

EXECUTIVE SUMMARY

Georgia Department of Human Resources (DHR)
Division of Children & Family Services (DFCS)
Program Improvement Plan Fifth Quarter Report
Work Completed September – November, 2009

Introduction

In response to a federal review of Georgia's child welfare outcomes, Georgia developed a two-year Program Improvement Plan (PIP) that was approved by the federal Children's Bureau of the Administration on Children and Families (ACF) and became effective September 1, 2008.

Georgia has begun work on all of the goals included in this PIP, having submitted as completed 65 (57%) of the 115 action steps included in the plan as renegotiated.¹ Following is a brief summary of the activities and progress Georgia has made toward each goal during the fifth quarter of the two-year plan, which ends August 2010.²

Strategy I: Develop and Pilot Family-Centered Practice Model (FCPM)

←Goal A: Develop and pilot a Family-Centered Practice Model in innovation sites.

Policy

The state has developed a Family-Centered Practice Model (FCPM), and family-centered practice concepts are incorporated into all of its newly revised and developed policies. Policy changes have focused on the principles of family-centered practice, inclusive of family engagement, team building and assessment. Revised policies incorporating concepts from the state's FCPM include Family Team Meetings, inclusion of the family preservation (ongoing services) model, individualized services, and independent living services. In addition, new/revised policies in the areas of concurrent planning and comprehensive assessment/risk assessment, both of which are incorporated into the state's FCPM, are being piloted in six "innovation zones" (six counties within the state).

Training

IMPACT training for foster and adoptive parents and for permanency staff has been updated to support the new concurrent planning initiative. IMPACT training is now more family-centered because foster parents are trained to work with birth parents so that the birth parents' child care responsibilities continue while the child is in care. Staff will learn about their role in supporting partnership and resource parents in working with the birth family. The state is also utilizing a new recruitment message for recruiting and retaining partnership and resource parents.

Family-centered practice training has been provided to staff within the innovation zones, and additional trainings to ensure 90% or better of all staff are trained are planned.

Supporting Implementation

The focus of the policy and training efforts is on practice change to ensure engagement of families, appropriate assessment, and the continued involvement of the family in the service continuum. The state is working with the National Resource Center (NRC) on Staff Development and Supervisory Practice to assist supervisors in supporting family-centered practice in the field, particularly for concurrent planning and comprehensive assessment/risk assessment. Plans include joint supervisory reviews on live cases; a

¹ The state's June 2009 renegotiation request to modify action steps in four of 21 goals related to strategies for risk assessment, concurrent planning, and identification of service array barriers and gaps was approved.

² This report only reflects work completed in the fifth quarter. For reports on work completed in previous quarters or to see the complete plan strategies, goals and action steps, please visit the Georgia PIP website at www.gacfsrpi.org.

supervisory summit with experts from the NRC to discuss case findings related to family-centered practice, concurrent planning and comprehensive assessment; and guidance for supervisors in using case reviews to coach and guide staff to align with family-centered practice.

To guide day-to-day practice, in addition to policies and training, the state is reinforcing the implementation of family-centered practice through the following:

- SHINES data system reminders for staff to document their work with families
- Family Team Meeting (FTM) facilitator training, mentoring and approval
- FTM case planning training to improve family engagement in case plan development
- Technical assistance from the state office to help innovation zone staff in assessing and implementing concurrent planning and risk assessment/family functioning practices
- Learning communities (learning labs) in the innovation zones to help staff process family-centered practice, risk assessment, and concurrent planning training; apply the principles learned in their work with families; and improve their family-centered practice
- Pre-training and transfer of learning activities to prepare staff before, during and after concurrent planning training
- New policy and practice guidelines for staff to use regarding FTMs, risk assessment and concurrent planning
- A concurrent planning assessment electronic desk guide to help staff understand the new concurrent planning practice principles
- A newly revised foster care pamphlet for parents to help them understand their options and resources when their children are placed in foster care
- Training for the courts, CASA, and private providers on the agency's family-centered practice philosophy and its new risk assessment and concurrent planning policies and practices
- State office responsiveness to the needs of the innovation zones and support for them in implementing risk assessment and concurrent planning
- "PEAS and Karots" learning tools with practical tips for staff to help them work more effectively with families

