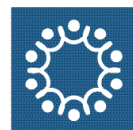


May 24, 2019

LASHAWN A. V. BOWSER PROGRESS REPORT
FOR THE PERIOD July 1, 2018 – March 31, 2019



**Center for the
Study of
Social Policy**
Ideas into Action

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LaShawn A. v. Bowser
Progress Report for the Period July 1, 2018 – March 31, 2019

TABLE OF CONTENTS

I.	INTRODUCTION	1
A.	Methodology	1
B.	Report Structure	4
II.	SUMMARY OF PERFORMANCE.....	4
III.	SUMMARY TABLES OF <i>LASHAWN A. v. BOWSER</i> IMPLEMENTATION AND EXIT PLAN PERFORMANCE	11
IV.	DISCUSSION OF <i>LASHAWN A. v. BOWSER</i> IMPLEMENTATION AND EXIT PLAN PERFORMANCE	61
A.	GOAL: CHILD SAFETY	61
1.	Hotline	61
2.	Child Protective Services Caseloads	63
3.	Investigations and Family Assessments	68
B.	GOAL: PERMANENCY	80
1.	Placement	80
2.	Visitation	93
3.	Services to Families and Children to Promote Safety, Permanency and Well-Being, and Case Planning Process	102
4.	Permanency Outcomes	119
C.	GOAL: CHILD WELL-BEING	127
1.	Health and Dental Care	128
2.	Adolescent Practice	131
3.	Special Corrective Action	133
D.	INFRASTRUCTURE, RESOURCE DEVELOPMENT, AND SYSTEM ACCOUNTABILITY	134
1.	Ongoing Caseloads and Supervisory Responsibilities	135
2.	Staff Training	137
3.	Training for Foster and Adoptive Parents	139
4.	Timely Approval of Foster Parents	141
5.	Reviewing Child Fatalities	142
6.	Infrastructure	146
7.	Financing	147

APPENDICES

- A. Glossary of Acronyms
- B. *LaShawn* 2018 Strategy Plan
- C. *LaShawn* 2019 Strategy Plan

LIST OF TABLES

Table 1: Outcomes to be Achieved.....	11
Table 2: Outcomes to be Maintained.....	22
Table 3: Calls to the Child Abuse and Neglect Hotline by Differential Response Pathway (July 2018 - March 2019)	63
Table 4: Service Linkage for Families with a Closed CPS Investigation or FA (February 2019).....	77
Table 5: Community Papering Outcomes (July – December 2018).....	79
Table 6: Demographics of Children in Out-of-Home Placement as of March 31, 2019	83
Table 7: Number of Children who Stayed Overnight at CFSA Office Building (July 2018 - March 2019).....	86
Table 8: Performance on Services to Children and Families to Promote Safety, Permanency, and Well-Being across Administration (CY2018)	107
Table 9: Utilization of Title IV-E Waiver Demonstration Project Programs as of December 31, 2018.....	109
Table 10: Performance on Case Planning across Administration (CY2018)	114
Table 11: CFSA Referrals to a Collaborative for Case Management (FY2018).....	117
Table 12: Children and Youth Exiting to Permanency by Cohort as of September 30, 2018....	124
Table 13: Children in Special Corrective Action Categories by Month (July 2018 - March 2019)	134
Table 14: CFSA’s Title IV-E Penetration Rates (July 2018 - March 2019).....	148
Table 15: CFSA’s Actual and Budgeted Gross Title IV-E Federal Funds Operating Budget (FY2009 - 2020)	149

LIST OF FIGURES

Figure 1: Percentage of CPS Workers who Met Exit Standard Requirement for Caseloads (December 2016 - March 2019).....	65
Figure 2: Monthly Workflow of Investigations and Family Assessments Accepted and Closed and Worker Caseload Compliance (July 2018 - March 2019)	66
Figure 3: CPS (Investigation and FA) Workers with Compliant Caseloads (July 2018 - March 2019)	67
Figure 4: Timely Initiation of Investigations (June 2015 - February 2019)	69
Figure 5: Timely Completion of Investigations (December 2015 - March 2019).....	72
Figure 6: Timely Completion of Investigations (July 2018 - March 2019).....	73
Figure 7: Timeline for FA Completion (July 2018 - March 2019).....	74
Figure 8: Community-Based Service Referrals for Low & Moderate Risk Families (June 2018 - February 2019).....	76
Figure 9: Number of Children in Out-of-Home Placements on Last Day of the Year (2005 - March 31, 2019).....	81
Figure 10: Number of Children Served through In-Home Child Protection Cases on Last Day of Year (2010 - March 31, 2019)	82
Figure 11: Entries and Exits into Foster Care by Month (March 2018 - March 2019)	82
Figure 12: Placement Type for Children in Out-of-Home Care as of March 31, 2019.....	84
Figure 13: Required Number of Worker Visits to Children in New Placements (June 2015 - February 2019).....	96
Figure 14: Required Number of Worker Visits to Children in New Placements (July 2018 - February 2019).....	97
Figure 15: Households with Twice Monthly Visits between Workers and Parents with Goal of Reunification (June 2015 - February 2019).....	98
Figure 16: Households with Twice Monthly Visits between Workers and Parents with Goal of Reunification (July 2018 - February 2019).....	99
Figure 17: Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought (June 2015 - January 2019).....	100
Figure 18: Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought (August 2018 - January 2019).....	101
Figure 19: QSR Implementing Supports and Services Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance.....	104
Figure 20: QSR Pathway to Case Closure Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance	105

Figure 21: QSR Findings on Services to Children and Families to Promote Safety, Permanency and Well-Being (CY2013 - CY2018)	106
Figure 22: QSR Findings by Indicator on Services to Children and Families to Promote Safety, Permanency and Well-Being (CY2017, CY2018).....	107
Figure 23: Performance on QSR Indicators for In-Home Cases (CY2017, CY2018).....	108
Figure 24: QSR Planning Interventions Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance'.....	112
Figure 25: QSR Findings on Case Planning Process (CY2013 - CY2018).....	113
Figure 26: QSR Findings by Indicator on Case Planning Process (CY2017, CY2018).....	114
Figure 27: Performance on QSR Indicators for In-Home Cases (CY2017, CY2018).....	115
Figure 28: Timely Permanency for Children in Care between 8 days and less than 12 months (September 2011 – September 2018).....	122
Figure 29: Timely Permanency for Children in Care More Than 12 and less than 25 months (September 2011 - September 2018)	122
Figure 30: Timely Permanency for Children in Care for 25 months or longer (September 2011 - September 2018)	123
Figure 31: Distribution of Medicaid Number and Medicaid Card to Foster Parents (December 2015 - December 2018)	131
Figure 32: Youth Ages 18 and Older with a Youth Transition Plan (June 2015 - December 2018)	132
Figure 33: Foster/Adoptive Parents with Required In-Service Training Hours (June 2014 - February 2019).....	140
Figure 34: Approval of Foster Parents within 150 Days of Beginning Training (June 2014 - February 2019).....	141

LaShawn A. v. Bowser
Progress Report for the Period July 1, 2018 - March 31, 2019

I. INTRODUCTION

This report on the performance of the District of Columbia's child welfare system for the period of July 1, 2018 through March 31, 2019¹ is prepared by the *LaShawn A. v. Bowser* court-appointed Monitor, the Center for the Study of Social Policy (CSSP). As Monitor, CSSP is responsible to the Honorable Thomas F. Hogan of the United States District Court for the District of Columbia and is required to independently assess the District of Columbia's performance in meeting the outcomes and Exit Standards set by the *LaShawn* Implementation and Exit Plan (IEP)² in accordance with the *LaShawn* Modified Final Order (MFO)³.

The IEP sets the outcomes and performance levels to be achieved and sustained in order to fulfill the requirements of the *LaShawn* MFO. The IEP includes – Section I: Outcomes to be Achieved; Section II: Outcomes to be Maintained; Section III: Sustainability and Exit; and Section IV: Strategy Plan, which is updated annually⁴. For each of the outcomes, an Exit Standard(s) has been identified and is the target against which outcome achievement and sustained performance are measured.

The Monitor's last report on *LaShawn* implementation was released on November 20, 2018. With few exceptions, this current report is based on performance data from the District's Child and Family Services Agency (CFSA) for July 1, 2018 through March 31, 2019⁵ to determine progress in meeting the IEP Exit Standards and the objectives of the *LaShawn* 2018 Strategy Plan.

A. Methodology

The primary sources of information about performance are data provided by CFSA. The Monitor reviews extensive aggregate and back-up data for select measures and has access to hard copy and electronic case records in FACES.NET⁶ to verify performance.

¹ Prior monitoring reports have included performance for 6 month periods. Per agreement of the Parties and the Court, this report includes performance for a 9 month period.

² Implementation and Exit Plan (Dkt. No. 1073), December 17, 2010.

³ Modified Final Order (Dkt. No. 222 (order adopting MFO); Dkt. No. 222-2 (MFO)), January 27, 1994.

⁴ The *LaShawn* 2018 Strategy Plan was filed on April 6, 2018, after consultation with the Monitor and Plaintiffs' counsel (see Appendix B). The *LaShawn* 2019 Strategy Plan was filed on March 11, 2019 (see Appendix C). Implementation of the 2019 Strategy Plan is not assessed in this report.

⁵ In some instances where March 2019 performance data are not available, the most recent performance data are cited with applicable timeframes.

⁶ FACES.NET is CFSA's State Automated Child Welfare Information System (SACWIS).

The Monitor conducted the following supplementary data collection and verification activities during this period:

➤ ***Assess the Quality of Investigations***

The Monitor and CFSA jointly conducted a review of a statistically significant sample of child protective services (CPS) investigations closed in November 2018 to assess the quality of investigations conducted during the monitoring period.

➤ ***Validation of Collaborative Referrals for Low or Moderate Risk Families***

The Monitor and CFSA jointly conducted a review of a statistically significant sample of CPS investigations and Family Assessments (FA) closed in February 2019 to assess if those families whose circumstances were assessed to place a child in their care at low or moderate risk of abuse or neglect and were in need of and agreed to be referred for services were connected to a Collaborative or other community-based agency to meet their needs.

➤ ***Validation of Caseload Data***

The Monitor validated caseload size and assignment of cases between July 2018 and March 2019 for caseworkers within Entry Services, including CPS investigations and FAs, in-home services, and permanency. Additionally, the Monitor validated supervisory responsibilities, including supervisors carrying cases and instances in which individual supervisors were assigned to supervise more than five case-carrying social workers and one case aide.

