

**Meeting of the
Statewide Foster Care Advisory Council
Sheraton Lisle Naperville, 3000 Warrenville Road, Naperville, Illinois
June 15, 2018
9:00 a.m. - 3:00 p.m.
APPROVED MINUTES**

SWFCAC MEMBERS PRESENT	SWFCAC MEMBERS PRESENT	STAFF PRESENT	GUESTS
Gladys Boyd	Carol Sheley	Debra Dyer-Webster	Julie Cebulski
Donna Gregory	Denise Spires	Claudia Dancy-Davis	Andrea Gray
Arrelida Hall-Johnson	Samella Taylor-Lewis	Carlene Erno	LaTanya Grundy
Darrin Holt		Gwenn Eyer	George Lemperis
Rachel Hoyt	SWFCAC MEMBERS ABSENT	Michelle Grove	Calvin McLemore
Ken Keefe		R. Lizcano	Pat Pride
Harriet Kersh	Katy Cotts	Gail Mayer	Andrea Roberts
Maya Maclin	Gordon Hannon	Laticia McAlpine	Michelle Roberts
Susan McConnell	Kate Monte	Norm Suire	Mark Smith
Mark McDaniel	Trina Rizzo	Eva Walker-Outlaw	Esther Spurgeon
Kellye Norris	Mary Savage		Iris Williams
			Jacqueline Williams

Welcome and Introductions - Mark McDaniel

Chairman Mark McDaniel welcomed everyone to the meeting at 9:10 a.m.

Approve Minutes from 05/11/18 SWFCAC Meeting

Kellye Norris made a motion to accept the minutes. Maya Maclin seconded. Motion carried.

Travel Reimbursement Requirements

Gwenn reviewed the updated travel policy and council members completed revised travel reimbursement forms.

Public Comment: None

Final Report to the Director

Mark McDaniel

There were no final reports submitted to the Director since the last meeting. The monthly Director's Report was submitted as required by law.

Public Comment – there were no guests present, so there was no public comment.

Managed Care

Maggie Poteau

Maggie is the DCFS Marketing & Communications lead to the Medicaid Managed Care Implementation. She provided an overview and led a discussion of the roll-out. The contract for the general population has been signed and is in effect; the contract for DCFS youth has not yet been signed. Information is posted on the HFS website. October 1st is the scheduled target date for all youth in care and former youth in care to transition to Medicaid Managed Care. Planning for this implementation is underway. There are safeguards in the contract to ensure Medicaid MCO's have a strong provider network statewide.

Discussion questions and issues the advisory board seeks to address

- Are they adding mental health services to the current Illini plan? It was noted that we don't want disruption of services, and if something is not covered there must be a way to quickly access services and supports.
- Check the provider company's ratings. "Keeping kids healthy" is the very lowest rating. Behavioral health is much higher.
- If services are not available with Illini, can caregivers go outside to their regular providers?
- How do we verify that doctors are in the network? Online lists are not updated. Maggie stated that program will be building up their own web site, redirecting participants to the right websites, and distributing information sheets for stakeholders.
- Transportation is currently an issue. They pick up and drop off on time, but foster parents have to wait an hour or so for pick up.
- Everyone is at the table to look at the communication and marketing strategy throughout the state.
- Care Coordinators will be used to benefit families. Nurses will be assigned, especially in private agencies.

Maggie reiterated that the council's concerns and questions are very important. Send your questions to DCFS.healthplan@illinois.gov. They need to hear from stakeholders so that they can make this transition as smooth as possible. The email address is also available to private agencies and their foster families. They are in the process of creating a Managed Care portal that will contain information for all stakeholders, i.e., marketing and communications collateral, social posts, information, educational resources, etc.

