

Commission on Improving the Status of Children in Indiana

*Wednesday, August 21, 2013, 10:00 A.M. to 2:00 P.M.
Indiana Government Center South, Conference Room C*

Minutes

Members present. Justice Loretta Rush, Chair; Debra Minott, Secretary, Family and Social Services Administration; Mary Beth Bonaventura, Director, Department of Child Services; Representative Gail Riecken, Evansville; Kevin Moore, Director, Division of Mental Health and Addiction; Ryan Streeter, Senior Policy Director for Governor Mike Pence; Lilia Judson, Executive Director, Division of State Court Administration; Susan Lightfoot, Chief Probation Officer, Henry County; Mike Dempsey, Director, Division of Youth Services, Department of Correction; Greg Zoeller, Attorney General; Dr. William VanNess, State Health Commissioner; Glenda Ritz, Superintendent of Public Instruction; Senator Tim Lanane, Anderson; Larry Landis, Director, Public Defender Council; David Powell, Director, Prosecuting Attorneys Council; Representative Rebecca Kubacki, Syracuse; and Senator Travis Holdman, Markle.

Staff present. Amber Holland and Anne Jordan.

Guests present: Bill Stanczykiewicz, Indiana Youth Institute; Dr. Page B. Walley, Casey Family Programs; Susan A. Weiss, Casey Family Programs; and Christine Calpin, Casey Family Programs.

1. Welcome and Introductions. Justice Loretta Rush welcomed the Commission on Improving the Status of Children in Indiana to their inaugural meeting, briefly outlining the history in establishing the Commission. She noted that Indiana's Commission is unique in the country because it involves leadership from all three branches of state government.

2. Reports from invited guests. **Bill Stanczykiewicz**, President and CEO of the Indiana Youth Institute, was invited to share information and offered the following about IYI.

The **Indiana Youth Institute** (IYI) is a statewide nonprofit organization originally funded by the Lilly Endowment. He stressed that IYI does not lobby. It provides training and professional development programs for agencies and for youth development staff. He reported that IYI tracked a mentoring program through which children were matched with mentors and found that those children had a 2/3 lower rate of re-offending. IYI is also focused on preparing vulnerable children for college. This initiative includes websites ("The Drive of Your Life" and "Trip to College") which enable youth to develop educational plans and parents to prepare for the youth's college. IYI's Indiana Mentoring Partnership works with the 21st Century Scholars program to improve the number of students who obtain Associate degrees within two years and Bachelor's degrees in four years. IYI is the Annie E. Casey Foundation KidsCount data provider for the state of Indiana and, as such, provides over 100 indicators that can be sorted into various reports by county, zip code and even by school district. The IYI issue briefs and data sheets are available on-line on its website.

Justice Rush also asked **Dr. Page B. Walley, Managing Director of Casey Family Programs' Strategic Consulting**, to provide an overview of Casey Family Programs' work and goals, particularly as they relate to work with Indiana's Department of Child Services (DCS). Dr. Walley reported that the organization's long-term goal is to reduce the number of children in out-of-home care nationally by 50% by the year 2020. Over 500,000 children were in out-of-home care in 2005; that number now is 383,000.

He reported further that, since 2007, Casey has focused its work in Indiana on strengthening families and keeping children safely at home or returning children safely to their homes. For children who are unable to be reunited with their families, the focus is on movement of the children to permanent families. Overall, the focus

is on safety, permanency and well-being of children. Indiana's rate of children in out-of-home care has remained relatively flat. Casey is preparing to "double down" on its efforts to assist Indiana. One method that may assist Indiana is data-mapping technology that can identify where the services are, where the referrals are coming from and what goes on within the service delivery network. This information can be used to develop a more specific plan for Indiana to meet its goals.

Casey Family Programs is offering technical assistance, consultation and other resources to support the Commission's goals and enhance its activities.

3. Review Statutory Requirements of Commission on Improving the Status of Children in Indiana. Justice Rush reviewed the statutory charge of the Commission and the requirements related to its work. The Commission must prepare and submit a report by July 1st of each year to the Legislative Council, the Governor and the Chief Justice. Justice Rush is hoping to establish an Executive Committee of the Chairs of the Commission for the purpose of continuity, as she will rotate off as Chair at the end of this year. A legislator will follow as the Chair for 2014, and the Governor's representative will be the Chair in 2015.