➤ ***Review of Young Children Placed in Congregate Care Settings***

The Monitor and CFSA jointly conducted a review of records of all children between the ages of six and 12 who were placed in a congregate care setting for more than 30 days and those children under the age of six who were placed in a congregate care setting for any length of time during the review period, to determine if these placements were appropriate and met an agreed upon placement exception as medically necessary to meet the child's needs.

➤ ***Review of Children Who were Adopted over 12 Months from Placement in Pre-Adoptive Home***

The Monitor and CFSA jointly conducted a review of cases in which a child's adoption was finalized between July 2018 and March 2019, and the final adoption took longer than 12 months from the child's placement in the pre-adoptive home to determine if reasonable efforts had been made to finalize the adoption expeditiously.

➤ ***Validation of Youth Transition Plans***

The Monitor conducted data validation of Youth Transition Plans (YTPs) for youth who were eligible⁷ to have a transition plan during this monitoring period. The Monitor pulled a random sample and requested hard copies of select youth's YTPs. The Monitor reviewed the YTPs for quality and documentation of youth's participation.

➤ ***Quality Service Reviews***

Information about the quality of services and case planning and practice is collected through Quality Service Reviews (QSRs) to assess performance for three select Exit Standards, two of which are Outcomes to be Achieved. The QSR is a case-based qualitative review process that requires interviews with all of the key persons who are working and are familiar with the child and/or family whose case is under review. Using a structured protocol, trained QSR reviewers synthesize the information gathered and rate how well the child is functioning and how the system is performing to support the child and family. Reviewers provide direct feedback to social workers and supervisors as well as a written summary of findings to expand and justify QSR ratings. As part of *LaShawn* monitoring, Monitor staff are lead reviewers for approximately two QSRs each month reviews are conducted⁸ and participate in weekly oral case presentations⁹.

Between January and December 2018, a total of 137 QSRs were completed to assess case planning, service delivery, and health outcomes. Of these 137 cases, 54 cases involved a child receiving in-home services and the remaining 83 cases involved a child placed in out-of-home care.

➤ ***Validation of Training Data***

The Monitor conducted validation of pre-service training data for foster parents, social workers, and supervisors, and in-service training data for foster parents.

➤ ***Validation of Timely Licensure of Foster and Adoptive Parents***

The Monitor conducted additional validation of data for those foster and adoptive parents whose licensure took more than 150 days from beginning training to receive a license to determine if the delay was due to circumstances outside of the District's control.

⁷ Beginning at age 15, all youth in care are eligible for transition planning. CFSA works to ensure that all eligible youth receive appropriate and supportive transition services, regardless of their permanency goal.

⁸ The Monitor provided reviewers for 16 QSRs between January and December 2018 and CSSP staff participated in almost all oral case presentations during the period.

⁹ Each case is presented to a panel consisting of CFSA representatives from the QSR unit and Monitor staff to ensure inter-rater reliability on review ratings.

➤ *Other Monitoring Activities*

The Monitor meets frequently with senior leadership and managers at CFSA and attends some CFSA meetings, including the CFSA Internal Child Fatality Review Committee. Additionally, the Monitor participates as a member of the City-wide Child Fatality Review Committee and routinely collects information from external stakeholders, including contracted service providers and advocacy organizations.

B. Report Structure

This monitoring report assesses the District of Columbia child welfare system's performance between July 2018 and March 2019¹⁰ in meeting the IEP Exit Standards, as defined in the December 17, 2010 Court Order. Section I provides an introduction to this report and outlines the methodology. Section II provides a narrative summary of the District's progress in improving outcomes during this nine month period, as well as other current updates. In Section III, the summary tables provide the Court with a consolidated update of the data on the District's performance as of March 2019 on the IEP outcomes remaining to be achieved and the outcomes previously achieved that need to be maintained.¹¹ Section IV provides further discussion of the data, an assessment of whether the District has met the required Exit Standard(s) for IEP Outcomes to be Achieved, maintained required performance for select IEP Outcomes to be Maintained, and information on CFSA's implementation of specific strategies included in the *LaShawn* 2018 Strategy Plan.

II. SUMMARY OF PERFORMANCE

The *LaShawn A. v Bowser* class action lawsuit has provided the impetus and framework for significant improvements in the District's child welfare system and outcomes over many years. After a very rocky start and incremental progress followed by slippage, the District has consistently pursued systemic and practice reforms since the creation of the *LaShawn* Implementation and Exit Plan (IEP) in 2010. The District's child welfare system today – one that still faces challenges, but has also adapted to incorporate best practices being pursued in other states and local jurisdictions – bears little resemblance to the one that sparked the *LaShawn* lawsuit in 1989.

The *LaShawn* IEP ordered by the federal court in 2010 includes 88 performance and outcome measures that were intended to produce and sustain better outcomes for children and families in the District and to produce a well-functioning child welfare system with a robust infrastructure,

¹⁰ Prior monitoring reports have included performance for 6 month periods. Per agreement of the Parties and the Court, this report includes performance for a 9 month period.

¹¹ In some instances where March 2019 performance data are not available, the most recent performance data are cited with applicable timeframes.

processes, policies, and resources to keep children safe, with families, and achieving positive outcomes. It contains 88 Exit Standards, 85 of which remain applicable today.¹² Since the IEP was ordered, CFSA has achieved and maintained required performance for 42 of the standards for at least five years¹³ and an additional 16 Exit Standards have been achieved and maintained for between 18 months and four years. It total, 71 Exit Standards were met at the start of this monitoring period.

There remained 14 IEP Exit Standards still to be achieved at the start of this monitoring period. The unmet standards pertain to timely and quality child protective services practice; adequacy of case planning and service delivery to children and families; quality of worker documentation in assessing for children's safety during visits; ensuring workers frequently visit children who have been newly placed or experienced a placement move; achieving timely permanency outcomes for children through reunification, guardianship, or adoption; appropriately conducting meaningful assessments of children who experience placement disruptions; and eliminating the practice of children and youth staying overnight at the CFSA office building.

During this monitoring period (between July 2018 and March 2019), five of the remaining 14 measures were not newly assessed for one of the following reasons – performance is based upon annual outcomes data, the most recent performance was included in the last monitoring period, or data for reporting were not available. Of the remaining nine Exit Standards, one was newly achieved during this nine month period (visits between parents and children with a goal of reunification); two standards were partially achieved (visits between parents and workers and social worker visits to children experiencing a placement change); five standards were not achieved, however performance improved although not to the level required in the IEP (timely initiation of investigations, timely closure of investigations, acceptable quality of investigations, acceptable case planning, and acceptable service provision); and performance for one unmet Exit Standard declined (prohibition against children staying overnight at the CFSA office building).

In terms of sustainability, of the Exit Standards that CFSA has previously achieved, four were not maintained during this period (children in temporary or emergency placements longer than 30 days, timely licensure of foster parents, community-based service referrals for families whose circumstances are deemed to place a child in their care at low or moderate risk of abuse or neglect, and in-service training for foster parents). As discussed later in the report, those with declining performance primarily pertain to the Agency's placement issues which remain unresolved. Three Exit Standards were only partially maintained (timely dental care for children in foster care, caseloads, and training for new supervisors).

¹² The IEP includes 3 historical, time limited adoption measures that are no longer applicable (IEP citations I.B.16.a.ii, I.B.16.b.i., and I.B.16.b.ii.).

¹³ Examples of some of the standards maintained for 5 years or more include maintaining a quality assurance system, ensuring social workers are licensed, notifying adoptive families for services available after agency involvement, placing a limited number of children more than 100 miles outside of the District, monitoring a 24-hour response system for reports of abuse or neglect against children, etc.

The discussion below provides further analysis of CFSA's performance during the period under review within the foundational areas of child welfare system practice.

Child Protective Services Practice and Caseloads

Earlier this year, CFSA leaders made the decision to end its Differential Response (DR) model due to ongoing challenges with Family Assessment (FA) practice.¹⁴ This is a major policy and practice shift that had been under consideration for some time as a needed change to improve the performance and results of the District's front-end child protective services (CPS) responses and interventions. Beginning April 1, 2019, CFSA stopped assigning new referrals to the FA track and all accepted referrals to the Hotline of alleged child abuse and neglect are now handled as CPS investigations. The case practice qualities and strengths of FA practice – including caseworker efforts to effectively engage and team with families – are expected to be reflected in CFSA's investigative practice. Organizationally, this means that CFSA's Entry Services workers are all expected to follow policy and procedure governing CPS investigations which requires that contact with the alleged victim child(ren) occur within 48 hours of a report¹⁵, that all appropriate actions be taken to immediately ensure the child's safety, and that the investigation be completed and a decision regarding disposition (to unfound or substantiate) the allegation(s) be made within 35 days of receipt of referral. As in all other social work activities within CFSA, social workers are expected to reach out to family members and work to identify and ameliorate both immediate and underlying needs and involve parents and families in planning for their children.

During the current monitoring period, there was improvement in performance in the three Exit Standards related to CPS practice that remain Outcomes to be Achieved: *Timely Initiation* (in March 2019, 86% of investigations were initiated within 48 hours or good faiths efforts to see the alleged victim child(ren) were completed), *Acceptable Investigations* (in November 2018¹⁶, 73% of investigations were of acceptable quality), and *Timely Closure of Investigations* (a monthly

¹⁴ CFSA began utilizing a practice known as Differential Response (DR) in 2011 to provide an alternative to the traditional CPS investigation for referrals with less severe safety concerns with a goal of intervening in a less punitive way with families where the issues were primarily child neglect. CFSA's alternative response, Family Assessment (FA), was designed for families for whom a Hotline report had been made and the safety concerns were minimal. For these families, instead of a CPS investigation, CFSA used a strength-based, family-centered assessment process to support families in identifying needs and accessing services. In every FA, a safety assessment is mandatory and part of the initial response. If no immediate safety concerns that could be easily ameliorated were identified, an assessment was conducted and families were engaged and encouraged to develop a family agreement for receipt of services. Beginning in late-2018, CFSA's leadership reviewed quantitative and qualitative data on outcomes of FA practice, and considered how the voluntary nature of the FA pathway impacted the number of families who elected to participate in needed services. Based upon this analysis, CFSA decided to end the FA pathway. CFSA's investigative practice will seek to incorporate the strengths of the FA model, with a strong focus on engaging parents and family supports from the start and throughout an investigation.