Five Field Operations Review Guide (County Director review) items are being used to assess family-centered practice. These items include Permanency Goal for the Child, Proximity of Foster Care Placement, Needs and Services of the Family, Child and Family Involvement in Case Planning, and Worker Contact with Parent. Baselines have been established and these items will be tracked on an ongoing quarterly basis. (Cases are reviewed on a monthly basis and compiled quarterly.)

→Goal B: Improve and expand the Family Team Meeting practice statewide.

FTM training continues to be offered to staff and to providers on a quarterly basis, and the Program Evaluation and Analysis Section (PEAS) conducts regional case reviews for quality assurance. From December 2008 through November 2009, 828 cases were assessed for FTM usage. Of these cases 53% (slight decrease from the previous quarter) of cases received a timely FTM. Subsequent FTMs were conducted in 42% (a slight improvement over the previous quarter) of the cases when identified as a need. Families were clearly included in 44% (slight decrease from the previous quarter) of the cases.

★Goal C: Promote placement stability and permanency through caseworker-child visit statewide initiative ("Every Child Every Month").

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Strategy II: Strengthen Policy and Improve Practice to Ensure Safety of Children

★**Goal A: Develop and distribute to intake staff statewide quality screening intake tool.**

←**Goal B: Improve ongoing risk and safety assessment tool usage statewide.**

Comprehensive Assessment/Risk Assessment policies based on Family Functioning Assessments have been reviewed and finalized and shared with staff for implementation in the innovation zones. After the final training session is completed, each innovation zone county will begin utilizing the new Family Functioning Assessment tools and policies for new cases as well as existing family preservation cases as they become due for reassessment/case planning. Supervisors will engage in supervisory meetings designed to assist them in assessing cases for family-centered practice, concurrent planning and risk assessments. The meetings will include tips and guidance on staff development, inclusive of coaching and guiding staff in making practice changes based on case file reviews. The supervisory meetings will be conducted initially by the National Resource Centers.

In November 2009, a Comprehensive Assessment/Risk Assessment Family Functioning pilot training was held at Fulton County DFCS for the six innovation zones. Curriculum writers and trainers from Georgia State University were available for onsite technical assistance and curriculum revision input. The training curriculum was subsequently revised, and staff in the innovation zones will receive training prior to the conclusion of the 6th quarter.

→**Goal C: Improve case documentation.**

Revised case documentation training, a two-day training required for all staff once they are certified, has been provided across the state.

Strategy III: Improve Permanency Outcomes for Children and Families

★**Goal A: Support Court Improvement Project (CIP) summits review of courts related to child abuse and neglect cases.**

→**Goal B: Support CIP review of courts related to child abuse and neglect cases to address problems of permanency, including adoption and APPLA.**

The court compliance reviews have ended, but the agency continues to meet regularly with the Court Improvement Project (CIP) and the Office of the Child Advocate (OCA) to discuss case reviews and findings related to those case reviews. The CIP meets one-on-one with Juvenile Court judges to discuss the findings of case file reviews completed within the judicial circuits and continues to host Judicial Summits. The agency has solicited input from the Council of Juvenile Court Judges through judges serving as participants in work groups and as reviewers for the new concurrent planning handbook, policy and training.

