOGY

In 2018 the following methods were employed:

- Surveying current child protection social workers (41 new employees participated in Induction training and were surveyed; 25 responses were received)
- Participating on panels interviewing applicants for open positions
- Collaborating with Sabrina Jones, Child Protection Induction Unit Supervisor (She provided us with contact information in order to survey Inductees)
- Reviewing collaborative sources of information

The responses in this current study are not significantly different from the study involving Induction training in 2017.

IV.C. KEY FINDINGS AND THEMES OF SURVEY

i. Effectiveness of Induction Training

Few inductees viewed their experience with Induction training as a positive experience. The majority described a process that was disjointed and disorganized, had no framework, was vague, ill prepared, and with a confusing order of topics and content.

The content was perceived as not being reality based, with trainers who were not engaged or thoughtful. Specific comments among participants include:

- “organizational mess;”
- “waste of Hennepin County time and money;”
- “defeated the goal of improved staff retention.”

Many inductees surveyed were frustrated by the inconsistent schedule and poor communication around cancelling and moving location of sessions, and “lots of waiting.” (This was also emphasized by workers surveyed in last year’s report). One person felt the group was not treated as professionals, with any prior experience discredited. Off-site components of the training were met with a “vibe of distrust.”

Responses regarding how trainees experienced the qualifications, support, empathy, and supervision during Induction showed a pervasive split between perceptions about the trainers vs. the designated supervisor. Individual trainers received positive ratings by the respondents; the supervisor did not.

When asked about expressing their thoughts, only a few responses indicated this as a positive aspect of Induction. More than half felt pressure to “keep our opinions to ourselves.” Responses included comments about intimidation, fear-centered approach, threats of firing and feeling belittled. There was discomfort when the trainers talked about other workers in front of the group. One person reported that his/her evaluation following Induction rated “asking questions” as a negative. Other individuals who felt comfortable with expressing concerns and opinions realized others did not. There was the sense that what was said was not taken into consideration by the trainers.

The primary goal of Induction is to prepare newly hired child protection social workers for the job for which they have been chosen. Less than half of the Inductees surveyed believe this goal was attained. They found it difficult to retain all of the information disseminated, yet felt the content “barely scratched the surface.” The need for more hands-on preparation, experience with day-to-day tasks, shadowing and working cases during the Induction process was reported. Elements identified as lacking in preparation for assignment to a unit included not enough discussion about racism, and “meeting people where they are.”

ii. *De-centralized Office Model (flexible workspace/regionalization)*

For the most part, a large majority of respondents view the open workspace concept positively. They appreciate the flexibility it affords. Negative aspects of this concept were noted:

- difficulty building relationships
- feeling disconnected/not part of a team/no cohesion
- challenging to access supervision when needed
- distractions from close quarters

- not enough quiet spaces, lockers, or IT support

Regarding teaming in general, one respondent who is assigned to ICWA feels isolation and hostility from the non-Native workers. The person perceived the non-Native workers “hate the Tribes.”

iii. Secondary Trauma and Burnout

Approximately half of the respondents stated that Induction provided adequate training on secondary trauma and burnout for workers. Some inductees expressed confusion when given conflicting information regarding how to handle this difficult aspect of working in a high-stress profession. One person felt they were not given adequate time as a group to debrief a video used in the training, which resulted in strong reactions and emotions. Others believed the underlying message among trainers was “this is how it is” without constructive coping mechanisms being introduced.

(Secondary Trauma is due to exposure to traumatic experiences, with accompanying symptoms similar to Post Traumatic Stress Disorder [PTSD]. Burnout is defined as a reduction in work satisfaction, and emotional exhaustion in response to exposure to traumatic experiences [National Child Traumatic Stress Network, 2011]).

iv. Retention

Most respondents indicate their intention is to stay with Hennepin County Child Protection for several years, up to and including retirement. However, in the current survey, 20% of respondents stated that they have sought other employment opportunities in the last six months. Ongoing efforts by the county to increase workforce retention seem to have been yielding some success. Jody Wentland, Hennepin County Human Services Director, reported that the county had an 11% turnover in 2015. In June 2018, that turnover rate for all staff in child welfare had dropped to 7.5%. However, for newly hired child protection social workers going through Induction training in 2018, 13% are no longer employed, through either voluntary or involuntary termination.

v. Inductee Improvement Recommendations

Respondents were asked to contribute ideas for improving the Induction process. Many suggestions for improvement are within control of the county administration. Suggestions were as follows:

1. Listen to what the inductees say does/doesn't work
2. Create two levels of Induction, dividing trainee social workers having prior child protection experience from those with limited to no experience

3. Allow inductees to choose their assigned unit based on preference and strength, whenever possible
4. Provide more training on children with complex trauma
5. Provide better information regarding the Hennepin county child welfare culture
6. Acknowledge stress related to deadlines, paperwork, and caseload size
7. Address micro-aggressions in the workplace
8. Accept feedback regarding nonresponsive, non-supportive supervisors
9. Reduce confusion and stress caused by poor communication about scheduling
10. Provide hands-on training with forms, ECF, SSIS
11. Assign inductees as a second worker on a case
12. Provide better research tools to find information
13. Treat everyone fairly with equal opportunities
14. Provide laptops with mobile Internet
15. Assign mentors for the first year

Respondents who have been employed with the County for greater than one year could not identify any changes that have been implemented to improve training and retention.

As was true in last year's survey, working directly with clients was not reported as the most challenging aspect of the job. What was reported as most difficult is:

1. Constantly changing information
2. No centralized database for relevant information
3. Tedious referral forms with inconsistent instruction on forms
4. Transition from Induction into unit assignment
5. Watching other workers fail children

IV.D. LOOKING TOWARD A NEW MODEL FOR STAFF TRAINING

Beginning in February 2019, Hennepin County will be launching a new approach to training new employees, replacing the current Induction model with a Training Academy. While a statewide Academy system with regional hubs has been envisioned by the Legislature, it is an unfunded mandate and has not been implemented. Consequently, Hennepin County has chosen to restructure the Induction process, accessing County funds for that purpose.

The Hennepin County plan includes an initial week of shadowing with an experienced worker, following an active case. The new hire will also follow the entire continuum of child protection services, from screening/intake, transitioning into investigations, interviewing, and field. All new inductees, upon completion of the Academy training, will begin their unit assignment in Field, prior to some ultimately being assigned to Investigation.

The county's newly initiated activity of "all staff meetings" is a step toward improving cohesion. It provides an opportunity for staff to be together, meet in small-group breakout sessions, be introduced to administrators, hear agency updates, and celebrate the good work of child protection workers.

This newly implemented activity of all-staff meetings also includes self-care as a topic of those sessions. This may address the perceived lack of preparation, training, and support around secondary trauma and burnout.

In year three, this Citizen Review Panel project will evaluate the effectiveness of the new Academy Training model, in comparison to the current Induction process.

IV.E. FINDINGS

The existing Induction process is inadequate to prepare new employees for the critical work they are embarking on. Significant support needs to be provided to develop an Academy that meets the needs of new staff, taking into consideration the issues listed in this report.

The Panel has been informed of the major components of the new Academy and agrees with the changes.

These changes should include:

1. Improved staffing with trainers and supervisors who are organized, approachable, and non-judgmental.
2. Changing the culture to be supportive of asking questions and expressing concerns.
3. A dedicated location and consistent scheduling of training sessions. This will hopefully enhance participants' feelings of being professionally treated and respected.
4. Training that effectively demonstrates how to take a case from the first call through assessment, and placement to termination.
5. Creation of a system of support in which all staff can air concerns without fear of retribution.
6. Assignment of a mentor for each new employee for the first year.

IV.F. SUMMARY

Leadership sets the tone and expectations for what occurs in any institution. **Our experience with the present leadership is that they are creating a substantially different tone within the agency.**

The Citizen's Review Panel has experienced this change in our interactions with the leadership. We are experiencing greatly improved transparency and acknowledgement of the agency's strengths and shortcomings. This is a marked difference from our interactions with previous leadership.

The findings of this study on Induction show little change from the 2017 study. The respondents of both studies expressed a high level of dissatisfaction with the quality and usefulness of the training. In interviewing leaders within the agency, we have been informed that the Academy beginning in early 2019 will be substantially different and will address many of the issues of this report. Next year's study will address whether this has happened.

IV.G. REVIEW OF COLLABORATIVE INFORMATION SOURCES

Minneapolis Star-Tribune, April 2018: “Compared with other states, Minnesota’s spending on training for child protection workers remains ‘woefully inadequate’ (Traci LaLiberte, executive director of the University of Minnesota’s Center for Advanced Studies in Child Welfare). In a recent analysis, LaLiberte found that Minnesota spends \$71 on training for every child receiving a child protection response...compared with \$354 in Pennsylvania, \$267 in Washington, and \$111 in Colorado. As a state, we are doing less than the bare minimum, LaLiberte said. ‘Without adequately training our workforce, we are putting kids and families at risk.’ “

Minneapolis Star-Tribune, September 2018: “Hennepin County’s far-thinking overhaul of its Child Protection services system is already showing results.... Deputy Administrator Jennifer DeCubellis, said, ‘Our staff spends 60 percent of its time on paperwork.’ A serious infusion of funds has made it possible to hire more caseworkers, reducing workloads that were far above average. Case workers were able to spend more time with families.”

