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**Case Studies:  
Use of Flexible Funding in Indiana's  
Child Welfare Demonstration**

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**Part of  
A Comprehensive  
Evaluation of the Indiana  
Title IV-E Child Welfare Waiver  
Demonstration**

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**A Report for the Children's Bureau**

**Prepared for the  
Indiana Department of Child Services**

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## Preface

This is a report of case studies conducted as part of the comprehensive evaluation of the state of Indiana's title IV-E child welfare waiver demonstration. The demonstration was an attempt to determine whether the need for and use of foster care could be reduced significantly through the provision of a broader set of support and wrap-around services to children and their families.

The state began operating its waiver demonstration in 1998. It originally received approval from the federal Department of Health and Human Services for a five-year program period that ran through December 31, 2002. The project continued at that point under an interim understanding and in 2005 the state received formal approval from DHHS to operate the waiver for an additional five years. This formal extension ended June 30, 2010, and the state has been given approval to continue for a second interim period that is in effect as this paper is being written.

During the extension period a Special Project was undertaken in addition to the process, impact and cost studies that formed the formal evaluation of the project. In this special project, a closer, more detailed look was undertaken at the utilization of the waiver in a limited set of cases involving a family with at least one child assigned to the waiver. These case studies, it was hoped, would provide a greater understanding of the uses and effects of the waiver, its potential and its challenges, and shed light on what was being found in macro-level analyses involving either the full population or very large samples of study cases.

Interviews for the case studies were conducted in 2008 and 2009 as the demonstration was considered to be at the height of its maturity and prior to the consideration of phasing it down.

The evaluators appreciate the time and assistance given by the county supervisors and case managers of the Department of Child Services who participated in lengthy interviews as part of this study.

## Case 38

In the spring of 2006 a young woman walked into an inner-city office of the Indiana Department of Child Services and asked for help. She had three young children, the oldest was three and the youngest still an infant, and she had no way to care for them. Except for the children she was alone and could no longer afford to stay in her apartment. She was upset and crying and asked if the county could take her children and place them in the care of someone who could look after them. She said she did not have money to buy food or pay for electricity and had no family to help her and no one to turn to. She had split up with her boyfriend after an argument turned violent; the boyfriend was the father of her two youngest children. She had friends but none with money they could lend her to buy food or pay rent on an apartment. She herself had been raised in foster homes and now the wheel was turning and she saw no alternative but to give up her children as she had once been given up to foster care.

The county opened a children's services case and assigned it a case manager. The case manager placed the three children in foster homes paid through Title IV-E. She found an unfurnished public housing unit for the young woman, helped her look for a job, gave her homemaking and cooking instructions, enrolled her in parenting classes, and made arrangements for her to visit her children. The case manager arranged for counseling for the woman and her partner with whom she wanted to reestablish her family, if this were possible. Gradually, the woman's life gained a measure of stability and her relationship with the children's father strengthened. She found a job and planned to enroll in a community college program.

Reunification of the children and parents was the case plan, but nine months after the case was opened, the woman was still unable to furnish the apartment and could not pay her overdue utility bills. There seemed to be no forward movement possible in the case without an infusion of some funds for concrete assistance. It was at this point in the case that the case manager recommended assigning the family to the child welfare waiver program. With funds available through the IV-E waiver, the case manager covered the overdue utility bills and purchased beds and bedding, a dining room table and other furniture for the apartment. The total cost was \$3,358. With this help, the children were able to return home and the family reunited. Without the help there would have been no suitable home for the children to return to. The case was closed in the spring of 2007 and there have been no further reports regarding this family to the Department of Child Services.

This case is one example of how the Title IV-E child welfare waiver has been used in Indiana. Across the full spectrum of families assigned to the waiver in the state, the average amount of waiver funds expended in individual cases has not been large. In this case, the worker estimated the children were reunited with their parents in their birth home at least six months sooner than they would have been if the waiver funds were not available. The amount of waiver funds used was less than the cost of six months of foster care. In this case, then, the waiver was both programmatically effective and cost effective in helping to produce an outcome that benefited both the family and the public.

This paper is a close-up analysis of a sample of child protection cases in Indiana in which the child welfare waiver was utilized. It is part of a larger, broader evaluation of the state's Title IV-E waiver demonstration. In the case studies a small number of child protection cases in which the waiver was used were examined in close detail to understand better how the waiver can be used and has been used, and with what effect. The cases in this study represent something akin to archaeological test digs—an attempt to move our understanding forward by digging deeper.

## Background

The Indiana child welfare waiver demonstration was an attempt to determine whether the need for and use of foster care could be significantly reduced through the provision of a broader set of support and wrap-around services to children and their families. Without a waiver, Title IV-E federal funds can only be used to pay foster care expenses of children removed from their homes for their own protection. The waiver approved for Indiana by the Department of Health and Human Services granted the state greater flexibility in determining how these funds may be used.

The goal of Indiana's "flexible funding" demonstration, administered by the Department of Child Services (DCS), was to reduce the frequency that children were removed from their natural homes and placed in foster care arrangements. The demonstration also sought to reduce the lengths of stay for children placed in foster care and to expedite family reunification. The project was envisioned as both a cost-effective response to child maltreatment and an intervention that was expected to improve the wellbeing of children and the functioning of the families. The flexible nature of the demonstration meant greater latitude in the kinds of services that could be provided to children and their families in order to achieve the goals of the demonstration.

Among states with Title IV-E waiver demonstrations, the Indiana project was unique, or at least distinguished, in a number of ways. It was one of a small number of flexible funding demonstrations. It was statewide in scope, and individual counties were permitted some discretion in program implementation. It allowed broad participation within the full range of child protection cases, from low to high-risk, and permitted the inclusion of juvenile delinquency cases. Children could be assigned to the waiver group, the experimental group in the evaluation, if they had already been placed outside the home or were at risk of placement but still residing at home. Finally, the state was allowed to use waiver funds for children who did not otherwise meet Title IV-E eligibility criteria as well as those who do, as long as the program remained cost neutral to the federal government.

The state implemented the waiver demonstration on January 1, 1998 and received approval for a five-year program period that ran through December 31, 2002. The project continued at that point under an interim understanding and, in 2005, the state received formal approval from DHHS to operate the waiver for an additional five years. This formal extension ended June 30, 2010, and the state has been given approval to continue for a second interim period that is in effect as this paper is being written.

## Evaluation

A comprehensive evaluation of the Indiana waiver demonstration has been ongoing since the initial demonstration period and continuing through the formal extension of the project. The evaluation of the original 60-month demonstration period found considerable variation among counties in the manner and extent to which the waiver was utilized and in the types of services provided in individual cases. Successful outcomes were generally realized across the state; however, positive outcomes were often quite modest in scale and tended to be limited to a set of counties that had made more active use of the waiver.

As part of the evaluation during the extension period it was decided to take a closer, more detailed look at the use of the waiver in a limited set of cases. These case studies, it was hoped, would provide a greater understanding of the uses and effects of the waiver and shed light on what was being found in macro-level analyses involving either the full population of cases or very large samples of cases.

## Selection of Cases

Cases selected for the case studies all came from so-called “program” counties. From the first years of the project, evaluators identified a subset of counties that made greater use of the waiver, focused on the programmatic opportunities the waiver provided and maintained a higher degree of fidelity to the intensive services model. While initially not a large number of counties, the group of counties that came to be referred to as “active waiver counties” or “program counties,” grew as the demonstration went on. For reasons related to the manner in which the waiver was utilized, some of the counties originally considered program counties were dropped from the set during the extension period, while others were added to the group.

The selection of cases began in 2008 by contacting DCS supervisors in program counties and asking for recommendations for cases to be included in the case study. We were looking primarily for cases involving IV-E eligible children and children in child protection cases. While non-IV-E eligible children and children in juvenile delinquency cases were permitted to be assigned to the waiver in Indiana, these types of cases lay outside the national focus of the child welfare waiver project. We also asked county supervisors and family case managers (FCMs) to suggest cases that they considered representative of the types of cases they have assigned to the waiver and cases that might demonstrate how they have used the waiver to make a difference in the lives of children and their families. Primarily, therefore, we were looking for examples of what might be considered successful CPS waiver cases, although these were not the only types of cases selected.<sup>1</sup>

We were also looking for cases on which we had more comprehensive data. That meant, in addition to data available from the state’s child welfare information system (ICWIS), cases that were included in our large case review samples, in which case managers had already completed a detailed review instrument, and cases in which families had been surveyed or interviewed as part of the broader process of obtaining feedback from caregivers affected by the waiver.<sup>2</sup> Finally, we did not include any control (matching) cases among the case studies.

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<sup>1</sup> Part of the reason for doing this was our conviction that there had generally not been enough sharing of lessons learned about waiver usage across counties in the state and that, among other things, this exercise might provide such an opportunity.

<sup>2</sup> A description of these data sources can be found in the interim report on the demonstration extension at: [www.iarstl.com](http://www.iarstl.com). The final report of the first 5-year demonstration period is also available at this website, and the final report of the second 5-year period (2005-2010) will be available at this site by January 2011. A discussion of using matched-pairs as control cases can also be found in these reports.

In this manner we initially identified 50 cases with one or more children assigned to the waiver. From these, 43 cases (with a total of 51 waiver children) were chosen that represented the diversity in case types, family characteristics and circumstances that composed the waiver population. All but two of the cases involved children who were IV-E eligible. The 43 cases originated in 13 counties, and we visited each of these counties to interview the appropriate case managers and supervisors about the details of the cases. Information from site interviews was integrated with data collected through other methods including ICWIS extracts, family surveys and interviews, and worker case-specific reviews.

## Overview of Cases

**Case Types.** At the start of the demonstration, Indiana classified CPS cases into four categories: CHINS, Informal Adjustment, Service Referral Agreement, and Services.<sup>3</sup> These categories can be thought of as a risk-level classification system from most serious to least serious. The most serious cases were classified as CHINS cases and these could involve children removed and placed outside the home or children remaining in their homes. In 2006 and 2007, Services and Service Referral Agreement case types were eliminated and began to be phased out of the system. Some were shifted to Informal Adjustment, others were reclassified as CHINS and others were closed. In mid 2007 the two lower risk case types accounted for about one-quarter of all waiver cases (SRAs were 6 percent of the total and Services cases were 20 percent). As of June 30, 2010, these figures had lowered and 1 in 10 children assigned to the waiver during the extension were classified in ICWIS as being SRA cases (3 percent) or Services cases (7 percent).

At the time they were selected for inclusion in the case study, 21 of the 43 cases involved children classified as CHINS; 17 involved children removed from their birth homes and placed in foster care and 4 were cases of in-home CHINS. Sixteen of the cases were originally classified as Informal Adjustment; 6 of these were reclassified as in-home CHINS while the case was open. The other six cases began as either SRA or Service cases and one

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<sup>3</sup> CHINS (children in need of services) cases involved children with substantiated maltreatment reports at the highest level of criticality and who have been made wards of the state or county. These children could either be in out-of-home placement (foster care, group homes or residential facilities) or remain in their own homes. Informal Adjustment (IA) cases involved less severe but substantiated reports of abuse or neglect in families with a limited history of maltreatment. SRA or Service Referral Agreement cases involved less severe but substantiated reports of families with no previous CPS history. Service cases were those in which the safety of children was judged not to be at risk but services might be provided to families on a voluntary basis. Case type was never a static thing but could change while the case was open.



was changed to Informal Adjustment while the case was open. Four children who were not removed initially were placed in foster care at a later point in the case.

**Prior History with CPS.** A majority (63 percent; 27 of 43) of the cases selected involved families or family members with some prior CPS involvement. There had been child maltreatment reports at some earlier point in time involving the children in 22 of the selected cases, and 8 families had adults who themselves had been wards of the court as children. One-third of the families had at least one parent with a criminal history.