→**Goal C: Support court process to notify parents, foster parents, pre-adoptive parents and relative caregivers regarding their rights related to hearings and case reviews.**

The CIP has continued to survey and train foster parents regarding their right to be heard. Since March 2009 a juvenile court judge has traveled and presented training to foster parents to help them understand their right to be heard in court and prior to court and their right to timely notification of court proceedings. At each training, foster parents are given a pre-training survey to assess their knowledge on their right to be heard and to determine whether or not they were (1) receiving notification of court proceedings, and (2) being allowed to attend and be heard at court proceedings involving the foster children in their homes. To date, 298 foster parents have been trained in 48 different counties. In addition, the state has amended the IMPACT curriculum to include training on foster parents' right to be heard.

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The CIP plans to conduct a survey and provide another workshop this year for the Foster Parent Conference and DFCS is participating in the planning process for four Foster Parent Conferences this year.

★Goal D: Collaborate with federal and state partners to improve permanency outcomes for children.

→Goal E: Cross-train SAAGs, GALs, parent attorneys, CJCJ, court staff, child fatality review committees and DFCS.

Agency staff, community stakeholders, child advocates the judiciary were afforded four opportunities to attend trainings on child welfare topics through the Barton Law Clinic:

- Traumatic Removal and Impact on Brain Development (08/31/09)
- Community Involvement for Children/Youth in Juvenile Court (09/25/09)
- The Power of Early Periodic Screening and Detection Test (EPSDT) (10/22/09)
- Ethical and Evidentiary Challenges of Child Participation in Dependency Hearings (11/19/09).

All of these academy trainings are available to for stakeholder viewing online at:
<http://www.law.emory.edu/centers-clinics/barton-child-law-policy-clinic/presentations.html>

The agency presented workshops at the statewide 10th Annual Child Placement Conference in November 2009. The Child Placement Conference is the largest multi-disciplinary gathering of child welfare professionals in Georgia. The CIP sponsored 34 registrations for DFCS staff to attend this year's conference, themed "From Placement to Permanency: Georgia's Shifting Focus." Local training opportunities for partners included summits in the Bell-Forsyth and Chattahoochee circuits.

★Goal F: Increase timely achievement of permanency for children through Permanency Unit Pilot in Region 4.

→Goal G: Update and/or develop policies and/or practice to improve permanency outcomes for children based on best practices.

In the fall of 2009, feedback was received on the new Georgia Concurrent Planning Handbook from judges, the DFCS Legal Services and SAAG stakeholder group, the Council of Juvenile Court Judges, the CIP, the Adoption and Foster Parent Association of GA, DFCS quality assurance, policy and education and training units, concurrent planning workgroup participants, and the Citizen Review Panel. After receiving stakeholder feedback, the agency finalized related policies and tools for implementation in the innovation zones. The policies and tools have been shared with innovation zone staff, and each county will begin utilizing concurrent planning in new foster care cases at the conclusion of their final training session.

Staff training dates, trainers and training sites have been finalized for the January and February 2010 concurrent planning training, and pre-training learning activities and transfer of learning action plan materials have been developed. Innovation zone administrators, supervisors and concurrent planning experts were invited to participate in a December 2009 Web X session so they could be trained on how to use the pre-learning activities and action plans to prepare staff for the training, support them during the training and help them process and apply the training material to their work after the training.

In November agency staff met with the Council of Juvenile Court Judges Permanency Committee to discuss concurrent planning so committee members could inform other juvenile court judges of the concurrent planning initiative. Additional meetings and information were requested for specific jurisdictions, and an additional meeting was scheduled with Robert Bassett, who participates in the Permanency Committee and is in charge of the Citizen Review Panel that reviews case plans for DFCS.

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Also in November, DFCS and the Adoption and Foster Parent Association of GA facilitated a concurrent planning workshop titled, "Adults Should Take the Risk so Children Don't Have to: Achieving Permanency through Concurrent Planning." The workshop provided an opportunity to meet with external stakeholders and to educate them about concurrent planning and their role in this important permanency strategy.

Supervisory meetings are planned to assist them in assessing cases for family-centered practice, concurrent planning and risk assessments. The meetings will include tips and guidance on staff development, inclusive of coaching and guiding staff in making practice changes based on case file reviews. The supervisory meetings will be conducted initially by the National Resource Centers.

