

Kansas Department of

# **Social and Rehabilitation Services**

Janet Schalansky, Secretary

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**Corrections and Juvenile Justice - 526-S**  
January 30, 2003

**Briefing on Child in Need of Care**

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### Briefing on Child in Need of Care

Representative Loyd and members of the Committee, I am Janet Schalansky, Secretary of Social and Rehabilitation Services. You have asked for a briefing to explain child in need of care. I am attaching information which might be helpful including a copy of the statutory definition of a child in need of care. I will focus my comments on a very general overview.

Kansas law charges SRS with receiving reports alleging child in need of care. In FY 2002, the department received 42,818 reports alleging a child to be in need of care. Statewide 40% of these reports were screened out and 60% accepted. Reports are accepted if the information indicates the child meets the definition of a child in need of care contained in K.S.A. 38-1502(a). (Attachment A) Of the screened in reports, almost two thirds (60%) were assigned as suspected abuse or neglect. If the allegation is that the child has been abused or neglected, an assessment of the child's immediate safety must take place on the same day or within 72 hours.

The remaining third of screened in reports involved children who were in conflict with their family, school or community. Children who are in need of care for reasons other than abuse or neglect are sometimes referred to as status offenders because their behavior is objectionable only because they are not yet adults. This includes truants, runaways or youth otherwise not under adequate parental care and control. Because safety of the child is not an immediate concern, agency policy requires that an assessment of the reported concern be initiated within twenty working days. Normally children in this category are older.

Assigned reports are investigated by SRS to determine child safety and whether there is a need for further action. The need for further action is based on an assessment of the family's strengths, resources and needs as well as the child's safety and well being.

If additional services are determined to be appropriate, the family may be provided information or a referral to community or family services. Statewide services are available from Community Mental Health Centers, Community Developmental Disability Organizations, and Regional Prevention Centers for substance abuse treatment. Services which have been designed through the collaborative efforts of local SRS staff and communities are also available. Many communities have faith based or other philanthropic efforts like Big Brothers Big Sisters willing to support families in meeting the needs of children. If the child is at risk of immediate out of home placement which

can not be addressed with less intrusive services, a referral is made for Family Preservation services from a private, licensed agency under contract with the department.

If the child is in immediate danger, law enforcement or the court may place the child in police protective custody or SRS custody. Law enforcement officers may take a child into custody when there are reasonable grounds to believe the child would be harmed if left in the same circumstances. The court must find that leaving the child in the home would be contrary to the welfare of the child and an emergency exists, or reasonable efforts have failed to remove the danger. Protective custody allows for immediate separation of the child from the family and is limited to 72 hours exclusive of weekends and holidays.

When reasonable efforts have failed to maintain the child safely with the family or are not appropriate, the county or district attorney may file a petition alleging the child to be in need of care.

Parents and grandparents receive notice of the petition. Grandparents were recently made parties to all child in need of care actions and are legally equivalent to parents once a petition is filed. However, while grandparents may be represented, only parents who can not afford an attorney have the right to have an attorney provided. A guardian ad litem is appointed by the court to represent the child and independently investigate the facts upon which the petition is based.

If all parties agree, orders of informal supervision, which serves as diversion to a child in need of care designation can be implemented. If an agreement is not possible, after a hearing or parental stipulation the court may determine there is clear and convincing evidence that the child is in need of care. When the court places the child in SRS custody for out of home placement, the family is referred to the foster care contractor responsible for foster care and reunification services in the community.

The court balances the rights of parties with the best interests of the child and insures adequate progress is made to implement a permanency plan which is designed to provide the child a safe, permanent family. The family and foster care contract staff work together to implement the plan and achieve the goal. SRS staff provide guidance, technical assistance and monitor for compliance with requirements of the foster care contract.

The permanency plan goal is usually reintegration with the parent, but when this is not appropriate the goal may be adoption, permanent guardianship or another planned permanent living arrangement. Statewide during FY 2002, over two-thirds (67.4%) of all children served by the foster care contractor had a permanency goal of reunification. Independent living is incorporated in the case plan for all children 14 and older.

Foster care is not an appropriate place to grow up so, if reunification is unsuccessful, the prosecutor may file a motion to terminate parental rights or appoint a permanent guardian. When a child's case plan goal is adoption and both parental rights are terminated or relinquished, the child is referred to the statewide adoption contractor. In FY 2002, 674 children in SRS custody were referred to the adoption contractor and adoptions were finalized for 499 children.

As indicated in Attachment B, a number of entities and professionals work to support the child in need of care system. I hope this testimony has been helpful in providing and understanding the role of SRS.