**Household Composition and Demographics.** The waiver children lived in households of various compositions. More often than not (58 percent) the children lived with two or more adults, but only 23 percent lived in two-parent households; 16 percent lived with their mother and her partner and 19 percent lived with their mother and other adults, often the mother's parents. The rest of the households (42 percent) were single-adult, frequently single-mother households (33 percent) or single-grandmother households (7 percent; one child lived only with his stepfather.

The average number of children per household was 2.9, with the number ranging from 1 to 10. The age of the children assigned to the waiver ranged from newborn to 17 years, with a mean age of 5.6 years. With respect to ethnicity, 33 were white, 9 were African American and 1 was Hispanic.

**Initial Report.** Maltreatment reports leading to CPS intervention in these cases were quite varied. Seven included allegations of drug use or selling and another seven involved drug-exposed infants. Another seven of the cases began with reports of unsupervised children, four with reports of domestic violence, and four with reports of physical abuse. One of the cases involved a family that was homeless, three were of families with unsanitary homes, and three were reports of families unable to provide basic needs for their children. There were two cases of medical neglect, one of educational neglect, and one was a case of parent-child conflicts. One case involved a child whose parent was arrested for probation violation; another case involved the children of a woman jailed for drug use. One case arose from a request from the local mental health agency for CPS intervention.

**Family Problems and Needs.** Many of the families were found to have additional problems and serious needs during the investigation phase of the case. These problems were often complicated and placed the welfare of the children at risk. The following is a more detailed list of the types of issues discovered by family case managers.

- All of the families struggled with personal, financial and household managements issues, such as lack of sufficient income for basic necessities, inability to pay bills, imminent eviction or utility shut off, overcrowding, unsafe or inadequate living conditions, lack of transportation, lack of medical insurance or medical care, and/or lack of affordable child care.
- 32 families (74.4 percent) had at least one member with a substance abuse problem, often the caregiver.
- 28 families (65.1 percent) had caregivers with deficient parenting skills, supervision problems or frequent and serious conflict in dealing with their children’s behavior.
- 26 families (60.5 percent) had children with various mental health or physical health concerns, ranging from ADHD, separation anxiety with parents, behavioral problems, and developmental disabilities.
- 20 families (46.5 percent) had caregivers with mental health or physical health issues that affected parenting and/or the ability to keep a job.
- 15 families (34.8 percent) experienced domestic violence, ranging from aggravated verbal disputes to physical violence with children present.
- 15 families (34.8 percent) faced basic home-related problems, such as lack of organizational skills, unsanitary or unsafe homes or poor hygiene for the children.
- 13 families (30.2 percent) experienced strained or dysfunctional relationships between adults, between children or between parents and children.
- 8 families (18.6 percent) were managing a serious illness in the family or had suffered the recent death of a family member.
- 6 families (14.0 percent) had severe childcare problems that often interfered with the employment of the caregivers.
- 4 families (9.3 percent) experienced extreme social isolation.
- Many experienced a host of other problems, such as living in high-crime neighborhoods, lacking positive social and community support or suffering as victims of crime or natural disasters.

**Waiver Usage.** In a large majority (86 percent) of the families, a single child had been placed on the waiver. In five of the families (11.6 percent) there were two waiver children assigned during the case, and in one family there were three children placed on the waiver. The assignment to a waiver occurred at varying points during individual cases. Informal Adjustment children were more likely to be assigned at the start of the case, while children with CHINS cases were more often assigned mid-case or nearer to case closure. The total amount of waiver funds spent ranged from several hundred dollars to several thousand dollars, and in a few cases to tens of thousands of dollars. The least amount of waiver funds used on any of the selected cases was \$561; the most was \$45,542.

**Services Purchased through the Waiver.** Waiver families were provided an array of services throughout their cases to address family needs and case plans. These services were purchased through waiver funds as well as through other means, such as Medicaid, Title IV-B, and county funds. Often families would receive a number of services prior to assignment to the waiver and these services would continue throughout the waiver period. Families also often received direct assistance from their family case manager and were frequently connected to unfunded community resources, such as food banks.

Services funded through the waiver can generally be categorized into two types: traditional behavioral or therapeutic services (for example, in-home casework, counseling, psychological assessments, drug-treatment) and concrete assistance (such as financial assistance for rent, furniture, or clothing). A majority of case study families (27) received both behavioral and concrete services. Of the remaining 16 families, 4 received traditional behavioral services only, while 12 received concrete services only. The table shows the number of families that received specific services paid for with waiver funds.

**Number of Case Study Families who Received Specific Services**

<b><i>Behavioral Services</i></b>	<i>n</i>
Counseling, substance abuse treatment, or individual or family therapy	20
Drug screens	12
Homemaker or home-based case management	11
Parent aid, parenting training	7
Supervised visits	6
Other in-home assistance	5
Psychological or substance abuse evaluations	3
Tutoring or mentoring	2
Domestic violence emergency services	1
<b><i>Concrete Services</i></b>	
Assistance with utility bills	20
Rent assistance	18
Furniture, appliances, bedding	11
Deposit for apartment	10
Child care assistance	10
Clothing for children	8
YMCA or youth activities	6
Car repair/expenses	6
School supplies	4
Car and transportation assistance	2
Food	2
Legal fees for guardianship	2

Items and assistance not included in the table that were provided through the waiver to one case-study family were a hearing aide, prescription medication, gas voucher, eye glasses, phone installation, dentist visit, yard mowing, cell phone, moped and helmet, bus passes, new windows, hygiene products, and eviction filing fees.

**Outcomes.** Because of the types of cases selected for the case study, most of the waiver children and families discussed here had positive outcomes: the goals in the case plans were attained for a majority of them. Families who wanted to make real changes in their lives were able to make important progress because of assistance provided through the waiver. By the close of each case, the affected children were considered to be in safe and caring environments. More specifically:

- Permanency outcomes were established for all 23 of the cases involving out-of-home placement. For 19 of these cases, family reunification occurred and for the other 4 cases, legal guardianship or adoption occurred.
- Of the in-home CHINS cases, the waiver prevented the removal of children in 2 cases, established a safe home environment in a third case, and expedited safe case closure for the fourth.
- For the cases that were considered to be less severe (IA, SRA, and Service cases) the waiver was instrumental in preventing risk escalation for 12 of 16. Temporary mid-case placement occurred for 4 children. Institutional placements were avoided for two high special needs children through services paid for with waiver funds.

In most of these cases, the worker viewed the positive outcomes as directly related to services funded through the waiver. In a number of the cases, the critical waiver services involved some kind of financial assistance, such as helping a family establish a home so that reunification could occur, as in Case 38 described at the beginning of the report. For a larger number, risk escalation was prevented by financial assistance that addressed problems related to housing and home conditions, utilities, childcare and other basic needs. Financial support that directly addressed a barrier to family integrity allowed the case to progress more rapidly. Concrete services, often coupled with the behavioral services that allowed parents to learn positive parenting or home management skills or addressed problems related to alcohol or drugs, brought positive resolution to some very difficult cases. In addition to child permanency and safety outcomes, parental self-confidence developed, children's socialization and behavior improved, family members were given accurate mental health diagnoses and provided therapeutic or medical treatment, children's academic performance improved and family dynamics and communication progressed.

## Case Studies

To understand how the waiver was utilized, data related to the 43 cases were integrated, organized, analyzed, and turned into narratives. Many of the families had multiple and complicated problems and needs. At the same time, many shared a set of characteristics; most had limited financial resources, many had family members with substance abuse problems, and many experienced some level of social psychological dysfunction. Accordingly, and primarily to eliminate redundancy, 20 case narratives were selected for inclusion in this report as indicative of how the flexible funding waiver was utilized in Indiana. The cases were selected to illustrate how and why the decision was made to use the waiver and how the use of flexible funds helped the cases progress to a positive resolution. The majority of the included case studies are organized according to a “waiver assignment trigger,” that is, the primary circumstance or family need that prompted the agency to assign the case to the waiver. A few other cases are included due to a distinguishing case feature, such as the particularly large amount of waiver funds used.

**Waiver Assignment Trigger.** Although these cases were often complex and multi-faceted, there was generally a specific identifiable issue or reason why a child and his or her family were assigned to the waiver. Once this issue triggered waiver-group assignment, however, families typically received a range of assistance and services through the waiver to address the broader set of problems they experienced. As noted above, nearly all the families received multiple traditional services aimed at behavioral change in addition to concrete help with things like rent or utilities. Traditional services were often in place and funded through sources other than the waiver at the time a waiver assignment trigger was encountered. More often than not, this trigger was some kind of financial need that was an immediate barrier to a child’s safety or reunification with the primary caregiver and there was no other way to pay for it. In addition to using the waiver to address this financial need, the waiver was often then used to continue to fund the traditional behavioral services that were already in place. Consequently, though a financial need was frequently the reason for waiver group assignment, traditional services often made up the bulk of waiver spending for the family.

Assignment to the waiver took place at different points during the individual cases. In some cases, children were assigned to the waiver at case opening if the family demonstrated a financial need or required special services immediately. Typically, these were non-placement, lower-risk cases, such as Informal Adjustments. However, in CHINS cases in which a child had been removed, assignment to the waiver did not occur until the caregivers made progress with the aid of other services and showed commitment to the

well-being of their children and the stability of their family. In these cases, the waiver was not considered appropriate until other services had been completed and reunification was possible if additional help through the waiver were provided.

As the case examples that follow show, family case managers generally viewed the waiver as a means to expedite positive outcomes for families who were viewed as “willing to change.” The waiver’s flexible financial assistance allowed the caseworker to address issues quickly, directly and at a point in the case that made a difference.

## 1. Lack of Adequate Housing or Utilities

Among the cases examined, housing assistance was the service most frequently funded through the waiver. Lack of adequate housing and/or utilities was commonly a barrier to child safety, reunification, completion of services and case closure. These housing needs were often the trigger for a waiver assignment. When costs associated with security deposits, rent payments, home repair or necessary furniture exceeded a family’s financial capacity, and viable alternatives within the extended family or community could not be found, the flexible funding available through the waiver allowed DCS to intervene directly to overcome these barriers. Workers in these cases saw a clear relationship between addressing housing issues and achieving positive outcomes in families.

A child was usually assigned to the waiver at the point when housing became an immediate need for the family. This was sometimes at the start of the case, but more often occurred later, when the family had completed other services and was ready to make the transition to reunification. Though most of these families experienced a wide variety of other problems as well, such as drug abuse or domestic violence, use of the waiver for housing was instrumental to success in each case.

The first six cases explore situations where *lack* of appropriate housing or impending eviction was the primary issue and a waiver was used for a security deposit, down payment or rent. The cases include various risks levels and represent a range of complex scenarios. The first three cases (cases 11, 19 and 36) are high risk CHINS placement cases. These are followed by two mid-risk Informal Adjustment cases (cases 13 and 9). The final case in this set (case 4) is a lower risk Services cases. Notice that as the risk level decreases from CHINS placement to Informal Adjustment to Services, use of the waiver for housing assistance was more likely to occur earlier or at the beginning of the case. Though Services cases were eliminated in late 2006, the use of the waiver in case 4 illustrates its preventative potential.

In the subsequent case (case 25), the waiver was used primarily to address the *adequacy* of housing, such as a utility shut-off or purchases to improve the living space.

Note that in many of the examples mutually supportive services were provided; for example, utility assistance might have been provided along with rent payments. The waiver was triggered to address a particular problem but other services were then provided to address more fully the needs of the family. Note also that most of the families also received or continued utilizing home-based services of some kind once housing was established or that housing was necessary in order to begin the provision of these services. To distinguish the particular circumstances of each family, a brief headline highlights the unique features of each example and key phrases in the narrative associated with the waiver trigger are underlined for clarity.