4. Presentations by Commission Members. Each Commission member was given the opportunity to present the following information: agency overview; description of how the agency serves vulnerable youth; available data on vulnerable youth; and initial priorities for Commission. An initial summary of the data available from each agency was collected and will continue to be updated.

❖ **Debra Minott, Secretary, Family and Social Services Administration (FSSA).** Four of the five FSSA divisions impact children. Secretary Minott focused on three of those divisions, as the Director of the Division of Mental Health and Addiction is also a Commission member and will cover information and data related to that division. The Office of Medicaid Policy & Planning (OMPP) provides Medicaid, M-CHIP and SCHIP services to over 600,000 children. The Division of Rehabilitative Services (DRS), through the First Steps program, provides services to about 20,000 children in any given year. An additional 1,812 children were served through the Medicaid waiver and 91 children were served in group homes. The Division of Family Resources (DFR) served about 21,000 children in one-parent families on the Temporary Assistance to Needy Families (TANF) program and about 2,000 children in two-parent families. Almost 40,000 children are receiving child care assistance, with about 77% of that care being provided in licensed day care.

Priorities of FSSA for the Commission include the following:

- Promote the self-sufficiency of low-income working families.
- Increase the use of Well Child Visits to ensure preventative care, immunizations and Early Periodic Screening Diagnosis and Treatment (EPSDT) to monitor a child's development.
- Improve access to health services for children throughout Indiana, including dental care.
- Promote children's learning and increase school readiness and academic success by improving the quality of early care and school age out-of-school time programs.
- Provide more effective crisis support to families of children with Intellectual Disabilities/Developmental Disabilities (ID/DD) to prevent out-of-home placement or incarceration.

❖ **Mary Beth Bonaventura, Director, Department of Child Services (DCS).** DCS's core mission is to protect children from abuse and neglect by partnering with families and communities. An additional mission is getting money to kids through establishment, enforcement, payment processing and disbursement of child support orders. The following are core functions of DCS: receive reports of child abuse and neglect; complete assessments on reports of child abuse and neglect; conduct ongoing case management to guide a family through services, placement, permanency and case closure; administer the Title IV-D child

support program in Indiana. The program for enforcing child support is state administered and county operated. It involves the establishment of paternity and child support as well as its enforcement and disbursement. DCS processed over \$1 billion in child support payments in the past year. DCS serves vulnerable children through prevention, preservation of families, placements and reunification services, and permanency and support services provided after the child's case is closed. Director Bonaventura expressed a particular concern about the lack of services in rural areas, as opposed to the array of services that are available in Marion and Lake Counties.

Priorities of DCS for the Commission include the following:

- Early identification of at-risk youth.
- Establish clear roles and responsibilities for agencies serving vulnerable youth.
- Address service availability and access challenges.

One of the Commissioners asked about the availability of predictive modeling regarding the occurrence/reoccurrence of child abuse and neglect. Dr. Walley responded that there are many safety and risk assessment tools, and he will forward information to Director Bonaventura to be shared with Commission members.

- ❖ **Representative Gail Riecken.** Representative Riecken provided information and statistics specific to Evansville and Vanderburgh County, which she represents. She serves on the Child Services Oversight Committee and served on last year's DCS Interim Study Committee.

Representative Riecken's priorities for this Commission include the following:

- Promote transparency and accountability in services and programs for Hoosier children.
- Encourage collaboration and communication.
- Address other trends and issues affecting the status of children.
- Recommend policies to Oversight Committee for DCS and local services to protect babies born to drug-addicted mothers.

- ❖ **Kevin Moore, Director, FSSA's Division of Mental Health and Addiction (DMHA).** Director Moore announced that DMHA is elevating the focus of its work with children to a Deputy Director level. The Deputy Director is Sirilla Blackmon. DMHA served over 50,000 children, who had a diagnosis of serious emotional disturbance last year, through its contracts with providers in mental health clinics, schools and other community based settings. DMHA services are provided by organizations under contract with DMHA. Children and adolescents eligible for services are those who meet the definition of Serious Emotional Disturbance based on diagnosis, functional impairment and duration; those that reside in one of Indiana's counties and currently receive public assistance through Medicaid, TANF (Temporary Assistance to Needy Families) or SNAP (Supplemental Nutrition Assistance Program) or the family income is at or below 200% of the HHS Poverty Guideline.

