

Dallas Roundtable on the Fostering Connections Act

November 4, 2009

The roundtable began with an overview and summary of the key sections of the legislation. Specific challenges were raised during the discussion including that IVE payment for older youth will need to be designed in a way that recognizes that the needs for older youth are very different from traditional foster care, and therefore the funding will need to look different. IVE Training will also be a challenging area. There is much concern about setting regulations that may set states up for disallowances later.

The first panel discussion focused on tribal opportunities and challenges. Dana Huckabee, ACF Region 6 Specialist, provided an overview of tribal provisions in FCA. She highlighted the need for additional funding. She also described the grant for the Sac and Fox Nation through the IV-E development fund, one of only six in the country.

Ann Davis, Co-Chair of the Oklahoma Tribal/State Child Welfare Workgroup, described the tribal nations in Oklahoma and their diversity. She described challenges facing tribes including disproportionality and tension between tribes and child welfare program administrators. She commended efforts of John George of CWLA to address these challenges. She highlighted the new and different relationships between tribes and states as a result of the new direct access provisions in the Act, and the potential for stronger working relationships.

Kara Whitworth, Program Manager, Cherokee Nation of Oklahoma's Child Welfare Program, discussed the eight child welfare programs under way serving 1400 children, and the history of Indian child welfare in Oklahoma. She outlined agreements in place for administration policies and funding regarding child welfare. She stated the intention of the Cherokee Nation to continue the current agreements at this time rather than pursuing direct IV-E access.

Karen Hamilton and Rusty Creed Brown are from the Sac and Fox Tribe. They provided a description of the long history of their tribe providing services to children and families. They feel strongly the infrastructure is in place to implement the new IV-E opportunities in Fostering Connections. The challenge is that there is much to be determined. There will be a great deal of growth over the next couple years and managing the growth will be a challenge.

The final presenter on this panel was Sue Settles from the BIA. She spoke about the major changes that have taken place over the past two decades. In the 80's over 80% of the services were provided by and administered by the BIA. Now 80% are provided and administered by tribes. This has demonstrated what sovereignty can accomplish. The FCA will continue this trend and hopefully the changes will be accomplished more successfully. She concurred that the major challenge will be in implementing the changes effectively.

The second panel was a special focus on health care. James Pawelski, Director, Division of State Government Affairs at the Academy of Pediatrics, made a presentation about their initiative on implementing the health provisions of the Act. He pointed out that evidence and experience tells us that the health care needs of children in foster care continue to go unmet. Addressing these needs is a major challenge. The FCA specifically requires states to develop plans for the ongoing oversight and coordination of health services for any child in a foster care placement. These plans are referred to as Health Oversight and Coordination Plans (HOPC's). States will be challenged to meet this and other provisions of the Act.

The AAP is recommending that the health needs identified during screening and assessment be addressed in accordance with Early Periodic Screening, Diagnosis, and Treatment (EPSDT) requirements, and that state HOPC's include steps for ensuring that the individuals involved in a child's care each know exactly what their responsibilities are and how to fulfill them.

Further AAP is encouraging pediatricians and other health clinicians to collaborate closely with child welfare professionals in improving health and well being of children in foster care.

He finished the presentation by providing a sample of activities in a few states. He highlighted the progress underway in Texas, Illinois, Kansas, Minnesota, and Ohio

A team of health providers in Texas made a presentation focused on implementation strategies underway there. Liz Kromrei, CPS Director of Services, gave a brief overview and introduced the Texas providers.

Marsha McMann, Director of Foster Care for the Star Health Program, described how Star Health is a managed health care program developed specifically for Texas foster children. It is designed to coordinate communication among Medical Consenters, Caregivers, Members, DFPS Staff, Guardians Ad Litem, Attorneys Ad Litem, Judges, and Law Enforcement for the best interest of the child. The program provides extended support to the Members and Caregivers to request and receive health services.

Dr. David Harmon, Vice President of Medical Affairs for the program, spoke about how the program works and results to date, including much success with medications, particularly psychotropic drugs. .

The final panel was focused on kinship and guardianship. Ana Beltran, Special Advisor with Generations United, described the kinship provisions in the law and a variety of implementation activities underway in a number of states. Carmen Schulze, Executive Director of the Missouri Coalition of Children's Agencies, has been at the forefront of work in her state to take the kinship option and discussed the developments and status in Missouri. Both agreed there are many questions unanswered regarding this section of the Act. Successful implementation will require a major undertaking throughout the country.