### *Lack of Housing*

#### **Case 11**

*CHINS PLACEMENT, neglect, multiple family members with mental health concerns, previous episodes of domestic violence. Case open for 574 days. Waiver assignment on day 329.*

**Report and Assessment.** A police report came into DCS that there was a domestic dispute in the middle of the street between a young teen-age girl and her mother. Police took the girl, who was 14, to the local police station, as she was afraid to return home. The girl stated that her mother had not yet registered the girl for school, that she did not have appropriate books or shoes and that she had not been on her medication for her bipolar disorder for several months. Fleabites covered her body, her legs and arms were bruised where, she said, her older sister had kicked her. Allegations involving environmental endangerment of life and health, lack of food, shelter, clothing and poor hygiene were substantiated and a CHINS placement case opened.

The household consisted of the mother, the 14-year old girl and a 12-year old boy. An older, adult daughter would occasionally bring her own young children to stay there. The father of the 12 and 14 year old children had recently suffered a heart attack, was hospitalized throughout the case and eventually died. A 20-year history of domestic violence between the parents highlighted the inconsistency and volatility of the relationship and the father served time in jail on more than one occasion. The anger present in the household affected everyone. Hitting, cursing and kicking occurred frequently between the two children and between the children and the mother. However, the children got along better with their father and blamed their mother for the domestic violence. Parenting was a struggle for the mother; she would do things for the children but did not teach them how to do things for

themselves. The family also had a long history with child protection and had had DCS cases in other counties. The oldest daughter had been a ward of the state as a child and her own children were in the system as well.

Aside from suitable housing and school enrollment for the children, the family had a number of underlying needs. Several members of the family had histories of mental health problems: the mother, the oldest daughter and the second daughter were all bi-polar but did not take prescribed medication. The 12-year old boy had bed-wetting problems, ADHD and a learning disability. The mother also had issues with chronic pain and could barely walk. Social support was limited. Poor hygiene caused the children to be ostracized at school. Housing was structurally unsound and the family had 20 cats living on the property.

Both children were removed from the home. During the court hearing the 12 year-old boy started kicking and screaming and attacked a probation officer. No one knew the exact extent of the mental health issues he was suffering. He was sent to a correctional facility for psychological evaluation where the boy stayed for 13 weeks. However, it was not a good placement for him. Reports came in about his inability to understand procedures; he could not read and was very low-functioning. The 14-year old daughter was placed in a group home.

**Case Plan and Service Provided.** Family dynamics, domestic violence issues, medical care and education were the biggest issues facing the family. Services provided to the family included: home-based therapy, case management, mental health assessments and psychological evaluations for the children, a parent aide for the mother and children, and clothes for the children. The parent aide helped the mother with an employment search, household budgeting and parenting education. According to the FCM, "We offered everything we could because this was an extreme case." The youngest child went to a youth shelter at one point and a parent aide began to teach him how to read and write. Treatment was provided for the child's bed-wetting and ADHD. After a mental health assessment, it was determined that the 14-year old did not need medication. The children received therapy during placement and the mother began therapy before the children returned home. DCS used a total of \$4,787.40 in waiver funds to provide a down payment on a mobile home, five months of rent and payments for electricity and water bills.

**Outcomes and Impact of the Waiver.** The need for adequate housing led to the use of the waiver one year into the case. Housing was necessary before home-based services could be established and before reunification could occur. Previous living conditions were so unsafe that the family essentially lived out of a car. According to the FCM, once the family got new housing, "There was a miraculous change in the family. The mother was a mother now... Before everyone did their own thing; there were no family roles." Safe and comfortable housing allowed the family to work on other issues in their lives. Children were enrolled in



school, received treatment and medication and therapy helped the family to become stable and close. The mother became employed full-time. Independence and responsibility increased for the youngest child as a reaction to his mother's employment. At case closure, the family got along very well and comforted each other. Domestic violence ceased with the father's passing.

The FCM said, "Without the housing there was no way we could have fixed anything. The children could possibly still be in placement. Mom did not have the ability to manage it on her own. She needed someone to help her get where she needed to be and, once it was established, she could maintain it. This family was in extreme poverty." At the time of this case review, the family has been stable for 17 months and there have been no new reports.

### **Case 19**

*CHINS placement, overcrowding, 10 children, special needs, long-term inpatient drug treatment. Case open for 1,182 days. Waiver assignment on day 1,094.*

**Report and Assessment.** A report came in for unsanitary and overcrowded home conditions: 7 children and 3 adult women lived in a three-bedroom apartment with no working utilities. The assessment also concluded that drug use was present. The family had a prior history with DCS a few years back involving an unsanitary home, drug use and domestic violence. The mother had Post Traumatic Stress Disorder because she was molested as a child and had been a victim of domestic violence.

Individuals living in the home included the mother, her seven children, the mother's sister, a few of her children and the grandmother. Because of the conditions of the home and the mother's drug use, all the children were removed and placed into different foster homes. The mother entered an in-patient drug treatment program where she stayed for almost three years. As progress was made, the children were slowly moved into the treatment center so that she could start parenting them again before moving them back to the community. As they were being moved into the residential facility in phases, the children remained in foster care for varying lengths of time, ranging from two months to two years, with the youngest ones moving back to their mother first. The children stayed with their mother in the treatment facility from one to two years before they all transitioned back to the community.

During the course of the case, the mother gave birth to three more children. At the time of case closure, she had 10 children in total, aged 1 through 14. Seven of these children had health concerns, including mental health needs, learning disabilities, Down syndrome and feeding issues. The children had three different fathers, one of whom was somewhat

involved. Parenting and time management was a key challenge for the mother. The older children grew up taking parental roles and DCS case managers spent “a lot of time teaching them how to be children again.”

The mother’s relatives were enduring cycles of domestic violence, alcohol and drug abuse of their own. The mother chose to live in another town after completing treatment. She knew if she returned home her extended family would move into her home, likely causing her to relapse into drug use once again. During the course of treatment, the mother made some friends in the treatment center, became involved with the church and participated in a support group from the treatment center.

**Case Plan and Service Provided.** The main goal for the mother was to remain drug and alcohol free. In addition, each child had specific personal goals: the older children had educational goals and the younger ones had developmental goals with First Step. The family also strove to build better emotional connection between the children and caregivers, especially for the children that did not have special needs. Reunification was predicated on finding subsidized housing for 11 people and quality, subsidized childcare for the youngest children. Cleanliness was also a big issue with this family and DCS worked for several months on a cleaning schedule with the mother. After the completion of drug rehabilitation, it took six months to transition the mother back into the community.

Services provided included drug and alcohol treatment, casework, family and individual therapy for the mother, daycare for five children at the treatment facility, transportation, supervised visits, assistance obtaining housing and connection to eligible county programs. Financial assistance from DCS and donations from the community included bedding, cribs for three children, a dining room table, two couches, chairs, pillows, rubber pads for mattresses, dressers, a washer and dryer, and one year dues for six children for the Boys & Girls Club. The mother was also provided with job training and budgeting, and referred to disability services for some of her children. Waiver funds totaling \$3,144.13 were used for a deposit and to purchase a washer and dryer, dressers, couches, other household items and Boys & Girls Club memberships.

This case experienced a large turnover of DCS staff during the three years it was open. Seven FCMs were involved. On average, monthly communication included one face-to-face meetings and three or four phone calls. Once the mother became sober, she started seeing her shortcomings and realized that her family history was repeating with her family. According to the FCM, the mother “was always willing to put tools into effect that her therapists or caseworkers gave her,... she had a great deal of pride in moving forward.” Once the family transitioned back into the community, they were monitored for four months before the case closed.

**Outcomes and Impact of the Waiver.** The waiver was opened on the family when the mother was ready to move back to the community, some three years into the case and three months before it closed. DCS partnered with a community agency to help the mother get basic household needs. "We knew that with a minimum wage job it would take months and months of savings to get things needed for the apartment, including rent, a deposit, and furniture," stated the FCM. "It was a kind of case that many saw going and going, just because there were ten kids and mom had a history of substance abuse ... If the waiver was not available mom would not have been able to find an apartment and the kids may be back in foster care."

During the course of the treatment the mother worked on her parenting skills. By the time the case closed, the mother had made improvements and realized her responsibilities. For the first time, the mother was actually parenting and saw success in her life and the lives of her children. The oldest boy made the Honor Roll at school and the child with Down syndrome was making progress with language and physical development goals. Mutual support between family members increased. The older children were able to put their anger behind them and tell their mother that they were proud of her. Stability improved because "stepping in and helping them with basic needs gave them an opportunity to work on other things, i.e., therapy, drug rehabilitation, etc. Before that, they could not see the problems because they were too much into meeting basic needs." At case closure, the mother was employed and connected to community support services. The case has been closed for two years and there have been no new reports.

### **Case 36**

*CHINS placement, neglect, very young children, waiver used to escape domestic violence. Case open for 300 days. Waiver assignment on day 90.*

**Report and Assessment.** A call to the DCS county office reported that a child was going to a neighbor's house and asking for some food and to take a shower. The investigation found that the family, an unmarried couple and their four young children (ages 4, 3, 1 and an infant), was extremely poor and experiencing domestic violence. At the time of the investigation, the parents were separated. The oldest child was living with the father and the three younger ones were living with the mother, her grandmother and the grandmother's boyfriend. The oldest child was removed from the father's care and another child was removed from the grandmother's care (due to suspected sexual abuse by the grandmother's boyfriend). Soon after the removal of the children, the father went to jail for drunk driving and public disturbance and was unavailable to participate in the case plan.

The grandmother's boyfriend moved out and the children were returned to their grandmother shortly before they reunited with their mother.

Several major issues were present in the case. A young mother (21) who had never lived on her own, had never been employed nor had graduated from high school was involved in a very controlling domestic situation where she sustained several injuries as a result of domestic violence (broken bones and most of her teeth gone). Because of these factors, she suffered great financial strain and provided little stability for her children. According to the FCM, the mother had been raised by her grandmother and had gone from "grandmother doing everything for her as a teenager to living with a man twice her age and having kids one after another." The mother's welfare income paid for their daily necessities because the father did not let the mother work or go anywhere outside the home. He himself did not want a job. Although they were otherwise healthy, not having a stable home had a negative impact on the children.

**Case Plan and Services Provided.** The case plan for the family included the mother obtaining her GED and gainful employment, maintaining a stable home, enrolling the children in Head Start and First Steps, learning new parenting skills, building her self esteem and participating in random drug screens and substance abuse evaluations. Services provided to the family included weekly, home-based services—a homemaker, parenting education, budgeting and individual therapy. Waiver funding totaled \$9,715.44 and helped to pay for a deposit and rent on a mobile home, a utility bill (\$450), beds (\$200), a washer/dryer (\$935) and other services in the family's home.

The case was open for nine months, and there was one FCM involved with it. The FCM saw the family at least twice a month and spoke with the family regularly by telephone. The mother was compliant and cooperative, but sometimes she was hard to locate. According to the FCM, the major barrier in the case was the mother's low self esteem: "It was hard to get through to her that she had the ability and was smart enough to get her GED and good enough to get a job."

**Outcomes and Impact of the Waiver.** The children were assigned to the waiver a few months into the case as the mother was planning to move them into a different community to escape her partner's abuse. As the FCM stated, "I saw possibilities of a young mother who had never stood on her own and how we could give her that start." With the help of waiver-funded services in meeting their basic daily needs, the mother was able to focus on her GED classes and renew her life. These services helped the young woman obtain employment, improve her self-esteem, and attain better parenting skills, thus resulting in a more stable home for the family. For the first time, the mother had strong feelings of self-worth and could see that their domestic situation was improving. The mother was consistently surrounded by her family's support on which she could rely anytime. Once in a

stable home, the two older children began to excel at school. The case was closed in March 2007 and the family is currently doing well.