American Public Human Services Association (APHSA), 2005 (Flower, McDonald, Sumski, Karsan): “Due to the well-documented high financial and human costs of undesired turnover of child welfare employees, it is important for public child welfare leaders to understand what they can do, using best practices known, to reduce undesired turnover and to promote an organizational culture of wellbeing.” This APHSA study emphasizes the importance of: knowing the major reasons high performing staff leave the organization; modeling practices that contribute to the retention of high performing employees; balancing between focusing on the people/relationships and regulatory compliance; providing effective guidance and support; providing timely and constructive feedback to employees about their performance.

Review of turnover in Milwaukee County private agency child welfare ongoing case management staff (Flower, C., McDonald, J., and Sumski, M., 2005): “Children who had one social worker in a year achieved permanency 74.5% of the time. However, those who had a change in workers which resulted in two workers in per year achieved permanency 17.5% of the time, and those who had three social workers in a year achieved permanency 5.2% of the time, down to a low of .1% for those youth with six or more workers in a single year.”

Listening to the voices of children in foster care: Youths speak out about child welfare workforce turnover and selection; Social Work, 55(1), 47-53: (Strolin-Goltzman, J., Kollar, S., & Trinkle,

J., 2010): For youth, worker turnover represents another loss. It replicates their original relational trauma of disconnection and distrust.

Children and Youth Services Review, 2011: Respect in the Workplace: A mixed methods study of retention and turnover in the voluntary child welfare sector: Perceptions of respect by workers is related to job satisfaction and intent to stay in a demanding child welfare job. Organizational support from various levels addresses respect and prevention of isolation. Adequate communication (internal and external) prevents confusion and lack of understanding about agency policies. Employees feel more valued in a system that offers recognition for hard work.

Hennepin County Human Services Director Jodi Wentland, May 2018: Field caseloads are currently 16-18; the targeted goal is for caseloads of 12. ICWA caseloads are currently at 10. Additional goal is to hire 10 new staff per month, in order to decrease caseload numbers.

Hennepin County Child Well-Being Committee report, September 2018: From 2016 to 2018, Child Protection workforce turnover decreased by 42% (from 15% to 9%), while the number of employees increased by 42% (from 326 to 463).

V. COMPLEX CASES SUBCOMMITTEE REPORT

V.A. INTRODUCTION

As a result of discussions with Hennepin County Child Protection leadership staff, our subcommittee agreed to engage in a review of complex cases in the system. **It is our plan to identify commonalities in these cases that have led to costly and resource intense outcomes.** This will be a two-year project with recommendations offered in the 2019 final report.

In an effort to better define “complex cases” we met with both Hennepin County staff and key informants in the community. It has been difficult to identify a clear definition of a “complex case.”

For our purposes we have identified complex cases as those cases in child protection involving families that receive an array of child protection services over time due to significant maltreatment of children.. These cases tend to be families with complex family configurations and unstable environments, often having multiple needs, requiring significant resources in both money and time, and found to be hard to engage or foster change in.

Our project involves reviewing complex cases in child protection so that we might identify missed opportunities for early intervention and potentially effective interventions as a case progresses.

V.B. METHODOLOGY

Our record review commenced in December. We were provided with 15 complex cases chosen by Hennepin County Child Protection Supervisors for our review.

We reviewed the 15 cases with the following criteria in mind:

- Evidence of intractable maltreatment of children who are difficult to control or manage
- History of maltreatment of parents as children
- Home and physical environment
- History of alcohol abuse, drug addiction and/or mental illness of parents
- Length of time in system
- Complexity of family constellation; e.g., children born from multiple partners
- Degree of family isolation
- Unrelated adults in the household
- Children who themselves are difficult to engage
- Children who are difficult to raise due to physical, medical, or mental challenges
- Poverty and/or housing instability
- Other criteria that may become apparent as our review progresses

From these 15 cases we will select 4-5 families that, based on our criteria, will provide prototypes for a range of the most significant issues. These cases will constitute our references within the project and will of course remain anonymous with no identifying characteristics in our final report.

With this smaller subset we will be asking questions such as:

1. What are the identified obstacles to successful engagement and incentive to change?
2. Is the intention of case management to build parent-child interactions so they can successfully deal with adversity?
3. Where were the opportunities that County staff could have stepped in to provide support and parenting help?
4. Is the case plan designed to help parents learn and improve?
5. What is the length of time away from parents?
6. How many workers have been assigned to the case? Turnover rate?
7. Was there effective support to parents in managing the system?
8. Whether placement is foster, institution or kinship care, is there evidence of ongoing Child Protection involvement and support?
9. Are there permanent obstacles to success?
10. Are there interventions that have been successful in other cases that might be incorporated into practice?

Obviously, we will have many more questions as the project continues. One challenge is that we cannot copy or remove the case file from the county premises, so our ability to refer back to the case is limited. Our hope is that we can identify these few cases and retain the option of re-examining them if needed. We expect to complete this project in 2019 and provide recommendations to the county and state.

V.C. KEY INFORMANT INTERVIEWS

- Jodi Wentland, Director of Human Services, Hennepin County
- Michelle Lefebvre, Area Manager, Child Protection Services, Hennepin County
- Jamie Halpern, Area Manager, Hennepin County Children and Family Services
- Erika Jensen, Supervisor, Hennepin County Child Protection, Intake and Screening
- Stacey Rudnick, Data Coordinator, Hennepin County Children and Family Services
- Anne Gearity, PH.D, LICSW, Washburn Center for Children

VI. HOW AND HOW EFFECTIVELY IS KINSHIP CARE BEING USED IN HENNEPIN COUNTY?

VI.A. OVERVIEW

We conducted a two-year project — begun in 2017 and completed this year — examining kinship care. The specific focus of our project is:

Exploring how and how effectively Hennepin County is using kinship care to achieve the goals of safety, permanency, placement stability, reduced disproportionality and racial disparities, and well-being for children in out of home placement.

We're also providing insights and ideas from research and best practices from other states to help Hennepin County and Minnesota continue to improve.

VI.B. RECOMMENDATIONS FOR HENNEPIN COUNTY

Based on all of the qualitative and quantitative information we gathered and analyzed (described later in this report), we developed the following recommendations with the goal of helping Hennepin County build on the success it has had so far with kinship care practice. We believe these recommendations will help improve practice and therefore improve outcomes for children and families.

i. Recommendation: Improve support and engagement of kinship families by county workers, including clear, consistent communication

The challenges facing children entering and in kinship care and the challenges facing the relatives/friends receiving the children are well documented. For the placement to be successful, for the children to feel cared for, safe, and have their needs met, and for the placement to be successful for the adults, much support is needed.

“...children and youth in foster care or kinship care and those who have been adopted from care face many challenges. Although they have also been shown to be strong and resilient, these children are at higher risk than their peers for health problems, educational challenges, mental health diagnoses, and behavior problems. Supportive services both help children overcome these challenges and assist families to cope with or reduce the impact of the challenges that remain.”¹

There are several types of support that the county should provide to assist caregivers. These types include:

- **Provide general information to kinship caregivers** about the process, the people involved, the child’s needs, and the services that are available.
Rationale: Overall, most caregivers we interviewed felt that they had been given good information by at least some of the county workers with whom they were involved. The kinship workers and licensing workers were most often reported to be helpful. Those that had child service workers assigned to the children in their home found these workers to be helpful. Almost all of the caregivers interviewed expressed some confusion about who the various workers were who came to their homes and what their roles were. They commented that the communication between various workers was poor and that they were often given different messages by different workers.
- **Provide frequent and ongoing communication.** This includes the various facets of communication – speaking, writing, and listening.
Rationale: Communication between workers and communication with the kin caregivers were often cited as problems by the caregivers we interviewed. Kin providers frequently talked about the difficulty in getting calls returned by the child protection worker.
- **Provide workers who are knowledgeable about each other’s work,** responsibilities, family needs, and other related areas – not to duplicate, but to be knowledgeable to provide the best possible support and services.
Rationale: Caregivers who had stable workers reported this as a plus. Unfortunately, this was not true for many of those interviewed.
- **Provide respite care support** for needed rest and time to recharge.

¹ AdoptUSKids. 2015. *Support Matters: Lessons from the Field on Services for Adoptive, Foster, and Kinship Care Families*. Available online: <http://adoptuskids.org/assets/files/AUSK/support-matters/support-matters-resource-guide.pdf>

Rationale: Some of those interviewed commented on the need for more respite care and also the problem with getting children in daycare. This was especially a problem before the kin provider became licensed.

- **Provide workers who are culturally competent**, including a need for knowledge and understanding of the Native American culture, laws, and practices.

Rationale: There were comments on the need for more cultural competency of the workers involved with their family. They did not feel they were treated respectfully and that inappropriate questions were asked of them.

- **Provide timely financial assistance.**

Rationale: The overall process of getting licensed and receiving payments was felt to be too slow – often taking several months. People had trouble getting their accounts set up and payments were not reliable. Getting the paperwork done and submitted was made more difficult due to the fact that it could not be done online.

- **Provide training to the kinship caregivers** that is on-going and meets the needs of family.

Rationale: Getting the necessary training done in a timely fashion was also difficult for many of the caregivers. Several commented that there needed to be more online classes for those who work or live out of the metro area. Also, many of the classes did not seem to be very helpful and there should be a greater selection of classes.

