



DCF 57 Advisory Council Meeting - MINUTES

June 26, 2024

1:00 p.m. – 3:00 p.m.

VIRTUAL Meeting

DCF 57 Advisory Council Meeting

DCF Staff			
Name	Present	Name	Present
Jamie Gennrich		Elaine Pridgen	
Katie Davis	x	Shelby McCulley	
Dana Johnson	x	John Elliott	
Kristie Buwalda	x	Amy Bryant	x
Mary Morse	x	Emily Erickson	
Rob Collins	x	Jeanette Paules	x
Rachel Nili			

Member	Present	Nominating Organization
Emily Coddington	x	WAFCA
Marye Beth Dugan	x	Nehemiah Group Home
Dave Fretz	x	Forward Home for Boys
India Hansen		Office of Lived Experience @ DCF
Amy Rodriguez	x	DOC
Dr. Murece Johnson	x	Moe's Transitional Living Center (COA)
Lisa Netterville		New Hope & Destiny Home II (COA)
Caylee Nichols	x	Positive Alternatives
Audra O'Connell		Walker's Point Group Home (operate as homeless program)
Jennifer Pester		Office of Lived Experience
Jill Collins	x	DMCPS
Lisa Pendleton	x	WAFCA
Stephen Bedwell	x	WAFCA

AGENDA

I. **Call to Order, Welcome, and Introductions** - Rob Collins from the Office of Legal Council has been assigned to the project.

II. DCF 57 Admission & Discharges – Rule Revisions – Flow to Categories

1. *Should the house rules from DCF 57.05(2)(k) be moved to the admission section? Yes*

2. *Are there additional needs at the time of admission which are not included in 57.19(8) or 57.05(2)(k)? At admission. Group home needs a medical insurance card and medical release and are not always provided at time of admission. Birth certificate (need for job). Social Security card (need for job). Should this be explicitly stated in rule? Some of these are hard to obtain especially if youth was born outside of the state. Clarification: This rule requires what*



the group home needs to have. DCF 57 will not require the county to provide it. One county requires a parent to sign the medical consent form at time of TPC or placement. One GH said their issue is more getting records from DOC; not county placement.

- Key contact information for GH manager. *When will the child welfare professional meet with youth, family interaction, court hearings and should be included in admission materials?*
 - Add social media and cell phone usage.
 - Can we create an onboarding plan and require in rule?
 - Under revocation (9) should be moved to licensing section 57.56
 - COMMENT: re: Health. DCF has this flagged and will change language to "schedule".
 - Document when you called to schedule and when the appointment will occur.
3. *We are leaning towards a separate respite section in rule (defines who/how/when) to consolidate into one section. Thoughts? Would like a separate section for "respite" only.*
- 57.19(2) placements would come in 15 days, discharge 1 day and then readmit for another 15 days. **FLAG 48.981(2).**
4. *Add in 48.625 (1m) Homes that have a custodial parent and an expectant child and is separate documentation required? How does planning and care occur for the child/infant? How does payment and services provided to the child/infant occur?*
- **No representation regarding this on the AC.** (2 homes Tomorrows Future 1 & 2)
 - **Reach out to the counties as well for guidance.**
 - DMCPs has situations. VPA with teen parent and child. Infant is not always on a CPS order. Indirect client. Not a child participant in the SACWIS case.
 - Does not base the age off the infant because the infant is technically not the client resident.
5. *What information should be included in a discharge plan? What else should be modified in the discharge section? This section is not strengths-based.*
- No standard discharge plan. Add some details about what is required in the discharge plan. **Form #5379 Discharge Plan (voluntary use).** This proves proof that the plan was implemented and evidence as to what they did to ensure a successful discharge and highlight what they accomplished. Add requirement that the discharge plan go to the next placement if it is known at the time of exit.
 - One GH uses a template. Discharge is generally a quick process because they are leaving on a bad note, not a smooth transition to a less restrictive environment.
 - Change wording to entry and exit vs. admission and discharge.
 - OHC parts A & B. A copy of the treatment plan, progress report instead of the current discharge plan since it is not consistent. Who needs the information and what do they need.
 - Planned vs. unplanned discharges are different.
 - County uses the discharge summaries to plan for the next placement.
 - Discharge plan is still in placement and make plans for that. Summary is after they have been discharged. Have youth write their discharge summary or plan and the staff write a version as well.



- The summary is after the fact and agreement about SIR and when rule was written we did not have SACWIS to capture this.
- Discharge plan should begin and take place throughout the placement. "Discharge from day 1".
- People don't know the difference between the plan and summary.
- 30 days post discharge seems too late especially if the youth are moving to another placement. GH agency requires it to be done in 15 days. Upcoming appointments, etc. that should be known. At time of discharge, they use another document to highlight urgent appointments.
- Created their own template of information required from DCF 57. "Transitional Planning".
- Is this section about outcomes or planning and **addressing concerns in the treatment plan section**. In discharge section what needs to transfer with them.
- DCF 57.23(3) also references discharge planning.
- [WCHSA/WAFCA Workgroup Report](#) page 12 talks about what providers and placing agencies thought about discharge

