



Council on Child
Safety and
Family Empowerment

GOVERNOR DUCEY'S OFFICE OF YOUTH, FAITH AND FAMILY
COUNCIL ON CHILD SAFETY AND FAMILY EMPOWERMENT

Meeting Minutes DRAFT

November 8, 2018

10:00 AM

Governor's 2nd Floor Conference Room

1700 West Washington Street, Phoenix, AZ 85007

A general meeting of the Council on Child Safety and Family Empowerment was convened on September 18, 2018 at the Governor's 2nd Floor Conference Room, 1700 West Washington Street, Phoenix, Arizona 85007, notice having been duly given.

Members Present (20)	
Angela Ducey , Chair, First Lady of Arizona	
Kathryn A. Pidgeon , Co-Chair, Adoption Attorney	
Berisha Black , Director, Arizona Foster Care Initiatives	
Janet L. Garcia , Arizona Senior Director, Casey Family Programs	
Greg McKay , Director, AZ Department of Child Safety	
James D. Molina , Director, Step up Arizona	
Colleen McNally , Presiding Juvenile Court Judge Maricopa County, Retired	
Jeffrey James Taylor , Chair, Salvation Army Advisory Board	
Roy T. Dawson , Director, Arizona Center for African American Resources	
Mark Upton , President and CEO, Christian Family Care	
Andrea Stuart , Executive V.P. Staff Services & Care, Arizona Baptist Children's Association (on phone)	
Marcia Stanton , Senior Injury Prevention Specialist, PCH	
Julie K. O'Dell , Statewide Adoption Director, DCS	
Torrie Taj , CEO, Child Crisis Arizona	
Molly Dunn , Director, FosterEd Arizona	
Paul S. Mulligan , President and CEO, Catholic Charities	
Darlene Newsom , CEO, UMOM New Day Centers	
Zora Manjencich , Assistant Chief Counsel, Attorney General	
Katie O'Dell , City Care Pastor, Hillsong Phoenix	
Leslie Y. Reprogle , Founder, Agape Adoption Agency Arizona (on phone)	
Members Absent (9)	Staff/Guest Present (12)
George Michael Khalaf , President, Data Orbital	Maria Fuentes , Governor's Office of Youth, Faith and Family
Lorrie Henderson , State Director, AZ 1.27	Malcolm Hightower , Governor's Office of Youth, Faith and Family
Obed Escobar , Regional Director, Alliance Defending Freedom	Melisha Bryant , Governor's Office of Youth, Faith and Family
Kate Brophy McGee , Arizona State Senator	Livia Finman , Governor's Office of Youth, Faith and Family
Terry M. Crist , Pastor, Hillsong Phoenix	Wyndee Davis , Community Services Coordinator, NJ Dept. of Children and Families
Warren H. Stewart Jr. , Pastor, Church of the Remnant	Spike , Bikers Against Child Abuse
Jay A. Cory , President and CEO, Phoenix Rescue Mission	Lisa Ciolli , ChildHelp
Vicki Mayo , Founder and CEO, The Touchpoint Solution	Jonathan Sanborn , CarePortal
Richard Yarbough , Executive Director, Pilgrim Rest Foundation	Peter Bartolini , Guest
	Julie Bartolini , Guest
	Kecia Meyers , Guest

Brian Steele, Phoenix Dream Center

1. Call to Order

Ms. Kathryn Pidgeon, Co-Chair, called the Council on Child Safety and Family Empowerment meeting to order at 10:13 AM with nineteen members present and ten members absent.

2. Opening Remarks by Chair

Mrs. Angela Ducey, Chair, welcomed all and shared sentiments for former governor, Jan Brewer's family and an unrelated shooting that took place this morning.

3. Approval of Minutes

Ms. Pidgeon requested a motion to approve the minutes from the September 13, 2018 Council meeting. Mr. Mark Upton moved to approve the minutes as drafted and Ms. Colleen McNally seconded. The motion passed with unanimous vote.