- **Provide the best placement for the child.**

Rationale: Kinship workers reported a lack of county support for kin foster parents because the focus was on getting the children placed, not supporting the placement. In other words, the placement was the priority, not the match with the child's needs.

ii. Recommendation: Improve county infrastructure to support effective kinship practice

By having a specific kinship unit with committed, passionate staff, Hennepin County has a strong foundation for doing good kinship care practice. This work could be further improved by strengthening Hennepin County's infrastructure that supports workers and that affects the experience of potential and current kinship families. Specifically, we recommend improving the following elements of the infrastructure:

- *Financial paperwork and processes* — We heard from multiple caregivers that they experience a lot of challenges getting payments processed in a timely manner and that these delays create hardships for the kinship families (e.g., slow payments, paperwork repeatedly getting lost by county staff, having to re-submit and hand-deliver forms because staff didn't receive them by mail, etc.). Kinship caregivers already face challenges as the county asks them to come forward to care for children—who may have complex needs—and to navigate complicated child welfare system requirements, so it is critical to ensure that the county's own payment and reimbursement processes do not create additional burdens for these families. We recommend improving the timeliness and

processes for getting payments processed, including minimizing paperwork requirements where possible (e.g., options for submitting paperwork online/electronically).

- *Kinship search and engagement approaches* — Our interviews with kinship workers indicated that the staff have many creative approaches and individual strengths for finding, engaging, and communicating with possible kinship caregivers (e.g., using various databases and other tools to search for kin, having strategies for staying in touch with identified resources, etc.). However, there does not seem to be much of a shared, formalized knowledge base that is shared across the whole team, leaving individual workers having to rely largely on their own expertise. We think that the important work of the kinship unit could be made even more effective, efficient, and consistent if Hennepin County captures its recommended strategies and practices in a formal way — such as in a written guide and suggested protocols — and facilitates more knowledge sharing across staff.

iii. Recommendation: Strengthen teaming approaches within the county, both informally and formally

Although Hennepin County's stated practice would seem to stress the importance and value of teamwork, we did not find this to be happening on a regular basis related to making placement decisions involving possible kinship families or for ongoing work with kinship families.

A primary problem identified by both the county workers and kin foster care providers we interviewed was the lack of communication, collaboration and cooperation between county staff who were assigned to the same case. County staff reported that other workers frequently did not return calls or respond to their messages. This lack of communication at times lead to duplication of efforts as well as frustration among county staff that things didn't always get done by other staff involved. Some of the county staff interviewed did not know in detail the functions or the responsibilities of other county staff.

For the caregiver families, there was a confusion as to roles and to who was responsible for doing what. They also reported getting different messages from the different workers involved. Although the child protection worker is primarily responsible for handling the case, it appeared that at times the child protection worker took on tasks that should have been done by others and/or had difficulty sharing decision making with others. At times decisions were made by workers who were unaware of all the information that was available.

We also heard from child protection supervisors and child service workers that they thought that child protection workers had too many responsibilities for the case and that other workers needed to assume more of the workload. Clearly the lack of communication is causing problems both for county workers and for the families involved in the child protection system.

Recommended strategies:

- To begin with, the county needs to work on developing relationships between staff from different areas. This could be done by having regular meetings between staff from

kinship, licensing, child protection and child services with participation strongly encouraged by supervisors. Workers could share with others how they approach their job and also ask questions of other workers. Besides having these more formal meetings, units could be encouraged to invite others to informal get-togethers — perhaps over lunch. In our interviews, we heard of one unit that tried to do this by inviting other staff to a popcorn party. Unfortunately, no one except the workers from that unit attended. This would seem to exemplify the lack of importance that staff place on getting to know others. Management will need to stress that developing better working relationships and knowledge of the functions of other workers is a priority for the department. The bottom line is that improving communication and cooperation between workers will help Hennepin County provide better service to clients.

- A licensing worker and a kinship worker should be assigned to each child protection unit. These workers could then meet at regular intervals with the units to develop a relationship and a better understanding of each other's roles. We heard from child protection supervisors that a public health nurse is assigned to each child protection unit and meets regularly with the unit. This collaboration is valued and should be a model for collaborating with kinship and licensing workers. Some of the child protection units also have "embedded" child service workers in the unit. This strategy also appears to enhance communication between at least the child service worker and the child protection worker.
- We heard the excuse that the workload was so heavy that it was difficult to find the time to return calls or attempt to get information from other workers involved on the case. Now that workloads are decreasing, especially for child protection workers, it will be crucial to encourage and even insist on regular communication between workers. Supervisors will need to take the lead in looking at how and when a worker communicates with other workers involved in a case and to work with their staff to improve communication and cooperation. It will also be important for supervisors to stress the importance of communication and working with others when decisions need to be made.

iv. Recommendation: Strengthen the approach for matching children with potential kinship caregivers

Hennepin County should develop procedures for assessing a child's strengths and needs whenever out-of-home placement is needed. Ideally this should occur prior to placement so that potential kin caregivers can be found who can provide a home that will provide the care and structure the child needs to grow and thrive.

Hennepin County is to be commended on their efforts in placing children with kin when out-of-home placement becomes necessary. Certainly, placing a child with kin has many benefits as cited by research. However, all kin families are not equal in their ability to care for children needing placement, especially since many of these children have significant emotional or behavioral needs. Research also has found that kin caregivers tend to have a number of characteristics which may make it difficult for them to provide adequate care to these children.

There appears to be little effort by Hennepin County to match the child's needs with the ability of a kin foster placement to meet those needs.

As we learned, the decision as to where to place the child is often based more on which kin is first located rather than how well the home can meet the child's needs. Several kin caregivers commented on feeling under pressure to take the child and that they really didn't understand the responsibility they were assuming. Furthermore, workers reported that once a child is placed in a home, there is great reluctance to remove that child even, if another placement option is found that would clearly be better for the child.

Although numerous research articles state the importance of matching the child's needs to the ability of the kin foster parent to meet those needs, little information is available about how this is best done. It is beyond the scope of this study to provide specific details regarding how Hennepin County should design such a program. Ideally, when the decision is made to remove a child from his/her home, there would be time to do a short assessment of the child's strengths and needs. There are a number of tools available for this purpose that require a minimum amount of time to administer (generally 10 to 20 minutes). Such tools could be used in conjunction with an assessment by a social worker to provide at least a basic understanding of the child. Then, when looking for a relative placement for that child, the kinship worker would be able to assess the potential kin's strengths and ability to nurture and structure a safe environment for that particular child.

It would also be important to provide potential kin foster parents with adequate information about the child, to discuss what support and interventions the child may require and also to discuss how taking on the care of the child may impact the caregiver and his/her family. Hennepin County kinship workers stated that they rarely have information about the child(ren) that will be placed with kin. If anyone has information about the child's needs, it would usually be the child protection worker. The kinship workers report little communication with child protection workers. Kinship workers view their job as finding licensable kin, not to match children with potential kin. In the haste to place a child with kin, too often the increased difficulties that the kin family may face are ignored or overlooked by the placing workers. This is especially important given the reluctance of many kin foster parents to seek help.

We understand that many children are ordered into immediate custody with relatives (OIC-R) and that the county has little chance to assess either the child's needs or the kin caregiver's strengths and ability to care for the child. We also learned that OIC-R placements were more apt to disrupt than other placements. This would lend support to the position that it is important to spend time upfront trying to match children with caregivers rather than just placing in the first available home. Licensing workers commented on the problems they often encounter when licensing homes that children were placed in an emergency licensing procedure. At times, they are not able to license the home, which then causes a disruption for the child. Other times, they are able to license the caregiver, but they quickly became aware of what they perceived as the inability of the caregiver to adequately parent the child in placement with them.

Recommended strategies: Hennepin County should use assessment tools that are readily available (e.g., Strengths and Difficulties, The Child and Adolescent Service Intensity Instrument (CASII), Early Childhood Service Intensity Instrument (ECSII), etc.) to assess the strengths and

needs of children who need to be placed in out-of-home care. This should be done prior to placement as much as possible.

Whether it is the child protection worker or the child services worker who does the child's assessment, the results, combined with the social worker's clinical assessment, need to be shared with the kinship worker. The kinship worker and the child protection worker can then look for the kin placement that can best meet the child's needs. The kinship worker would also be able to provide potential kin caregivers with information about the child and how taking the child might impact the caregiver and her family. Ideally, the licensing worker should also be included in the discussion of where to place the child as they have the best knowledge of who may or may not be licensable.

In cases where an assessment of the child cannot be done prior to placement, the assessment should be done as soon as possible and the findings shared with the kin caregivers and also with all workers involved with the kin caregivers — both Hennepin County workers and workers from other agencies. By doing so, Hennepin County will be in a better position to support the foster caregivers if problems arise.

Finally, if it has not happened, a family group conference should be scheduled. By doing so, additional supports may be found for the kin caregiver and child(ren). Given the reluctance of kin caregivers to seek help, this may be one way for them to realize and accept needed help.

v. Recommendation: Develop an approach for assessing how well children are doing in their kinship placements and how well the whole kinship family is doing.

We applaud Hennepin County for its success in placing a large percentage of children in foster care with kin and we are encouraged by the county's commitment to seeking to place children in kinship families.

We believe that it's important, however, to go beyond simply tracking the percentages of children who are in kinship placements. We strongly recommend having a way to assess how well children are doing in their kinship placements and how the kinship families are doing. We recommend establishing a way to track trends over time about the success of kinship placements, to be reviewed in combination with the data on the percentage of children placed with kin in order to have a more holistic picture of the effectiveness of kinship practice in the county.

