



WISCONSIN LEGISLATIVE COUNCIL

CHILD WELFARE PROVIDER RATE IMPLEMENTATION

Room 412 East, State Capitol
Madison, Wisconsin

October 15, 2009
10:00 a.m. - 4:35 p.m.

[The following is a summary of the October 15, 2009 meeting of the Special Committee on Child Welfare Provider Rate Implementation. The file copy of this summary has appended to it a copy of each document prepared for or submitted to the committee during the meeting. A digital recording of the meeting is available on our Web site at <http://www.legis.state.wi.us/lc>.]

Call to Order and Roll Call

Chair Grigsby called the committee to order. The roll was called and it was determined that a quorum was present.

COMMITTEE MEMBERS PRESENT: Rep. Tamara Grigsby, Chair; Sen. Robert Jauch, Vice Chair; Rep. Steve Kestell; Sen. Alberta Darling; and Public Members Susan Conwell, Linda Hall, Wanda Montgomery, Bill Orth, Sheila Reichert, and John Tuohy.

COMMITTEE MEMBERS EXCUSED: Public Members John Burgess and Amy Herbst.

COUNCIL STAFF PRESENT: Laura Rose, Deputy Director; and Anne Sappenfield, Senior Staff Attorney.

APPEARANCES: Brenda Reinke, therapeutic foster parent, St. Aemilian – Lakeside; Shirley Combs, treatment foster care provider, La Causa; Christina Hyke, treatment foster care provider, Family Works; Heidi Bronsdon, former foster youth and Secretary of the Wisconsin Youth Advisory Council; Joy Anderson, Executive Director, Family Works, Karen Johnson, Director of Treatment Foster Care, St. Aemilian-Lakeside, Inc., and Brenda Hoskins, Associate Director, My Home Your Home; David Whelan, Director of Research and Program Evaluation, Children's Service Society of Wisconsin; Amelia Franck Meyer, CEO, Anu Family Services, Inc.; Ron Hauser, Vice President of Program Services, and Ken Prust, Executive Director for Children, Youth, and

Family Services, Lutheran Social Services of Wisconsin and Upper Michigan, Inc.; and James Balestrieri, President and CEO, Oconomowoc Residential Programs, Inc.

Approval of the Minutes of the Committee's September 23, 2009 Meeting

Chair Grigsby moved, seconded by Ms. Montgomery, to approve the summary of proceedings of the September 23, 2009 meeting. The motion carried by unanimous consent.

Presentations by Invited Speakers

[Note: PowerPoint presentations and other documents referred to by the speakers are posted on the committee's Internet site.]

Brenda Reinke, therapeutic foster parent, St. Aemilian-Lakeside

Ms. Reinke described her experiences as a therapeutic foster parent in Milwaukee. She has cared primarily for boys and described some of the medical and family issues experienced by the children. She noted that she relies on the extra support she receives from St. Aemilian-Lakeside and would likely not be a foster parent if she did not have the support.

Chair Grigsby asked what support services have been the most helpful. Ms. Reinke noted the support of their case coordinator was very valuable in several areas. Ms. Reinke described the involvement of the coordinator in reviewing care plans for the children, and the weekly visits to assist the children in achieving the goals of their care plan.

Shirley Combs, treatment foster care provider, La Causa

Ms. Combs, a licensed treatment foster parent, has been caring for a 10-year old boy for a year. She described some of his severe behavioral issues. She said that after eight months in her home, he has made substantial progress, made possible with the support of the team from La Causa. In response to a question from Mr. Orth regarding treatment foster care rates, she said that she supplements the rate with some of her own funds because she considers her foster child to be a member of the family. Ms. Combs talks with the case worker almost daily, and meets personally with them on a weekly basis.

Christina Hyke, treatment foster care provider, Family Works

Ms. Hyke stated that she and her husband have been treatment foster care parents since 2005. She described experiences with one of the children, who had been in Mendota Mental Health Institute for mental health issues. She described the substantial progress he has made, both behaviorally and academically, since being in their home. She said that they would like to adopt him, but the judge in Marquette County, his county of residence, does not favor termination of parent rights. She then described her experiences with other foster children and their progress.

In response to a question from Chair Grigsby, Ms. Hyke stated that she works as a treatment foster parent because she knows the alternative placement for these children would be in a residential

care center, which does not provide a home-like atmosphere. She said that Family Works provides a lot of training and support for their treatment foster parents.

In response to a question from Mr. Orth regarding the sufficiency of treatment foster care rates, she commented that the rates are commensurate with the work that they do. However, the rate does not provide for retirement or health insurance benefits.