4. Introduction of Council Members

Mrs. Ducey asked members to introduce themselves. Each member of the Council introduced themselves.

5. Special Recognition

Mrs. Ducey recognized community members, Peter and Julie Bartolini for their service to foster children. Mrs. Ducey highlighted their accomplishments and presented them with a certificate of appreciation.

6. New Jersey Mobile Response and Stabilization Services

Mrs. Pidgeon introduced Ms. Wyndee Davis, Community Services Coordinator for New Jersey's Department of Children and Families. Ms. Davis presented on the Mobile Response and Stabilization Services offered through New Jersey's Children's System of Care. She reviewed the organizational structure and briefly discussed family success centers, which serve youth under 21 with emotional and behavioral health needs, developmental disabilities, autism, and substance abuse challenges. She described the programming as a family-centered, community-based environment with most services being voluntary. She mentioned that all services were on a Medicaid platform and federal funding eligible. There are 15 service areas modeled after court jurisdictions. The department and programming emerged from a parents' caucus developing an initiative and presenting it to the governor. Implementation required structural changes that would prevent families from entering the child welfare system. There is one front door access for youth services. Implementation also required restructured funding and a focus on clinical necessity vs ability to pay. Local and statewide feedback loops help to maintain stability. Families are able to receive services at home, at school, or in the community. In the event of an out of home episode there is a plan for treatment and re-entry with a strong emphasis on daily parental involvement. Statewide implementation took 7 years. Engagement and support from all systems and stakeholders was necessary. New Jersey has a population of 9 million people of which, 2 million are youth. About 50,000 youth are being served in New Jersey's Children's System of Care apart from other child welfare agencies. Ms. Davis shared the implementation timeline. She briefly described the reasons for integrations, the department's values and principles, training and technical assistance to service providers and staff, the importance of language, and the role of assessment. Ms. Davis explained how the system's components help connect families to resources and services by maintaining medical records and triaging each case. The department contracts with 15 care management organizations across the state. Some of the organizations provide services in dual and tri county areas. All organizations use the wrap around model to serve youth and families with moderate and complex needs. Ms. Davis discussed family support organizations which provide family-led support and advocacy. She gave an overview of the Mobile Response and Stabilization Services and discussed the hallmarks of an intensive in community out of home placement. These are homelike environments with up to 5 youth regardless of need that provide trauma-informed care by implementing the Nurtured Heart Approach with families and staff. Ms. Davis wrapped up the presentation with a discussion about the Stabilization Services portion of the program. She discussed response time, family defined crisis, family safety and

soothing plan. She mentioned that stabilization management is second phase and last up to 8 weeks and available in out of home placements and allows for functional family therapy for resource (foster) families.