For our project, we sought to determine how well kinship placements are serving the goals of well-being, placement stability, and permanency; **but, despite multiple efforts to get qualitative or quantitative data on indicators of how children are doing in kinship placements, we were unable to obtain such information from Hennepin County.**

From what we were able to learn, the county doesn't have mechanisms in place to track how well children are doing in kinship placements (e.g., how many placements are changed due to children's needs not being met by their placement or the caregivers not being supported enough

to care for the child, whether children’s needs are being met in a placement, whether a child being in a kinship placement helps contribute to more timely permanency, etc.).

In our interviews with both workers and kinship caregivers, we heard that there aren’t strong approaches for matching when making placement decisions; this indicates that children are placed with kin without necessarily determining that the caregiver is well-equipped and well-supported to meet the child’s specific needs. **We are concerned that children may be placed with kin due to a goal — which is an important goal — of increasing the use of kinship care without sufficient consideration of whether each placement is truly appropriate for the child’s needs.**

Having a structured approach for assessing how well kinship placements are meeting children’s needs and contributing to positive outcomes will help Hennepin County ensure that it is using kinship care as a strategy to achieve placement stability, permanency, safety, and well-being, rather than assuming that placing more children with kin will inherently lead to better outcomes. We recognize the complexity of determining child well-being and we acknowledge that this recommendation does not involve simply tracking or analyzing a few data elements, but we believe it is critical for a child welfare system to assess the effectiveness of its practice, not just the percentage of cases in which a practice is used.

VI.C. RECOMMENDATIONS FOR THE DEPARTMENT OF HUMAN SERVICES

Although this project focused primarily on kinship care efforts in Hennepin County, we also identified some areas of need at the state level related to kinship care. The recommendations below would help DHS play a leadership role for the entire state — benefitting children and families in Hennepin County as well as elsewhere in the state — to promote and support effective and equitable kinship care practice.

i. Recommendation: Conduct an analysis of the waiver requests for foster parent licensing for relatives across the state and the patterns of the specific requirements being requested to be waived.

We recommend that DHS conduct an analysis of the requests for licensing waiver requests that it receives from each county for licensing kin as foster parents to explore factors including:

- Which licensing requirements are most commonly requested to be waived, including whether the waiver requests and decisions differ across counties
- Result of the waiver request (i.e., whether approved or denied)
- Race of applicant and whether there are differential impacts of waiver decisions for applicants of any race.²

² Note: We were told by DHS staff that the race data collected in licensing waiver requests is not reliable data. If this is correct, we strongly recommend fixing this problem immediately. It is crucial for Minnesota to be able to determine any differential impact by race of licensing requirements and waiver approvals or denials, especially in light of Minnesota’s serious problems with overrepresentation of African American and Native American children in the child welfare system.

Given the emphasis Minnesota — and the federal government — places on promoting kinship care, it is important to have a clear understanding of what barriers are in place that prevent kin from being considered as placement options for children in foster care. We think it is particularly important to understand whether the barriers differ across the state (e.g., by county, based on urban or rural location, etc.) and whether there are differential impacts of barriers based on the race of the licensing applicant.

In light of the requirements in the federal Family First Prevention Services Act related to assessing barriers to licensing and determining whether Minnesota will align with the model licensing standards from the federal Children’s Bureau, we believe that this recommendation will also help DHS with efforts it will need to conduct for federal reporting.

We attempted to get data from DHS for nearly a year and a half to be able to conduct this analysis for this report, but we faced significant barriers and delays in getting any information from DHS about whether the needed information was available or could be tracked for several months for our project. We were deeply disappointed that DHS was unable to respond to our requests over the course of many months and that we ultimately were unable to obtain any relevant data for this analysis. After more than one year of requesting data, we believed that we were going to be able to get at least a few months of data, but then experienced additional delays receiving any data reports, and the data we received was not responsive to our specific request.

On a related note, we find it very concerning that DHS was so slow in responding to our repeated inquiries and that we ultimately never received the data we requested, given that our Citizen Review Panel (CRP) operates in partnership with DHS and as part of DHS meeting the federal requirement for having CRPs. We strongly hope that DHS will improve its responsiveness to data requests and inquiries from CRPs, since these panels provide an important service to the county as well as to DHS.

ii. Recommendation: Develop an approach for assessing how well children are doing in their kinship placements and how well the whole kinship family is doing.

As described above in our recommendations for Hennepin County, we believe it is critical to have a structured approach for determining how well kinship care placements are working, both for the child and the kinship family. While we are making a recommendation to Hennepin County to develop an approach to assessing how well kinship care placements are contributing to positive outcomes for children, we also believe that DHS should take a strong leadership role in assessing the effectiveness of kinship care practice throughout Minnesota. We support Minnesota’s ongoing efforts to promote the use of kinship care and we strongly recommend that DHS provide leadership to the entire state on the importance of both using kinship care placements and ensuring that kinship care is being used effectively in service of positive outcomes for children.

VI.D. ADDITIONAL INSIGHTS

We heard several additional suggestions from Hennepin County social workers, including:

- A kinship worker should be assigned when the investigation worker is assigned. This would help in finding kin families more quickly as now a court order is needed before a kinship worker is assigned.
- Make sure to clearly and repeatedly explain to the kin foster family the roles of the various county workers. Families tend to be very confused as to who is who.
- Have workers visit the family together whenever possible so that there is less disruption for the family.
- There should be more training options, including online training, as many parents live outside the metro area and getting to trainings is difficult.
- The county needs to do more work in educating the community about child protection and the desire to place kids in kin foster homes. Communities are very distrustful of the county. With more community support, the county may be able to reduce out-of-home placements.
- Best practice would be to have a family group conference before placing the child.
- Licensing workers should be involved at the beginning of the case. They would like the child protection worker and the kinship worker to consult with them before placing the child. This would prevent some disruptions as there are times when the kin caregiver is not able to be licensed.
- Kinship workers should stay on the case longer and continue looking for potential families even after a placement with kin. Several workers cited the ongoing efforts of ICWA kinship workers and stated that should be a county model.
- It is important to understand the entire family system — not just the family the child is placed with. The process should be much larger than just finding a child a place to sleep.
- Case aides should be available for transporting children and kin caregivers to appointments. Too often appointments are missed because of transportation difficulties.
- Families need more support after a child is placed with them. We heard the comment that private agencies do a better job of supporting families than Hennepin County does.

We also heard suggestions from workers as to how to improve the quality of kinship placements that Hennepin County may want to consider.

We heard repeatedly that Hennepin County is too quick to remove a child from their home and that additional support services should be put in place in an attempt to keep a child in the home. During this time of additional support services, there would be time to assess the child's strengths and needs. There would also be time to have a family group conference to look at which kin might be best to take care of the child should the child need to be removed from the home.

Other workers suggested that if a child needs to be removed immediately, placement in a shelter foster home could be best. This would give county workers time to adequately assess both the child and potential kin caregivers.

Finally, kinship workers should continue looking for potential kin caregivers even after a child has been placed with kin. This way, another kin caregiver may be available in the case of a disruption or if the worker decides that the home is not able to meet the child's needs.

VI.E. APPROACH AND METHODOLOGY

Our project was designed to include both qualitative and quantitative elements so that we would have breadth, depth, and multiple perspectives in our understanding of the topic and issues. Our research included:

- Interviewing Hennepin County social work staff
- Reviewing relevant literature
- Understanding the relevant laws, policies, and processes
- Requesting, receiving, and studying county and state-level data
- Following relevant federal policy developments
- Exploring best practices and approaches from other states
- Interviewing kinship foster care families

In 2017, our research began with a series of interviews to increase our knowledge and understanding of kinship foster care. We interviewed staff from Hennepin County Children and Family Services to learn about the definitions, basics of operations, rules, and challenges involved in placing children with kin. In addition, we interviewed representatives from the African American Workgroup on Child Protection and learned about issues related to placement of African American children with kin. We also interviewed staff who work on kinship care and kinship navigator services at Lutheran Social Services to learn about their perspectives on issues and needs related to kinship care.

We obtained data on out-of-home placement through October 2018 from Hennepin County's Children and Family Services Continuous Quality Improvement and Data Unit. We sought statewide data from the Department of Human Services (DHS) on licensing waiver requests for kinship foster parents over the course of two years, but we were unable to get the data we requested repeatedly.

In 2018, our research continued with interviewing the following Hennepin County Children and Family Services staff:

- Supervisors of both Indian Child Welfare Act (ICWA) and non-ICWA kinship units
- Supervisor of the licensing unit
- Child Protection supervisors with embedded Child Service Workers in their units (CSWs)
- Kinship workers from both ICWA and non-ICWA units
- Licensing workers
- CSWs in embedded child protection units

We also interviewed 14 kinship foster parents. These interviews included both ICWA and non-ICWA foster parents.

Limitations

1. In our research, we sought to determine the well-being of the children in kinship care. However, the type of data we needed and requested was not available from Hennepin County. For example, the number of times a child was moved from one kin foster home to another foster home can be an indication of how well the child is doing after placement. However, the disruption data, using this definition, was not available. The county does have disruption data but the definition includes more transitions of the child than for lack of thriving in kinship care. In addition, the county does not have a definition of how well the children are doing in kinship care or guidelines for measuring the well-being of children in kinship care (or in other placements).
2. We originally were going to include research and discussion related to race-based disproportionality. However, the issue of overrepresentation and disproportionality is multi-faceted and goes well beyond the scope of this project. We did seek to explore possible differential effects of practices and requirements (e.g., licensing and waivers) across races, but encountered several challenges in getting the needed information to conduct that analysis.