¹⁵ Completion of applicable good faith efforts to see the alleged victim child(ren) are also considered compliant for timely initiation. Good faith efforts may include: visiting the child's home at different times of day, visiting the child's school or daycare, contacting the reporter, reviewing CFSA's information system and other information systems, and contacting the police if children are in immediate danger.

¹⁶ The most current performance assessed was in November 2018.

range of 78 to 91% of investigations were closed timely this period). Current performance for these remaining Exit Standards does not meet the required target, but reflects an upward trend.

In addition to the three measures described above, the IEP includes requirements for meeting caseload standards for CPS staff. CFSA has long struggled to maintain caseloads for CPS staff at the level required by the IEP, and for five of the nine months this monitoring period, caseload compliance was below the required 90 percent. In March 2019, 65 percent of CPS staff had 12 or fewer investigations or FAs (the caseload standard) throughout the month. CPS caseloads consistently begin to rise throughout the school year as children accumulate unexcused absences that lead to calls to the Hotline regarding educational neglect. This is an annual trend that has occurred for some time. At the beginning of the 2019/2020 school year, CFSA is planning to assign workers to two or three schools with high numbers of educational neglect reports to work with families and intervene before absences become educational neglect. The goal is to reduce educational neglect referrals by intervening earlier to support children and families. The hope is that targeted early intervention would, as a consequence, make it easier to manage CPS caseload fluctuations. The inconsistency in CPS caseload compliance is troubling and clearly affects social workers' consistent performance on investigation timelines and quality metrics. It will be important that CFSA take multiple steps, including, if necessary, adding more CPS workers to stabilize caseloads at required levels.

Finally, there remain a number of Entry Services policies and practice manuals where revisions have been in process and must be finalized to codify and ensure consistent application of practice standards and expectations moving forward. The policies that need to be finalized include: *Safety Planning*, *In-Home Services*, *Family Team Meetings*, *Hotline*, and *Investigations*. Collectively, they govern practice in such key areas as ensuring children are safe at home; parents, relatives, and other caregivers understand what is required of them and what kinds of supports they can expect from CFSA; and kinship providers are supported when a safety plan is put in place that includes the child temporarily living with a relative. At the *LaShawn* federal court status hearing on December 11, 2018, CFSA made commitments to the Court outlining the content and implementation of its *Safety Planning* policy. The Monitor has provided feedback to drafts of this policy and CFSA has indicated that they anticipate producing a final version, with consultation from the Monitor, by May 31, 2019.

Case Practice – Services to Families and Children and Case Planning

There are two Exit Standards that directly assess the quality of practice with families who have an open, ongoing case with CFSA – these are *Services to Families and Children to Promote Safety, Permanency, and Well-Being*; and *Case Planning*. Both are Outcomes to be Achieved that are measured through ratings collected during Quality Service Reviews (QSRs). While ratings are

modestly improving, CFSA continues to struggle to meet the final target of 80 percent of cases rated in the acceptable range for these indicators.

During CY2018, improvements were documented in the Exit Standards measuring quality of case practice for families receiving services while their children remain in the home (“in-home services”) and for those foster care cases that are managed by one of the private agencies that contract with CFSA to provide social work and foster care services. Despite these improvements, the quality of case practice as measured through the QSRs remains far below the required level, with 56 percent of cases rated acceptable on *Services to Families and Children*, and 60 percent rated acceptable on *Case Planning*. The quality of case practice with children and families is central to the agency’s ability to ensure their mission of supporting the safety, permanency, and well-being of children and families.

There are a number of opportunities to improve case practice with children and families including teaming more consistently and effectively with a family’s formal and informal supports, better engaging children’s fathers, improving access to and receipt of appropriate and effective mental and behavioral health supports for children and parents, and increasing the levels of supports and in-home resources available to foster parents to promote the stability of children within their homes.

Placement Array and Stability

While the majority of the District’s children placed in foster care are in family-like settings (83% as of March 31, 2019), including 27 percent who are placed with relatives or kinship providers, CFSA continues to experience considerable challenges in the appropriate and stable placement of children.

Data on CFSA’s placement practices continue to reflect ongoing problems. During the current monitoring period, there were 17 overnight stays by children and youth¹⁷ in CFSA’s office building – a practice that increases trauma for children experiencing foster care and is specifically forbidden by the IEP. CFSA attributes these continued overnight placements to a lack of responsiveness or willingness of foster parents to accept children who present with challenging behaviors – likely the result of trauma, loss, and mental health conditions – and, in some cases, inefficiencies in communication between staff in different units within CFSA. In addition to an increase in overnight placements, there was an increase this period in the number of children who exceeded 30 days in a short term or temporary placement (9 children).¹⁸ Further, CFSA continues to be unable to report on required assessments and team meetings for children experiencing a

¹⁷ Two children experienced more than 1 overnight stay at the CFSA office building during this period. In July 2018, 1 child had numerous overnight stays, thus the total number of stays referenced may underrepresent the actual amount.

¹⁸ This Exit Standard is an Outcome to be Maintained that was not maintained this period.

placement disruption. The Monitor continues to advocate for the development of specialized family-based resources with more intensive services for children experiencing placement instability.

Performance data for this period also reveal challenges with adequately tracking and supporting foster parents with timely licensure and completion of required in-service training hours necessary to maintain licensure. Between July 2018 and February 2019, only 62 percent of newly licensed foster homes were licensed within 150 days of beginning training (the IEP timeliness requirement), a significant decline in performance from 82 percent the prior period. Additionally, only 88 percent of foster parents who were relicensed during the monitoring period completed the required number of in-service training hours. These data are especially concerning given the demonstrated need for additional licensed and skilled foster parents.

Resolving these placement issues involves aggressively and successfully implementing targeted strategies in numerous domains. Internally, and in collaboration with its private agency partners, CFSA must expand and improve its recruitment and retention of foster parents; operate and support a functional placement matching process that utilizes current data and information from formal and informal supports who know the child needing placement; and expand immediate access to and availability of resources and supports that foster parents need to be successful and to prevent the damaging revolving door of placements some children with behavioral, emotional, and other specific needs are experiencing. Lastly, the District needs to continue to prioritize efforts to expand and improve the quality of mental and behavioral health services available to children.

New Opportunities within the Family First Prevention Services Act (FFPSA)

CFSA has been thoughtful and intentional with its implementation planning for new federal legislation (FFPSA)¹⁹, which provides opportunities to expand federal resources available for targeted prevention services for children and families. In looking at how to maximize the opportunities provided within the law to better support children and families in the community, CFSA first convened a workgroup of stakeholders – including the District’s Departments of Behavioral Health, Health, and Human Services; the Collaboratives; and other community partners – to assess the current scope of prevention services in the community and identify additional services that would meet the needs of children and families who are at-risk of entering care. CFSA has also worked with these partners to analyze data to better understand the unique circumstances and needs of these children and families who come to the attention of the child welfare system. Importantly, as part of this process, CFSA conducted focus groups with parents and providers of

¹⁹ The Family First Prevention Services Act (FFPSA) was passed in February 2018 as part of the Bipartisan Budget Act. Under FFPSA, states will be able to claim Title IV-E reimbursement for mental health, substance use, and in-home parent skill-based programs that are identified as well-supported, supported, or promising practices. CFSA will receive reimbursement for these services when they are provided to eligible children and families, which includes pregnant and parenting youth in foster care and children who are candidates for foster care.

direct service mental health and parenting skills to learn about the strengths in the existing prevention continuum and where additional investments are warranted. The District provided a draft of the required Title IV-E Prevention Plan on April 10, 2019, to the federal Children's Bureau and is currently awaiting feedback.

FFPSA also requires that states limit the use of congregate care placements for children. As a result of the work under *LaShawn* for many years to promote family-based placement for children, the District is in a good posture with respect to meeting these new federal requirements. The District's use of congregate care settings is low and the new federal requirements of a Qualified Residential Treatment Program should not adversely impact their budget in a significant way. The goal of the changes in federal law mirror *LaShawn* requirements which are based in research that has shown that children do best when they are in a family-like setting, and that any placement in a congregate care setting should be temporary and only used when necessary to address a child's treatment needs.

III. SUMMARY TABLES OF *LASHAWN A. v. BOWSER* IMPLEMENTATION AND EXIT PLAN PERFORMANCE

Table 1: Outcomes to be Achieved					
Implementation and Exit Plan Requirement ²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance ²¹	Exit Standard Achieved ²²	Direction of Change ²³
<p>1. <i>Investigations</i>: Investigations of alleged child abuse and neglect shall be initiated or documented good faith efforts shall be made to initiate investigations within 48 hours after receipt of a report to the hotline of child maltreatment.</p> <p>(IEP citation I.A.1.a.)</p>	95% of all investigations will be initiated within 48 hours or there will be documented good faith efforts to initiate investigations whenever the alleged victim child(ren) cannot be immediately located.	<p>March 2018 performance, 86%</p> <p>June 2018 performance, 79%</p>	Monthly range of 82 – 89% ^{24,25}	No	↑

²⁰ The IEP includes three historical, time limited adoption measures that are no longer applicable and are not included in this Table. These include IEP citation I.B.16.a.ii, I.B.16.b.i., and I.B.16.b.ii.

²¹ In some instances where March 2019 performance data are not available, the most recent performance data are cited with applicable timeframes. For some Exit Standards, the Monitor provides a range of data over the monitoring period to better illustrate performance. More detailed information on CFSA’s performance toward specific Exit Standards is provided in subsequent sections of this report.

²² “Yes” indicates that, in the Monitor’s judgment based on presently available information, CFSA’s performance satisfies the Exit Standard requirement. “Yes” may be used for Outcomes to be Maintained in Table 2 of this report if performance deviation from the Exit Standard requirement is determined by the Monitor to be insubstantial or temporary. “Partially” is used when CFSA has come very close but has not fully met an Exit Standard requirement or in instances where Exit Standards have more than 1 part and CFSA has fulfilled some but not all parts of the Exit Standard requirement. “No” indicates that, in the Monitor’s judgment, CFSA’s performance is below the designated Exit Standard requirement.