Maggie asked council members to list the types of information needed by caregivers during this transition:

- Lists should include providers, hospitals, etc.
- Will they be dealing with the transportation part of it? What do foster parents need to know about the process and how it works?
- Will Emergency treatment transportation be available?
- Illini Care has a two-day grace period to call in advance of the appointment. Sometimes a doctor wants to see the youth sooner, and foster parents want to know if it will be covered.
- Will there need to be referrals, or may caregivers just schedule with the specialist?
- How will this change the consent process for routine care, psychotropic meds, etc.? Will it add an extra step to go through Illini Care?
- Will this expedite things between Integrated Assessment, or will it cause delays for counseling, etc.?

- As with any new program, there will be a transition period. Illini Care will meet providers where they are. If they're not currently using Illini Care, providers will be given resources and other information to get the help they need.
- Everyone is aware that this is something we have to get right. It is a question of understanding the process as there are many systems to integrate.
- There will be many liaisons throughout the state and a general 800# will to go a liaison who will be able to field questions.
- How does the new program compare to current Illini Care plans? For those on Illini Care currently, the transition shouldn't be too cumbersome.

Maggie stated that there is a form set up on the current DCFS website for questions and concerns about the transition of health care for all youth in care.

Go to: <https://www2.illinois.gov/dcfs/brighterfutures/healthy/Medicaid/Pages/HealthPlan.aspx> and click on "Leave Feedback." Maggie referenced the Managed Care Council that is being developed. They will meet in various regions and meetings will be open to the public. They will provide recommendations to HFS and DCFS. She also asked for members of this advisory council willing to serve on a focus group to provide feedback on marketing collaterals as this rolls out.

Medical Marijuana

Debra Dyer-Webster

The law affects DCFS policy due to conditions under the law itself. DCFS policy says that caregivers can't have "controlled substances" around the child in care. A person that's not a foster parent may store marijuana in their home and use it in their home. The act states that if you're a licensed child care provider you cannot store it in your home. The card given with prescribed medical marijuana says that it must be stored in the home. The law specifically addresses licensed "child care providers," so licensing reps are going to enforce it.

Discussion

Carol read the following from George Vennikandam, Acting Deputy Director of Licensing, dated March 7, 2017: "The rescinding of Policy Guide 2015.09 is a recognition that medical cannabis may be prescribed as permitted by P.A. 99-0122. Prescribed medical cannabis should be managed as all other prescription medications in licensed child care facilities in regard to established rules for the proper storage, controlled access and usage only by persons for whom the medication is prescribed."

Debra reminded the council that the public law states that if you're a licensed child care provider you cannot store it in your home. If you have TLC oil instead of smoking, the prescription dictates how it should be stored. If you have a prescription for it, you have to do what it says in the act.

What if a foster parent states that they are not going to abide by the law? They'll do an unannounced visit and further steps will be taken.

Mark stated that as a council, the only way to really manage this issue is to send it to the Policy/Legislative Committee for attention. Debra explained that we don't always have to ask that the law be changed, we may just ask for clarification, i.e., the council may wish to ask for an amendment to clarify whether it applies to day care and/ or foster care (which could be exempted); we may be able to clarify that it may be stored in a locked box like other psychotropic drugs. Gwen Walsh is the DCFS Legislative Liaison that could work with our council to address this issue.

Election of Officers

Ballots were distributed, and Darren and Kellye collected ballots to count them. Carol Sheley is the new chairperson and Ken Keefe is the co-chair.

Committee Reports

Policy/Legislation – Darrin reported on passed and pending legislation. He covered the following: HB4360 amends the Illinois Income Tax Act to create a credit equal to 20% of gross wages paid to a qualified youth in care.

HB4909 amends the vital records act, waiving fees for youth in care and former youth in care.

HB4964 amends the Children and Family Services Act to place youth in care in the least restrictive and most family-like setting consistent with the youth's needs and best interests.

HB5076 amends the Children and Family Services Act to require DCFS to place a locked suggestion box in group homes, shelters, etc.

SB2655 amends the Juvenile Court Act of 1987 and strengthens permanent relationships for youth over age 15.

SB2846 amends the Children and Family Services Act making post-secondary education tuition and fee waivers available to certain youth in care or formerly in care.