Priorities of DMHA for the Commission include the following:

- Access to effective treatment for youth with Substance Use Disorders.
- Access to interventions or treatment for youth who have experienced trauma.
- Access to mental health and addiction services for youth involved with the juvenile justice system.
- Access to assessment for early identification and intervention.
- Access to the appropriate level of service regardless of funding.

- ❖ **Ryan Streeter, Senior Policy Director for Governor Mike Pence.** Dr. Streeter stated that the Governor wants to thank everyone for the seriousness in taking on their responsibilities as Commission members.

Priorities of the Governor's Office for the Commission include the following:

- Pathways for every child to achieve the child's dreams.
- Provide services that wrap around the child.
- Find the cracks in the service delivery system and seal those up, reduce duplication where it exists and do what needs to be done.
- Develop the workforce through innovation, career and college readiness.
- All children, including vulnerable children, can have career and college goals.

Justice Rush echoed his comments about the need to improve high school graduation rates and college readiness for children in the systems so that they do not end up in the state's prisons.

❖ **Lilia Judson, Executive Director, Division of State Court Administration.** Director Judson provided an overview of the judicial system. The Indiana judiciary serves a crucial role in the lives of vulnerable youth, and judges and juvenile probation officers act as gate-keepers. The Indiana Supreme Court rules govern court procedure but less so in juvenile cases because the legislature has set juvenile procedures. The Judicial Conference of Indiana and Indiana Supreme Court Division of State Court Administration work in the juvenile arena.

- In 2012 there were 43,000 new referrals to juvenile probation of juvenile delinquency.
- 70,000 new juvenile CHINS (child in need of service), juvenile delinquency and termination of parental rights cases were filed in the courts.
- 18,400 juveniles were under probation supervision by the courts.
- The Judicial Conference of Indiana, chaired by the Chief Justice, works through the Juvenile Justice Improvements Committee, Juvenile Benchbook Committee, and Child Support Guidelines Committee, among others.
- The Court Improvement Program tracks the timeliness of permanency data; an administrative rule requires all courts to track the timelines to permanency for CHINS cases.
- Courts use Indiana Youth Assessment System (IYAS), an evidence-based risk and needs assessment tool used in critical stages of juvenile justice proceedings.
- State Court Administration manages the Indiana Guardian ad litem/Court Appointed Special Advocate (GAL/CASA) program; in 2012, 18,000 volunteers represented children.
- Pending automation projects include a focus on Disproportionate Minority Contact (DMC) and predisposition reports and other tracking and development of a juvenile database for all juveniles in the justice system, whether delinquents or CHINS.

Priorities of the judicial branch for the Commission include the following:

- Need consistent cross-agency data sharing.
- Improve State-Level Justice/Education System Collaboration.

❖ **Justice Loretta Rush, Indiana Supreme Court.** Justice Rush noted that Lilia Judson's power point document, which will be circulated with all other presentations, reports on three other important issues:

- (1) the **Juvenile Delinquency Alternative Initiative (JDAI)**, a collaborative, proven community effort that is aimed at providing appropriate responses to detention.
- (2) the work of the **Indiana Criminal Justice Institute** in the area of juvenile law, particularly on Disproportionate Minority Contact (DMC), which reviews the contact minority juveniles have with the juvenile justice system.
- (3) Initiative that provides **Mental Health Screening** to juveniles in detention, allowing for early and more accurate services to such children.

Justice Rush then reported on the top five areas of concern submitted by judicial officers in response to an email sent by the Indiana Judicial Center. Priorities of Indiana's juvenile judges for the Commission include the following:

- Develop policies and procedures to improve communication, cooperation and long-range coordination with the Department of Education/local school districts, DCS, probation, DOC and the Juvenile Courts.
- Develop policies and procedures to meet the needs of "dual jurisdiction" children.
- Conduct an assessment of the availability of services in each of Indiana's 92 counties to determine if there are gaps in available programs or services and then devise a plan to correct the disparate distribution of services.
- Evaluate the availability of mental health services for severely mentally ill children and trauma based care for abused, neglected and at risk children.
- Further encourage Juvenile Detention Alternatives Initiative as well as Disproportionate Minority Contact efforts on a statewide basis.