Ms. Hyke noted the excellent support provided by Family Works. They give her a say in deciding who will live in their home. She refuses to take children who are current drug users because of their influence on other children in the home. In response to a question from Ms. Montgomery regarding annual rate increases, Ms. Hyke stated that Milwaukee County had just changed their rate structure to one blanket rate, which is increased by a small amount every year.

Heidi Bronsdon, former foster care youth and Secretary of the Wisconsin Youth Advisory Council

Ms. Bronsdon described her experiences as a child in foster care homes throughout her childhood. She stated that she had been in foster care for approximately seven years, and described her experiences as a foster child. She was ultimately adopted by her foster mother just prior to her 18th birthday. Ms. Bronsdon also described the experiences of her siblings in their foster care placements. She also described her work with the Wisconsin Youth Advisory Council. They come to the Capitol every spring to advocate for legislation, such as mandatory foster parent training.

In response to a question from Chair Grigsby regarding what has helped her succeed, Ms. Bronsdon stated that her resiliency was a factor in her success. She said she also had a good foster mother, who is a social worker. She noted the need for support groups for both foster children and their parents.

Joy Anderson, Executive Director, Family Works, Karen Johnson, Director of Treatment Foster Care, St. Aemilian-Lakeside, Inc., and Brenda Hoskins, Associate Director, My Home Your Home

Ms. Johnson, Ms. Anderson, and Ms. Hoskins appeared as a panel to discuss their treatment procedure programs, outcomes, and rate issues.

Background

Ms. Johnson, St. Aemilian-Lakeside, described ongoing support and clinical interventions that are provided to foster parents and birth families of youth in foster care. At St. Aemilians, there are weekly in-person meetings with the staff, foster parents, and children; an on-call system; supervisor backup systems; a minimum of 20 units per year of respite care; funding for camps and other activities for foster children; and other support groups. She said that St. Aemilian-Lakeside is committed to trauma informed practice, which is an empathic approach to working with foster youth based on the knowledge of brain development.

Ms. Hoskins, My Home Your Home, said that their organization is now accredited by the Foster Family-Based Treatment Association (FFTA). They require 40 hours of training per foster parent per year, which is 20 hours more than required by the Wisconsin Administrative Code. Their organization conducts performance evaluations and based on these evaluations a foster parent can qualify for

incentives. The organization provides a monthly support group; two respite days per month; crisis respite care; and 24-hour crisis on-call staff.

Ms. Anderson, Family Works, described her organization's work in all counties of Wisconsin. Many of their social workers work out of their homes and spend a lot of time on the phone and traveling to the treatment foster parents' homes. She stated that they require 36 hours of preservice training, 24 credits per year of additional training, and provide monthly support group meetings for their foster parents. They provide two to six days per month of respite care, exceeding Wisconsin Administrative Code requirements. They also provide an on-call system and crisis response availability. She noted that all three agencies testifying at the hearing are members of FFTA.

Outcomes

Ms. Anderson noted the following outcomes among the 169 children at Family Works: no incidents of substantiated maltreatment; no license revocations; 12 adoptions; 17 adoptions in progress; and 90% of the children had one placement while at Family Works.

Ms. Hoskins noted the following outcomes at My Home Your Home: no use of corporal punishment; use of de-escalation techniques; seven adoptions; 16 adoptions in process; and 97% of the children had one placement while at My Home Your Home.

Ms. Johnson noted the following outcomes at St. Aemilians-Lakeside: 24 children adopted; no incidents of reported maltreatment; and 82% of the children had one placement while at St. Aemilians-Lakeside.

Rates

Ms. Anderson discussed the components of the treatment foster care rates. She noted that there are fixed business costs attached to each agency. Costs that vary included facility costs and transportation costs, which vary by urban or rural setting. There is also variance in the cost of living, by region.

She said that all three agencies represented at the hearing exceed requirements set in the Wisconsin Administrative Code. She stated that they are concerned that the proposed new system for treatment foster care provider rates will not recognize providers who are going beyond the minimum requirements. She said that they usually place only one or two children per home, which increases the need for foster care homes.

Ms. Anderson referenced FFTA standards and the work that organization has done researching evidence-based treatment, such as development of a "risk of disruption" inventory.

Each of the three provider representatives then presented case examples of difficult children placed in their care that had experienced progress in the treatment foster care setting.

In response to a question from Chair Grigsby regarding how the state can get a handle on controlling treatment foster care costs, Ms. Hoskins said that FFTA has information on costs that could be referenced. Ms. Johnson stated that she supports tying outcomes and performance to payment, and that all providers should be working towards achieving safety and permanence. Ms. Anderson stated

that there is not a “one size fits all” situation, and that if rates are negotiated, the child’s age should be a factor in setting a rate.