²³ Where applicable, “↑” indicates that, in the Monitor’s judgment based on data and an understanding of case practice, performance is trending upwards; “↓” indicates that, in the Monitor’s judgement, performance is trending downward; “↔” indicates that, in the Monitor’s judgment, there has been no change in performance; and “N/A” indicates a judgment regarding direction of change is not applicable to the Exit Standard during the monitoring period.

²⁴ Monthly performance on timely initiation of investigations during those months in which good faith efforts were validated are as follows: August 2018, 89%; December 2018, 82%; February 2019, 86%.

²⁵ Reported performance reflects CFSA’s secondary analysis of FACES.NET data in August and December 2018, and February 2019 to validate instances where the supervisor indicated staff had made “good faith efforts” in investigations where the alleged victim child(ren) was not seen in the required timeframe. Data on good faith efforts for the other months during the monitoring period were not provided and are therefore not included in this Table.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance²¹	Exit Standard Achieved²²	Direction of Change²³
2. <u>Investigations</u> : Investigations of alleged child abuse and neglect shall be completed within 30 days after receipt of a report to the hotline of child maltreatment and the final report of findings for each investigation shall be completed within five days of the completion of the investigation. (IEP citation I.A.1.b.)	90% of investigations will be completed and a final report of findings shall be entered in FACES.NET within 35 days.	Monthly range of 72 – 81%	Monthly range of 78 – 91% ^{26,27}	No	↑
4. <u>Acceptable Investigations</u> : CFSA shall routinely conduct investigations of alleged child abuse and neglect. ²⁸ (IEP citation I.A.2.)	80% of investigations will be of acceptable quality.	66% of investigations closed in March 2018 were of acceptable quality.	73% of investigations closed in November 2018 were of acceptable quality. ²⁹	No	↑

²⁶ Monthly performance data for timely completion of investigations are as follows: July 2018, 81%; August 2018, 91%; September 2018, 90%; October 2018, 84%; November 2018, 78%; December 2018, 83%; January 2019, 81%; February 2019, 78%; March 2019, 81%.

²⁷ During this monitoring period, CFSA reports the following backlog of investigations each month not completed within 35 days: July 2018, 5; August 2018, 11; September 2018, 19; October 2018, 36; November 2018, 25; December 2018, 31; January 2019, 45; February 2019, 30; March 2019, 21.

²⁸ Evidence of acceptable investigations includes: (a) use of CFSA's screening tool in prioritizing response times for initiating investigations; (b) interviews with and information obtained from the 5 core contacts – the victim child(ren), the maltreater, the reporting source (when known), medical resources; and educational resources (for school-aged children); (c) interviews with collateral contacts that are likely to provide information about the child's safety and well-being; (d) interviews with all children in the household outside the presence of the caretaker, parents or caregivers, or documentation, by the worker, of good faith efforts to see the child and that the worker has been unable to locate the child; (e) medical and mental health evaluations of the children or parents when the worker determines that such evaluations are needed to complete the investigation, except where a parent refuses to consent to such evaluations; (f) use of risk assessment protocol in making decisions resulting from an investigation; and (g) initiation of services during the investigation to prevent unnecessary removal of children from their homes.

²⁹ Performance data were collected by CFSA and Monitor staff during a review of a statistically significant sample of investigations closed in November 2018. A total of 183 investigations were reviewed, representing a sample with a $\pm 5\%$ margin of error with 95% confidence in its results.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance ²¹	Exit Standard Achieved ²²	Direction of Change ²³
<p><u>5. Services to Families and Children to Promote Safety, Permanency, and Well-Being:</u> Appropriate services, including all services identified in a child or family’s safety plan or case plan shall be offered and children/families shall be assisted to use services to support child safety, permanence and well-being.</p> <p>CFSA shall provide for or arrange for services through operational commitments from District of Columbia public agencies and/or contracts with private providers. Services shall include:</p> <ul style="list-style-type: none"> a. Services to enable children who have been the subject of an abuse/neglect report to avoid placement and to remain safely in their own homes; b. Services to enable children who have or will be returned from foster care to parents or relatives to remain with those families and avoid replacement into foster care; c. Services to avoid disruption of an adoptive placement that has not been finalized and avoid the need for replacement; and d. Services to prevent the disruption of a beneficial foster care placement and avoid the need for replacement. <p>(IEP citation I.A.3.)</p>	<p>In 80% of cases, appropriate services, including all services identified in a child’s or family’s safety plan or case plan shall be offered along with an offer of instruction or assistance to children/families regarding the use of those services.³⁰</p>	<p>CY2017 performance: 49% rated acceptable.</p>	<p>CY2018 performance: 56% rated acceptable.³¹</p>	<p>No</p>	<p>↑</p>

³⁰ The Monitor will determine performance based on the QSR implementation and pathway to safe closure indicators for which 80% of cases will be rated acceptable on both indicators, as applicable (a score of 4 or higher on the 6 point QSR indicator scale).

³¹ Data collected during QSRs conducted in CY2018 determined that 76% of cases (104 of 137) were rated acceptable on the *Implementing Supports and Services* indicator, 63% of cases (86 of 137) were rated acceptable on the *Pathway to Case Closure* indicator, and 56% of cases (77 of 137) were rated acceptable on *both* indicators.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance²¹	Exit Standard Achieved²²	Direction of Change²³
<p><u>7. Assessing Safety during Worker Visits with to Families with In-Home Services:</u> Workers are responsible for assessing and documenting the safety (e.g., health, educational and environmental factors and the initial safety concerns that brought this family to the attention of the Agency) of each child at every visit and each child must be separately interviewed at least monthly outside of the presence of the caretaker.</p> <p>(IEP citation I.A.4.c.)</p>	90% of cases will have documentation verifying each child was visited and seen outside the presence of the caretaker and that safety was assessed during each visit.	Performance data collected for August 2018	In August 2018, 33% of children had documentation indicating that safety was fully assessed during all visits ³²	No	N/A
<p><u>9. Assessing Safety during Worker Visits with Children in Out-of-Home Care:</u> Workers are responsible for assessing and documenting the safety (e.g., health, educational and environmental factors and the initial safety concerns that brought this family to the attention of the Agency) of each child at every visit and each child over two years old must be separately interviewed at least monthly outside of the presence of the caretaker.</p> <p>(IEP citation I.A.5.d.)</p>	90% of cases will have documentation verifying each child was seen outside the presence of the caretaker by a worker and that safety was assessed during each visit.	Performance data collected for August 2018	In August 2018, 44% of children had documentation indicating that safety was fully assessed during all these visits. ³³	No	N/A

³² Performance data were collected by CFSA and Monitor staff during a review of a statistically significant sample of children receiving in-home services in August 2018. A total of 164 cases were reviewed, representing a sample with a $\pm 7\%$ margin of error with 95% confidence in its results.

³³ Performance data were collected by CFSA and Monitor staff during a review of a statistically significant sample of children in foster care in August 2018. A total of 158 cases were reviewed, representing a sample with a $\pm 7\%$ margin of error with 95% confidence in its results.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance ²¹	Exit Standard Achieved ²²	Direction of Change ²³
<p>10. <u>Visitation for Children Experiencing a New Placement or a Placement Change:</u></p> <p>a. A CFSA social worker or private agency social worker with case management responsibility shall make at least two visits to each child during the first four weeks of a new placement or a placement change.</p> <p>b. A CFSA social worker, private agency social worker, family support worker or nurse care manager shall make two additional visits to each child during the first four weeks of a new placement or a placement change.</p> <p>c. At least one of the above visits during the first four weeks of a new placement or a placement change shall be in the child's home.</p> <p>d. At least one of the visits during the first four weeks of a new placement or a placement change shall include a conversation between the social worker and the resource parent to assess assistance needed by the resource parent from the Agency.</p> <p>(IEP citation I.A.6.a-d.)</p>	90% of children newly placed in foster care or experiencing a placement change will have four visits in the first four weeks of a new placement or placement change as described.	<p>a.-c. Monthly range of 80 – 91% of applicable children had the required number of visits following a new placement or placement change.</p> <p>d. Performance data collected for July 2018</p>	<p>a.-c. Monthly range of 82 – 94% of applicable children had the required number of visits following a new placement or placement change.^{34,35}</p> <p>d. In July 2018, 63% of children had documentation indicating that agency staff had a conversation with the resource parent to assess their needs in caring for the child.³⁶</p>	Partially ³⁷	↑

³⁴ Monthly performance data require tracking visits for 28 days following the initial placement or placement change; therefore, data are one month behind other reports and March 2019 performance was not available at the time of writing this report.

³⁵ Monthly performance data for worker visits during first 4 weeks of a new placement or placement change are as follows: July 2018, 90%; August 2018, 88%; September 2018, 94%; October 2018, 94%; November 2018, 93%; December 2018, 91%; January 2019, 82%; February 2019, 88%.

³⁶ Performance data were collected by CFSA and Monitor staff during a review of a statistically significant sample of children newly placed or experiencing a placement change in July 2018. A total of 60 cases were reviewed, representing a sample with a $\pm 7\%$ margin of error with 95% confidence in its results.

³⁷ CFSA met the required level of performance for one sub-part of this measure during 5 of the 8 months assessed. The Monitor considers this Exit Standard to be partially achieved.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance²¹	Exit Standard Achieved²²	Direction of Change²³
<p>11. <u>Assessing Safety during Worker Visits with Children Experiencing a New Placement or a Placement Change</u>: Workers are responsible for assessing and documenting the safety (e.g., health, educational and environmental factors and the initial safety concerns that brought this family to the attention of the Agency) of each child at every visit and each child must be separately interviewed at least monthly outside of the presence of the caretaker.</p> <p>(IEP citation I.A.6.e.)</p>	<p>90% of cases will have documentation verifying each child was seen outside the presence of the caretaker by a social worker and that safety was assessed during each visit.</p>	<p>Performance data collected in August 2018</p>	<p>In August 2018, 42% of children had documentation indicating that safety was fully assessed during all visits³⁸</p>	<p>No</p>	<p>N/A</p>

³⁸ Performance data were collected by CFSA and Monitor staff during a review of a statistically significant sample of children newly placed or experiencing a placement change in July 2018. A total of 60 cases were reviewed, representing a sample with a $\pm 7\%$ margin of error with 95% confidence in its results.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance²¹	Exit Standard Achieved²²	Direction of Change²³
<p>18. <u>Visits between Parents and Workers:</u></p> <p>a. For children with a permanency goal of reunification, in accordance with the case plan, the CFSA social worker or private agency social worker with case-management responsibility shall visit with the parent(s) at least one time per month in the first three months post-placement.</p> <p>b. A CFSA social worker, nurse care manager or family support worker shall make a second visit during each month for the first three months post-placement.</p> <p>(IEP citation I.B.10.)</p>	<p>80% of parents will have twice monthly visitation with workers in the first three months post-placement.³⁹</p>	<p>Monthly range of 72 – 89%</p>	<p>Monthly range 67 – 90%^{40,41}</p>	<p>Partially⁴²</p>	<p>↔</p>

³⁹ This Exit Standard is also satisfied when there is documentation that the parent(s) is(are) unavailable or refused to cooperate with the agency.