VI. F. CONTEXT AND BACKGROUND

Research on Kinship Care

The Adoption and Safe Families Act of 1997 (ASFA) encouraged child welfare agencies to place children in need of out-of-home placement with relatives (kin) whenever possible. Following the passage of ASFA the number of children placed with kin has increased. According to the 2005 census, more than 2.5 million children were living with relative care givers. This was a 55% increase from the 1990 census.³ In 2011 approximately 25% of foster care children were placed with relatives and in some states the percentage was around 50%.⁴ Interestingly, ASFA was passed with little research evidence comparing the benefits of placing children with kin rather than in non-kin foster homes. Since the passage of that act, there has been ongoing research looking at the effectiveness of kinship care on the wellbeing of children placed out of the home.

³ Rubin, D, Downes, K, et. al. Impact of Kinship Care on Behavioral Well-being for Children in Out of Home Care. *Archivers of Pediatric Adolescent Medicine*, Vol 162 (No 6), June, 2008.

⁴ Casey Family Programs. Does Kinship care Work Well for Children? A Summary of the Research, April, 2011.

In looking at any out-of-home placement, one needs to consider what the goals of out-of-home placement should be. Research then can compare kin vs. non-kin on how well the different placements meet these goals.

Safety: Most research findings suggest that children placed with kin are as safe or safer than children placed in non-relative foster care. A study by Winokur, Holtan, and Batchelder⁵ found that children in non-relative foster care were 3.7 times more likely to be maltreated than children placed with kin. Multiple studies have also reported that children placed with kin are less likely to re-enter care.⁶

Placement Stability: A large majority of children entering the child welfare system have experienced trauma from abuse or neglect. They are then further traumatized by the removal from their home and parent(s). Unfortunately, children placed out of the home often experience multiple placements. We know from research that frequent changes in caregivers negatively affects the emotional, social and psychological development of children. Thus, stability of placement is an important factor when placing children. Numerous research studies indicate placements of children with relatives are more stable than those of children placed in non-relative foster care. Children in kin placement experience fewer placements.⁷

However, it is also important to note that children placed in kinship care tend to have fewer emotional and behavioral problems at the time of placement.⁸ Thus, it may be that the placements of children placed in non-relative foster care disrupt more because the children are presenting more challenging behaviors which the caregivers find difficult to manage.

Permanency: Research comparing the achievement of permanency for children in relative vs. non-relative placement is varied. Many studies have found that children placed with kin remain in care longer.⁹ However, a study from 2014 found no difference in the length of time children spent in out-of-home placement or rates of reunification. Overall, research has found that children in non-relative foster care obtain permanency through adoption while children placed with kin tend to achieve permanency through guardianship.¹⁰

Well-Being: It is important to note that studies looking at the well-being of children tend to focus on short-term benefits. There have been few studies that followed children in kinship care into adulthood to determine how well these children are doing as adults. Research does suggest that at least in the short-term, kinship care is beneficial to children in several respects. Children placed with kin are more apt to remain in their schools (however, children in both types of placement often have to change schools), are more apt to be placed with siblings, are more apt to have visits

⁵ Winokur, Holtan and Batchelder. Kinship Care for the Safety, Permanency and Well-being of Children Removed from the Home for Maltreatment. Online publication, 2014.

⁶ Casey Family Programs, 2011.

⁷ N.C. Division of Social Services and The Family and Children's Resource Program. Research on Kinship Care: Implications for Practice. Vol. 20. No. 1, December, 2014

⁸ Casey Family Programs, 2011.

⁹ *ibid*

¹⁰ Winokur, Holtan and Batchelder, 2014.

with or maintain contact with their birth parents, and are more likely to maintain cultural connections.¹¹

When we look at data on mental and behavioral health outcomes for children in the two types of placement, the findings are mixed. Generally, there were no reported differences in mental/behavioral health problems by type of care. One study did report children placed with kin tended to have fewer behavioral and social skill problems but that they had a higher risk of substance abuse and pregnancy as teens.¹² In another study, Ruben et. al., found that kin foster parents were less likely to report behavioral problems of children in their care.¹³ One study reported that 28% of children in kinship care needed mental health services but that only 14% received services¹⁴. Additionally, children placed with kin tend to receive less services than children placed with non-relative foster parents. This is an important factor when assessing the developmental, educational and mental health needs of the children. There is some evidence that children placed with kin may have lower academic achievement than children placed in nonrelative foster homes¹⁵. Also, it is important to note that children in both types of placements experienced greater mental health and behavioral health problems than children not in placement.

Caregiver Challenges: Both kin foster parents and non-kin foster parents are apt to experience challenges in the parenting of children placed in their care. As noted above, children placed in care have experienced the trauma of being removed from their homes and separated from their parents and have generally experienced either neglect or maltreatment. In addition, children placed out of their homes tend to come from impoverished backgrounds, may have developmental or cognitive delays, and have increased risk for mental or physical health problems.

In looking at characteristics of kin vs. non-kin caregivers, kin caregivers tend to be single, older, poorer, less educated, have lower employment rates and to have poorer physical and mental health. In addition to these characteristics which could make parenting children more difficult, kin caregivers are less likely to receive assistance (including financial support) and services both for themselves and for the children in their care. Kinship caregivers often receive children with very little notice and therefore are apt to be faced with unanticipated financial, health and social challenges.¹⁶ Even when financial help is available, the benefits received are often less than what it costs to care for a child. Many kinship caregivers, especially grandparents, deal with feelings

¹¹ Casey Family Programs, 2011.

¹² Saki, D, Lin, H, et. al. Health outcomes and family services in kinship care. Archives of Pediatric and Adolescent Medicine Vol 165(2), 2011.

¹³ Rubin, D, Downes, K, et. al., 2008.

¹⁴ Foster Family-based Treatment Association (FFTA). The Kinship Treatment Foster Care Initiative Toolkit, 2015.

¹⁵ Rubin, D, Springer, SH, Zlotnik, S, et. al. Needs of Kinship Care Families and Pediatric Practice. Pediatrics, , 139(4), 2017.

¹⁶ The Annie E. Casey Foundation, Stepping Up For Kids Policy Report, 2012.

of personal guilt regarding their child’s inability to parent. They may also be very angry with the child(ren)s parents which may make it difficult to maintain a relationship with the parent.

Older kin caregivers especially may experience many losses. These losses may include the loss of control over their life and the loss of a predictable futures now that they are responsible for raising a young child. The health of the kin caregiver may also suffer as they focus on the needs of the child(ren) in their care while ignoring their own physical and emotional needs.¹⁷

As a result of all of the above factors some, kinship caregivers “may lack the capacity to adequately provide for children and youth with specific challenging needs.”¹⁸

Studies have also found that social workers visit kin providers less frequently and are less clear about their role in working with these families.¹⁹ This may make it more difficult for kinship care providers to receive the help that they need to best nurture and meet the needs of the children in their care.

Priority Placed on Kinship Care

Need for Appropriate Placement Options

With 3,440 children in out-of-home care in Hennepin County in 2018 — a significant increase since 2012 — the need for appropriate placements options is large and has been rising. With this level of need for foster families to care for children, there is a need for effective kinship care practice as one of several strategies to recruit and identify enough foster families.

As placement options are considered, there are many variables in all situations that require a continuum of placements options to be available. These options ranging from least to most restrictive are: remaining with the birth family with supports in place, placement in kin foster care, placement in non-kin foster care, and placement in group or congregate care.

Variables to be considered when looking at placement would include the nature of the maltreatment and the trauma experienced by the child; the emotional, physical and behavioral needs of the child; the ability to locate and find suitable kin; the ability of kin to provide for the child; the economic situation of the kin, etc.

Placement option considerations among available kin are also important. Each kin family brings different strengths and areas of need. For example, if the child has physical health or mental health needs, the caregiver’s knowledge base becomes very important. Economic resources can also be important to consider. Proximity to the child’s school, the ability to maintain friends and relationships, and the ability to maintain access to hobbies and sports can be factors that should factor into the kin placement decision. In addition, there are the main criteria or eligibility requirements that can impact the child and kin care family match.

¹⁷ Phagan-Hansel, Kim, ed. *The Kinship Parenting Toolbox*, 2015

¹⁸ Casey Family Programs, 2011, page 5

¹⁹ N.C. Division of Social Services, 2014.

With kin placement options, the county can evaluate the strengths and competencies of the prospective family and increase the success of the placement by making appropriate matches and placement decisions for each child. Without options, the child may not be placed in an environment in which he or she can thrive. In addition, the adults may not thrive, either, if they have a child placed with them whose needs they aren't equipped or supported to meet.