Ms. Hall stated that it is important to keep these stories in mind when thinking about reimbursement rates. She said that investments that are made now produce savings later on.

Senator Darling asked the speakers to comment on the turnover rate of social workers. Ms. Johnson said that there is a need to support the staff, to provide weekly and individual and group supervision, and to offer training throughout the year. She said that the work is challenging and that it is important to make sure that the social workers have the necessary tools. Ms. Anderson commented that having small caseloads gives the social workers the time they need to do their work well. Ms. Hoskins noted weekly meetings that provide support to the social workers.

Mr. Orth commented that one of the biggest challenges is identifying key factors in rate setting. It is important to note desired outcomes and recognize the need to individualize rate negotiations. Ms. Johnson said that it is important to keep low caseloads and to know the families that they are working with. Ms. Anderson said that the system needs to recognize the needs of each child and provide flexibility to meet those needs. Ms. Hoskins noted the need for more training of treatment foster parents.

Ms. Montgomery noted the existence of a treatment foster care collaborative group involving 10 agencies, which has conducted joint trainings.

David Whelan, Director of Research and Program Evaluation, Children’s Service Society of Wisconsin

Mr. Whelan stated that his organization places children in treatment foster care for the Bureau of Milwaukee Child Welfare. The placement staff have not observed a great deal of variation in the quality of services based on the rates. He stated that when placing children, their organization looks for access and stability. In the new regulation system, they are looking for a sustainable rate so that they can find treatment foster parents who are willing to take risks. He said that having a family setting available for foster children is a huge benefit, and that good foster parents are not found, but are developed. The FFTA creates an expectation that the treatment foster care homes that they enlist will meet certain standards.

Mr. Whelan then provided examples from other states that are using outcome measurements. He said that Philadelphia uses the Child and Adolescent Needs and Strengths (CANS) tool as an assessment measure to determine the needs of treatment foster care children and to assist in planning when they leave care. He said that Philadelphia was able to reduce the length of stay and reduce costs by using CANS. In Kentucky, a nonprofit organization was hired to set quality indicators. Tennessee contracted with Chapin Hall at the University of Chicago to determine a method to rank higher care level providers.

Representative Kestell asked for feedback on the Tennessee process for rate setting. Mr. Whelan stated that treatment foster care providers generally did not like the process, but Tennessee personnel thought the indicators may assist poor performers in raising their standards. He noted that in Wisconsin, agencies have differing reputations, but many are trying to be innovative. He said that it is very beneficial to place treatment foster children into stable family environments, and that evaluating results needs to be done on a case-by-case basis. In response to a question from Mr. Orth, Mr. Whelan said he did not think the states he mentioned tied rates to quality. He added that many of the treatment foster

kids that are placed are very tough, and that agencies should be encouraged to take risks and to work with the more difficult cases.

Ms. Hall asked how an external agency can measure what is being done by the providers. Mr. Whelan said that counties could do this, but that some smaller counties with fewer kids would have more difficulty getting generalizable data. He noted a need for agreed-to quality indicators, and said that the CANS tool is one way of evaluating how providers are performing.

Senator Darling said that there was a need to identify the ultimate goals of the system, such as permanency, consistency of placement, high school graduation rates, and the ability to obtain employment. Representative Kestell suggested checking home visitation evaluation systems developed by the University of Wisconsin-Extension, to see if they had developed uniform criteria for home visitation providers.

Amelia Franck Meyer, CEO, Anu Family Services, Inc.

Ms. Franck Meyer said that there is not one universally agreed-to model of treatment foster care, but there are common elements. Generally, treatment foster care children have higher levels of need that require specially trained foster parents; therapy; and small caseloads for social workers. She noted organizations such as FFTA, the Quality Outcomes Leadership Alliance, and the Benchmark TFC program have established quality indicators. She said that Anu Family Services measures outcomes by customer satisfaction surveys; continuous quality improvement (CQI) metrics; and outcomes on discharge measurements. She said that 79% of their children are discharged to less-restrictive settings, and 57% of children are reunited with families or adopted. 95% of the families remained with the same family during their care.

Ms. Franck Meyer said that Anu's major goal is be the last placement for 90% of their children before they achieve permanence. The family search and engagement model is used to prepare youth for permanence. They are also conducting a complete review of their organizational culture, training, and policies and procedures to achieve this goal, and continue to seek funding to support this initiative. She said that treatment foster care agencies are not allowed to keep reserves, which makes it difficult to fund these quality initiatives. She said that without investment in treatment foster care, Wisconsin will lose its ability to achieve positive outcomes. She said that the Casey Foundation has hired 40 consultants to work with states to reduce, by half, the number of children in care. Chair Grigsby commented on the need to invest at the front end to keep children out of care, and to invest in the children's parents.