⁴⁰ Due to shortened report timeline, March 2019 data were not available for inclusion in this report. Reported performance includes data for July 2018 through February 2019.

⁴¹ Reported performance includes instances where there is documentation in the record that the parent was unavailable or refused to cooperate with the agency despite efforts by the agency. Monthly performance data for visits between parents and workers are as follows: July 2018, 74%; August 2018, 81%; September 2018, 80%; October 2018, 80%; November 2018, 90%; December 2018, 76%; January 2019, 67%; February 2019, 74%.

⁴² CFSA met the required level of performance during 4 of the 8 months assessed. The Monitor considers this Exit Standard to be partially achieved.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance²¹	Exit Standard Achieved²²	Direction of Change²³
<p>19. <i>Visits between Parents and Children</i>: There shall be weekly visits between parents and children with a goal of reunification unless clinically inappropriate and approved by the Family Court. In cases in which visitation does not occur, the Agency shall demonstrate and there shall be documentation in the case record that visitation was not in the child's best interest, is clinically inappropriate or did not occur despite efforts by the Agency to facilitate it.</p> <p>(IEP citation I.B.11.)</p>	85% of children with the goal of reunification will have weekly visitation with the parent with whom reunification is sought. ⁴³	<p>April 2018 performance, 85%</p> <p>June 2018 performance, 82%</p>	Monthly range 83 – 88% ⁴⁴	Yes ⁴⁵	↔

⁴³ This Exit Standard is also satisfied when there is documentation that a visit is not in the child's best interest, is clinically inappropriate, or did not occur despite efforts by the agency to facilitate it.

⁴⁴ Assessing performance for this measure requires validation of those cases in which required visits did not occur, however, the social worker made necessary efforts in an attempt to facilitate visits. This validation was completed for performance in the following months: August 2018, 85%; November 2018, 88%; January 2019, 83%.

⁴⁵ CFSA met the required level of performance during 2 of the 3 months assessed, and was only 2 percent below in the month the standard was not achieved. The Monitor considers this Exit Standard to be achieved.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance ²¹	Exit Standard Achieved ²²	Direction of Change ²³
<p>32. <i>Timely Permanency</i>: Timely permanency through reunification, adoption or legal guardianship.</p> <p>(IEP citation I.B.16.c.)</p>	i. Of all children who entered foster care for the first time in FY2017 and who remain in foster care for 8 days or longer, 45% will achieve permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2018.	Not yet due	As of September 30, 2018, 46% of children in this cohort achieved permanency.	No	N/A
	ii. Of all children who are in foster care for more than 12 but less than 25 months on September 30, 2017, 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2018.	Not yet due	As of September 30, 2018, 34% of children in this cohort achieved permanency.		
	iii. Of all children who are in foster care for 25 months or longer on September 30, 2017, 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2018, whichever is earlier.	Not yet due	As of September 30, 2018, 29% of children in this cohort achieved permanency.		

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance ²¹	Exit Standard Achieved ²²	Direction of Change ²³
<p>33. <i>Case Planning Process</i>:</p> <p>a. CFSA, with the family, shall develop timely, comprehensive and appropriate case plans in compliance with District law requirements and permanency timeframes, which reflect family and children’s needs, are updated as family circumstances or needs change, and CFSA shall deliver services reflected in the current case plan.</p> <p>b. Every reasonable effort shall be made to locate family members and to develop case plans in partnership with youth and families, the families’ informal support networks and other formal resources working with or needed by the youth and/or family.</p> <p>c. Case plans shall identify specific services, supports and timetables for providing services needed by children and families to achieve identified goals.</p> <p>(IEP citation I.B.17.)</p>	80% of cases reviewed through the Quality Service Reviews (QSR) will be rated as acceptable. ⁴⁶	CY2017 performance: 52% rated acceptable.	CY2018 performance: 60% rated acceptable. ⁴⁷	No	↑

⁴⁶ The Monitor will determine performance based on the QSR case planning process and pathway to safe closure indicators for which 80% of cases will be rated acceptable on both indicators, as applicable (a score of 4 or higher on the 6 point QSR indicator scale).

⁴⁷ Data collected during QSRs conducted in CY2018 determined that 80% (109 of 137) of cases were rated acceptable overall on the *Planning Interventions* indicator, 63% (86 of 137) of cases were rated acceptable on the *Pathway to Case Closure* indicator, and 60% (82 of 137) of cases were acceptable on *both* indicators.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ²⁰	Exit Standard	January – June 2018 Performance	July 2018 – March 2019 Performance ²¹	Exit Standard Achieved ²²	Direction of Change ²³
<p>38. <u>Assessments for Children Experiencing a Placement Disruption</u>: CFSA shall ensure that children in its custody whose placements are disrupted are provided with a comprehensive and appropriate assessment and follow-up action plans to determine their service and re-placement needs no later than within 30 days of re-placement. A comprehensive assessment is a review, including as applicable the child, his/her family, kin, current and former caregiver and the GAL, to assess the child's current medical, social, behavioral, educational and dental needs to determine the additional evaluations/services/supports that are required to prevent future placement disruptions.</p> <p>(IEP citation I.C.21.)</p>	90% of children experiencing a placement disruption will have a comprehensive assessment and an action plan to promote stability developed.	Unable to determine ⁴⁸	Unable to determine ⁴⁹	No	N/A
<p>68. <u>Placement of Children in Most Family-Like Setting</u>: No child shall stay overnight in the CFSA Intake Center or office building.</p> <p>(IEP citation II.B.8.)</p>	Ongoing Compliance	Between January – June 2018, 10 children stayed overnight at CFSA.	Between July 2018 – March 2019, there were 17 overnight stays by children at CFSA. ⁵⁰	No	↓

⁴⁸ Due to discrepancies identified in the data during validation by the Monitor, performance for this Exit Standard could not be assessed or reported.

⁴⁹ Although CFSA has made improvements in ensuring data on the number of placement disruptions are accurate, there continue to be challenges in collecting data on teaming and planning meetings once these disruptions occur. See discussion in *Assessments for Children Experiencing a Placement Disruption* section of this report for more information.

⁵⁰ Two children experienced more than 1 overnight stay at the CFSA office building during this period. In July 2018, 1 child had numerous overnight stays, thus the total number of stays referenced may underrepresent the actual amount.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>3. <i>Investigations</i>: For families who are subject to a new investigation for whom the current report of child maltreatment is the fourth or greater report of child maltreatment, with the most recent report occurring within the last 12 months, CFSA will conduct a comprehensive review of the case history and the current circumstances that bring the family to CFSA's attention.</p> <p>(IEP citation I.A.1.c.)</p>	90% of the case records for families subject to a new investigation for whom the current report of child maltreatment is the fourth or greater report of child maltreatment, with the most recent report occurring within the last 12 months will have documentation of a comprehensive review.	Monthly range of 90 – 97%	Monthly range of 95 – 99% ⁵²	Yes
<p>6. <i>Worker Visitation to Families with In-Home Services</i>:</p> <p>a. A CFSA social worker or private agency social worker shall make at least one visit monthly to families in their home in which there has been a determination that child(ren) can be maintained safely in their home with services.</p> <p>b. A CFSA social worker, family support worker, private agency social worker or a Collaborative family support worker shall make a second monthly visit at the home, school or elsewhere.</p> <p>(IEP citation I.A.4.a-b.)</p>	95% of families will be visited monthly by a CFSA social worker or private agency social worker and 85% of families will be visited a second time monthly by a CFSA social worker, family support worker, private agency social worker or a Collaborative family support worker.	<p>a. Monthly range of 92 – 95% of families were visited monthly</p> <p>b. Monthly range of 88 – 93% of families were visited twice during the month</p>	<p>a. Monthly range of 92 – 96% of families were visited monthly⁵³</p> <p>b. Monthly range of 88 – 94% of families were visited twice during the month</p>	Yes

⁵¹ In some instances where March 2019 performance data are not available, the most recent performance data are cited with applicable timeframes. For some Exit Standards, the Monitor provides a range of data over the monitoring period to better illustrate performance. More detailed information on CFSA's performance toward some Outcomes to be Maintained is provided in subsequent sections of this report.

⁵² Due to shortened report timeline, March 2019 data were not available for inclusion in this report. Reported performance includes data for July 2018 through February 2019.