When contacted by the evaluator, the mother reported on the survey that living in her mobile home with her four children was excellent. She also reported that she and her children were doing very well. She said that when she interacted with her children she felt “happy, loved, peaceful, grateful, content, relaxed, energized and tired.” The children were performing better at school, at home and in interactions with other children and adults. They were also responding better to instructions and understanding lessons taught at school. However, the mother reported not being currently employed and not having medical insurance for herself. She still had trouble finding work and affordable childcare and was in need of reliable transportation. Social support was adequate and the family often relied on others for help. She reported being much more confident in her ability to deal with life issues and find help on her own. When contacted, the family was receiving Food Stamps, school breakfasts, WIC, childcare assistance and Medicaid for the children.

### **Case 13**

*INFORMAL ADJUSTMENT, lack of supervision, poor home conditions, parenting issues. Case opened for 181 days. Waiver assignment on day 1.*

**Report and Assessment.** A report came in regarding lack of supervision: A married couple had been drinking, had an argument and passed out, leaving three children unattended. While unsupervised, the children, ages 9, 11, and 13, drank the parents’ alcohol. During the assessment, it emerged that the family had very poor home conditions and some issues with substance abuse (marijuana and alcohol). The family lived in a trailer next to the mother’s parents. The trailer was in disrepair and unsafe and the family’s water supply came from an unfiltered, green pond in the back yard. A subsequent investigation found the allegations in the report to be substantiated and an Informal Adjustment case was opened.

Household members included the mother, her husband and the mother’s three children from a prior relationship; the biological father was in prison. Though there was frequent verbal fighting between the couple, mostly regarding the children’s discipline, the relationship seemed to be fairly stable. The children, however, did not get along with their stepfather and were resentful that their real father was not in their life. In addition, the oldest boy had mental health and anger issues and needed supportive services through special education and, on previous occasions, residential placement. Due to the lack of structure, rules, consistency, and parental follow-through for the children, the couple needed assistance with parenting and discipline. Income for the family had declined significantly since an accident had left the stepfather with chronic physical pain. The mother

was working and the family received Food Stamps and the children had state medical insurance prior to DCS involvement.

Isolated in a rural area, the family had little community support other than the mother's own parents who lived on the same property. This extended family was dysfunctional, had problems with sobriety, and would often fight and retaliate against one another by calling the police and DCS. The nuclear and extended family both had extensive prior histories with DCS. Most reports were for neglect and the children had been previously removed from parental custody in other counties.

**Case Plan and Service Provided.** Unsafe housing and poor parental discipline were the most pressing concerns in this case. Substance abuse was evaluated for the mother and father but was determined not to be a major problem for either parent. Throughout the case, all family members were provided with individual and family therapy and the parents participated in parenting classes and homemaker services, which included transportation and budgeting assistance. A mentor was found for the boys, and the mentor helped them with their homework and behavioral incidents at school, and assisted with transportation. With the help of a parent aide and DCS, the family relocated to a new home within the area. Although the family expressed their frustration with the amount of services prescribed, they were very cooperative and engaged with service providers. The case was open for six months and was managed intensively by one FCM.

**Outcomes and Impact of the Waiver.** The waiver was opened at the very beginning of the case in anticipation of the family needing financial assistance to find a new home. Waiver purchases included a deposit and rent for the home and a bed for one child. As a result of the immediate accessibility of the waiver, the family was able to relocate to safer housing.

Through other services, the parents were able to provide more structure in the lives of their children and learned to communicate more effectively with one another. According to the FCM, "If they had continued to live in that house and use that water the children could have become very ill and the house could have burned down. ...I think a new home helped the family to communicate better." When the case was closed the behavior of all the children had improved.

When last contacted by the evaluator, the family was still intact and living in the same house. The mother said that the family was doing better and that she felt better equipped to care for her children than she did six months ago. Improvements in the children's behavior at school had been made: they got along better with teachers and with other children, responded better to instructions and misbehaved less frequently. The family still experienced stress related to financial matters, but had a few sources of emotional and financial support and received Food Stamps and utility assistance. In general, the mother

felt a lot more confident about her ability to deal with daily issues. The case had been closed for four months at the time of review and there have been no new reports.

### **Case 9**

*INFORMAL ADJUSTMENT. Lack of supervision, special needs child, severe poverty. Case opened for 132 days. Waiver assignment on day 1.*

**Report and Assessment.** A report came from the police regarding lack of supervision. A maintenance man who came to fix the stove reported finding a two-year-old child alone in the apartment. The mother arrived an hour later and stated that she had gone to the Trustee's office for some financial help and did not want to wake her child. She had left him alone with safety gates on the bedroom door and admitted to previously having left the child alone on a number of occasions. The report was substantiated and a short-term Informal Adjustment case was opened.

The family consisted of a single mother and her two-year old son who was developmental disabled. It appeared that the family was struggling financially, was socially isolated and that the mother was depressed. The mother had been unemployed for the last two months, in part due to attending to the disabilities of her child. During those two months, the child had undergone two surgeries for clubfoot. The mother had been employed full-time prior to the operations, but she was forced to quit her job when she could not secure extended leave. The lack of regular income threatened imminent homelessness for the family. They did not have any family support in the area. The family had no prior history with DCS.

**Case Plan and Service Provided.** The mother agreed to cooperate with a parent aide and an in-home therapist, accepted home visits from First Steps, properly supervise her son at all times, obtain adequate medical care and administer medication he needed.

Although the mother had two job prospects, she was waiting for appropriate daycare for her son. Past rent in the amount of \$677 was owed and the family was facing eviction. Despite support from Section 8, she had accrued a large past due balance on her rent, including late fees and eviction filing fees.

The woman was provided with financial help for rent assistance, vouchers for daycare, counseling and an in-home parent aide. The parent aide helped the mother with budgeting, looking for work and locating the nearest food pantry. The mother was compliant with DCS and all service providers. The waiver utilization included \$5,912 for rent assistance, home-based counseling and a parent aide.

**Outcomes and Impact of the Waiver.** The case was put on a waiver to assist the family maintain its housing and avoid eviction. Without this assistance, the family may have lost

their apartment and the case could have easily elevated to a CHINS due to the child's special needs.

The mother successfully completed 90-days of in-home therapy and parent aide sessions. Great progress was made and the assigned therapist concluded that the mother did not need continued services. All of the child's doctor's appointments were successfully attended and the mother also obtained consistent daycare. At case closure, the mother was employed and she and her child living in a stable environment.

At the time contacted by evaluators the mother and child still lived alone together in the same apartment. The mother indicated that she and her child were doing better now and she felt somewhat more able to care for him than she had six months before. The child was doing better at preschool, demonstrating good responses to instructions and good concentration on tasks. He also slept better and was calmer. Unfortunately, the mother had lost her job since the case had closed and felt stress related to her financial outlook and job prospects. She reported having unexpected financial difficulty, trouble with transportation and childcare and stated that she had trouble dealing with her son's health condition. She also reported feelings of depression and reduced social support compared to the previous year. The case has been closed for nine months and there have been no new reports.

#### **Case 4**

*SERVICES CASE. Opened voluntarily for support with housing, general stress and poverty. Case opened 199 days. Waiver assignment on day 3.*

**Report and Assessment.** An early use of a waiver during the extension, this case opened as a service case to support a mother and three young children facing electricity shutoff and eviction after a report accusing the mother's boyfriend of child sexual abuse. The family had no prior history with DCS.

At the beginning of the case, members of the household included the mother, her boyfriend, and three children, ages 4, 3 and 1. The children were from two different relationships and both fathers remained involved with their children. Immediately following the report of child sexual abuse, the mother's boyfriend moved out and the woman and children moved into her own mother's home. However, the relationship between the woman and her mother was volatile and the woman's mother was only minimally supportive. Outside of this relationship, the woman had a social network of family and friends on whom she could rely for occasional emotional and financial help. She later tried to get an apartment on her own, but struggled with payments. It was difficult for her to keep a job and she was overwhelmed with her responsibilities and her situation. The



children were generally undisciplined and a source of stress to their mother. She was in need of financial help and appropriate parenting skills.

**Case Plan and Service Provided.** The service plan included obtaining stable housing, improving the mother's parenting skills and ability to budget her resources, helping her with transportation and planning how to better use the woman's support network.

Homemaker services were provided along with financial assistance for rent, utilities and furniture. Additionally, referrals were made to Head Start for the children and individual counseling for the mother. Counseling was also provided to the child who had allegedly been sexually abused. Overall, the children were healthy and their medical needs met. Services were provided for six months. The mother was fairly cooperative throughout the case and called for help when she needed it.

**Outcomes of Case and Impact of the Waiver.** This case was assigned to the waiver at the beginning of the case due to the family's immediate need for housing. Waiver-funded services brought safety to the family by providing them with stable housing and functioning utilities. The mother was able to move into an apartment and later into a mobile home. New furniture was purchased for the family. A total of \$6,260.02 waiver funds were spent on the family. Services provided from the waiver funds included rent, payment of electricity, furniture and home based services.

The use of waiver funding to provide housing directly prevented homelessness for the family. Other services provided resulted in skill building and increased social and community support for the family. The mother found a job and the children entered Head Start. The mother improved the way she managed and care for her children. She gained control of the household and was more responsible in paying her bills. Therapy helped the child thought to have been sexually abused.

The case has been closed for over two years and there have been no further reports. According to the FCM, the mother was now stable, employed, living with two of her children and was no longer on public assistance. One of the children has moved in with his father. This arrangement came about through a mutual agreement with the mother about six months after the case closed. The mother continues to see this child on a regular basis.

*Inadequacy of home environment (utilities, other financial needs)*

**Case 25**

*INFORMAL ADJUSTMENT. Physical abuse, parenting concerns, mental health issues. Case opened for 402 days. Assigned to the waiver on day 112.*

**Report and Assessment.** The initial allegation involved a stepfather hitting a 12-year-old child with a belt, leaving one-inch marks on her thigh. The stepfather was subsequently arrested and the case opened as an IA. The household included the girl, her natural mother, the stepfather, and two younger half siblings, ages 7 and 6. The family had no previous history with DCS and did not receive public assistance.

At intake, the family was socially isolated, experiencing limited contact with their extended family, neighbors or wider community. The children were not involved in any extra-curricular activities outside the school. However, the family dynamic within the nuclear family was good and fairly strong. The 12-year-old girl never knew her biological father and considered the stepfather her dad. Some behavioral issues were present with the girl, including defiance of authority and low self-esteem. This occasionally escalated into physical aggression towards her mother and stepfather and frustrated them. Additionally, the mother was diagnosed with depression, was on disability for her physical health and virtually never left her residence. The father was employed, but the family was financially strained. During the case the father lost his job and, though he found new employment relatively quickly, his wages were less than he had been receiving previously and the family applied for Food Stamps.

The major concerns in the case were parenting challenges, social isolation, relationship dynamics between the parents and the twelve-year-old, the mother's mental health and the self-esteem of both mother and daughter.

**Case Plan and Services Provided.** The goals of the case plan were to improve the girl's self-esteem and behavior, teach the parents appropriate and effective discipline for their three children, increase social support, complete minor repairs on the dwelling and to help the mother manage her depression. Services provided included Family Preservation Services two to three times per week, individual counseling for the daughter and her mother once a week, family therapy once a month, financial help with clothing for the children, hygiene products for the daughter, food, window replacements and payment of the electricity bill. The family received advice on budgeting, nutrition and positive parenting. A family preservation advocate also worked with the girl at school and at home to improve her social skills and attention to personal hygiene. Services were provided throughout the duration of the case. The family was also given numerous referrals to community resources, including

food pantries, bill assistance and community action. The total amount of the waiver was \$9,947.12 and was applied to utility bills, supplies for home repair, home based services and therapy.

One FCM was involved with the case for 13 months. Face to face contact occurred twice a month and conversations via telephone at least twice a week. In addition, the FCM had daily contact with service providers. Family Team Meetings, which were very productive for the family, were held monthly. Engagement and cooperation with the service providers was consistent throughout the case.

**Outcomes and Impact of the Waiver.** The case was assigned to the waiver five months after it was opened because the family needed replacement windows in their mobile home. Fixing the windows was a safety issue, as was keeping the utilities connected. "If the family had lost electricity and heat, we would have had to remove the children. We were able to pay those bills," stated the worker.