❖ **Susan Lightfoot, Chief Probation Officer, Henry County Probation Department.** Ms. Lightfoot noted that she is honored to serve and to represent probation officers. Probation officers are involved with the child from the point of entry and referral through the life of the case. Caseloads vary from county to county and are often high, which affects the amount of time that a probation officer can spend getting to know each child and the family.

Priorities of probation officers for the Commission include the following:

- Mental illness and lack of service.
- Concerns about implementation of recent legislative changes.
- Substance abuse issues and lack of resources.
- Medicaid issues.
- Boundary/relationship issues between probation and DCS.

❖ **Mike Dempsey, Director, Indiana Department of Correction, Division of Youth Services (DOC/DYS).** Director Dempsey noted that his organization has responsibility for juvenile justice system children who are committed to DOC. DOC also oversees the 22 juvenile detention centers and the community corrections programs.

Priorities of DOC for the Commission include the following:

- Providing alternatives to DOC commitment for youth with serious mental health diagnoses and educating the courts on what services could be offered for youth with serious mental health disabilities in place of committing them to the juvenile justice system. Ensuring that there are an adequate number of adolescent mental health beds within the state of Indiana.
- Ensure collaboration of services for "crossover" youth, particularly those with prior DCS or mental health history. Provide a seamless transition for youth involved in the child welfare or mental health system who crossover into the juvenile justice system to cross back over and receive services upon release from DYS.
- Youth being released from the DOC/DYS are not eligible for Medicaid benefits while they are on parole status and assigned to a re-entry/residential group home program. We need to find a process that would allow Medicaid eligible youth to access these benefits during the re-entry process. Currently, youth must be fully discharged from the DOC in order to receive Medicaid benefits.
- Continue with the JDAI Statewide expansion and ensure youth are placed and receive services in the least restrictive setting based upon their needs and risk. Ensure youth are in the right place, with access to the right services, for the right reasons and for the right length of time.

- Increase the number of service providers, especially in rural parts of the state, who can provide treatment in alcohol and substance abuse treatment, trauma-based treatment and functional family therapy.
- Increase training in the area of juvenile justice for Law Enforcement Agencies, such as crisis intervention training for juveniles and adolescent development/trauma informed care.
- Improve access to treatment.
- Increase alternative education programs for youth.
- Provide Medicaid eligibility to youth in detention centers, to increase services, such as physical examination for all youth in detention and testing and treatment for STDs and TB.
- Mental health evaluation and treatment for youth screened and in-need of further services.
- Increase community-based alternative programs, such as day and evening reporting centers, increased probation and home-based family therapy.

Senator Lanane asked how Medicaid can be accessed for these youth if federal policy is the barrier. Mr. Dempsey responded that it depends on the treatment setting that the youth is admitted to; in some settings children are eligible if placed there. Children have also been transferred to DCS supervision for Medicaid services.

- ❖ **Greg Zoeller, Indiana Attorney General.** Attorney General Zoeller reported that in an effort to combat the prescription drug abuse epidemic in Indiana, he launched the statewide Rx Drug Abuse Task Force to help fight the growing drug problem in the state. As Chair, AG Zoeller works with state legislators, law enforcement, health officials, pharmacy representatives, state and local agencies and education providers toward the goal of significantly reducing the abuse of controlled prescription drugs and to decrease the number of deaths associated with these drugs in Indiana. The Task Force also works with problems related to neonatal abstinence syndrome which is a syndrome that occurs when a pregnant woman takes addictive, illicit or prescription drugs and as a result, the baby is born dependent on the drug(s). Additionally, AG Zoeller reported that his office also works with issues surrounding domestic violence, victims' assistance, internet crimes against children and human trafficking. He co-chairs the Indiana Protection for Abused and Trafficked Humans (IPATH) Task Force with U.S. Attorney Joe Hogsett and was renamed as the co-chair of the National Association of Attorneys General's (NAAG) standing committee on human trafficking. IPATH, which includes medical professionals, members of law enforcement and victim service providers, is partnering with DCS for training to identify victims of human trafficking and the provision of legal counsel and representation. In addition to a detailed handout of the AG's report, he also provided a NAAG State-by-State Resource Guide for states other than Indiana RE: Vulnerable Children.