Ms. Franck Meyer noted an 80-90% retention rate of Anu social workers who have caseloads of eight to 11 children.

Mr. Orth commented that he thinks the current treatment foster care rates are adequate to support the needs of the families, and that this committee's task is to insure that agencies meet certain criteria. He noted that the rate setting model outlined in an FFTA white paper is based on the children's level of need, and uses performance-based contracting based on the level of care. Ms. Franck Meyer suggested looking at Louisiana, Illinois, Tennessee, Kentucky, and Philadelphia for outcome measurements.

Ms. Conwell asked what concrete items should be looked at, versus long-term outcomes. Ms. Montgomery commented that if Milwaukee caseloads were 8 to 10 children per worker, turnover would be much lower and that the public child welfare system must take every child that comes their way.

Ron Hauser, Vice President of Program Services, and Ken Prust, Executive Director for Children, Youth, and Family Services, Lutheran Social Services of Wisconsin and Upper Michigan, Inc.

Mr. Hauser provided some background on Lutheran Social Services of Wisconsin and Upper Michigan (LSS), which began in 1882 and provides nine lines of service. Children, Youth and Families and Adoption and Foster Care are two of the lines. He said LSS focuses on creating a partnership with children, families, and service providers. In 1996, LSS began looking at how to help the most difficult children in the system, and began the Family Partnership Initiative (FPI) in response to this discussion. The FPI has expanded to 15 counties. The “YES” program, which is a similar program in northwestern Wisconsin, will merge with FPI next year, bringing the total to 30 counties. There are 642 children served in this program, with referrals to the program made through the county system.

Mr. Hauser stated that family team meetings address a plethora of issues, and focus on family strengths. The care coordinator’s job is to seek strengths within each family and build off of what the family considers important in creating a care plan. The capitated rate for this program is \$3,960 per month per child. LSS negotiates rates with providers for this program. The caseload size is 8.33 children per care coordinator. Counties require providers to provide plans of care; a crisis plan; and a termination summary. The counties want the FPI to show reduced delinquency; increased school performance and attendance; increased permanence; and behavioral changes in the children served.

Among their caseload, 81% have had no new adjudications; 90% have improved their school performance with 82% of the children on track for graduation or certificate of general educational development; and 86% achieving permanence. He noted that care coordinators are a part of the project’s success and the turnover is very low for the program. If a case is exceeding the cost benchmarks, a utilization review is conducted. At times, community-based care can be more costly, but eventually, natural supports are developed to the point that program supports can be withdrawn. Throughout this model, the family is a direct consumer of services and it has input into what services are provided.

Chair Grigsby stated that because of the press of time, committee members should submit their questions in writing to the staff, who would submit these questions to the presenters.

James Balestrieri, President and CEO, Oconomowoc Residential Programs, Inc.

Mr. Balestrieri is the Chief Executive Officer of Oconomowoc Residential Programs, which serves 1,300 individuals in several different care settings, including children in the Oconomowoc Developmental Training Center and the Genesee Lake School. Mr. Balestrieri stated that he feels that the provider rate regulation proposal will not improve outcomes for children or provide control over costs. He said that residential care center rates tend to be reasonable, and that the wide variation in rates can be explained by additional services provided by certain residential care centers, such as educational services. He made several recommendations for modifying the residential care center licensing system in the event that provider rate regulation is pursued.

Chair Grigsby stated that because of the press of time, committee members should submit their questions in writing to the staff, who would submit these questions to the presenters.

Discussion of Committee Assignment

Chair Grigsby stated that at the next meeting the committee will discuss efforts in other states to set child care provider rates; look at differences between what the State of Wisconsin requires of its providers versus what the providers actually provide; and look at research papers to examine how issues of performance measurement and rate setting are handled.

Mr. Tuohy stated that at the next meeting, the Department of Children and Families (DCF) will have residential care center and group home rate information provided. Mr. Orth commented that it would be good to discuss the respective roles of this committee and the DCF committee. Mr. Tuohy said he envisions that this committee would articulate general principles for establishing rates for child welfare providers.

Plans for Future Meetings

Chair Grigsby stated that subsequent meetings of the committee have been scheduled for *November 17, 2009 and December 17, 2009*.

Adjournment

The meeting was adjourned at 4:35 p.m.

LR:ksm