Numerous changes were apparent in this family due to the services provided. The whole family dynamic improved and individual relationships benefited as well. The family was able to sit down and talk rather than yell; the twelve year old and her mother were closer and able to talk to one another; parenting skills had improved; and the mother was managing her mental health issues. Social connections improved and their support system broadened. The self-esteem of the girl improved and she made friends at school and became more socially adjusted. Her behavior and academic performance at school were markedly improved. Her grades went up from C's and D's to A's and B's, she stopped teasing other children and became active in an art club and Girls Scouts. The children's behavior also improved at home; they learned that when parents said something they meant it and were not relenting. The children exhibited less irritability in their relationships with one another. DCS also helped the family contact their extended family members and to engage in community activities. The children became involved in Boys & Girls Club and the mother joined a book club. The case has been closed since June 2008 and there have been no new reports.

When last contacted by the evaluator the mother said the family was doing well. The couple still lived in the same mobile home with their children, and they had taken in a relative's child to live with them. Mother reported that interactions with her children were "happy, peaceful, content, loving, and relaxed". The family felt confident in their ability to cope with problems and had improved social support in place. The mother found a part-time job and the family's income had increased. The family received Food Stamps, housing assistance, school breakfast, utility assistance, child support and Medicaid for children; the parents did not have health insurance.

## 2. Childcare to Maintain Employment

Childcare can be a major problem for caregivers needing to work. Lack of accessible, reliable, and affordable childcare can create employment problems, creating a vicious circle. Employment is often part of a comprehensive case plan and childcare is a critical service for families that can make or break other goals. The following three examples detail situations where the need for childcare assistance, often lasting until appropriate state subsidies could be obtained, was the chief waiver trigger. As in the previous examples, the waiver often funded more than just direct childcare costs and was particularly beneficial for caregivers in maintaining employment.

### Case 23

*CHINS placement case. Failed drug screen, long-term drug use, establishing father as caregiver. Case opened for 416 days. Assigned to the waiver on day 232.*

**Report and Assessment.** DCS took custody of a 5-month-old baby whose mother was arrested for a probation violation. The mother was in a drug treatment program when she failed a drug screening. Consequently, she was arrested and went to jail for six months. Her drug treatment was located in another town and she had no one to watch her child when she was out of the house when her own mother was not available.

The household included the mother and her five children, aged 18, 17, 9, 2, and 5 months. The children spent a lot of their time at their grandmother's house. All were from different relationships, but only two fathers were involved with the family at the time of the case. The grandmother was the main caretaker of the children, as the mother was often on the streets doing drugs. Unfortunately for the children, the maternal grandmother passed away during the case. Soon after, there was a drug raid at the grandmother's home where the mother's brothers lived. DCS was forced to remove all her other children and place them in foster care. Prior history with DCS included a case involving an infant born exposed to drugs.

At the beginning of the case, the major issues were the mother's regular drug use and poor parenting. The mother had been a crack cocaine user for 15 years. She did not have adequate housing nor good parenting skills, and she was unemployed. Her two oldest children were behind in school and were unlikely to graduate from high school. The oldest daughter had a child of her own. Her extended family had legal issues and problems with drugs and provided the mother little support. She received Food Stamps, TANF, Medicaid, and occasional help from the Township Trustee.

**Case Plan and Service Provided.** Initially, the goal of the case was reuniting the mother with her infant, but the mother decided that the infant should instead live with her father. The father was much older than the mother, and stable. He had long-term employment, lived with his mother in safe housing and was a good provider. He also had strong support from his extended family. Although the father was happy to assume custody of the child, several steps were needed, including paternity testing, determining a visitation schedule, drug and alcohol evaluation and parenting classes. It was nearly a year before the child could go home with her father. Two concerns remained over granting the father custody. The father had an ongoing relationship with the infant's mother and he had not located appropriate and affordable childcare. Once he assumed full custody of the infant, the mother was no longer allowed unsupervised visitation with the child. However, the father allowed the mother watch the infant a few times while he was at work.

Services provided in this case included drug screening for the parents, a substance abuse and psychological evaluation for the father, substance abuse education and individual and family therapy sessions for the mother. The total amount of the waiver was \$10,241.37, which was used to pay for six months of daycare for the infant, parenting classes, psychological and substance abuse evaluations and six months of drug screening for the father (all negative). The father got to select the daycare of his choice using waiver funds. The father exhibited strong motivation and sincere commitment to the process. The mother, however, was inconsistent with case requirements and relapsed into drug use.

**Outcomes and Impact of the Waiver.** The father's need for daycare was the trigger to place the case on the waiver. He could not afford daycare at full price and was on a waiting list for subsidized daycare. In the meantime, the mother was occasionally watching the child unsupervised which was unacceptable to DCS. To assist, DCS determined they would provide payment for daycare until the father was enrolled in the subsidized program. According to the FCM, "since the father was employed he was at the bottom of the waiting list ...the waiver was our only alternative ...the child could have been removed from dad if mom was still babysitting her." Childcare brought security to the family and the child was able to socialize with other children her age. When the case was closed the living situation of the infant was considered to be safe and stable. The child was healthy and got along well with the father's family and with other children at daycare. The father and his family provided loving care for the child. The case with the father has been closed for one year.

## Case 6

*CHINS placement. Lack of supervision, single father-headed household, low income. Case opened for 426 days. Assigned to the waiver on day 165.*

**Report and Assessment.** Two children, ages 2 and 3, were found wandering the streets with inadequate clothing and no shoes. Allegedly, the father had gone to work and left the children with a friend who had left the children unsupervised. A single father, the caregiver was struggling with the care of his children, ages 8, 3, 2 and 1, while trying to manage a full-time job. The children's mother had left the father and their four children and moved in with her boyfriend. Other problems in the family included poor hygiene, unsanitary living conditions and inadequate food in the home. An investigation determined that the housing conditions were below minimal sufficiency. The children were removed the same day and a CHINS placement case was opened.

Prior to removal of the children, the household composition included the father, his four children, his brother and his girlfriend. All the children were from the same relationship, but the mother was not involved with the family during the case. The family's support system was limited. After the children were returned to him, the father and his children lived in their own residence. Prior DCS history included a substantiated abuse incident in 1999.

**Case Plan and Service Provided.** Of primary concern for the family was a reliable income needed to provide consistent childcare and safe housing conditions. Truancy was also a growing problem for the oldest child. The father felt trapped as a parent; he was a single caretaker who tried to juggle childcare and a job. Homemaker services were provided to help clean the house and respite care was provided; the father was also referred to a parenting class. One child was evaluated to determine the need for special education. The family was also referred for family counseling but did not use the referral. Once the home conditions had improved and daycare in place, DCS decided to reunify the children with their father as soon as possible, as daycare was preferred over foster care.

The father was on a waiting list for public-assisted childcare, so the waiver was used to help with childcare expenses until he received this assistance. In addition, the family needed help with housing, furniture and home appliances. A washer and dryer were purchased to alleviate the burden of traveling 12 blocks to the Laundromat with all four children and clothes in tow.

The total amount of the waiver was \$3,666, which was spent on daycare expenses for four children, mattresses and bed frames for the children, a washer and dryer, a past-due utility bill, deposit and rent for public housing and homemaker services. Community donations

helped to pay for two months of childcare and a bed for the youngest child. Two FCM's were involved during the 14-month case.

**Outcomes and Impact of the Waiver.** The waiver was used six months into the case because the FCM saw a need to pay childcare expenses until the family received state childcare assistance. The waiver helped reduce placement time and kept the children at home and alleviated childcare concerns for the single father by providing assistance with childcare, maintaining appropriate housing, and obtaining needed items for the home. According to the FCM, waiver-funded interventions could not have been obtained another way, and "the waiver was the only thing that could have helped." As a result the father was able to get the support he needed to keep the children in appropriate daycare while he was at work. The children were at home for a year before the case closed. At time of review, the case had been closed for 16 months, and there have been no new reports to DCS.

## **Case 12**

*CHINS placement. Drug use and violence, two-parent home, adoption by grandparents. Case opened for 717 days. Assigned to the waiver on day 106.*

**Report and Assessment.** DCS initially began this case as an IA, after a newborn tested positive for marijuana. However, the parents refused to sign the IA and when the situation deteriorated further, the case became a CHINS placement. Major issues in the case were illegal drug use and violence at home committed by both parents. The case quickly worsened when the mother became violent, took her children in the car and threatened to drive herself and her children off a bridge. The mother was found unconscious with a whiskey bottle and drugs beside her.

The family consisted of two biological parents and two children, a 2-year-old and a newborn. The mother and father together had a long history of drugs and crime, beginning when the mother was 14-years-old. Together they used crack cocaine, marijuana and various pharmaceuticals. Both parents also had extensive criminal histories, including robbery, drug use, drug sales and petty crime. Appropriate discipline and parenting were a problem for both caregivers. The oldest child had previously been bruised by a slap in the face and the children were frequently left unsupervised.

The family had one prior DCS report on the oldest child and the mother was also in the system as a juvenile delinquent. Drugs had negatively affected the mother's life for many years and previous rehabilitation services had been unsuccessful. Social connections were limited due to the family's geographic isolation, however the grandparents did provide some financial and emotional support to the family. Even though relations between the

mother and her own parents were strained, the children were eventually placed with their maternal grandparents who adopted them after parental rights had been terminated.

**Case Plan and Service Provided.** At the beginning of the case, the goal was family reunification for the biological parents and the children. The parents needed to maintain adequate housing (their home had been condemned), obtain employment and learn how to parent their children in an appropriate manner. Drug and alcohol assessments and treatment were provided for the mother along with individual and family therapy and home-based case management. A parent aide worked on GED classes for the mother, an employment search and also helped with transportation. The parents were also offered parenting classes and domestic violence counseling.

Compliance with services, however, was poor. The mother would leave the state for extended periods of time and was often uncooperative and inconsistent in addressing the problems of the family. The father was incarcerated for the majority of the case. He was given the option of using these services in jail but refused to do so. DCS also helped the mother get an apartment, but she left after being there three days. At approximately 15 months into the case, efforts to reunite the family were suspended. Two years into the case, parental rights were terminated. The mother did not show up for the hearing and the father voluntarily surrendered his parental rights.

During the adoption process, the grandparents were provided with in-home therapy and parenting classes to help them adjust to the stress of dealing with young children again. The children bonded well with their grandparents who took excellent care of them. Waiver funds expended amounted to \$21,767 over two years. The waiver paid for daycare, home-based services, utilities, clothing and other financial help. The grandparents were actively engaged with all services and there were no barriers to the adoption process.

**Outcomes and Impact of the Waiver.** The case was put on the waiver to help the grandparents pay for daycare. The grandparents were not licensed providers so they did not qualify for a per diem and DCS wanted to assist them. Both grandparents worked and needed childcare during the day.

The waiver facilitated the placement process, allowing the grandparents to adopt the children. The grandparents could not afford daycare services nor could they afford to stop working to care for the children themselves. Without the direct assistance of the waiver, foster care was the only remaining option. The waiver-funded services expedited the permanent placement of the children in a home and allowed them to remain with their biological family. Eventually, the grandparents became licensed foster care providers and began receiving adoption assistance.



Recent family feedback from the grandparents indicated that they and the children were doing quite well. Both grandparents were employed, had medical insurance and received TANF, WIC, and childcare assistance. The children were going to daycare and were getting along better with adults and other children. They also slept better and were able to calm down after getting upset. The family did not report experiencing any stress in the last six months and felt greater confidence in dealing with problematic issues in their life. At time of review, the case has been closed for 17 months and there have been no new reports.

### 3. Transportation

Problems with transportation are also common among lower-income families. Lack of reliable transportation can hinder the completion of CPS case plan services and make it hard for a person to hold a job. In several of the case studies, assistance with car payments or insurance, car repairs, or public transportation fees was provided along with other financial support. In the following example, the mother's transportation needs were the main trigger to assigning the child to a waiver. Additional services were provided for a longer duration after the waiver was opened.