(1:55-2:00) IV. Break

(2:00-2:45) V. DCF 57 Personnel – Rule Revisions

1. *In reviewing 57.14(2) age and (b) what should the staff member requirements be? Different or the same as written?* Group home running into qualified people without college degrees. Significant experience. Non-profit management certificates. Allow a broader range of training and experience. Director position allow for so much experience in lieu of a college degree.
 - Define youth care worker and personnel (cooks, etc.)
 - Agree with age requirement but allow for an exception. QRTP "dings" for a high school diploma only. QRTP wants an associate degree.
2. *Are there accreditation standards applicable to age, experience, and education?*
 - Program director and GH manager: 1 year experience or 2 years for both. How can staff move up.
 - Add degree in education to the list of areas which are allowable; not just special education.
 - DMCPs has started going towards going more towards experience and less reliance on education. Added peer mentors and peer support specialists to staff. Staff at DMCPs does not require a college degree.
 - Degree of expertise and training should be based on their position.
 - Group home should also be providing a level of treatment. Increasing the age should be considered. Focus on skills and abilities. Put more ownership on the supervisors by providing more supervision and on the job training. Talk through the executive functioning pieces with the staff so they can provide a therapeutic setting.
 - Regardless of background is there should be component of training.
 - All employees go through the same onboarding procedure. 80 hours on the floor work with residents and reporting. Also do HIPAA mandated reporting,



medication administration, etc. of 40 plus hours of training regardless of their position. Check in with group home manager or program director and ensure they are training staff to meet the needs of the residents.

- Use YIPA for training. Have a therapist come in and do training for staff. Communication log training.
 - Distinction of what training is needed and ongoing training needs.
 - Agree to getting an exception for the age requirement (keep age as is). Are enrolled in college and are rarely alone doing supervision.
3. *What is the use of the traineeship program? Is traineeship a barrier when onboarding new staff? In reviewing 57.14(4)(a) all of the roles that are identified in this section, are there areas of qualifications or responsibilities that you would like to see change? Conversation about who is a trainee and difference between internships and volunteers.*
4. *Which areas of the Hiring & Employment 57.15 section which requirements are difficult for you to follow? Which requirements are well-aligned with your business practice and for the treatment and services to youth?*
- 57.16(1) within first week of hire; suggest that be changed as they have part-time staff where that is the first 40 hours of employment/work.
 - Fingerprinting every 4 years is a federal requirement. (Need to add citation – there is a memo that was published)
 - Infant care & toddler care applies only to pregnant and parenting group homes (only have 2 of those). Add clarity to this section.
 - 24 hours of continuing education are hurdles. Needed for accreditation. Can we consider 12 hours? No youth care conferences or trainings specific to this population. Want some sort of interactive format in addition to allowance for online training. Was previously 12 hours. 24 is more than CPS staff. Social workers are 30 years every 2 years. One agency that has many medical needs kids they are able to meet these needs. 2-hour staff meeting has a training component to ensure workers get hours.
5. *In the 57.16 (Training), which elements of training would you like to see changes to either enhance skills and requirements for licensing and operation, or areas that are difficult to achieve by your facility? Training topics on emotional intelligence, signs of secondary trauma. CPR and first aid – can it be waived if they already have that certification? YES.*
6. *In 57.17 Personnel, Policies, and Records are there recommended changes you would like to make to Policies, Personnel Records, or Volunteer Personnel Record?*
- Can we have an attestation that the person is in good physical health and capable of performing duties. OR free from physical and mental health condition.
 - Date of hire has to be on the application – can we remove that. The date was on the file.
 - No requirement to have a driver's license.



- Need to require a photo ID on file (federal requirement). I-9 requires a copy of the ID
- Include agency core values 57.05 as part of agency evaluations.
- Last quarter of the year do agency evaluations of all staff. Review communication logs, attendance, etc. The staff also provide feedback. Monthly supervision as well. Data driven. Copy goes in their personnel file. This is required for QRTP.
- No requirement in DCF 57 currently to have an evaluation.
- One agency has 2 evaluations first year; 6 months and 1 year. In subsequent years they continue the 2x year evaluations and monthly supervision. Self-evaluation and supervisor evaluation. Training and attendance. Policy and procedure compliance. Also do peer evaluations.
- Volunteers personnel (2) section question. Requirements don't include fingerprints, background checks or a physical. Could add a name-based background check.
- Volunteers cannot be unsupervised. Relief staff get paid so would be required to comply with the background check requirement.
- Relief staff only was used during COVID.

7. *In 57.18 are there responsibilities for staff or volunteers that you would like to add or remove?*

- In addition to a conviction. Add "charged with" not just convicted. Ethan's Law also applies. Interns if paid should have a background check. If you pay an intern doing direct care would need to meet requirements.
- *What is "competency?" How can we actually measure that? (4)*
- *Should we have a training on the rule (57) for staff? DCF should have a training. Can we have a training like there is for the foster care rule? Offer to group home owners who then could train staff. Many staff may not even know that DCF 57 exists.*
- One group home developed their own PowerPoint training on DCF 57 and available to staff.
- *Can we add a requirement to have staff read DCF 57? One agency has staff initial each rule so staff is aware of the requirements. DCF may be able to do webinars on demand. FLAG for PDS to partner with us.*

(2:45-2:55) VI. Next Steps

- Implementation team will review updates & training needs
- Next meeting 7.24.24
- Reviewed the different teams that are also involved in this process

(3:00) VII. Adjourn