Policy Priority and Guidance on Kinship Care

Both federal and state policy prioritizes placing children who are in foster care with relatives. One of the federal laws that makes this priority clear is the federal Fostering Connections to Success and Increasing Adoption Act of 2008. This law included a requirement that state child welfare agencies conduct due diligence to find and give notice to all adult grandparents and other relatives of each child within 30 days of the child's entry into out-of-home care. As part of giving this notice to relatives, the child welfare agency must provide information on the requirements for becoming a licensed foster parent and on the support and services available to children in foster care. The federal Adoption and Safe Families Act of 1997 (ASFA) also prioritizes kinship care: "Gives preference when making placement decisions to adult relatives over nonrelative caregivers when relative caregivers meet all relevant State child protection standards"²⁰

During this project, Congress passed and the President signed into law major new child welfare legislation, the Family First Prevention Services Act. This law has several components, some of which relate directly to kinship care policy and practice that our report also addresses. Specifically, DHS will have to submit information on:

- Whether their licensing standards are in accord with U.S. Department of Health and Human Services' [HHS] model standards, and if not, why they deviate and a description of why that model standard is not appropriate for the state.
- Whether they waive certain licensing standards for relative foster family homes, and if so, a description of the standards they most commonly waive. If the state does not waive standards for relatives, they must describe the reason for not doing so.
- If the state waives licensing standards for relatives, a description of how caseworkers are trained on this waiver and whether the state has developed a process or tools to help caseworkers in waiving the non-safety standards to help place children with relatives more quickly.
- A description of how the state is improving caseworker training or the process on licensing standards.

Minnesota's Guidance and Work on Kinship Care

Minnesota DHS bulletin #16-68-01 recognizes that relatives (or others with whom a child has a significant relationship) are to be given first consideration for placement.

²⁰ <https://training.cfsportal.acf.hhs.gov/section-2-understanding-child-welfare-system/2999>

We have learned that Minnesota is accessing new funding available under the Family First Prevention Services Act for Kinship Navigator services and that DHS will have a time-limited Kinship Navigator staff position.²¹ Although information is limited regarding this position, we are encouraged to hear that DHS is leveraging federal funding for a Kinship Navigator. We encourage DHS and the Navigator to be hired to consider our findings and recommendations in this report as they set priorities and service approaches for the Kinship Navigator work.

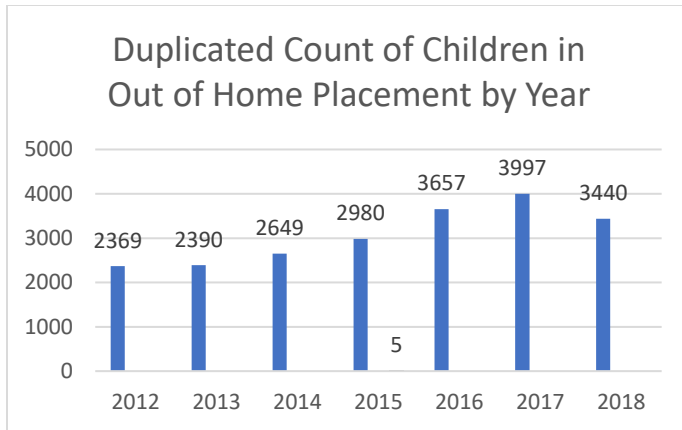
VI.G. HIGHLIGHTS OF DATA ON HENNEPIN COUNTY OUT-OF-HOME PLACEMENTS

We requested data on various aspects of out-of-home placement yearly from 2012 to 2018 from the Children and Family Services Continuous Quality Improvement and Data Unit. All the data obtained for 2018 was through October 31, 2018 with the exception of the duplicated count of children in out-of-home placement, which was for the entire year. We would like to acknowledge the excellent support and cooperation we received from the data unit. We also obtained data from other Hennepin County written reports dealing with child protection and out-of-home placement. Key findings are summarized below.

Number of Children in Placement in Hennepin County

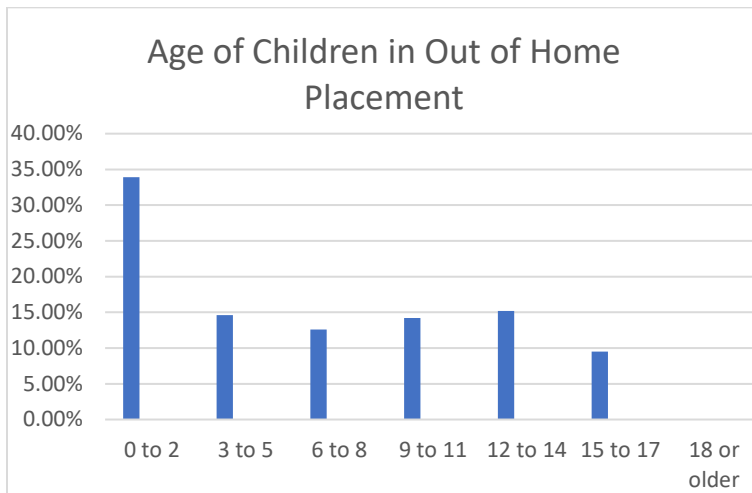
After increasing steadily from 2012, the duplicated number of children in out-of-home placement decreased in 2018. (Duplicated count represents the total number of out-of-home placement occurrences; thus, children with more placement episodes may be counted multiple times). This decrease occurred in spite of continued high numbers of reports to Hennepin County Child Protection. We do not have the necessary data to interpret the reasons for this decline. Some possible reasons might be that Hennepin County is providing more support to maintain children in their homes or that once in placement, children are not as apt to be moved to another placement.

²¹ E-mail correspondence with Mary Doyle, Department of Human Services, December 20, 2018.



Age of children in out-of-home placement

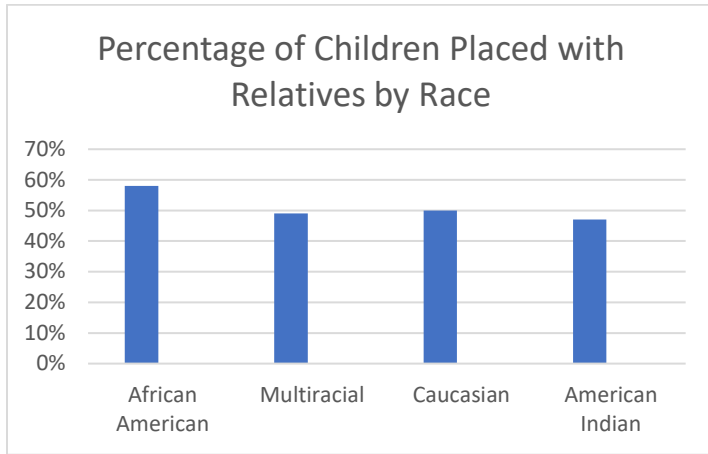
As in previous years, the largest cohort of children in out-of-home placement are children in the 0 to 2 age range. Children from 3 to 5 formed the next larger cohort. Thus, almost half of the children in out-of-home placement are 5 or younger. Given the difficulty of finding homes for young children and their vulnerability, it is imperative that Hennepin County continue to focus attention on the needs of this population since they constitute such a big percentage of the children in placement. (See our previous Citizen Review Panel project report in 2015, “Prevention and intervention of child abuse and neglect in children ages 0 – 3” for specific findings and recommendations related to this population.)



Percentage of children in kin foster placements by race

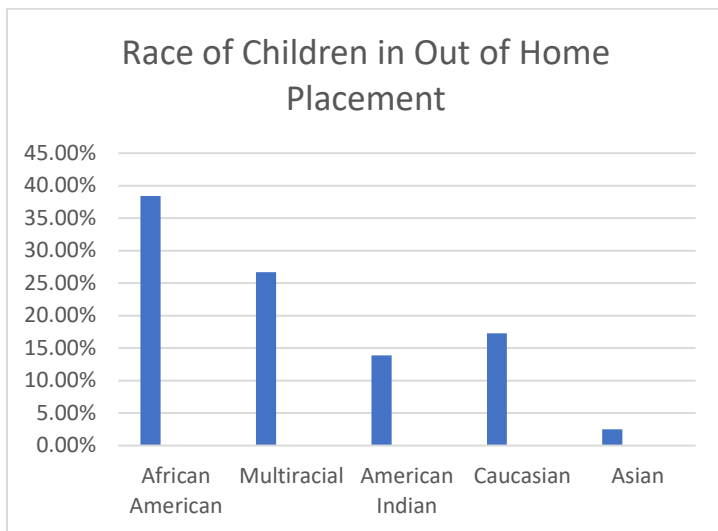
Hennepin County has continued to do an excellent job of placing children with relatives. DHS has set a performance standard for children placed out of the home to be placed with relatives/kin at least 35.7% of the time. Hennepin County has continually exceeded that standard. Through

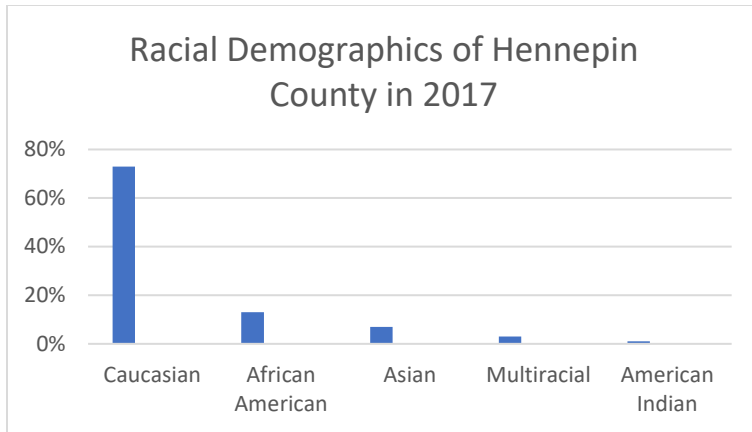
October of 2018, 53% of children were placed with relatives/kin. In looking at the race of children placed with relatives, the percentages are roughly similar across races.