←Goal H: Train foster care supervisors and staff on best practices for achieving permanency.

County Directors and Supervisors in the innovation zones are utilizing the FORG document for case reviews. One component of the FORG review document is Item 7 (permanency goal of the child). In assessing this item, the reviewers consider whether the agency selected an appropriate permanency goal for the child in a timely manner (including the designation of a concurrent plan). This includes identification of the goal, its timeliness, and appropriateness; documentation of compelling reasons not to pursue termination of parental rights; and consistency of services provided with the identified goal.

In November 2009, a concurrent planning pilot training was held at the Methodist Children's Home for the six innovation zones. An NRC consultant attended the pilot to provide technical assistance to the staff attending the training, the trainers who trained the curriculum for the first time, and to the instructional designer. The training curriculum was subsequently revised, and staff in the Innovation zones will receive training prior to the conclusion of the 6th quarter.

Strategy IV: Improve Service Array and Foster Parent Recruitment/Retention

→Goal A: Individualize services for family members to meet their specific needs as identified in the risk assessment.

In August 2009, a memorandum from Assistant Commissioner Mark Washington was sent to the field setting the expectations that Family Team Meetings will be used to develop case plans, to include individualized services based on the identified risks and needs of the family, and that assessed needs of youth will be incorporated into their Written Transitional Living Plans. This memo was accompanied by the revised Risk Assessment Social Services Policy. This revised policy provides practice expectations related to individualizing services for families based on the current risk assessment.

The intent is to ensure that families receive specific services based on specific assessed needs as opposed to the traditional "cookie cutter" services historically provided by the agency. The state has been providing specialized training to case managers on how to utilize FTMs for case plan development, particularly so that case managers are able to capture and address the unique needs of a specific family. This training has been provided across the state.

The state has amended its case review tool to incorporate questions related to specific PIP goals, including the following questions related to individualized services:

- Does documentation support the development of the case plan/family plan from information gleaned during the FTM, from assessments, deprivation findings and with the inclusion of family members?
- Are the findings from assessments (substance abuse assessments, psychological, CCFA, developmental, mental health, etc.) incorporated into the case plan? This includes any need that has been identified in a formal or informal assessment as identified in the full case review.

From December 2008 - November 2009, 828 cases were assessed during regional reviews for the development of case plans based on FTM usage as well as the incorporation of assessments in case

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plans. Of these cases, 78% of cases documented that case plans were developed from information gleaned during the FTM. Assessments were clearly incorporated into the case plan in 79% (both increased from the previous quarter).

←Goal B: Improve availability of and access to services for families and children.

Service Array Assessment

The state has received the results of the Family Connections Partnership's 2009 Unmet Needs Assessment, which was sent to judges, Juvenile Courts, DFCS agencies, Family Connection Collaborative Partners and other community stakeholders. Only 46 (30%) of the 150 counties polled responded.

Based on the feedback received, the primary needs identified included services for homeless parents, substance abuse treatment (for parents and children), and respite care (for children with disabilities in foster care and in families at risk for CAN). The survey identified services that participants planned to address within the next 5 years and indicated whether these services would be a priority for development. Results have been provided to the field.

DFCS Regional Directors completed a self-assessment (similar to the state self-assessment for the CFSR) for their individual regions. Based on their assessments, each region compiled a chart of readily available services and those services lacking within their region. The regional directors are working with regional inter-agency teams (RIATs) to develop strategies to address services as prioritized by the teams. Those plans are due by the end of January 2010. The RIATs, inclusive of mental health, are taking an active role in identifying services most needed to prevent children from being placed in psychiatric residential treatment facilities (PRTFs) and to allow them to stay in the community, preferably in their own homes.

The Governor's Office of Children and Families (GOCF) has secured the funds to complete a statewide needs assessment, and DFCS participated in a cross-agency collaborative meeting in September 2009. The GOCF has contracted with METIS and Associates to compile the assessment, which will be shared with all partners in January 2010.