⁵³ Monthly performance data for once monthly in-home worker visits are as follows: July 2018, 94%; August 2018, 95%; September 2018, 92%; October 2018, 93%; November 2018, 95%; December 2018, 94%; January 2019, 93%; February 2019, 93%; March 2019, 96%.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>8. <u>Worker Visitation to Children in Out-of-Home Care</u>:</p> <p>a. A CFSA social worker or private agency social worker with case management responsibility shall make monthly visits to each child in out-of-home care (foster family homes, group homes, congregate care, independent living programs, etc.).</p> <p>b. A CFSA social worker, private agency social worker, family support worker or nurse care manager shall make a second monthly visit to each child in out-of-home care (foster family homes, group homes, congregate care, independent living programs, etc.).</p> <p>c. At least one of the above visits each month shall be in the child's home.</p> <p>(IEP citation I.A.5.a-c.)</p>	<p>95% of children should be visited at least monthly and 90% of children shall have twice-monthly visits.</p>	<p>a. Monthly range of 96 – 98% of children had monthly visits</p> <p>b. Monthly range of 94 – 97% of children had twice monthly visits</p>	<p>a. Monthly range of 96 – 98% of children had monthly visits</p> <p>b. Monthly range of 95 – 97% of children had twice monthly visits</p>	<p>Yes</p>
<p>12. <u>Relative Resources</u>: CFSA shall identify and investigate relative resources by taking necessary steps to offer and facilitate pre-removal Family Team Meetings (FTM) in all cases requiring removal of children from their homes.</p> <p>(IEP citation I.B.7.a.)</p>	<p>CFSA will take necessary steps to offer and facilitate pre-removal FTMs in 70% of applicable cases requiring child removal from home.</p>	<p>Between January – June 2018, CFSA took necessary steps to offer/facilitate pre-removal FTMs in 92% of applicable cases.</p>	<p>Between July 2018 – February 2019, CFSA took necessary steps to offer/facilitate pre-removal FTMs in 90% of</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
			applicable cases. ⁵⁴	
13. <i>Relative Resources</i> : In cases where a child(ren) has been removed from his/her home, CFSA shall make reasonable efforts to identify, locate and invite known relatives to the FTM. (IEP citation I.B.7.b.)	In 90% of cases where a child(ren) has been removed from his/her home, CFSA will make reasonable efforts to identify, locate and invite known relatives to the FTM.	Of the 101 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate, and invite known relatives to the FTM in 100% of cases.	Of the 139 families who had children removed between July 2018 – February 2019, CFSA made reasonable efforts to identify, locate, and invite known relatives to the FTM in 98% of cases. ⁵⁵	Yes
14. <i>Placement of Children in Most Family-Like Setting</i> : Children in out-of-home care shall be placed in the least restrictive, most family-like setting appropriate to his or her needs. (IEP citation I.B.8.a.)	90% of children will be in the least restrictive, most family-like setting appropriate to his or her needs.	Measure not reassessed this period	Measure not reassessed this period ⁵⁶	Yes

⁵⁴ Due to shortened report timeline, March 2019 data were not available for inclusion in this report.

⁵⁵ Ibid.

⁵⁶ The method of determining performance on placement of children in the least restrictive, most family-like setting appropriate to their needs requires a qualitative case record review; performance data for March 2012, March 2013, and December 2015 indicate that CFSA consistently exceeds the required level of performance. This Exit Standard was not reassessed this period.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>15. <u>Placement of Children in Most Family-like Setting</u>: No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days.</p> <p>(IEP citation I.B.8.b.)</p>	No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days. ⁵⁷	Between January – June 2018, no children were placed in an emergency, short-term foster home, or shelter facility for more than 30 days.	Between July 2018 – March 2019, 9 children were placed in an emergency, short-term foster home, or shelter facility for more than 30 days.	No
<p>16. <u>Placement of Young Children</u>: Children under age 12 shall not be placed in congregate care settings for more than 30 days unless the child has special needs that cannot be met in a home-like setting and unless the setting has a program to meet the child's specific needs.</p> <p>(IEP citation I.B.9.a.)</p>	No child under 12 will be placed in congregate care settings for more than 30 days without appropriate justification that the child has special treatment needs that cannot be met in a home-like setting and the setting has a program to meet the child's specific needs.	Between January – June 2018, a total of 3 children under age 12 were applicable to this standard and all children met an agreed upon exception.	Between July 2018 – March 2019, a total of 4 children under age 12 were applicable to this standard and all children met an agreed upon exception.	Yes
<p>17. <u>Placement of Young Children</u>: CFSA shall place no child under six years of age in a group care non-foster home setting, except for those children with exceptional needs that cannot be met in any other type of care.</p>	No child under 6 years of age will be placed in a group care non-foster home setting without appropriate justification that the child has exceptional needs that cannot be met in any other type of care.	Between January – June 2018, 1 child under 6 years of age was placed in a group care non-foster	Between July 2018 – March 2019, 1 child under 6 years of age was placed in a group care non-	Yes

⁵⁷ The IEP provides that based on individual review, the Monitor's assessment will exclude, on a case-by-case basis, children placed in an emergency, short-term foster home, or shelter facility for more than 30 days where moving them would not be in their best interest.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
(IEP citation I.B.9.b.)		home setting and met an agreed upon exception.	foster home setting and met an agreed upon exception.	
<p>20. <u>Appropriate Permanency Goals</u>: Children shall have permanency planning goals consistent with the Federal Adoption and Safe Families Act (ASFA) and District law and policy guidelines.</p> <p>(IEP citation I.B.12.a.)</p>	95% of children shall have permanency planning goals consistent with ASFA and District law and policy guidelines.	Monthly performance was 98% every month	Monthly range of 97 – 98%	Yes
<p>21. <u>Appropriate Permanency Goals</u>: Children shall have permanency planning goals consistent with the Federal Adoption and Safe Families Act (ASFA) and District law and policy guidelines.</p> <p>(IEP citation I.B.12.b.)</p>	Beginning July 1, 2010, children shall not be given a goal of APPLA without convening a Family Team Meeting (FTM) or Listening to Youth and Families as Experts (LYFE) meeting with participation by the youth and approval by the CFSA Director, or a court order directing the permanency goal of APPLA.	There were 27 youth whose goal changed to APPLA between January – June 2018. Three youth had their goal change initiated by the Agency (with approval) and 10 youth had documentation of a LYFE/FTM conference.	There were 9 youth whose goal changed to APPLA between July 2018 – February 2019. ⁵⁸ Three youth had their goal change initiated by the Agency (with approval) and 6 youth had documentation of a LYFE/FTM conference.	Yes

⁵⁸ Due to shortened report timeline, March 2019 data were not available for inclusion in this report.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>22. <u>Appropriate Permanency Goals</u>: Youth ages 18 and older will have a plan to prepare them for adulthood that is developed with their consultation and includes, as appropriate, connections to housing, health insurance, education, continuing adult support services agencies (e.g., Rehabilitation Services Administration, the Department on Disability Services, the Department of Mental Health, Supplemental Security Income (SSI) and Medicaid), work force supports, employment services and local opportunities for mentors.</p> <p>(IEP citation I.B.12.c.)</p>	<p>90% of youth ages 18 and older will have a plan to prepare them for adulthood that is developed with their consultation. No later than 180 days prior to the date on which the youth will turn 21 years old (or on which the youth will emancipate), an individualized transition plan will be created that includes as appropriate connections to specific options on housing, health insurance and education and linkages to continuing adult support services agencies (e.g., Rehabilitation Services Administration, the Department on Disability Services, the Department of Mental Health, Supplemental Security Income (SSI) and Medicaid), work force supports, employment services and local opportunities for mentors.</p>	<p>Between January – June 2018, 92% of youth ages 18 and older had a timely Youth Transition Plan (YTP).</p>	<p>Between July – December 2018⁵⁹, 91% of youth ages 18 and older had a timely youth transition plan (YTP).⁶⁰</p>	<p>Yes</p>

⁵⁹ Due to shortened report timeline, January through March 2019 data were not available for inclusion in this report.

⁶⁰ Seven youth were excluded from analysis for one of the following reasons: being in runaway or missing status from placement and hard to locate; struggling with significant mental illness and unable to participate; or declining to participate in the development of a YTP.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p><u>23. Reduction of Multiple Placements for Children in Care:</u></p> <p>(IEP citation I.B.13.)</p>	a. Of all children served in foster care during the previous 12 months who were in care at least 8 days and less than 12 months, 83% shall have had two or fewer placements.	Unable to determine	Between November 2018 and March 2019 ⁶¹ , monthly range of 81 – 83% ⁶²	Yes ⁶³
	b. Of all children served in foster care during the previous 12 months who were in care for at least 12 months but less than 24 months, 60% shall have had two or fewer placements	Unable to determine	Between November 2018 and March 2019, monthly range of 64 – 70%	
	c. Of all children served in foster care during the previous 12 months who were in care for at least 24 months, 75% shall have had two or fewer placements in that 12 month period.	Unable to determine	Between November 2018 and March 2019, monthly range of 73 – 75% ⁶⁴	

⁶¹ Following work to modify the FACES.NET placement screens and data entry processes, CFSA has reported increased confidence in placement data beginning in November 2018; thus, performance data for November 2018 through March 2019 are reported. The Monitor has not independently validated these data.

⁶² Monthly performance for children in care at least 8 days and less than 12 months with 2 or fewer placements are as follows: November 2018, 82%; December 2018, 82%; January 2019, 83%; February 2019, 82%; March 2019, 81%.

⁶³ CFSA fell slightly below the required levels of performance for 2 sub-parts of this standard during some months. The Monitor considers these deviations insubstantial and this Exit Standard maintained.

⁶⁴ Monthly performance for children in care at least 24 months with 2 or fewer placements are as follows: November 2018, 73%; December 2018, 74%; January 2019, 74%; February 2019, 75%; March 2019, 75%.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>24. <u>Timely Approval of Foster/Adoptive Parents</u>: CFSA shall have in place a process for recruiting, studying and approving families, including relative caregivers, interested in becoming foster or adoptive parents that results in the necessary training, home studies and decisions on approval being completed within 150 days of beginning training.</p> <p>(IEP citation I.B.14.)</p>	70% of homes licensed beginning November 1, 2010, will have been approved, and interested Parties will have been notified within 150 days.	82% of foster homes licensed between January – June 2018 received their license within 150 days.	62% of foster homes licensed between July 2018 – February 2019 received their license within 150 days. ^{65, 66}	No
<p>25. <u>Legal Action to Free Children for Adoption</u>: Children with a permanency goal of adoption shall have legal action initiated to free them for adoption and Office of the Attorney General, on behalf of CFSA, shall facilitate the Court’s timely hearing and resolution of legal action to terminate parental rights.</p> <p>(IEP citation I.B.15.a.)</p>	For 90% of children with a permanency goal of adoption, where freeing the child for adoption is necessary and appropriate to move the child more timely to permanency, OAG, on behalf of CFSA shall file a motion to terminate parental rights or confirm that appropriate legal action has been taken within 45 days of their permanency goal becoming adoption.	100%	95% ⁶⁷	Yes

⁶⁵ CFSA licensed 81 foster homes between July 2018 and February 2019; 50 (62%) of the homes were licensed within the required time frame or are considered compliant due to circumstances beyond the District’s control that resulted in the licensure process taking longer than 150 days (16 homes).

⁶⁶Due to shortened report timeline, March 2019 data were not available for inclusion in this report. Reported performance includes data for July 2018 through February 2019.