Race of children in out-of-home placement

As of the end of October 2018, there were 1,499 children currently in placement. Overall, children of color comprise about 81% of the children in out-of-home placement in Hennepin County. This is very disproportionate to the racial demographics of Hennepin County. This disproportionality is something that Hennepin County is well aware of and several initiatives within Child Protection are currently working to address this issue; our Citizen Review Panel is also aware of and concerned about this disproportionality.





Stability of children in out-of-home placement

Another area that we were interested in examining was the stability of out-of-home placement. In looking at the number of disruptions in out-of-home placement, the data from Hennepin County suggests that disruptions occur fairly equally between relative and non-relative placements. Between 2012 and 2018 the average number of disruptions for children in kin placement was 14.6% while the average number of disruptions of children in non-relative care was 14.1%.

We also looked at the difference in the number of placements a child experienced between kin foster homes and non-kin foster homes. In 2018, the greatest difference between the two types of foster placements was that a greater percentage of children in kin foster placement experienced a single placement (43.1%) while only 19.7% of children in non-kin foster homes were in only one home. We don't have the data to explain the reason for the difference. One possible reason could be that children who are placed in non-kin homes are more likely to first be placed in shelter (which would count as a placement). Children in non-kin placements also were more likely to experience 3 or more placements compared to children in kinship placements.

Reunification for children in out-of-home placement

A final area of interest was how often children were reunified with their parent(s). The percentage of children reunified varied greatly from year to year between 2012 and 2018. For children placed in relative homes, the range was from 42% to 62% reunified during the year while the range for children placed in non-relative homes was 38% to 67%. The average reunification rate for all years was 52% for children placed both types of homes. Thus, overall, the type of home did not seem to make a difference as to whether or not children were reunified with their parents. However, it is likely that children placed in relative homes who were not reunified may have been able to maintain some connection with their parent(s).

VI. H. HIGHLIGHTS OF INTERVIEWS WITH HENNEPIN COUNTY SOCIAL WORKERS

In Hennepin County, there is not a single social worker responsible for placing and supporting children in kinship care. Rather, there are a number of specialized roles for social workers involved in the process.

A kinship worker is the person primarily responsible for locating possible kin for a child needing out-of-home placement. The kinship worker is responsible for completing a preliminary background check and then the emergency paperwork on kin chosen for placement.

A licensing worker is responsible for doing a more thorough screening of the kin and others in the home to see if they meet licensing standards. This information is then sent to Minnesota DHS where the final decision is made whether or not to license the kin foster parent. The licensing worker then is required to meet regularly with the kin foster parent to assist with any issues or concerns that may arise.

In addition, a child protection worker will also be involved to some extent, at least initially, with the kin foster family and the child in placement. For example, the child protection worker involved with the case may also locate possible kin through their meeting with the child's parent. However, the primary role of the child protection worker is to work with the child's parent(s) to develop a plan for reunifying the child and parent. If reunification is not possible, the child protection worker will develop an alternate permanency plan for the child.

In cases where there are several siblings or if the child has special needs or is high risk, a child service worker may be assigned. The child service worker's role is to assess the needs of the child and to work with the child and the kin foster parent to make sure that the child's needs (physical, educational, behavioral, and emotional) are being met. They are also required to meet regularly with the child and kin foster parent and to provide an ongoing assessment of how well the child is doing.

In an attempt to learn how the process is working in Hennepin County, we interviewed staff from the areas of child protection, kinship, licensing and child service, although we focused primarily on the last three areas. We would like to acknowledge and thank the many social workers who met with us. They were eager to share their thoughts as to how well the system was working or not working and they offered many thoughtful recommendations for possible improvements.

Overall, the social workers we spoke with thought that they and the other workers involved with children placed in out-of-home care really cared for the children and worked hard to provide the best service for the children and the kin families they were placed with. There was the sense that most workers liked their jobs. They commented that they were flexible in meeting with children and families and were generally good at developing positive relationships with kin providers. They felt supported by their supervisors and co-workers in their units and were not afraid to ask for help when needed.

Many, however, did express concerns about high caseloads and unrealistic timelines.

- Almost all of the workers interviewed talked about the lack of communication and collaboration between workers. They commented on role confusion, lack of understanding of other's roles, and an overlap in functions (i.e., duplication of efforts). It seemed as though workers were often not "on the same page" when working with the kin foster families.
- Most workers thought that there was not enough focus on trying to match the needs of the children with the ability of the kin foster parents to meet those needs and that children were at times placed in very inadequate homes. There was the general feeling that the message from the county was to place kids quickly in kin homes rather than to make sure the kin homes were suitable for the children being placed in them. One licensing worker commented that with non-relative foster homes the workers try to match the child's needs to the family's ability to meet those needs but that this is rarely done with relative foster homes.
- A number of workers also commented that they did not think the county provided enough support for kin foster parents and that the foster parents often were not aware of the needs of the children placed with them. Again, the focus seemed to be on getting the children placed rather than supporting the placement.
- Many workers commented that kin families are often confused by all the different workers that are involved with the placement.

VI.I. HIGHLIGHTS OF INTERVIEWS WITH KIN FOSTER PARENTS

As part of our research project, we conducted interviews with 14 relative caregivers. The interviews took between 1 to 2 hours and were conducted in homes, at coffee shops or over the phone. Those interviewed had between 1 and 4 children placed with them whose ages ranged from 1 month to older teens. The majority of children were placed with their maternal grandmothers. The foster kin ranged in age from early 20s to early 70s.

Interestingly, almost all of those interviewed had learned of the need for placement from the parent of the child needing placement and, on their own, sought out the possibility of placement. In only a few cases was the contact with the relative initiated by Hennepin County workers.

In our interviews, we attempted to get information regarding how well kinship foster care was working and what could be done to improve the experiences that these kin caregivers had. Several areas will be described below:

Financial: About half of the kin caregivers did not think that having a child placed with them caused much of a financial hardship. The caregivers we interviewed were split approximately 50/50 in terms of whether providing kinship care posed an ongoing financial hardship, with many caregivers reporting at least financial challenges. Almost all of the caregivers relied on the financial help they received and even with this financial help, several said it was difficult to meet the children's needs. Almost all the caregivers thought that it took far too long to receive the first foster care payments and that it was hard for them to buy the necessary supplies before the payment arrived.

Contact with parents: Interestingly, the majority of kin caregivers had no or very limited contact with the birth parent. Of those that did have contact, most felt that the visits, when they occurred, did not go well. The parents did not show up when scheduled, were argumentative, or the relationship was conflictual.

Permanency plan: In 7 cases, the permanency plan was to reunite with the mother. However, of those, 4 of the kin did not think it would work as the parent was not following the case plan. Adoption was the plan for 4 of the cases (these tended to be young children) and TLC was the plan for 3 cases (2 of which were ICWA).

How the children are doing in kinship care: The very young children were generally reported to be doing well. The children from about 4 years of age and older tended to have behavioral problems with varying degrees of difficulty. There were a lot of anger issues, acting out and nightmares. Several of the caregivers said they had not been told about the child's problems prior to placement. Many of the children were in therapy and those in school tended to have IEPs. Almost all of the caregivers reported that therapy was helpful and that the children were doing better after being involved in therapy and being in a more stable home. Several said they would like more help from the social worker in getting help for the children in their care and also help in parenting the children.

Information given to foster parents by Hennepin County: Overall, most foster parents felt that they had been given good information by at least some of the county workers they were involved with. The kinship workers and licensing workers were most often reported to be helpful. Those that had child service workers assigned to the children in their home found these workers to be helpful. There tended to be the most dissatisfaction with child protection workers. Three of the caregivers reported having very bad experiences with the child protection worker. However, almost all of the caregivers interviewed expressed some confusion about who the various workers were who came to their homes and what their roles were. They commented that the communication between various workers was poor and that they were often given different messages by different workers.

What worked well: Caregivers who had stable workers reported this as a plus. Unfortunately, most of the caregivers we interviewed did not experience having consistency in workers. Overall, the written material provided by the county was felt to be helpful. Several commented that the booklet they had been given, *Getting Started. Your Role as a Hennepin County Relative/Kin Foster Parent*, was very useful. Many of those interviewed stated that the ability to communicate by text made it easier to get in touch with their worker. Several of the kin caregivers felt that their workers were trying to be helpful, were respectful towards them, and attempted to communicate with them on a regular basis.

What didn't work well: Unfortunately, the list here was much longer and included:

- Communication between workers and communication with the kin caregivers was often cited as a problem. Kin providers frequently talked about the difficulty in getting calls returned by the child protection worker.

- They felt that there were too many workers involved with their family and that they often didn't understand the various roles of those involved.
- The overall process of getting licensed and receiving payments was felt to be too slow—often taking several months.
- People had trouble getting their accounts set up and payments were not reliable.
- Getting the paperwork done and submitted was made more difficult due to the fact that it could not be done online.
- Getting the necessary training done in a timely fashion was also difficult for many of the caregivers. Several commented that there needed to be more online classes for those who work or live out of the metro area. Also, many of the classes did not seem to be very helpful and caregivers thought that there should be a greater selection of classes.
- Another expressed concern was that the workers didn't seem to ask much about how the children were doing in their care.
- Those caregivers who experienced changes in workers during the placement all commented on how difficult this was. There was the suggestion that if a new worker is needed, the family should be told in advance and helped to prepare for the new worker.
- Some of those interviewed commented on the need for more respite care and also the problem with getting children in daycare. This was especially a problem before the kin provider became licensed.
- A couple of kin caregivers commented on the need for more cultural competency of the workers involved with their family. They did not feel they were treated respectfully and that inappropriate questions were asked of them.

