How does Kentucky’s child protection agency collaborate to prevent foster care and support family well-being?

This jurisdictional scan was conducted by the Center for Health Care Strategies, in partnership with Casey Family Programs.

The Center for Health Care Strategies (CHCS) has identified promising cross-system collaborations that support integrated prevention planning and implementation, and focus increasingly on upstream approaches. Following a document and literature review, CHCS interviewed 46 stakeholders from four states (California, Kentucky, New Jersey, and Ohio) and one tribe (Salt River Pima-Maricopa Indian Community in Arizona), including representatives from child protection agencies, behavioral health, Medicaid, community-based organizations, youth and families with lived expertise, as well as other experts in child and family well-being. These geographically diverse jurisdictions deliver prevention services through a range of collaborative structures.

This document profiles cross-system collaboration efforts in Kentucky. For detailed information on the other jurisdictions, see: California, New Jersey, Ohio, and Salt River Pima-Maricopa Indian Community. For an overview of lessons learned across all five of these collaboration efforts, see: How can child protection agencies collaborate to prevent foster care and support family well-being?
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<table>
<thead>
<tr>
<th>Kentucky</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>2020</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children involved in a substantiated maltreatment report</td>
<td>22,410</td>
<td>23,752</td>
<td>20,130</td>
<td>16,748</td>
<td>14,963</td>
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<tr>
<td>Foster care entry rate (per 1,000)</td>
<td>5.9</td>
<td>7.4</td>
<td>6.6</td>
<td>5.1</td>
<td>5.0</td>
</tr>
<tr>
<td>Children in foster care on Sept. 30</td>
<td>8,146</td>
<td>9,355</td>
<td>9,148</td>
<td>8,675</td>
<td>8,369</td>
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<tr>
<td>Children adopted</td>
<td>1,128</td>
<td>1,124</td>
<td>1,368</td>
<td>1,365</td>
<td>1,212</td>
</tr>
</tbody>
</table>


**Background and structure**

Kentucky’s Cabinet for Health and Family Services oversees agencies and programs that administer child welfare, Medicaid, behavioral health, developmental disabilities, public health, and other services. The Department for Community Based Services administers services across nine regions, in coordination with partner organizations and communities. In addition to operating the state’s child welfare system, the department administers public assistance services provided to families including childcare, Medicaid, and economic supports such as the Supplemental Nutrition Assistance Program (SNAP).

Leaders have committed to strengthen prevention and community well-being in the Cabinet for Health and Family Services’ strategic plan. Additionally, the agency created the new Division of Prevention and Community Well-being to strategically strengthen prevention services and supports over the long term. The goal is to move beyond tertiary prevention and create a mechanism to increase the agency’s focus on primary and secondary prevention strategies.

**Key initiatives and collaborations**

Kentucky has various cross-system collaborations designed to support a continuum of prevention planning and implementation. As a Thriving Families, Safer Children site, Kentucky implemented a statewide prevention collaborative and nine regional collaboratives that focus on primary and secondary prevention approaches. This effort includes representatives from state agencies, such as the Department for Behavioral Health, Developmental and Intellectual Disabilities and the Department for Medicaid Services, as well as partners such as Prevent Child Abuse Kentucky, Kentucky Youth Advocates, community-based providers, and families with lived expertise in the child welfare system. To guide the work, a statewide prevention plan and regional action plans have been developed.

Complementary to this effort, Kentucky’s Family First Prevention Services Act (Family First) plan, which the state implemented in October 2019, primarily supports tertiary prevention strategies. This plan was developed with 1,150 stakeholders, including many state agencies — including those involved in behavioral health, juvenile justice, Medicaid services, and public health — and a wide array of community stakeholders including universities and the judiciary. While this planning process is complete, Kentucky is leading a continuous quality improvement effort to monitor implementation of its Family First Plan, gathering input from stakeholders and partners.

Kentucky has supported statewide adoption of the System of Care approach since 1990. The State Interagency Council — comprised of leaders from the primary child-serving agencies, a family-run organization, a transition age youth with lived experience, a parent who has a child with lived experience, and the chair of a committee on equity and justice for youth — has served
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as the governing body for the state’s six systems of care grants and other related initiatives. The position of chair of the State Interagency Council rotates every two years to support shared ownership of the group. There are also 18 Regional Interagency Councils. Historically, the chair of each regional council was a child welfare representative, but now the post is chosen through member vote. “It was a demonstration to members that they have equal voice and equal opportunity to share their concerns and discuss child- and family-serving systems from their perspective,” said an official with the Department of Behavioral Health, Developmental and Intellectual Disabilities.

Family Resource and Youth Services Centers which are designed to remove non-academic barriers to student success and wellbeing are available in 850 Kentucky schools statewide. Supported by the Cabinet for Health and Family Services, the centers offer a range of services related to kindergarten readiness, transitions to school and adult life, parent engagement, and student and family well-being.

Engaging community stakeholders

The Department of Community Based Services partners with a range of community stakeholders with the goal of maintaining diverse representation and perspectives. Together with stakeholders, the department has hosted forums and work groups. Partnering with community stakeholders brings their critical perspectives to prevention planning and implementation, while also building buy-in and investment, and supporting accountability for meeting the shared vision and goals.

The department works closely with Kentucky Youth Advocates and other partners to elevate the voices of people with lived experience in the child welfare system. This is accomplished through building collaboratives, including a kinship family coalition and a birth parent advisory council, and supporting these groups in bringing their perspectives to state and local policymakers. Another advocacy group, Prevent Child Abuse Kentucky, leverages its 300 state and local partners within its network to help bring community stakeholders’ perspectives to Kentucky’s prevention efforts. The group leads Lean on Me Kentucky, an initiative to encourage the development of stronger communities that is a core component of the state’s primary prevention approach.

Aligning across initiatives

Stakeholders in Kentucky strive for alignment at the state and local levels on prevention-focused efforts. Having one cabinet-level agency overseeing a range of child- and family-serving agencies enables Kentucky to more easily share data related to Temporary Assistance to Needy Families (TANF), SNAP, Medicaid, and other family-serving programs, and use the data to inform prevention efforts. This structure also supports the state in braiding funding streams to support prevention efforts. For example, the state blends Title IV-B, TANF, and state general funds to support its family preservation program.

While the state’s Family First Plan was in development, the state tailored a systems of care grant application to match the definition of the Family First foster care candidate population. The state also changed services offered through a grant to ensure they did not overlap with those provided through Family First, in order to fill needed gaps instead of create duplication.

1 Agencies/Organizations interviewed: Department for Behavioral Health, Developmental and Intellectual Disabilities; Department for Community Based Services; Cabinet for Health and Family Services; Department of Medicaid Services; Kentucky Youth Advocates; and Prevent Child Abuse Kentucky.

2 2021 Kids Count. The Annie E. Casey Foundation.
Casey Family Programs
Casey Family Programs is the nation’s largest operating foundation focused on safely reducing the need for foster care and building Communities of Hope for children and families in the United States. By working together, we can create a nation where Communities of Hope provide the support and opportunities that children and families need to thrive. Founded in 1966, we work in all 50 states, Washington, D.C., Puerto Rico, the U.S. Virgin Islands and with tribal nations across North America to influence long-lasting improvements to the well-being of children, families and the communities where they live.

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