This assessment will then be used as a resource for identifying pressing and emerging statewide needs in Georgia that can be addressed through a cross-agency approach. While other needs assessments have been conducted (often in silos), the goal for this needs assessment is to identify needs horizontally across results areas in the GOCF Results Framework (Educated, Healthy, Safe, Growing), because, in reality, needs are manifested in the same population of children and youth across these areas. Targeted populations for the assessment are youth ages 14-21 transitioning out of foster care or DJJ and young children ages 0-5.

The state is planning to utilize the results of the GOCF assessment (as originally planned for its PIP) as a basis for service array action plans because the aforementioned 2009 Unmet Needs Survey had such a low response that it may not accurately reflect the needs across the state. Regional Directors will report on service array barriers and improvements at a February 2010 Regional Directors/Leadership Lens meeting.

Local Inter-agency Planning Teams

The Department of Behavioral Health (DBH) entered into an MOU with the Department of Human Services (DHS) to track children receiving a Local Inter-Agency Planning Team (LIPT) staffing, but DBH has not been able to provide tracking data.

The need to track the children being served by the LIPT, the appropriateness of the services for which a family has been referred, and outcomes (whether the services prevented a PRTF placement or assisted the child in stepping down into the community) have been discussed at inter-agency collaborative

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meetings. These conversations have led to the development of a manual tracking form to be implemented in December 2009.

→Goal C: Individualize services for youth to meet their specific needs related to education, employment, housing, supportive relationships and health.

One of the means of individualizing services is to base services on assessed needs. All current ILC staff have been trained on the Ansell-Casey Life Skills Assessments (ACLSA), and the agency has completed more than 2,300 of these assessments from July 2008 through December 2009.

In March 2009, the agency submitted Independent Living Program (ILP) policy to the NRC for review and recommendations; as of this date the agency has not received feedback. New ILP policy was crafted, approved and sent to the field in August 2009.

In September 2009, PEAS added a question to its regional case review guide to determine, for children ages 14 or older, if the ACLSA was used to develop the youth's Written Transitional Living Plan (WTLP). During the 5th quarter, PEAS reviewed 24 cases eligible for ILP services. Based on that review, 58% of the cases reflected the incorporation of the Ansell Casey assessment in the child's WTLP.

→Goal D: Incorporate physical health, mental health and educational services for children in case plans as identified in needs assessments.

PEAS has been reviewing cases, identifying in regional reports best practices as well as barriers for meeting the health, mental health and educational needs of children in foster care as well as in family preservation cases. This information is shared with regional leadership and corrective action plans are developed for any identified deficiencies; review findings are available to all DFCS staff. Bi-annual trend reports are prepared and made available with trend data for the regions reviewed during the 12-month review period. This data is shared with statewide leadership including Regional Directors, County Directors, Field Program Specialists and state office staff.

★Goal E: Provide training and comprehensive support for foster caregivers through pilots in Region 17 and five additional counties (Fulton, DeKalb, Thomas, Colquitt and Mitchell).

←Goal F: Establish internal foster care recruitment program

In the fifth quarter, the agency completed development of its 2010 Statewide Foster Parent Recruitment and Retention Plan and released it to the field. In addition, 121 county or region 2010 Recruitment and Retention Plans were developed. (In some regions smaller counties have developed a resource development team and share recruitment and retention plans.) These plans will be reviewed by county and regional leadership to make any necessary adjustments based on the release of the 2010 Statewide Recruitment and Retention Plan and Policy.

IMPACT policy has also been amended to include the training of foster parents for Partnership Parenting. A key component of the state's Family-Centered Practice Model (FCPM) is Partnership Parenting. Partnership Parenting creates shared-parenting relationships between birth parents and foster parents, who mentor the birth parents and help them learn by setting a positive parenting example. In order to fully explain and teach Partnership Planning techniques, DFCS created IMPACT: Partnership Parenting. This training supports the development of families using the values of family-centered practice as well as the tenants of the shared parenting model.

