

# Taking a Comprehensive Approach to the Welfare and Wellbeing of Children and Families

Karen L. Bowling, Cabinet Secretary, DHHR  
October 21, 2014

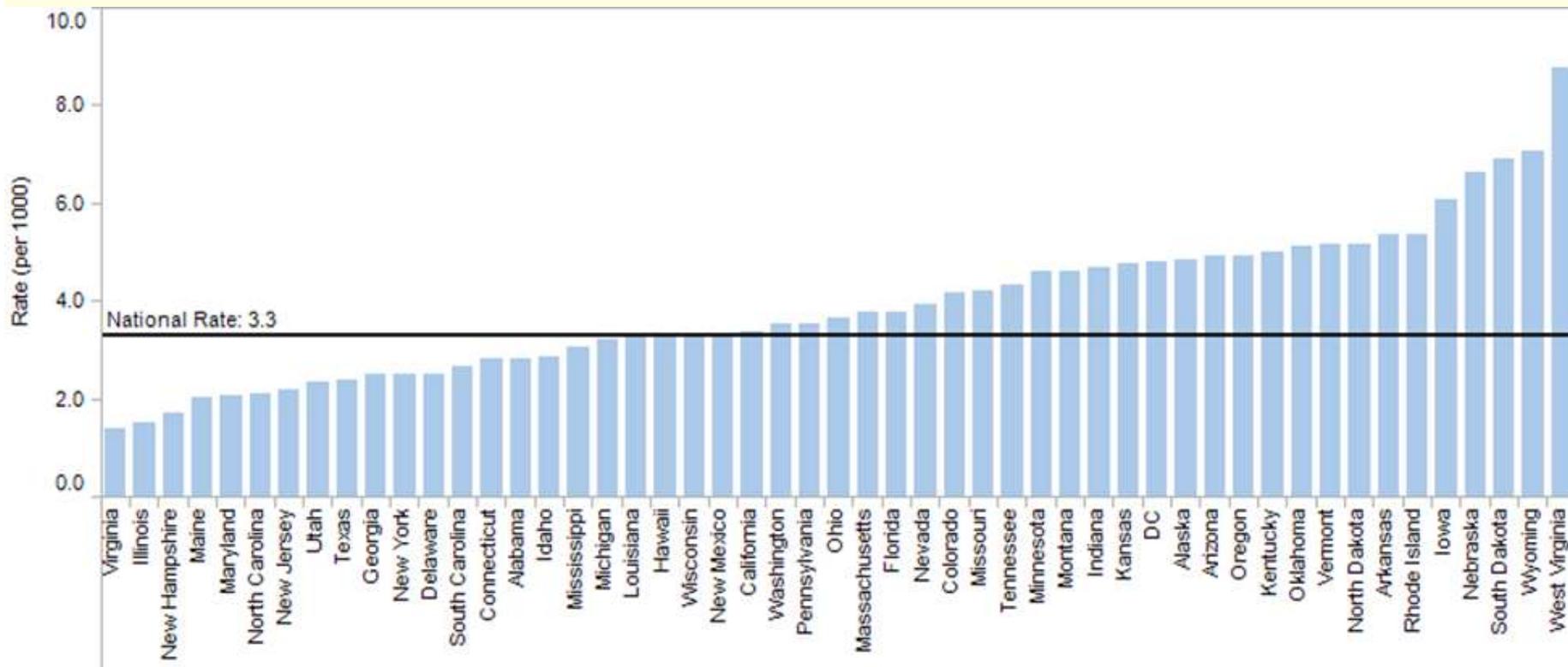


## Three Branch Institute on Child Social and Emotional Well-Being

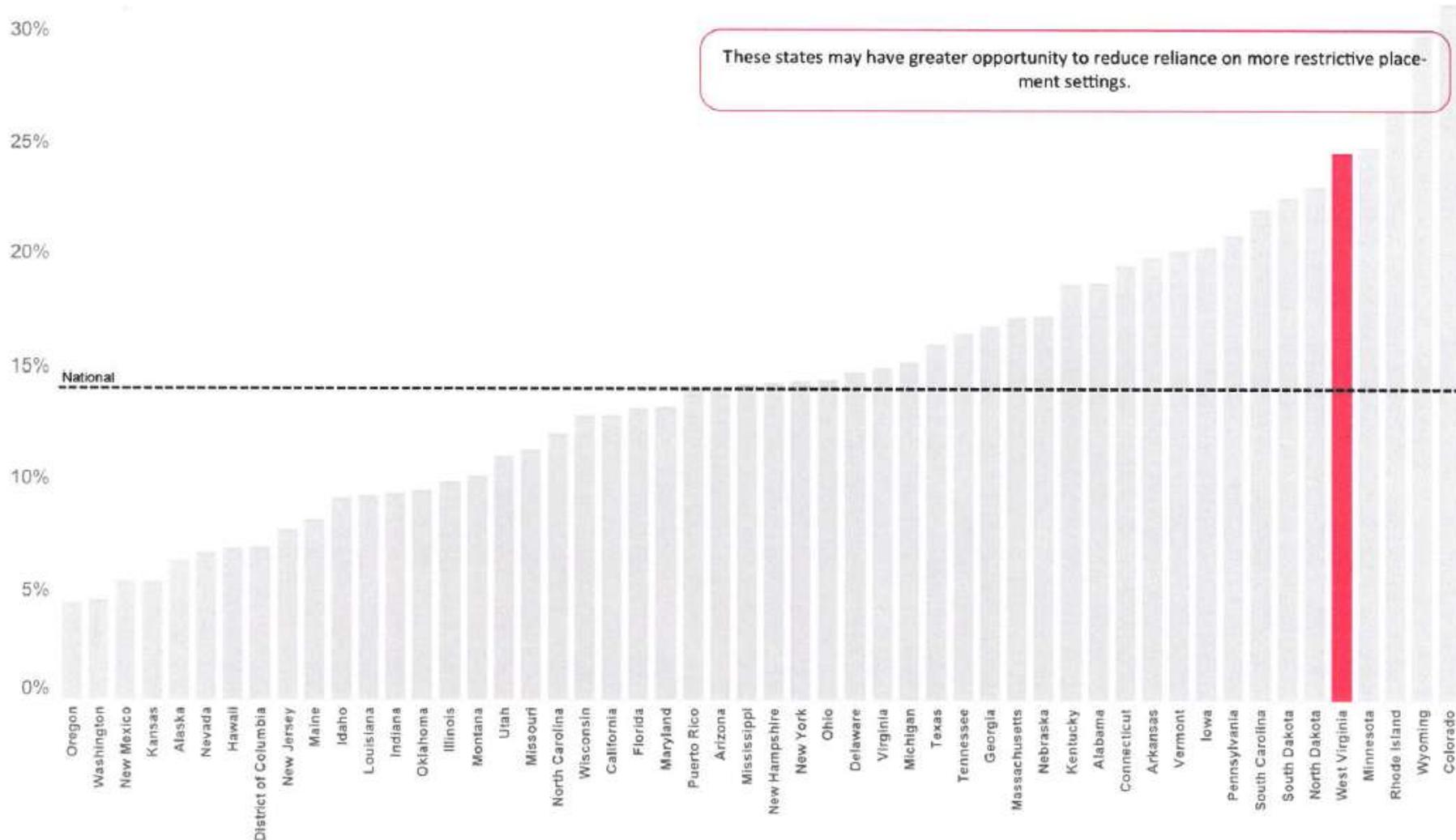
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- National Governors Association Center for Best Practices.
  - National Conference of State Legislatures.
  - National Council of Juvenile and Family Court Judges.
  - National Center for State Courts.
  - Casey Family Programs.
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- Engaging stakeholders from the Judicial, Legislative, and Executive branches of government.
  - Provide better outcomes for children and improve the social and emotional well-being of our foster children.