#### **Case 37**

*In-Home CHINS. Drug-positive infant, young mother, lack of education and employment. Case opened 261 days. Waiver assignment on day 71.*

**Report and Assessment.** A report came in from a hospital that a newborn tested positive for marijuana. The case opened as an in-home CHINS as the child's mother admitted to smoking marijuana near the end of her pregnancy. The family had no prior history with DCS. The household composition included the single, 21-year-old mother and her newborn son both living with the woman's mother and teenage brother in a high-poverty urban setting. Due to his incarceration, there was no involvement from the child's father.

The family had moved to the area from Georgia a few months prior to the case opening. The mother did not like the area of the city she was in due to drug traffic and violence, so she spent a great deal of time at home with her son. The family was knowledgeable about the community and available resources and the mother was able to locate a job on her own. Also, the mother and her son had a large, extended family that provided emotional support, financial assistance, childcare assistance and encouragement for the mother to continue her education.

**Case Plan and Services Provided.** According to the FCM, her main concern for the family was to “make sure that we put the mother in the program that would help her daily...provide counseling, build her self esteem, provide the strength that she needed to stay away from utilizing marijuana as a coping skill.” The case plan for the family included the mother obtaining employment, enrolling in GED classes, participating in substance abuse treatment and individual and family counseling, attending parent education classes, providing a drug-free environment for her son and learning coping skills to help prevent further drug use. Services provided included random drug screening, substance abuse treatment, individual and family counseling and parenting classes. All services were provided at home and, with the exception of family therapy, lasted the duration of the case. The total amount of the waiver was \$6,175, which was used for services including a substance abuse assessment, drug screening, counseling, some homemaker services and bus passes used for GED classes and employment search. The mother was actively engaged with the services throughout the nine-month case and took her participation and involvement in the services quite seriously.

**Outcomes and Impact of the Waiver.** The case was assigned to the waiver a few months along, primarily to purchase bus passes needed for the mother to conduct an employment search and attend GED classes. However, the waiver was also used to renew counseling and drug treatment referrals and, as a direct result, these services were provided for a longer time and at greater frequency. The caseworker was convinced that due to the bus passes and in-home treatment waiver, the mother was able to progress in her education and employment. The transportation barrier would have otherwise impeded the mother’s progress. As a result of gaining part-time employment and completing her GED, the mother gained confidence in her ability to find a new home apart from her family and away from the undesirable area.

The outcomes of the services provided included a drug-free environment for the child and greater self-esteem and coping skills for the mother. Although DCS offered to assist with housing, the mother was determined to do this herself. A Family Team Meeting helped the mother realize the source and extent of the support within her family.

The case has been closed since July 2008 and at the time of this report the mother still lived in the same area but now lived alone with her son. She told evaluators that she and her son were doing very well and that she was better equipped to care for him than she had been in the past. Confidence in her ability to deal with different issues had also increased, in spite of a job loss that year and trouble finding work and childcare. She reported receiving Food Stamps, TANF, and Medicaid, and help from the extended family with chores and emotional advice.

## 4. Facilitating Permanency Other than through Reunification

Occasionally the waiver was used to create positive outcomes other than reunification of children with their parents. The waiver was used, for example, to facilitate and expedite guardianship. Typically, this involved the direct payment of legal fees accrued during court proceedings. The following two cases are examples of this use of waiver funding. In the first case, the amount of waiver dollars spent was very small, but was a critical contribution to case progress. In the second case, the waiver also funded services directly to the children and the family to ease the children's transition to their new home.

### Case 31

*CHINS placement. Lack of supervision, mental illness, relative care. Case opened for 102 days. Waiver assignment on day 2.*

**Report and Assessment.** A report was received by a DCS county office that a four-year-old girl was left unsupervised. DCS was unable to locate the parents and took custody of the child. She was placed in foster care and later in the home of a relative where she spent three-and-a-half months. At case opening, the family composition included the mother, who suffered from schizophrenia, and the child, both of whom were residing in between the homes of the mother's mother and father. There was no involvement on the part of the child's father. There was no prior history with DCS, but the mother had a history with the probation office.

Due to the mother's severe mental illness, her parenting abilities were directly impaired. The child's grandmother also had schizophrenia, so the child did not often receive competent adult attention. The mother took prescribed medication, which caused her to sleep large portions of the day. Other than the mother's mental healthcare provider, the mother was socially isolated beyond a few relatives. Her home was sub-standard and unsafe, and she received Food Stamps.

**Case Plan and Services Provided.** After a brief placement in foster care, the child's maternal great-uncle and great-aunt came forward to offer care and declared a willingness to assume legal guardianship. The mother was aware of her severe mental health problem and her inability to parent the child adequately, and she agreed to let her relatives file for guardianship. Other goals in the case plan included the mother cooperating with mental health services and contacting vocational rehabilitation to see if she qualified for those services, contacting a lawyer about guardianship, and getting the child a psychological evaluation. The mother was able to maintain weekly visitations with the child during placement. However, at the close of the case, no formal visitation arrangements had been

made. Waiver funding in the amount of \$750 was used to pay the attorney fees to establish guardianship by the maternal great-uncle and great-aunt. The county also paid transportation costs for relatives to bring the child to weekly, supervised visitations with her mother.

The case duration was approximately three-and-a-half months and one FCM was involved. The mother was disengaged but cooperative. She wanted the best for her child and saw the home of her relatives as a viable solution to the child's permanent living arrangement.

**Outcomes and Impact of Waiver.** Because guardianship was foreseen from the beginning, the waiver was opened at the start of the case to help cover the guardianship fees. No other funds were available to pay the legal fees. The child's maternal great-uncle and great-aunt did not have the financial means to cover legal fees and were not receiving foster care payments. Therefore, the waiver expedited movement toward a permanent living arrangement. Due to the extent of the mother's mental health issues, it was unlikely that the child could ever return to her mother's care. The child's maternal great-uncle and great-aunt were engaged and involved in the permanency process. They drove 60 miles each way with the child's for her weekly visitation with her mother and attended to the child's mental health needs carefully. She did have some mental health symptoms, but, at case closure, a conclusive diagnosis had not yet been made. There were no concerns with the child's permanent living arrangements. The case has been closed for two years.

#### **Case 16**

*CHINS placement. Unaccounted injury, child mental health issues, kinship placement. Case opened for 453 days. Assigned to the waiver on day 434.*

**Report and Assessment.** A report came in from a hospital that a child, aged 7, had burned feet. He had lived with his former-stepparent and his half-brother, aged 14, for the past year. His mother, separated from the stepfather, was living with her boyfriend and had left her two children with her ex-husband. During the assessment, the conditions of the stepfather's home were found to be unsanitary, and a CHINS placement case was opened.

At the beginning of DCS involvement, the mother was inconsistent in her relationship with her child, but expressed interest in reuniting with him. The mother, however, had limited income and was not receiving any state or county benefits. She lacked adequate housing and had limited budgeting and parenting skills. The utilities had been shut off several times for the mother and her boyfriend and billing information had been changed several times to the children's names. The mother's boyfriend worked but his income was insufficient to

cover their bills and they ended up losing their home. Extended family support was minimal. There had been one prior involvement with DCS several years before.

The child liked his stepparent, but was indifferent to his biological parents. His father, who had not had contact with the child for quite some time, was a recovering drug addict, had poor physical health and lived on a very limited income. The child was placed in foster care for over a year and eventually was moved to reside with his great aunt and uncle. The couple had assumed legal and physical guardianship of the child by the end of the case.

**Case Plan and Service Provided.** At the opening of the case, the case plan was reunification with the mother. The mother stated she wanted reunification, but, according to the FCM, she lacked motivation, was depressed and had a tendency to sabotage her own progress.

Services provided to the family included intensive outpatient treatment for the father, supervised visits for the mother and father, individual and family counseling, parenting classes and assistance with finding employment for the mother. The child was provided counseling, mentoring, visits with his parents, and clothes while in foster care. Mentoring and counseling services were also provided to the half-brother as he lived in the same household to which the younger child would return. The total amount of waiver funds was \$9,000, which was spent on attorney fees for legal guardianship, home-based casework, therapy and supervised visits.

The case was opened for 17 months and there were two FCM's involved in it. Cooperation from both the mother and father was inconsistent. The mother was clearly depressed but refused to undergo a psychological evaluation, ultimately refusing services with the therapist altogether. Eventually the mother stopped answering her door for the service providers as well.

**Outcomes and Impact of the Waiver.** Fourteen months into the case, the child was put on waiver in order to pay for guardianship fees and intensive mentoring services. Because of the extra services provided, the waiver expedited permanency for the child.

The child was physically healthy, but had mental health issues. As things began deteriorating in his family, he started having problems at school with disruptive behavior in class and fighting with his friends. Mentoring was helpful, enabling him to play and interact with someone in a positive way. After guardianship was established, the child still struggled from time to time in school and at home. He was also hospitalized for a short time and received counseling. As a result of DCS involvement, the child developed and maintained a better relationship with his biological parents. His father had regular visits with him and his mother, who lived out of state, maintained phone contact. The case has been closed for one year and there have been no new reports. DCS never found out how his feet were burned.

According to the most recent feedback from the family, the child was doing well. His relationship with teachers and other children at school was considered normal, his attention in the classroom had improved, as had his grades. The family, however, reported having unexpected financial difficulty due to the aunt's job loss, chronic health problems and difficulty getting along with the child.

## 5. Drug Treatment

Aside from direct financial assistance, the waiver was sometimes employed for intensive services that could not be obtained through other means. In the following example, the waiver was used as a means to provide an intensive, in-patient drug treatment program. The treatment program was not a Medicaid provider, so options for paying for the treatment were limited. Note that intensive services of this type led to a higher overall waiver amount than those cases that required primarily financial assistance and short-term services. Waiver flexible funds allowed the mother to receive this treatment.

### Case 27

*INFORMAL ADJUSTMENT case. Long-term drug use, domestic violence. Case opened for 365 days. Waiver assignment on day 180.*

**Report and Assessment.** A report came in from the Sheriff's department stating that two children, ages 6 and 3, were not being properly fed and cared for and that drugs were present in the home. The mother, who lived alone with the children, admitted to using any drugs she could obtain, particularly hydrocodone and methamphetamines. The case was initially opened as a Service Referral Agreement but later became an Informal Adjustment case.

The family had a long history of involvement with DCS, including claims of previous domestic violence, lack of supervision of the children and drug abuse. Both children were from one relationship, which was still active, even though the father did not live in the home. The mother also had another child (aged 10) from a prior relationship who lived with his father and visited his mother on weekends. A few years previously, the mother's boyfriend, the father of the two younger children, beat the mother in front of the children. As a result, the father was banned from the apartment complex and arrested.

There were many concerns in the case, including the mother's drug use, lack of supervision for the children, financial crisis, harmful relationships, limited social support and self-esteem issues for the mother. Although the children and parents were close, domestic violence was

a frequent occurrence and the father was incarcerated for battery charges during the case. The father was from an affluent family who helped financially, but was emotionally abusive to the mother. The mother received some emotional support from her own family, but they also struggled with substance abuse. During the case, the mother voluntarily placed her two younger children with the paternal grandparents, as she went through inpatient drug treatment.

**Case Plan and Services Provided.** The primary goal of the case plan was the mother's overcoming her substance abuse problems. Also addressed were: the need for in-home case management services to teach the mother appropriate parenting skills and connect her to support services; random drug screening for both parents; drug abuse treatment and after-care program for the mother; and in-home counseling for the mother and her children. Utility bill assistance was an immediate need, as the woman was at risk of having the electricity disconnected.