Priorities of the Attorney General's Office for the Commission include the following:

- Teen Rx abuse.
 - Neonatal abstinence syndrome – increased awareness for women and physicians.
 - Providing services for children with adverse childhood experiences.
 - Protecting children on the internet.
 - Keeping children out of the court system.
- ❖ **Dr. William VanNess, State Health Commissioner, Indiana State Department of Health (ISDH).** Dr. VanNess reported that his agency promotes and provides essential health services, with the vision of a healthier and safer Indiana. SDH collaborates with the 92 independent health departments to reduce infant mortality rates, reduce adult obesity, reduce adult smoking and increase child immunization rates. SDH offers an array of programs, including immunizations, tobacco prevention and cessation, suicide prevention, prescription drug abuse prevention, rape prevention and education, lead poisoning prevention, chronic disease prevention and control and oral health programs. He also mentioned the child home visiting

program, which received \$11 million through the Affordable Care Act, and the Nurse-Family partnership, along with Healthy Families Indiana.

Priorities of ISDH for the Commission include the following:

- Lack of medical providers, particularly in rural areas of the state.
- Lack of mental health providers, particularly in rural areas of the state.
- Lack of mental health providers trained in addiction.
- Lack of mental health providers trained to work with children.
- Lack of school personnel trained to recognize signs and symptoms of children who are suicidal.
- Difficult to ensure medical and mental health providers are trained to provide evidence-based care or best practice.
- Schools without full-time school nurses.
- Schools without adequate numbers of counselors/social workers.
- Limited funding for interpretation services for clients not proficient in English.
- Lack of Medicaid reimbursement for interpretation services.
- Lack of funding for injury prevention.
- Decreased funding for lead poisoning prevention

❖ **Glenda Ritz, Superintendent of Public Instruction, Indiana Department of Education (DOE).** Superintendent Ritz reported for the DOE, which serves over 1 million children. She stated that she sees her service on this Commission as the one of the best uses of her time and is very interested in how to use data to channel supports to children. DOE collects over seven billion data points. DOE's goal is to build an education system of high quality, that is student centered and that meets children's individual needs. Teachers always need community supports and services; without those supports and services, vulnerable children become more vulnerable. She is revisiting the current DOE goals. She wants to build successful community school, address school culture and meet the technology needs of all students.

Priorities of DOE for the Commission include the following:

- Re-entry from incarceration to school has been identified by JDAI (Juvenile Detention Alternatives Initiative) as a continued problem.
- The quality and consistency of educational services for youth in detention centers – there are not any standards that all Centers must follow, including amount of instructional time.
- Disproportionality.
- Absenteeism.
- Mental health.
- Literacy.
- Student mobility.
- Engaging adults in the education of their children.

❖ **Senator Tim Lanane.** Senator Lanane noted that he served on last year's Interim Study Committee.

Senator Lanane's priorities for the Commission include the following:

- Indiana children rank below average on many health indicators. There is a need to create policies to improve our standing.
- Nearly 1 in 4 children live in a family below the federal poverty level. There is a need to better assist working families through the Earned Income Tax Credit and increasing the income threshold by which families qualify for federal child care subsidies and co-payments.
- Indiana is the only Midwestern state without a funded pre-kindergarten educational system. Policies and resources need to be dedicated to institute a quality pre-kindergarten educational system.

- There is lax enforcement of lead-based paint regulations. DCS should provide an update on the improvements to the child protection system.

❖ **Larry Landis, Director, Public Defender Council (IPDC).** Director Landis reported two major concerns. The first is to provide each child with a trained, competent advocate. Currently, 24% of children are incarcerated in DOC without having had legal representation, and funding provided by counties for legal representation is inconsistent. The Indiana Supreme Court is reviewing a proposal for a rule amendment requiring an attorney for every child before the child can waive the right to counsel. The second concern is to address the need for mental health and substance abuse treatment. The state would rather spend \$50,000 to imprison a child than to pay for treatment that the child needs.