The Policy / Legislation Committee met Thursday night at 7p.m. The committee will meet the evening before each council meeting. Since Darren is going off the council this committee will need a policy co-chair. They discussed Child & Family Team meetings and how they're changing under the Core Practice Model. They need clarity re: the distinction between Child & Family Team meetings and Administrative Case Reviews. They also addressed the respite letter sent to two past directors and copies were distributed. Following a brief discussion, it was decided that the letter will be revised for clarity and will go to the Director. Issues to be addressed include a definition for "extended period of time," the application of 906's, permissions and approvals, and timelines. Gladys Boyd's contact information was added. ***Motion: Ken Keefe made the motion to send the revised letter to Director Walker. Donna Gregory seconded, and the motion carried.***

*FPSS – Denise Spires reported that the statewide Foster Parent Support Specialists just had two days of intense training. The first day they had various speakers and broke into subgroups to identify Wildly Important Goals. The second day a doctor from Peoria demonstrated how to recognize different signs of trauma and abuse. Michelle distributed FPSS flyers. She stated that we're trying to provide the most up-to-date information possible, statewide. It was requested that we provide a statewide FPSS list to the council. She also stated that Maggie was at the training to discuss Managed Care and there was a presentation from the OIG's office on grief and loss. They discussed the judicial system and one region set a WIG to meet with local judicial representatives. Some of the things they worked with on their group projects were the WIGs. They may focus on trauma and trauma training, increasing the capacity of foster parents. They're going to spend time each week focusing specifically on the goal they choose.

4 Disciplines of Execution

Michelle Grove

Michelle said that the Director is trying to focus on one goal and get it accomplished. She shared Director Walker's wildly important goal: decrease deaths, serious harm and long stays in foster care for birth to three years old. She noted that steps are required to meet the goal, i.e., decrease the recurrence of child maltreatment for children birth to three and decrease the number of children

who enter care between birth and three years old who are not reunified within 24 months. Roxanne stated that the Director is also looking at youth from age eight to 21.

Michelle went on to reiterate the difference between lead and lag measures. Lead measures are proactive and lag measures are things that have already happened, and we don't really know how they really have impacted the overall goal. We are working to build camaraderie across the agencies. There is a need for veteran foster parents to have trauma training. We need to focus on less to accomplish more. She showed the 3DX video. We can all do a little piece to help us reach the larger goal. We have to pick something in order to contribute.

Training – The Training committee will work with Michelle to get the Core Practice training going. They're going to bring in outside stakeholders.

Hospitality/Marketing – We need to be able to have a better vehicle for the marketing part. We need to fill vacancies on the council and an updated membership list. We should possibly distribute membership application packets to council members to be shared with interested parties.

Reports from Other Councils/ Committees/ Workgroups

*CWAC

Rachel, Darrin, Mary, Gordon

Darrin reported that no meeting was held. Darrin is going off the council, so another member will need to be appointed to CWAC.

*IFAPA

Gladys Boyd

Gladys reported that there are concerns about ACR's since foster parents are asked to leave the meetings. IFAPA was invited to the Cook South Foster Parent Appreciation event and IFAPA donated raffle prizes.

Regional Reports

Northern – Donna Gregory reported that they held their biannual regional council meeting last Thursday. Christina Engel shared important information. They do not currently have officers and don't currently have support from the RA.

Southern – Mark McDaniel reported that they did not hold a meeting.

Central – They held a conference call. They have been working on Foster Parent Appreciation.

Cook North – No report

Cook South – No report

Cook Central – Denise reported that they did not have a regular meeting, but the combined Cook regions gathered for a Foster Parent Appreciation Banquet. 180 foster parents were invited and 174 showed up for the sit-down dinner with live entertainment. They offered raffle prizes and awarded South Brookfield Zoo tickets. Their next meeting is June 26th.

Motion: Kellye Norris made the motion to adjourn. Harriet Kersh seconded. Meeting adjourned at 2:43 p.m.

Next Meeting Date: September 14, Northern Region