⁶⁷ There were a total of 78 applicable children who required legal action to free them for adoption, and 74 (95%) had legal action to free them within 45 days.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>26. <u>Legal Action to Free Children for Adoption</u>: Children with a permanency goal of adoption shall have legal action initiated to free them for adoption and Office of the Attorney General, on behalf of CFSA, shall facilitate the Court’s timely hearing and resolution of legal action to terminate parental rights.</p> <p>(IEP citation I.B.15.b.)</p>	For 90% of children for whom a petition to terminate parental rights has been filed in order to achieve permanency, CFSA shall take and document appropriate actions by the assigned social worker and the assistant attorney general to facilitate the Court’s timely hearing and resolution of legal action to terminate parental rights.	100%	100%	Yes
<p>27. <u>Timely Adoption</u>: Children with a permanency goal of adoption shall be in an approved adoptive placement within nine months of their goal becoming adoption.</p> <p>(IEP citation I.B.16.a.i.)</p>	For children whose permanency goal changed to adoption July 1, 2010 or thereafter, 80% will be placed in an approved adoptive placement by the end of the ninth month from when their goal changed to adoption.	82%	83% ⁶⁸	Yes

⁶⁸ During the monitoring period, 59 of 71 applicable children were placed in an approved adoptive placement by the end of the ninth month from when their goal changed to adoption.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>31. <u>Timely Adoption</u>: CFSA shall make all reasonable efforts to ensure that children placed in an approved adoptive home have their adoptions finalized within 12 months of the placement in the approved adoptive home.</p> <p>(IEP citation I.B.16.b.iii.)</p>	<p>90% of children in pre-adoptive homes will have their adoption finalized within 12 months or have documented reasonable efforts to achieve permanence within 12 months of the placement in the approved adoptive home.</p>	<p>From January – June 2018, 100% of adoptions were completed or reasonable efforts were made to complete adoptions within 12 months of the child being placed in a pre-adoptive home.</p>	<p>From July 2018 – March 2019, 97% of adoptions were completed or reasonable efforts were made to complete adoptions within 12 months of the child being placed in a pre-adoptive home.⁶⁹</p>	<p>Yes</p>
<p>34. <u>Placement Licensing</u>: Children shall be placed in foster homes and other placements that meet licensing and other MFO placement standards and have a current and valid license.</p> <p>(IEP citation I.B.18.)</p>	<p>95% of foster homes and group homes with children placed will have a current and valid license.</p>	<p>Monthly range of 93 – 97% of foster and group homes with current and valid license</p>	<p>Monthly range of 95 – 98% of foster and group homes with current and valid license</p>	<p>Yes</p>

⁶⁹ CFSA reports that 67 adoptions were finalized this monitoring period. Of those 67, 42 adoptions were finalized within 12 months and reasonable efforts were made to finalize an additional 23 adoptions. Reasonable efforts were not made in the remaining 2 adoptions.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>35. <u>Community-Based Service Referrals for Low & Moderate Risk Families:</u></p> <p>(IEP citation I.C.19.)</p>	<p>90% of families who have been the subject of a report of abuse and/or neglect, whose circumstances are deemed to place a child in their care at low or moderate risk of abuse and neglect and who are in need of and agree to additional supports shall be referred to an appropriate Collaborative or community agency for follow-up. Low and moderate risk cases for which CFSA decides to open an ongoing CFSA case are excluded from this requirement.</p>	<p>61% of families in June 2018 with a closed CPS investigation or FA with a low or moderate risk level who were in need of and agreed to services were referred for services.</p>	<p>59% of families in February 2019 with a closed CPS investigation or FA with a low or moderate risk level who were in need of and agreed to services were referred for services.⁷⁰</p>	No
<p>36. <u>Sibling Placement and Visits:</u> Children in out-of-home placement who enter foster care with their siblings should be placed with some or all of their siblings, unless documented that the placement is not appropriate based on safety, best interest needs of child(ren) or a court order requiring separation.</p> <p>(IEP citation I.C.20.a.)</p>	<p>80% of children who enter foster care with their siblings or within 30 days of their siblings will be placed with some of their siblings.</p>	<p>85% of children placed between January – June 2018 with their sibling or within 30 days of their siblings were placed with at least some of their siblings.</p>	<p>80% of children placed between October 2018 – March 2019 with their sibling or within 30 days of their siblings were placed with at least some of their siblings.⁷¹</p>	Yes

⁷⁰ The Monitor collected performance data for this measure through a review of a statistically significant sample of families with a closed CPS investigation or FA in February 2019, whose circumstances were assessed to place a child in their care at low or moderate risk of abuse or neglect. A total of 148 cases were reviewed, representing a sample with a $\pm 5\%$ margin of error with 95% confidence in its results; 44 referrals were determined to be applicable to this measure, and in 26 of those referrals, the family was connected to a community-based service provider.

⁷¹ CFSA also provided data for all children in care at a point in time (not limited to those who entered care between October 2018 and March 2019) for this Exit Standard. As of March 31, 2019, 75% of children currently in foster care who entered care with their siblings or within 30 days of their siblings were placed with 1 or more sibling.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>37. <u>Sibling Placement and Visits</u>: Children placed apart from their siblings should have at least twice monthly visitation with some or all of their siblings unless documented that the visitation is not in the best interest of the child(ren).</p> <p>(IEP citation I.C.20.b.)</p>	<p>80% of children shall have monthly visits with their separated siblings and 75% of children shall have twice monthly visits with their separated siblings.</p>	<p>Monthly range of 87 – 92% with at least monthly visits</p> <p>Monthly range of 78 – 87% with at least twice monthly visits</p>	<p>Monthly range of 90 – 95% with at least monthly visits</p> <p>Monthly range of 86 – 92% with at least twice monthly visits</p>	Yes
<p>39. <u>Health and Dental Care</u>: Children in foster care shall have a health screening prior to placement.</p> <p>(IEP citation I.C.22.a.)</p>	<p>95% of children in foster care shall have a health screening prior to an initial placement or re-entry into care.</p> <p>90% of children in foster care who experience a placement change shall have a replacement health screening.</p>	<p>Initial and re-entries: monthly range of 94 – 100% with health screening</p> <p>Replacements: monthly range of 81 – 94% with health screening</p>	<p>Initial and re-entries: monthly range of 89 – 100% with health screening⁷²</p> <p>Replacements: monthly range of 85 – 96% with health screening⁷³</p>	Yes ⁷⁴

⁷² Monthly performance data for initial and re-entry health screenings are as follows: July 2018, 89%; August 2018, 100%; September 2018, 97%; October 2018, 96%; November 2018, 96%; December 2018, 97%; January 2019, 97%; February 2019, 97%; March 2019, 97%.

⁷³ Monthly performance data for replacement health screenings are as follows: July 2018, 85%; August 2018, 88%; September 2018, 88%; October 2018, 88%; November 2018, 92%; December 2018, 90%; January 2019, 91%; February 2019, 96%; March 2019, 89%.

⁷⁴ Performance for this period fell slightly below the 90% target in 5 of the 9 months this period. The Monitor considers this deviation to be insubstantial and this Exit Standard to be Maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>40. <i>Health and Dental Care</i>: Children in foster care shall receive a full medical evaluation within 30 days of placement.</p> <p>(IEP citation I.C.22.b.i.)</p>	<p>85% of children in foster care shall receive a full medical evaluation within 30 days of placement.</p> <p>95% of children in foster care shall receive a full medical evaluation within 60 days of placement.</p>	<p>Within 30 days: monthly range of 85 – 98% with full medical evaluation</p> <p>Within 60 days: monthly range of 96 – 100% with full medical evaluation</p>	<p>Within 30 days: monthly range of 89 – 95% with full medical evaluation</p> <p>Within 60 days: monthly range of 95 – 99% with full medical evaluation</p>	Yes
<p>41. <i>Health and Dental Care</i>: Children in foster care shall receive a full dental evaluation within 30 days of placement.</p> <p>(IEP citation I.C.22.b.ii.)</p>	<p>25% of children shall receive a full dental evaluation within 30 days of placement.</p> <p>50% of children shall receive a full dental evaluation within 60 days of placement.</p> <p>85% of children shall receive a full dental evaluation within 90 days of placement.</p>	<p>Within 30 days: monthly range of 34 – 73% with full dental evaluation</p> <p>Within 60 days: monthly range of 63 – 89% with full dental evaluation</p> <p>Within 90 days: monthly range of 63 – 89% with full dental evaluation</p>	<p>Within 30 days: monthly range of 46 – 64% with full dental evaluation</p> <p>Within 60 days: monthly range of 71 – 82% with full dental evaluation</p> <p>Within 90 days: monthly range of 73 – 84% with full dental evaluation⁷⁵</p>	Partially ⁷⁶

⁷⁵ Monthly performance data for children with completed dental evaluations within 90 days of placement are as follows: July 2018, 73%; August 2018, 82%; September 2018, 81%; October 2018, 79%; November 2018, 81%; December 2018, 81%; January 2019, 84%; February 2019, 74%; March 2019, 75%.

⁷⁶ CFSA met the required level of performance each month for the sub-parts of this Exit Standard requiring dental evaluations within 30 and 60 days. For the sub-part that pertains to dental evaluations within 90 days, CFSA's performance was below the required level during each month. The Monitor considers this Exit Standard to be partially maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
42. <i>Health and Dental Care</i> : Children in foster care shall have timely access to health care services to meet identified needs. (IEP citation I.C.22.c.)	80% of cases reviewed through Quality Service Reviews (QSR) will be rated as acceptable.	CY2017 performance: 90% rated acceptable	CY2018 performance: 92% rated acceptable ⁷⁷	Yes
43. <i>Health and Dental Care</i> : CFSA shall ensure the prompt completion and submission of appropriate health insurance paperwork, and shall keep records of, e.g., Medicaid application dates, HMO severance dates and enrollment dates. CFSA shall provide caregivers with documentation of Medicaid coverage within 5 days of every placement and Medicaid cards within 45 days of placement. (IEP citation I.C.22.d.)	90% of children’s caregivers shall be provided with documentation of Medicaid coverage within 5 days of placement and Medicaid cards within 45 days of placement.	Monthly range of 98 – 100% of foster parents received the Medicaid number within 5 days of the child’s placement. Monthly range of 92 – 100% of foster parents received the Medicaid card within 45 days of the child’s placement.	Monthly range of 95 – 100% of foster parents received the Medicaid number within 5 days of the child’s placement. Monthly range of 79 – 100% of foster parents received the Medicaid card within 45 days of the child’s placement. ⁷⁸	Yes ⁷⁹

⁷⁷ Of the 83 cases reviewed through QSRs in CY2018 where the child was placed in foster care at the time of the review, 76 (92%) cases were rated as acceptable on *both* of the *Health Status* indicators.