Services provided to the family included a 30-day inpatient, drug treatment and aftercare program for the mother and family preservation services. The father refused the drug treatment program, saying he could do it on his own. It was unknown whether the father's drug use subsided or not. Gradually, as the mother's drug treatment program progressed, the children were able to spend more time with her. Family Preservation was offered twice a week, which helped the mother improve her parenting skills and got her to enroll the youngest child in a special needs preschool class to manage his speech issues. All the children attended individual counseling. The oldest child, in particular, had a lot of anger towards his mother. Waiver payments covered utility bills, inpatient substance abuse treatment (that was not available with Medicaid), counseling and home-based case management. Two children were placed on the waiver to completely fund the mother's drug treatment program. The total amount of waiver expenditures was \$17,469.

The case was opened for one year, and there was one FCM involved with it. The mother wanted to get off drugs, was cooperative with all services and was grateful that DCS was involved. Family team meetings were held which helped the mother obtain emotional support from her family.

**Outcomes and Impact of Waiver.** Funding through the waiver allowed the mother to get intensive in-patient drug treatment and participate in an after-care program. Since the drug treatment program was not listed as a Medicaid vendor, there was no other funding stream to provide the treatment. The waiver also helped to avert electricity shutoff. If the waiver had not paid the utilities, the mother would have lost the apartment and the children would have gone into foster care. The waiver impacted this family positively by alleviating stress and allowing the mother address her substance abuse problems. Had the mother not gone to treatment, she would have been arrested and the children would have been removed.

As a result of the services provided, the mother's self esteem improved, she took an active interest in the children's school activities and functioned capably as a full-time parent. The children experienced direct benefits from the services as well: the oldest child was able to work through his anger issues and became proud of his mother, and the youngest child improved developmentally with the help of speech therapy. To allow the father to be more involved in the children's life, the case manager secured permission from the apartment complex for weekly visitations on apartment property. At case closure, the mother had been employed for two months with an excellent attendance record, and the children were being cared for. However, since the close of the case, the caseworker has heard that the mother lost her job. Nevertheless, there have been no new reports of maltreatment since October 2007.

When contacted by the evaluator, the mother said that she and her two children lived in the same apartment complex. The mother indicated that she felt confident in dealing with issues that arise. She was receiving some support from family and friends with transportation and financial needs. Ongoing stress remained regarding finances, job prospects and her life in general. For financial reasons, she has had her children stay with other family members on more than one occasion from a week up to a month at a time. The older child was in 1<sup>st</sup> grade and was doing well in school. The family received Food Stamps, housing assistance, unemployment benefits, school meals and child support.

## 6. Programs for Children

Though typically the waiver was used for services that benefited the family as a whole, such as financial assistance or home-based casework, occasionally the waiver was triggered by a particular need for a program or service for children in the home. In the following case, the waiver was used to purchase an after-school program and summer camp for children making the transition to living with their aunt. As described in the account, no other funds would have been available for this type of service.

### Case 30

*CHINS placement. Domestic violence, mental health issues, kinship care, adoption. Case opened for 911 days. Waiver assignment on day 425.*

**Report and Assessment.** A report came in concerning domestic violence between a father and his wife. The report about domestic violence was substantiated and two children were removed from the home and placed in foster care.



At the time of DCS's initial involvement, the household included the father, his wife (who was not the mother of the children), the father's seven-year-old daughter and nine year-old son. Major concerns in the case were the father's drug use, the father's and the stepmother's domestic violence and the mental instability of the biological mother of the children.

The family was stressed financially, as the father's wife was the sole provider for the family. The children's biological mother was bipolar, was not on medication, and did not have custody of the children at the time. Both the father and the mother had a previous history with DCS.

**Case Plan and Services Provided.** At the beginning of the case, the goals were to provide stability and permanent placement for the children and to work on reunification with the mother. The case plan called for medication and therapy for the mother and drug treatment and counseling for the father. Services provided included psychological assessments, individual and family therapy and supervised visits. The children participated in therapy as well. During the case, the mother was put on medication and her mood stabilized, and the children were reunited with her. However, she later became sick and started using drugs, leading to a second removal of the children and placement with an aunt, who eventually adopted the children. Waiver utilization included \$17,011.75 over two years. It paid for home-based services, psychological assessments, children's clothing, summer camp and an after-school program. The case was opened for over two years. The mother was cooperative, but the father did not participate in any of the services. The father was referred to drug treatment but he never attended.

**Outcomes and Impact of Waiver.** The children were assigned to the waiver about a year into the case in order to pay for camp and after-school programs while staying at their mother's and aunt's homes. According to the FCM, there was no alternative other than waiver funds to pay for these services and the caretakers could not have afforded to place the children in summer camp or an after-school program on their own. Waiver-funded services enabled the children to socialize with other children while staying safe and under supervision after school. It also served as a constant for the children during their placement with the aunt and helped the aunt with childcare responsibilities. Subsequently, by having that stability, the aunt was able to adopt the children. At the beginning of the case, the children had behavioral problems at school but seemed to do better once they moved in with their aunt and had a safe home. At time of review, the case has been closed for two years and there had been no further reports.

## 7. Child's Special Needs

Children with special needs can be especially challenging for families that also struggle with poverty. Medical care, diagnostic testing, medication, school accommodations and treatment programs can be overwhelming. In these two examples, the special needs of children triggered the assignment to the waiver, allowing DCS to alleviate stresses exacerbated by the condition of the children and allowing the family to obtain appropriate care. The second case included here is of particular interest in that it is another example of a voluntary Services case, which was opened to a waiver with no apparent report of abuse or neglect.

### Case 34

*INFORMAL ADJUSTMENT case. Medical neglect, behavior disturbance, dental needs. Case opened for 281 days. Assigned to the waiver on day 9.*

**Report and Assessment.** A rural DCS county office received a report from a school that a ten-year-old child was medically neglected, specifying that his dental needs were not being addressed. The child was a high special needs child, believed to be autistic by school personnel, though not yet evaluated by medical professionals. The mother failed to obtain appropriate medical care and attention due to transportation problems and a lack of insurance. An Informal Adjustment case was opened.

Regular medical care was a challenge due to the child's special needs and distance from medical professionals; the nearest dentist was about 70 miles away. Combative behavior problems were a recurrent problem and school personnel hoped that DCS involvement would help the mother address the child's special needs and obtain appropriate medical evaluation. However, the mother, who seemed tense and somewhat afraid, refused to believe that there was anything wrong with her child, felt that the school was targeting the child.

During the assessment, it emerged that the family was socially isolated, highly stressed financially and facing a utility shutoff. The mother had a fear of strangers and did not trust anyone outside the family. The child and the single mother lived with the maternal grandmother who had just undergone major heart surgery. It appeared that the mother required a lot of assistance from the grandmother, had trouble in decision making and might have been autistic herself. But since the surgery, the grandmother had not been able to help the mother as extensively as she had in the past. The child was in pain and malnourished. He was not eating appropriately due to his poor dental health. The child did not have a relationship with his father. The family had no prior history with the DCS.

**Case Plan and Services Provided.** The case plan included home-based, preventative aftercare services through a community provider twice a week, finding a job for the mother, individual counseling for the child and the mother, disability testing and group therapy for the child, as well as dental appointments and enrolling the child in Medicaid. A home-based service provider worked with the mother on parenting, financial planning and budgeting and gave her information on special needs children and support groups. The child was also referred to an after-school group to help him with social skills. However, due to his high social needs, he could not handle the noise and chaos in the setting.

Dental care was provided to the child along with a special needs assessment. The child was officially diagnosed with autism and started to receive SSI, which improved the family's financial situation. In addition, the mother was able to find a part-time job. Services received through the waiver included \$1,707 for car repairs (a major hurdle to getting the child needed medical appointments), \$348 for gas vouchers (for the mother to see her son in the hospital), \$734 for utility bills, a one-time grocery voucher (until Food Stamps started) for \$197, \$85 for repair of eye glasses for the child, \$505 for a refrigerator and home-based services for \$5,407. The total amount of the waiver was \$8,985.

One FCM was involved with the case for the nine months it was open. The FCM saw the family two to three times a month and the service provider visited three to four times a week. At first, the mother was very resistant, angry and frightened by the idea of seeking an evaluation and treatment for her son. The worker was able slowly to gain the mother's trust and bridged the gap in the communication between the mother and the school.

**Outcomes and Impact of the Waiver.** The serious special needs of the child and his immediate service need caused DCS to place the child on the waiver as soon as the case opened. It was not certain that the child would get Medicaid, so the waiver was necessary to ensure needed services could be funded. Due to the stress in the family, the caseworker was convinced that if not for the waiver, the child would have been removed and institutionalized. But, she said, "I don't think removal would have been the answer. The only way to resolve the problems was to get the barriers addressed. One utility payment saved a lot in institutional care. The waiver was the main factor in helping the family." The FCM thought that the car repair, the temporary food voucher and the repair of the child's glasses would not have been provided without the waiver. The waiver helped the family get through this temporary crisis, which had been complicated by the grandmother's heart condition and had aggravated the child's combative behavior at school.

All medical appointments were kept, the child's teeth were fixed, his behavior was monitored more effectively and his behavioral episodes were not as violent because of the medication prescribed. The mother received instruction in appropriate interaction techniques and nutrition. Her relationship with the school improved and she was able to

assist teachers and counselors interact with her son. The mother's fear of outsiders lessened and she felt more confident expressing herself. At case closure, the child was still receiving individual therapy and was on Medicaid. The case has been closed for 18 months and the family has apparently remained stable.

### **Case 32**

*SERVICES case. DCS intervention requested by service provider, after-school programming. Case opened for 1,064 days. Assignment to the waiver on day 69.*

**Report and Assessment.** A local mental health agency requested that a Services case be opened for a six-year old boy with severe mental health issues they had been serving. The provider was hoping that waiver funding could be used to provide financial assistance for the child and his family. The family had no prior history with DCS. The family composition included the child, his mother, stepfather and three younger, half-siblings.

The family struggled financially and had many responsibilities related to their son's care and treatment. His mental health problems included aggressive, defiant, impulsive, and dangerous behavior; high energy; anger management problems; oppositional defiant behavior; mild judgment impairment; impulse control issues; and violence when angry. He was also diagnosed as developmentally disabled and qualified for emotionally handicapped classes at school. He had a history of behavioral issues that resulted in his being expelled from kindergarten.

**Case Plan and Services Provided.** The boy had been receiving regular mental health treatment for several years prior to his service case opening. These mental health services included individual counseling at a mental health center (once a week), visits to a psychiatrist for medication management (once a month), case management services at school, summer camp, and home (various durations) with transportation. The mother and child were provided family counseling to help the mother understand and manage his aggressive behavior. The total amount of the waiver was \$1,636.56, which was used to pay for YMCA camp (including a one-on-one aide that helped the boy deal with stress), YMCA basketball, door alarms, rent and utilities. The case lasted nearly three years and closed when the family left the county to reside elsewhere in August 2008.

**Outcomes and Impact of Waiver.** Immediate assistance was provided through the waiver for rent and utility assistance. This help, along with the YMCA summer day camp, would not have been available for the family without the waiver. The summer day camp was the equivalent of daycare and respite care providing the mother a much-needed break from the stress of continually caring for her son.

When contacted by the evaluator the mother indicated that the family was doing well. The parents had had another child, so the family was now consisted of two parents and five children. When describing her interaction with her children the mother said that she felt happy, loved, grateful, content, relaxed, energized, and blessed. Unfortunately, the oldest child's behaviors had worsened in the interim and he was having trouble with teachers and other children at school. He had been first suspended and then expelled from school and had attended two different schools during the last school year. The family reported experiencing financial strain within the last six months: they faced eviction, lacked money for daily necessities and the stepfather had lost his job. They also had trouble locating housing and managing the household. In addition, one of the children had been hospitalized. However, since then, the family has been able to find housing, the mother secured full-time employment and the family's income increased. The mother reported contacting a community agency to get financial assistance. The family also received Food Stamps, housing assistance, free school breakfast, WIC, SSI and Medicaid.