- Mr. James Taylor asked about the prevalence of substance use among parents involved with the program. Ms. Davis responded that the data is not conclusive and that services are for children and youth; however, family workers will provide resources and referrals for parents or caregivers.
- Mrs. Ducey mentioned that mobile response is available for resources families during first and second placement. Ms. Davis confirmed Mrs. Ducey's statement and explained that New Jersey conducted a pilot where a child welfare case worker would contact the Mobile Response and Stabilization Services at the onset of a child's first or second placement in out of home care. As a result, children were able to remain in placement. This is now available statewide and has led to 94-97% of youth being stable. Mrs. Ducey commented on the significance of the outcomes.
- Ms. Molly Dunn asked what the mobile response process looks like. Ms. Davis explained that initially the response was within an hour, but it was noted that it was overwhelming for the resource families and children to come during the intake. Now, accommodations are made in order to meet family when it is most helpful to resource family and youth. An onsite visit is planned within 24 hours. The Mobile Response and Stabilization Services team goes to home and completes an assessment. Then they provide resources accordingly. They also take time to connect with and empathize with youth. The goal is to help connect the youth to individualized care and help resource parents to understand the child's trauma and individualize the care they provide.
- Mrs. Ducey asked about the responses of workers during implementation process and system changes. Ms. Davis stated that the case workers were able to realize that an investment upfront reduces time spent on finding new replacements and additional transitions later down. They understood that the new model improved outcomes for children.
- Director Greg McKay commented that Arizona's child welfare system is not integrated like New Jersey's. He asked how New Jersey received Medicaid dollars prior to implementation. Ms. Davis answered and said that before Medicaid, child welfare and mental health had a commitment to integrate funds there was a braiding and blending of funds, resulting in multiple pots of funding within the three divisions. They utilized a grant in one county for planning to move to Medicaid platform. Medicaid state plan amendment and then grew dollars for 50/50 match. Director McKay commented that integration is Arizona's #1 goal in order to provide real solutions as opposed to the current system's band aid remedies to bring down placement reductions. Not being an integrated system is the driving force behind Arizona's child welfare challenges in that DCS is only responsible for response and has no control over behavioral health. Director McKay commended Ms. Davis and added that New Jersey is successful because of integration. Ms. Davis clarified that New Jersey's Children and Families is not integrated with child welfare and behavioral health integrated. She stated that youth may or may not be involved with child welfare and added that they departments are more collaborative and operate with an all systems approach. She further clarified that Medicaid is a collaborative partner and that youth behavioral health is carved out to ensure that services were not determined based on any financial incentive only clinical necessity. The collaboration allows for the shifting of resources and partnerships and is successful due to transparency and constantly looking at what the real need is.
- Ms. Julie O'Dell asked if family services agencies are providing a long-term service plan in collaboration with other services. Ms. Davis replied that parents must agree to collaboration between services and that a long-term stabilization plan is developed for all families. She noted that only about 8-9% of families are involved with child protection.
- Mr. Roy Dawson asked about the one door access. Ms. Davis clarified that there is one door for behavioral health needs. Mr. Dawson asked about methods to track health of child while in care and upon exiting. Ms. Davis explained that each family completes pre and post assessments to compile outcome reports to determine needs moving forward.
- Mrs. Ducey asked about the capacity to work with children impacted by human trafficking. Ms. Davis confirmed they have the capacity to work with that population.

- Director McKay asked who responds to the initial call. Ms. Davis replied that direct care staff with bachelors or master's degree, who are supervised by a licensed practitioner respond to the call and work with the family on identifying and obtaining necessary interventions and resources.
- Mr. Dawson commented on the child welfare system in Arizona and asked when the Council will create and implement a plan to help Director McKay improve the system. Mrs. Ducey assured Mr. Dawson that efforts are being made and that is a goal of the Council Child Safety and Family Empowerment.

7. Phoenix Dream Center

Mrs. Ducey introduced Mr. Brian Steele, Executive Director of the Phoenix Dream Center. She commented on his work in the area of human trafficking. Mr. Steele presented on the work he does in addressing human trafficking in Arizona. He gave an overview of plans to expand housing for survivors and using survivor driven data to inform work of service providers. He highlighted the faith toolkit that was made to inform, educate, and empower faith communities to address human trafficking. He mentioned that the organization is working on efforts to address labor trafficking. Mr. Steele noted that many children in Arizona have fallen victim to sex trafficking and explained the after recovery process. He commented that data is not readily available concerning post recovery, because the outcomes are not good. Nationally, there are high rates (about 80%) of children who run from placement within first 30 days due to the trauma bond. Only one state has 8% run rate which is Arizona. These outcomes are due to a collaborative process for recovering youth. The collaboration consists of Phoenix law enforcement – namely vice, and Arizona Department of Child Safety, Mercy Maricopa Integrated Healthcare, St. Luke's Hospital and human trafficking NGOs. One main factor that has led to success in the recovery process is utilizing law enforcement to do all transportation of the youth. He noted that many youth run when they are transported by case workers. He went on to explain that an assessment completed within 24 hours and that the use of a step down model is more effective. Mr. Steele emphasized that the ultimate goal is family placement. In Arizona, 108 youth have been processed since October 2017. Of those, 86 were confirmed as victims and 81 were in the DCS system. Only 7 resulted in service disruption. 61% are in treatment, 19% ended up in detention due to criminal acts; 18% were reunited with family and 2% are still receiving care at St. Luke's Hospital or are in a clinical detox program. Another element of Arizona's recovery process is the use of neurosensory modulation (light, sound, touch), anchor points; dream rooms; trauma-informed academics. Mr. Steele concluded by noting that the Phoenix Dream Center has onsite medical and behavioral health services, academics, career training, and baby wellness.