VI.J. KNOWN BARRIERS: FOSTER CARE LICENSING AND CHALLENGES FOR RELATIVES GETTING LICENSED

Current foster care licensing disqualifiers appear biased in nature and outdated, such as citing “food stamp fraud” as a means to disqualify. While there are waivers available for such disqualifiers, the county’s licensing unit makes the recommendation/application to the state regarding relative licensing. In the event that a relative is denied at the county level (i.e., a waiver request isn’t submitted to the state), as far as we have been able to determine there is no county or state system in place to track the denial. This leaves the decision to the discretion of

the county. Should the child(ren) languish in foster care, there is not a system-supported method to revisit previous relative placement options that did not make it to the state level of licensing. Moreover, we have not found evidence that there is a clear process in place to educate/inform relatives denied at the state level of the possibility of requesting a waiver or variance.

VI.K. BEST PRACTICES AND EXAMPLES FROM OTHER STATES

One of our project goals is to highlight best practices and ideas from other child welfare systems that Hennepin County—and Minnesota as a whole—can use to strengthen the use of kinship care as a strategy to achieve positive outcomes for children in foster care.

- *Option for not requiring relatives to be licensed*—Some states, such as Washington State, do not require relatives to be licensed, although they may encourage licensure.²²
- *Supporting and expediting licensing for relatives*—Some child welfare agencies provide various options to help relatives get licensed, including using strategies such as:
 - Deploying staff to conduct expedited emergency licensure within the first day or two after a child enters out-of-home care and is placed with a relative.
 - Providing additional assistance (e.g., kinship navigator, family liaison, etc.) to help relatives understand how to work with the child welfare system, complete the required paperwork, and navigate through the licensure process.
 - Providing emergency kits for relatives to help meet licensing requirements (e.g., smoke detectors, fire extinguishers, first aid kits, etc.)
- *Conducting process mapping to identify barriers and delays in the licensing process*—Many child welfare systems have reduced the amount of time the foster care licensing process takes and made the process easier for applicants (including kinship families) by assessing the full process to identify redundancies, steps that can be conducted concurrently rather than sequentially, and other ways to reduce the burden on applicants. For example, Denver County, Colorado, used lean process mapping to identify and implement strategies to reduce barriers to timely licensing completion. The agency discovered that 80 percent of the process did not feel valuable to the families or the agency and was subsequently able to shorten the licensing process by 62 percent.²³

In addition to specific individual strategies, there is extensive information available about ways to infuse prioritization and valuing kinship care into a child welfare system. One great resource is an article, “[Creating a Kin-First Culture](#),” that highlights seven fundamental steps to creating a kin-first culture in a child welfare system. Developed and written by Child Focus, Generations United and the American Bar Association Center on Children and the Law, the article provides detailed suggestions on how to implement each step and includes examples of promising policies

²² Washington State Department of Social and Health Services. *Fact Sheet: Foster Care Licensing for Relatives*. #22-1493. Revised September 2017. Available at:

<https://www.dshs.wa.gov/sites/default/files/SESA/publications/documents/22-1493.pdf>

²³ Redlich Horwitz Foundation. 2017. *Foster & Kinship Parent Recruitment and Support Best Practice Inventory*. Available at: <http://grandfamilies.org/Portals/0/RHF%20Foster-Kin%20Inventory%202017.pdf>

and practices being used by child welfare agencies across the country. The full article is available online at:

[https://www.americanbar.org/groups/child_law/resources/child_law_practiceonline/child_law_practice/vol-36/july-aug-2017/creating-a-kin-first-culture-/,](https://www.americanbar.org/groups/child_law/resources/child_law_practiceonline/child_law_practice/vol-36/july-aug-2017/creating-a-kin-first-culture-/) with links to specific tools, policies, and other materials from multiple states that Hennepin County—and Minnesota as a whole—can use as resources available at: http://www.grandfamilies.org/wikiHow-for-Kinship-Foster-Care?fbclid=IwAR0eCNQ_KK_abLoq_nqrj3i2KiDyLFRTu4xKq-9aFjHKfJeJsPB8JpKvmpI.

The seven steps are listed below.

How to Create a Kin First Foster Care System: 7 Steps

1. Lead with a Kin First Philosophy.
2. Develop written policies and protocols that reflect equity for children with kin and recognize their unique circumstances.
3. Identify and engage kin for kids at every step.
4. Create a sense of urgency for making the first placement a kin placement.
5. Make licensing kin a priority.
6. Support permanent families for children.
7. Create a strong community network to support kin families.

One of the steps that we think is particularly important for Hennepin County and DHS to consider is: “*Step 2: Develop written policies and protocols that reflect equity for children living with kin and recognize their unique circumstances,*” with the following key points:

Child welfare systems must have a unique perspective when working with kin families and adopt policies that reflect an understanding of the different ways kin and non-kin become involved in the process. Kin-first systems take time to review their policies and practices to ensure they clearly outline how relative caregivers will be notified and engaged when children first enter care, the issues caseworkers should be attuned to in assessing kin families, and how all stakeholders, including the legal community, can advocate for the full range of support kin families need to meet the children’s needs.

While the experiences of kin families may differ from those of non-kin, the supports they need to care for children who have experienced trauma are the same. This means kin families should receive the same financial supports and services to support the children as all other foster families. Kin families may need extra support since many step in without warning and may have immediate needs, such as filling out required paperwork, navigating the licensing process, obtaining car seats and cribs, etc.

We believe that the point about ensuring that kin families receive both the same supports and services as other foster families *and* acknowledging that kin families may need extra support is a

valuable point for Hennepin County and DHS to address in order to ensure that kinship families are provided the necessary support to ensure that the placements contribute to positive outcomes for children.

VII. PANEL MEETINGS

Our panel met on the second Monday of each month with the exception of July. Small groups of panel members met at numerous additional times throughout the year to research specific projects for the panel. We frequently invited guest speakers from other agencies to these meetings to help us learn more about various aspects of child welfare in Hennepin County. In addition, Jodi Wentland, Director of Hennepin County Human Services, and Michelle Lefebvre, Child Protection Services Area Manager, attended most of our meetings to provide us with information regarding Hennepin County efforts in improving child welfare services.

VIII. PANEL MEMBERS

Our full panel for 2018 consisted of:

Lisa Ashley

Susan Dragsten (co-chair)

Alicia Groh

Ila Kamath

Julie Maxa

Janet Pladson

Eliana Power

Suzanne Renfroe

Doreen Robinson

Mary Sheehan (co-chair)

Vickie Underland-Rosow

IX. PANEL MEMBERS' ONGOING DEVELOPMENT --- TRAININGS AND EVENTS WE ATTENDED

In addition to participating in specific meetings, interviews, and other events for our specific projects, panel members participated on committees for the state or county, and also attended

workshops/conferences to continue learning about relevant work pertaining to children and child protection. These included:

- Member of State Mortality Review Committee (Monthly meetings)
- Member of Hennepin County Child Well-being Advisory Committee (Bi-monthly meetings)
- Prenatal to Three Policy Forum at the University of St. Thomas
- New member training for the Citizen Review Panels
- One member attended the 17th National Citizen Review Panel Conference in Michigan (three-day conference)
- Member of the Practice Standards Steering Committee for Hennepin County
- Participated in a panel that interviewed applicants for child protection social work positions
- Participated on the advisory board for the Hennepin-University Partnership (HUP) project on Maltreatment Recurrence, Re-Reporting and Foster Care Re-entry.

X. LOOKING AHEAD TO 2019

We will continue working on two of our projects, one of which was a two-year project and the other a three-year project. We will also be selecting one new project for 2019 as well as following up on past reports to determine the extent to which recommendations were considered or implemented. We will also be continuing to recruit members with diverse backgrounds for our committee.

XI. ACKNOWLEDGEMENTS

Our panel would like to extend its appreciation and gratitude to the following Hennepin County staff for their support and assistance: Jodi Wentland, Michelle Lefebvre, Casey Schmig, Stacy Rudnick, Sam Patnoe, Sabrina Parsons-Hang and all the Hennepin County social workers and supervisors who we interviewed for our projects. We also thank the child protection staff who responded to our questionnaires. We would like to acknowledge Mary Doyle, Minnesota Department of Human Services representative to the Citizen's Review Panel. Without their help and assistance, this report would not have been possible.

We also thank all of the community agencies/private agencies and individuals who spoke with us for our projects. The feedback, insights, and perspectives that these key stakeholders provided were crucial to our panel's work and our ability to provide meaningful findings and recommendations for Hennepin County and DHS.

In addition, we wish to acknowledge and appreciate the ongoing work of the child protection and child welfare staff in Hennepin County. We recognize the intense pressures and expectations involved in child welfare work and we are deeply aware of the ongoing demands and scrutiny on

this important work as both Hennepin County and the state of Minnesota seek to make significant changes to how child welfare/child protection work is done.

While much attention — including within our report — focuses on areas in need of improvement, we also applaud the devoted staff who are working to achieve positive outcomes for children and families while working within immense constraints including having extremely high caseloads. We look forward to continuing our partnership with Hennepin County staff; continuing the good work, and building on the many successes and strengths that already exist.