From September – November 2009, the agency received 2,165 inquires from interested prospective foster parents. As of November 30th, there were 2,758 active foster homes, down from 2,893 at the beginning of the quarter, a net loss of 135 homes. There were 195 homes closed during the quarter, half (99) due to foster parent adoption.

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★Goal G: Increase paternal family involvement through Outstanding Paternal Involvement pilot

Region 16 has narrowed the OPI pilot focus to look exclusively at paternal involvement in case planning and FTMs and contacts with fathers. Measurements will be based on the number of signed case plans for every unit in the region and include paternal attendance at FTM meetings and documented contacts with fathers in SHINES to allow for consistent, unbiased data. The current goals for paternal involvement in FTMs are:

- Increase paternal attendance at Permanency FTMs from 25% to 40% by 03/31/10.
- Increase paternal attendance at CPS FTMs from 50% to 60% by 03/31/10.

In November 2009, Region 16 reviewed 384 foster care case plans for paternal involvement as evidenced by signatures. Of the 384 reviewed, 27% were signed by the father. Family Preservation reviewed 190 cases, with 35% of the cases having case plans signed by the father. From July to November 2009, Region 16 also reviewed cases for paternal involvement in FTMs. There were 47 foster care cases reviewed, with 36% of the cases having fathers engaged in at least one FTM and 121 family preservation cases reviewed, with 54% having had fathers engaged in at least one FTM.

One strategy used to increase case manager contact with fathers is a weekly cadence call with all staff regarding their contacts. During the weekly call, contacts with fathers (as well as mothers and children) are assessed. The goal is to make contact with 25% of the identified fathers each week, so that 100% of identified fathers are contacted by the end of the month. The cadence call follow-up greatly increased contacts with fathers as well as paternal relatives during this time. It also increased attempts to contact fathers. Documented contact with fathers increased from 41% in May to 75% in June and July, and 76% in August 2009.

Despite not having as significant an impact as anticipated, the Region 16 pilot has provided some valuable practice insights. These include the lack of diligent search for fathers, the lack of staff awareness of the need for paternal involvement, how to engage fathers who are not within the household, how to track for paternal involvement in cases and how to engage mothers in the involvement of fathers in their children's lives.

The state has implemented tools to address these items:

- A specialized training module, called PEAS and Karots, was designed exclusively for making contacts with parents.
- Specific SHINES tracking reports are separated into "foster care" and "ongoing CPS" stages and provide real-time tracking for cases where parents have not been identified, mothers who have or have not been contacted at any point in the month, and identified fathers who have or have not been contacted at any point in the month. A summary report provides the percentage of contacts. These reports are available to any staff and can be broken down by state, region, county, unit, supervisor, and individual staff.

Improving Practice and Permanency for Children: Permanency Reviews and Roundtables

In addition to the work described above, the state is making significant statewide efforts to improve family-centered practice and permanency for children in foster care via case reviews and permanency roundtables.

Georgia identified 1,000 children who had been in the long-term custody of the agency for targeted permanency reviews. These reviews were conducted in one of two projects. Cases (500) were identified for the Court Improvement Project's Cold Case File Review and about 500 cases were identified for the Permanency Roundtable Project funded by Casey Family Programs. This provided the agency an opportunity to consider both internal and external assessments. Children considered for this permanency

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review were selected based on September 01, 2008 data, including length of time in care, permanency goals and placement types.