# Child Welfare Indicators: Children in Care



# Child Welfare Indicators: Children in Congregate Care



# Foster Children Receive Timely Screenings

**The rate of foster children scheduled for a medical screening within one day to three days of placement has increased from 17 % in 2013 to 63.5 % in June, 2014. The goal is screening will occur within three days of placement.**

**Demonstration project headed by Dr. Lewis of the Marshall University Medical School will screen every foster child for trauma.**

- A screening tool has been developed.
- The tool will be initiated in physician residency clinics by the end of the year.
- American Academy of Pediatricians is considering the pilot to implement trauma screening nationwide for all children.

**Taking a preventive approach to reduce the number of children with NAS placed in out of home care.**

- In the Spring, BCF initiated a new web-based reporting system to track babies with NAS.
- Surveying pregnant and postpartum women to identify barriers to accessing treatment:
  - WVU at Chestnut Ridge Center.
  - Dr. David Chaffin, from Joan C. Edwards SOM.
  - WV Perinatal Partnership is compiling survey data from the statewide three-year moms and babies program.

# Lily's Place Pilot

- New Local Neonatal Abstinence Recovery Center.
- Six month pilot with the BCF.
- To support healthy babies and families, Lily's Place provides:
  - Therapeutic handling method and latest weaning techniques to ease the discomfort of the baby.
  - Non judgmental counseling and support for the parents.
  - Education for the parents and caregivers.
  - Referral to appropriate human service programs and support.

# Lily's Place Pilot

**The facility officially opened October 1, 2014.  
The First Lady and I had the privilege of cutting  
the ribbon.**



# Children Remain in Their Community

## Implementing a TITLE IV-E Waiver pilot, *Safe at Home West Virginia*, in two regions of the state.

- Will provide wrap-around behavioral and human services to:
  - Support and strengthen families to keep children in their homes.
  - Return children currently in congregate care to their communities.
  - Reunite children in care with their families.

14 counties will be included in the initial demonstration:  
Kanawha, Boone, Cabell, Wayne, Jackson, Mason, Roane,  
Lincoln, Putnam, Logan, Mingo, Berkeley, Jefferson, Morgan

## **Our children and families will:**

- Be safe.
- Have a strong, permanent connection with family and community. While reunification, adoption, and legal guardianship are ultimate goals, we need to make sure that all children have caring adults in their lives.
- Be successful in their lives and have enhanced well-being.
- Be mentally and physically healthy.
- Be supported, first and foremost, in their homes and home communities, and by receiving the correct services to meet their needs.

**Our child-serving systems will be transformed to meet the needs of children and families.**

# Safe at Home West Virginia

- Targeted implementation date is October 2015.
- Safe at Home West Virginia will be based on the “National Wraparound Initiative” engaging community support and providing services individually designed to meet the complex needs of children and families.
- This will require true partnership between the Bureau for Children and Families, families, and our community partners.
- Elements of the service model will include assessments, care coordination, planning and implementation, and transitioning families to self-sufficiency.
- It will be focused on a single coordination plan for the child and family.

## **The Keystone of the Single Coordination Plan**

### **CANS tells us what to do next:**

- Does not replace existing tools.
- Safety, risk and other assessments remain essential.
  - Family Functioning Assessment.
  - Youth Risk Assessment.
  - Case Plan/Service Plans.

### **Triggers the need for targeted assessments.**

- CANS is not a diagnostic tool.

## **CANS Decision Making Tool**

Guides the decision for:

- Wrap-around services for the family.
- Service gaps to be developed in the community.
- Supports needed to maintain children in the community.
- Alternatives to out-of-home placement.
- Placement decisions when they are absolutely needed.

# WV CANS Next Steps

- BCF social work professionals trained to use the CANS.
- Revised WV CANS on-line training for BCF professionals.
- Wider use of WV CANS across all systems.
- University partnership.
- Essential for measuring effectiveness of all services and programs, especially those for Youth Services and Child Protective Services, will be:
  - Automation of CANS Scores and Summaries.
  - Analysis of data for Total Clinical Outcomes Management (TCOM).
  - Guided Decision Making.

# Contact Information

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