❖ **David Powell, Director, Prosecuting Attorneys Council (IPAC).** Director Powell noted that he represents the 91 elected prosecutors. Prosecutors work closely with DCS, schools and juvenile probation officers. Prosecutors see children who are victims, witnesses, and offenders in some of the worst days of the children’s lives. The goal is not to see these same children as adult offenders. There are breaks among the child-serving systems and differences in rules that point to a need to develop continuity as victims and offenders move between systems. Prosecutors also partner with DCS in the collection of child support payments for two-thirds of Indiana’s children.

Priorities of IPAC for the Commission include the following:

- Mental health issues need to be addressed – parents are afraid of their children and afraid for the children’s siblings.
- Address issues of violence so that there are fewer adult problems.
- Data collection and lack of compatibility is a problem. Deciding how data is collected and shared will be helpful.
- 17 ½ year-old youth who commit a felony offense have very few options available to meet their needs.

❖ **Representative Rebecca Kubacki.** Representative Kubacki stated that she is pleased to be a part of this Commission. She wants the Commission to focus on issues such as mental health, education and court-related issues. She stated that because the SNAP program (Supplemental Nutrition Assistance Program) is governed under federal rules, there is little we can do to change it. Representative Kubacki will provide more information on this topic at the next meeting.

❖ **Senator Travis Holdman.** Senator Holdman shared priorities for the Commission that his colleagues in the Senate individually communicated to him. They include:

- Strengthening criminal penalties against child abusers.
- Childhood poverty.
- The impact on children’s health care without the Medicaid expansion.
- Funding for youth programs, early childhood programs, safe places and the need for more parks and recreation programs.
- Parental responsibility.
- Bullying.
- The plight of black males.
- Retention of DCS staff.
- Child support automation.

5. **Initial Review of Submitted Topics for Commission.** Susan Weiss of Casey Family Programs presented the top seven priority issues identified by the Commissioners through their outreach to stakeholders:

- Improve child health policy and access for children (21%).

- Address gaps in service array for children (19%).
- Increase mental health services availability and accessibility (17%).
- Support juvenile justice reform (15%).
- Increase substance abuse treatment and prevention services (12%).
- Support staff recruitment/retention in agencies working with vulnerable children (8%).
- Improve coordination/collaboration between agencies serving crossover youth (8%).

Ms. Weiss noted that several other issues were a theme at the meeting (education, data sharing, use of prescription drugs and psychotropic medication) and may need to be added to the list.

6. Indiana infant and child mortality: Dr. William VanNess. Tabled until October.

7. Children’s Commission Assignments (Legislative Council Resolution 13-01).

- SEA 305-2013, Section 18 Due Process for Child Care Providers: Senator Travis Holdman. *Tabled until October.*
- SEA 530-2013, Section 2 Supplemental Nutrition Assistance Program: Representative Rebecca Kubacki and Representative Gail Riecken. *Tabled until October.*

8. Discussion.

- Mission and vision statement: *Tabled until October.*
- Commission website and webcasting future meetings: Kathryn Dolan, Public Information Officer for the Indiana courts. Ms. Dolan presented ideas for the Commission website. The members voted to approve the following:
 - Create a Commission home website and locate it at in.gov/children.
 - Design includes an orange banner and photo of children of all different ages.
 - Include a link to SEA 125, links to the power point presentations and other report materials the members circulated, a list of members and the mission statement (when finalized).
 - Documents submitted for the website must be in Word or PDF format.
 - After some discussion, the members agreed that future meetings will be live streamed. Also, press releases will be sent in advance of meetings for comment.
- Child Services Oversight Committee update: Representative Gail Riecken asked members of the commission to review the report of the DCS Ombudsman Report for 2012. http://www.in.gov/idoa/files/DCS_Ombudsman_2012_Annual_Report.pdf

9. Other Matters. Justice Rush ended the meeting by noting that the Commission is committed to finding ways to get public and stakeholder input, including input from the private sector. Senator Holdman and other legislators stated their interest in the live streaming of meetings and that interested parties have a method to provide comments that can be shared with the Commissioners.

10. Future Meeting Dates.

- October 16, 2013
- December 11, 2013

11. The Meeting Adjourned at 2:00 p.m.

Respectfully submitted,

Justice Loretta Rush,
Indiana Supreme Court