The selected children had been in care as long as 210 months. The largest proportion of children considered for review (45%) were under the age of 13; 25% of the children were between the ages of 13 and 15, and 30% of the children were older than 15. Identified case trends included:

- No concurrent planning for children
- Significant delays in reunification efforts with parents, lack of follow-up with services and delays in identifying appropriate relatives.
- Overall, the frequency and quality of contacts with parents were not sufficient to address needs and monitor progress toward goal achievement particularly in family preservation cases. There continued to be a lack of home visits with parents and children
- Termination of Parental Rights (TPR) was not filed within ASFA timeframes or appropriate compelling reasons for not filing were not documented. This had greatly impacted the timely achievement of permanency for children
- Delays in seeking termination of parental rights
- High-level placements for children based on mental health diagnoses
- Children in care less than 12 months had higher Permanency Outcome 1 (permanency and stability in their living situations) measures than children in care 12 months or more

Cold Case Review

The Cold Case Project had reviewed 147 cases as of November 2009. Based on those reviews, predictive indicators were established to identify cases that may eventually become a “cold case” with delayed or no movement toward permanency. These indicators were:

- No federal reimbursement
- Length of stay
- Not having termination of parental rights on both parents
- Older parent
- Institutional setting
- Older child
- More placements

The reviews showed that Georgia needs a real plan for each child aging out of foster care so they can transition into self-sustaining, successful adults. Identified trends/issues that require advocacy at the state level included:

- Immigration
- Pregnancy
- Family visitation rights
- The blurring between mental health and behavioral problems
- The lack of consistency in both court and social work practice across counties
- Although the law requires an extensive relative search, documentation of a diligent search is lacking in at least half of the files reviewed.
- It appears that once a child is placed with a relative, the inquiry as to the child's other family members ends.
- In general, documentation that a child is consulted on his/her plan for permanency is lacking.
- In a number of cases severely abused and traumatized children did not get the services they needed.
- A lack of connection between signed WTLPS and ILP services, as well as a lack of connection between service providers.
- Relatives unwilling to take custody, and lack of visitation with identified relatives who may be able to visit with the child but not have the child placed with them.
- Court orders missing required language, particularly the reasonable efforts finding that needs to be made at the permanency hearing.

The reviews also showed lots of compelling, compassionate case work by current case managers, and reviewers noted what DFCS has termed a "change in culture" in terms of case manager work. Cold case findings were shared with state office staff, Regional Directors, County Directors and designated Field Program Specialists in November 2009.

Permanency Roundtables

Statewide implementation of permanency roundtables has resulted in the review of 2,876 cases as of September 2009. As action plans are fully implemented and action steps successfully executed, the state is beginning to see marked progress in the attainment of permanency for children. To date, 15.6% (451) of the children whose cases were staffed have achieved positive permanency (reunification, adoption, guardianship or custody to relative), while an additional 5.6% (162) of the children emancipated from foster care. Of the 162 who emancipated, 80% (130) signed a voluntary agreement to remain in custody and currently receive ongoing agency support to establish lifelong connections. The remaining 2,263 cases are monitored monthly at the state and local levels for permanency progress.

In the roundtables, nearly 20% of youth had a permanency goal of Another Planned Permanent Living Arrangement (APPLA), either long-term foster care or emancipation. Children with an APPLA goal often require additional time (6-8 months) to resolve permanency barriers. Factors that impact the timeframe include:

- Positive permanency options were typically no longer actively pursued at the time of the roundtable. Identification and/or re-engagement of birth and adoptive parents, relative and non-relative resources had to be initiated via Accurint and diligent search. Home evaluations and the scheduling of court hearings to modify goals and transfer custody are among the required procedural steps to permanency that also take additional time.
- The child's reluctance to consider adoption or other forms of permanence also affected timeframes. Youth buy-in is critical to the success of permanency plans and to prevent the conscious or unconscious sabotage of permanency placements. The state enlisted the support of therapists and Regional Adoption Coordinators (RACs) to work through emotional issues that served as barriers to permanency. RACs also educate children and caretakers about the legal and financial benefits available. A child's unwillingness to participate in counseling and/or lack of receptivity to information can result in a delay in permanency.

As of September 30th, 796 children with an APPLA permanency goal have been staffed in roundtables.

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