## 8. Very High Waiver Amount

Typical waiver spending ranged from a few hundred dollars to several thousand dollars. The amount spent on each family was related to the extent of need and the type of services required. Waiver spending under \$1,000 usually occurred when a) specific financial assistance was needed, as with the \$750 spent on guardianship fees in a previous example, or b) when a few additional service sessions were required to achieve case goals. Long-term, intensive behavioral services cost much more than financial assistance and families that received specialized services through the waiver tended to have much higher waiver costs, especially if those services were provided over a long period. The following case involved the highest amount of waiver spending within our case study sample. The total amount of the waiver was \$45,542. This case is unique in the types of services provided. The waiver paid for intensive home-based services for the children, including therapy, mentoring and tutoring. Parents received a parent aide and counseling. All three children were placed on the waiver and intensive services were provided for 18 months.

### Case 18

*INFORMAL ADJUSTMENT case. Educational neglect, teenagers, parental non-cooperation. Case opened for 588 days. Assigned to the waiver on day 6.*

**Report and Assessment.** Three children, ages 10, 14, and 16, were reported to be chronically absent from school and failing classes. Each child had been absent nearly 20

times in the previous two months. Educational neglect was substantiated and the case was opened as an Informal Adjustment. The family did not have a prior history with DCS.

At the time the case opened, the father lived alone with the three children while the mother was temporarily out of state working a carnival job. The mother later returned and was added to the case. The couple had the two older children together, but, finding they could no longer get pregnant, the couple had the third child through an arranged pregnancy with a different man. Overall, the family got along fairly well.

When the mother was traveling, the father was limited in his ability to monitor the children. He was employed full-time and left every morning at 6 AM. The children were responsible for waking themselves and getting to school. Often the father was unaware if the children made it to the bus. Both parents had limited education themselves and did not emphasize it for the children. The school had tried to intervene several times, but the parents saw the school as an adversary. Two of the children had ADHD and were in special education. All three children needed extra help and attention. They had numerous problems at school, sleeping during classes and not completing homework assignments. Discipline at home was lacking and the children also had poor hygiene. There was no cooperation from the parents throughout the case and eight months later the case was elevated to in-home CHINS, then to CHINS placement. The two younger children were removed and placed with their grandparents. The family received Food Stamps and Medicaid.

**Case Plan and Service Provided.** Education-related problems were critical in this case. Letters had been sent to the parents regarding the children's grades, but the parents claimed total ignorance of the situation. The FCM speculated that the father could not actually read the letters that the children brought home from school but refused to admit it. The parents refused to send the children to school and did not take problems seriously until the children were removed. In addition, social exclusion was an issue for the children; they did not like school and would deliberately sabotage their studies.

During the IA period of the case, tutoring and mentoring were provided to the children. Other services, such as a parent aide and counseling, were refused by the father. When the situation did not improve, the case was elevated to CHINS and additional services were added: case management, parenting, and counseling. After the younger children were removed, the goal was reunification. The oldest daughter was not removed as she was close to finishing high school, had higher motivation and her grades had improved during the IA phase of the case. The children were to participate in weekly individual and family therapy, and mentoring. The parents agreed to participate in weekly case management visits, supervised visits with the younger children in foster care, support by the parent aide, substance abuse assessment, and individual and couple's counseling. School clothes were also provided. The total amount of the waiver was \$45,542; a waiver case had been opened

on all three children. Services provided through the waiver included homemaker support, supervised visits, casework, tutoring, therapy, drug screens, clothing for school, utility bills and furniture.

Cooperation was minimal at first, but grew as the case progressed. Monthly family team meetings were held during the CHINS phase of the case. The family was receptive to these and had friends and extended family attend.

**Outcomes and Impact of the Waiver.** The waiver was planned at the start of the case to provide tutoring and mentoring services for the three children. The family case manager said, "We definitely were able to provide more intensive services. ...It wasn't just grades, these kids needed foundation...I think these kids became much more successful at school because of intensive services." During the case the oldest daughter graduated from high school becoming the first one in the family to do so.

Although the children did not like mentoring services and were challenged by educational requirements at school, "they went from not going to school at all to going and doing homework...the kids adjusted and their grades improved." Even though the parents were very reluctant to have counseling and a parent aide at the beginning "they couldn't believe the benefits." The couple's counseling helped the parents improve their own relationship which became more supportive. The mother became more engaged with her family than she had ever been and stopped traveling for work. Discipline and boundaries were developed for the children at home. Additionally, communication between the parents and the school improved. DCS set up meetings with the school and the parents and modeled how to talk to teachers. After 19 months of case management, the case was closed and during the year since closure, there have been no new reports.

According to the most recent feedback from the family, the parents divorced and the mother was living alone with the two younger children. She was receiving Food Stamps, school breakfast and disability payments. She reported that she and the children were doing very well and that she felt more able to care for them than she did six months ago. The children were doing well at school and their academic performance had improved. They also had access to extra help at school if needed. The mother reported confidence in finding help on her own but still had limited social support.

## 9. Summary Case

Counties that were familiar and comfortable with the waiver saw its potential to address multiple issues in a comprehensive manner through the provision of a variety of services. In the following example, the “waiver trigger” was not a single issue, but was simply the mother’s readiness to be reunited with her children. Since she required nearly everything detailed in previous examples - housing, utilities, childcare, medical care, programs for her children and traditional services—a waiver was opened to surround the family with support during the time of transition.

### Case 33

*CHINS placement case. Lack of supervision, methamphetamine addiction, multiple needs. Case opened for 707 days. Assigned to the waiver after 496 days.*

**Report and Assessment.** A report was received for children lacking supervision. Three children aged 5, 3, and 2 were found on the street wandering by themselves. An assessment revealed the mother had a methamphetamine addiction and the family was considered high-risk due to lack of parenting skills, mother’s low self-esteem, unemployment and overwhelming financial difficulties. The children had no supervision or discipline and were essentially parenting themselves. The case was first opened as an Informal Adjustment, but the mother failed to cooperate with DCS and the case was elevated to a CHINS placement. The family, who had no prior history with DCS, consisted of the mother and her three children, all from the same father. The father was serving time in prison on two felony charges. The couple was in the process of getting a divorce.

After the mother’s failure to comply with the first case plan, the three children were placed with their maternal grandmother. While placed with the maternal grandmother, one of the children was injured by a dog bite and the maternal grandmother tested positive for methamphetamine as well. A new placement for the children was found in a non-relative foster care for about a year. In the meantime, the paternal grandmother of the children was becoming certified to be a foster care provider and hoped to get guardianship of the children. After a short placement with the paternal grandmother, the mother decided she wanted to be reunified with the children. DCS supported reunification by assisting with housing resources.

The mother was in her early twenties and was a single caregiver for three young children. No help was received from the children’s father and only periodic help with childcare was received from the two grandmothers. As the mother’s parents were themselves drug users, they were not good sources of support. A foster parent took childcare duties for the



mother while she was at work. The children were all in a good physical health except for separation anxiety in the youngest child and hostility and anger management issues in the oldest child.

**Case Plan and Services Provided.** At the opening of the case, the objectives included maintaining and sustaining the parent-child bond through parental visitation, increasing the mother's mental stability by providing individual counseling, improving parenting skills through parenting classes, getting the mother drug-free through attendance at intensive outpatient substance abuse treatment (IOP) and convincing the father to make regular child support payments, attend counseling and find employment. When the mother decided she wanted to be reunified with her children, then reunification became the primary goal. The main prerequisites for reunification were a drug-free environment, stable and secure housing and financial independence.

The services provided included individual and family counseling for the mother and her children, IOP, YMCA camp, childcare, Head Start, drug relapse prevention, intensive case management, parenting classes, clothes for the children and financial assistance to cover utility bills, prescription medication, housing and furniture. The family was also referred to several community programs that provided Christmas gifts, groceries and drug abuse support (AA/NA). The waiver paid for YMCA camp, childcare and respite care with the foster parent and a friend, daycare at Head Start, a dentist's visit, utility bills, furniture, security deposit, prescription medication, and a parenting class that was needed for the parents to get a divorce. The total amount of the waiver spent over two years was \$6,572.39.

At the beginning, the family case manager saw the family two to four times a week during the supervised visits and, later, twice a week. According to the case manager, the mother was cooperative but saw that things were hopeless for her, especially while her mother was undergoing inpatient drug treatment. Her cooperation increased dramatically as the case progressed.

**Outcomes and Impact of Waiver.** The case was assigned to the waiver while the mother actively worked towards reunification. Waiver funding helped the mother to secure an apartment by providing her with the security and utility deposit. Additionally, the mother would not have been able to maintain employment if the waiver had not paid for childcare. The FCM said, "I don't believe she would have been able to maintain her household or her job without our help...the odds against the mother would have been so overwhelming that she would probably have let the grandmother have the children." By eliminating the waiting-time needed for the mother to save enough money to establish a home, the waiver shortened the time the five-year-old and his siblings spent in placement. In addition, the waiver helped to provide services of increasing intensity and duration.

By the end of the case, family dynamics had changed dramatically. The children had some structure in their lives and the mother learned more about discipline and how to manage the children. The mother was avoiding substance abuse, was employed and had higher self-esteem. As a result of the DCS involvement, the father started paying occasional child support and began visitations with his children. At case closure, the family was still receiving counseling and the children were going to the YMCA program, summer camp and childcare at Head Start. The case has been closed for two years and at time of this review; there have been no new reports.

## Conclusion

The case studies presented here provide examples of successful utilization of Indiana's flexible funding waiver. Several trends in waiver assignment and service purchases emerged from the analysis and are evident in these cases. Assignment of a child to the waiver was often triggered by a clear financial need in the family that posed a barrier to family preservation or reunification. All but 2 of the 43 cases reviewed for the case studies project were eligible for Title IV-E funds, for which a child can qualify only if family income is below minimal poverty guidelines. As anticipated, financial disadvantage and subsequent absence of basic resources was uncovered in nearly every case.

At the start of the waiver extension, emphasis was given to assigning children who were at risk of out-of-home placement or who were in placement with the possibility of returning home. A high percentage of the children assigned to the waiver were in high-risk CHINS cases and in less severe Informal Adjustment cases, and family situations involved a wide range of initial safety concerns. Waiver assignment tended to occur later in the case for CHINS cases, following a specific financial waiver trigger. Informal Adjustment cases were more likely to be assigned to the waiver earlier or at the start of the case to fund prevention services as well as to meet basic needs of families. To make the assignment decision, family case managers first looked for evidence that family safety or integrity could be maintained or facilitated with financial assistance or specialized services. Then, family motivation and compliance with services was also considered. Waiver selection appeared to be based to varying degrees on the predicted success of waiver-funded interventions. In all instances, case managers were careful and deliberate about which children were assigned to the waiver, focusing on those families that were likely to make progress.

The case studies suggest that access to flexible funding was critical in many cases in facilitating and maintaining family unity. Establishment of an adequate living environment,

through rent or utility assistance, was the most common resource provided through the waiver in these cases, though this need was frequently enmeshed with other needs, such as childcare, transportation and/or treatment for substance abuse or mental health problems. Absence of these basic necessities created barriers to reunification and threatened family stability. Reimbursement available through the waiver allowed DCS offices to meet financial and service needs directly and without extensive delay. Often, according to case managers, there was no other source of funding available in these cases and use of the waiver shortened the case length by weeks or months. The flexibility of the waiver meant that any need a family faced could potentially be addressed. Case success was therefore not hindered by fiscal or logistical limitations but based only on the mutual determination of a family and a case manager to create positive change.

These cases are examples of the successful use of the waiver in Indiana and point to the potential of flexible IV-E funding. The outcome study that is part of the broader evaluation of the demonstration and submitted in a separate report, provides the context for these cases, describing how frequently the waiver's potential was or was not realized and reinforcing the importance of providing services that can enhance the wellbeing of children and achieve outcomes desired by CPS families, state and federal agencies, and the general public.