- Ms. Dunn asked if there were services for boys; is there a timeframe for transition though process into family setting; and what does after care look like. Mr. Steele stated that there are services available for boys, but capacity is limited and needs to be increased. He noted there is a deficiency in servicing boys due to 60-70% of funding is private and allocated for girls. For adults, there are more services for men over the age of 18. Mr. Steele commented that transition into a family depends on the providers and the individual. Goal is family placement and that they work with the state to determine when reunion is safe. Some children may be in services for 6-12 months depending on how the child and parents are doing.
- Ms. Katie O'Dell asked about the number of beds available for minors? Mr. Steele stated that there are 16 service providers in Arizona that provide housing and services for minors.
- Mrs. Ducey thanked Mr. Steele for his presentation.

8. CarePortal Update

Mrs. Ducey announced that Jonathan Sanborn, CarePortal State Director, Arizona and California will not be able to present today, but will come to a future meeting due to time constraints.

9. Update on Recent and Upcoming Events

Mrs. Ducey introduced Director Maria Fuentes. Director Fuentes reminded the Council that all commissioners should have received a save the date for the ACEs Summit. She informed council members that November National Adoption month and January is Human Trafficking Prevention month and

encouraged them to share and partner with GOYFF on any prevention efforts and collaboration and partnership around human trafficking. Director Fuentes mentioned that GOYFF is working to break down silos to better serve and support children and families.

10. Subcommittee Reports

Partnerships Subcommittee

Ms. Garcia, Subcommittee Chair, reported that the Partnerships subcommittee will be meeting tomorrow

Outreach Subcommittee

Ms. Katie O'Dell, Subcommittee Chair, reported that the subcommittee will be receiving first draft of video by next week. The anticipated date of completion is within the next 30 days. The subcommittee plans to present the video to the council. Ms. O'Dell informed council members that the subcommittee is planning a foster care adoption roundtable event in the spring of 2019. The event will be for the faith community at large. The subcommittee will be inviting council members to present at the event on topics regarding foster care, adoption, prevention, and youth aging out.

African American Children and Families Subcommittee

Mr. Roy Dawson, Subcommittee Chair, provided a report in writing that was distributed to council members.

Prevention Subcommittee

Mr. Mark Upton provided a report on behalf of subcommittee chair, Vicki Mayo. Mr. Upton reported that the subcommittee will be participating in the ACEs Summit in December. For 2019, the subcommittee will continue to focus on early childhood expulsion prevention and plans to host a roundtable in May for faith-based preschool providers and discuss expulsion and becoming a DES provider. Mrs. Ducey suggested the subcommittee contact Dawn Wallace for expertise on child care expulsion.

Support Subcommittee

Ms. Black, Subcommittee Chair, reported that the subcommittee has compiled the trauma survey results and provided the summary to council members. She mentioned the subcommittee will resume meetings in December.

11. Call to the Public

Mrs. Ducey conducted a call to the public. There were no requests to speak by the public.

12. Future Meeting Dates and Adjournment

Ms. Pidgeon noted the following meeting dates:

- January 10, 2019
- March 14, 2019
- May 9, 2019 may need to changes
- September 12, 2019
- November 14, 2019

Mrs. Ducey requested a motion to adjourn the meeting. Ms. Julie O'Dell motioned to adjourn. The motion was seconded by Ms. Colleen McNally. The meeting adjourned at 12:01 PM.