⁷⁸ Monthly performance data for caregiver receipt of Medicaid card within 45 days of the child’s placement are as follows: July 2018, 100%; August 2018, 97%; September 2018, 89%; October 2018, 79%; November 2018, 94%; December 2018, 87%. CFSA is unable to provide data for January through March 2019 due to a change in personnel, which resulted in a disruption in CFSA’s tracking and data collection protocol necessary to assess performance on this Exit Standard.

⁷⁹ CFSA met the required level of performance for the sub-parts of this Exit Standard requiring distribution of Medicaid numbers to caregivers. For the sub-part that pertains to the distribution of Medicaid cards to caregivers within 45 days of a child’s placement, CFSA’s performance met the required level during 4 of the 6 months assessed. The Monitor considers this deviation to be temporary and insubstantial and this Exit Standard to be maintained.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>44. <i>Resource Development Plan</i>: The District shall implement the CFSA Resource Development Plan, which is to be developed by June 30 each year. The Resource Development Plan shall include all of the components listed in item 21b of the Outcomes to be Maintained section of the IEP.</p> <p>(IEP citation I.D.23.)</p>	<p>The District shall implement the CFSA Resource Development Plan, which is to be developed by June 30 each year. The Resource Development Plan shall include all of the components listed in Item 21b of “Outcomes to be Maintained” Needs Assessment and Resource Development Plan.</p>	<p>CFSA submitted a draft FY2018 Needs Assessment to the Monitor on August 1, 2018. The Monitor provided feedback on August 8, 2018. A revised Needs Assessment and Resource Development Plan were provided to the Monitor on October 1, 2018.</p>	<p>CFSA submitted a final Needs Assessment and Resource Development Plan to the Monitor on October 1, 2018. Select Implementation updates are discussed later in this report.</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>45. <u>Financial Support for Community-Based Services</u>: The District shall provide evidence of financial support for community- and neighborhood-based services to protect children and support families.</p> <p>(IEP citation I.D.24.)</p>	<p>The District shall provide evidence each year of financial support for community- and neighborhood-based services to protect children and support families.</p>	<p>The approved FY2019 budget includes \$16.2 million for community-based services as a result of the Title IV-E waiver which was supposed to end March 31, 2019. CFSA has received an extension and the waiver will now end September 30, 2019.</p>	<p>The proposed FY2020 budget includes a \$4.75 million in community-based, primary prevention services.⁸⁰ CFSA will continue to fund the Collaboratives at \$12.2 million.</p> <p>Additionally, in FY2020, CFSA will begin claiming Title IV-E reimbursement for specific, evidence-based prevention services provided to children and families.</p>	<p>Yes</p>

⁸⁰ The significant decrease in funding for community-based services is due to the ending of the Title IV-E Waiver, as discussed in *Section IV.F.7* of this report.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>46. <u>Caseloads:</u></p> <p>a. The caseload of each worker conducting investigations of reports of abuse and/or neglect shall not exceed the MFO standard, which is 1:12 investigations.</p> <p>b. The caseload of each worker providing services to children and families in which the child or children in the family are living in their home shall not exceed 1:15 families.</p> <p>c. The caseload of each worker providing services to children in placement, including children in Emergency Care and children in any other form of CFSA physical custody, shall not exceed 1:15 children for children in foster care.</p> <p>d. The caseload of each worker having responsibility for conducting home studies shall not exceed 30 cases.</p> <p>e. There shall be no cases unassigned to a social worker for more than five business days, in which case, the supervisor shall provide coverage but not for more than five business days.</p> <p>(IEP citation I.D.25.)</p>	<p>90% of investigators and social workers will have caseloads that meet the above caseload requirements. No individual investigator shall have a caseload greater than 15 cases. No individual social worker shall have a caseload greater than 18 cases. No individual worker conducting home studies shall have a caseload greater than 35 cases.</p>	<p>a. May and June 2018 performance ranged from 54 – 62%.</p> <p>b. & c. 99% of ongoing workers met the caseload requirements each month. No social worker had a caseload of more than 18.</p> <p>d. 80 – 100% of workers conducting home studies met required performance of</p>	<p>a. Monthly range of 63 – 100%⁸¹ of CPS workers met the caseload requirement. Up to 2 workers exceeded 15 referrals at any time during the month.</p> <p>b. & c. Monthly range of 98 – 100% of ongoing workers met the caseload requirements each month. No social worker had a caseload of more than 18.</p> <p>d. 100% of workers conducting home studies met required performance of no</p>	<p>Partially</p>

⁸¹ Monthly performance data for caseloads of CPS workers are as follows: July 2018, 88%; August 2018, 100%; September 2018, 99%; October 2018, 93%; November 2018, 96%; December 2018, 85%; January 2019, 83%; February 2019, 63%; March 2019, 65%.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
		no greater than 30 cases. e. Monthly range of 9 – 26 cases (1 – 2% of total open cases) were unassigned to a social worker for more than 5 business days.	greater than 30 cases. e. Monthly range of 11 – 45 cases (1 – 3% of total open cases) were unassigned to a social worker for more than 5 business days. ⁸²	
<p>47. <u>Supervisory Responsibilities:</u></p> <p>a. Supervisors who are responsible for supervising social workers who carry caseloads shall be responsible for no more than six workers, including case aids or family support workers, or five caseworkers.</p> <p>i. Supervisors shall be responsible for no more than five social workers and a case aide or family support worker.</p> <p>(IEP citation I.D.26.a.i.)</p>	90% of supervisors shall be responsible for no more than five social workers and a case aide or family support worker.	Monthly range of 92 – 100% of supervisors met the required standard.	Monthly range of 93 – 98% of supervisors met the required standard.	Yes

⁸² Between July 2018 and March 2019, in addition to these unassigned cases, a monthly range of 8 to 30 ongoing in-home and permanency cases were assigned to investigative social workers, supervisors, program managers, and program administrators. This represents a slight increase from the previous monitoring period when the range was 9 to 26 cases. CFSA indicates that the investigator is responsible for working with the family and ensuring the child's safety until the joint home visit with the ongoing worker to transfer the case has occurred. The Monitor is unable to determine the length of time these ongoing cases remain on an investigator's caseload prior to transferring case management responsibilities to an ongoing worker.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>48. <u>Supervisory Responsibilities:</u> b. No supervisor shall be responsible for the on-going case management of any case. ii. Cases shall be assigned to social workers.</p> <p>(IEP citation I.D.26.b.ii.)</p>	95% of cases are assigned to social workers.	Monthly range of 94 – 97% of cases assigned to social workers.	Monthly range of 91 – 97% of cases assigned to social workers. ⁸³	Yes ⁸⁴
<p>49. <u>Training for New Social Workers:</u> New direct service staff⁸⁵ shall receive the required 80 hours of pre-service training through a combination of classroom, web-based and/or on-the-job training.</p> <p>(IEP citation I.D.27.a.)</p>	90% of newly hired CFSA and private agency direct service staff shall receive 80 hours of pre-service training.	100%	97%	Yes
<p>50. <u>Training for New Supervisors:</u> New supervisors shall complete a minimum of 40 hours of pre-service training on supervision of child welfare workers within eight months of assuming supervisory responsibility.</p> <p>(IEP citation I.D.27.b.)</p>	90% of newly hired CFSA and private agency supervisors shall complete 40 hours of pre-service training on supervision of child welfare worker within eight months of assuming supervisory responsibility.	75%	82% ⁸⁶	Partially

⁸³ Monthly performance data for cases assigned to social workers are as follows: July 2018, 95%; August 2018, 93%; September 2018, 92%; October 2018, 92%; November 2018, 93%; December 2018, 95%; January 2019, 93%; February 2019, 91%; March 2019, 97%.

⁸⁴ CFSA met the required level of performance for 3 of the 9 months assessed and never fell below 5 percent of the required level. The Monitor considers this deviation to be insubstantial and this Exit Standard to be maintained.

⁸⁵ Direct service staff includes social workers, nurse care managers, and family support workers who provide direct services to children, youth and families.

⁸⁶ Between July 2018 and March 2019, 9 of 11 supervisors to whom this Exit Standard was applicable completed pre-service training within 8 months.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>51. <u>Training for Previously Hired Social Workers</u>: Previously hired direct service staff⁸⁷ shall receive annually a minimum of 5 full training days (or a minimum of 30 hours) of structured in-service training geared toward professional development and specific core and advanced competencies.</p> <p>(IEP citation I.D.28.a.)</p>	80% of CFSA and private agency direct service staff shall receive the required annual in-service training.	88%	Not yet due ⁸⁸	N/A
<p>52. <u>Training for Previously Hired Supervisors and Administrators</u>: Supervisors and administrators shall receive annually a minimum of 24 hours of structured in-service training.</p> <p>(IEP citation I.D.28.b.)</p>	80% of CFSA and private agency supervisors and administrators who have casework responsibility shall receive annual in-service training.	91%	Not yet due ⁸⁹	N/A
<p>53. <u>Training for Foster Parents</u>: CFSA and contract agency foster parents shall receive a minimum of 15 hours of pre-service training.</p> <p>(IEP citation I.D.29.a.)</p>	95% of CFSA and contract agency foster parents shall receive a minimum of 15 hours of pre-service training.	97%	100%	Yes

⁸⁷ Twelve of the 30 hours required for the nurse care managers may be met with continuing education requirements of the licensing board.

⁸⁸ Data are collected annually based on a training schedule that begins July 1st and ends June 30th each year. Performance data will be included in the next monitoring report.

⁸⁹ Ibid.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>54. <i>Training for Foster Parents</i>: CFSA and contract agency foster parents shall receive 30 hours of in-service training every two years.</p> <p>(IEP citation I.D.29.b.)</p>	95% of foster parents whose licenses are renewed shall receive 30 hours of in-service training.	89%	88% ⁹⁰	No
<p>55. <i>Special Corrective Action</i>:</p> <p>a. CFSA shall produce accurate monthly reports, shared with the Monitor, which identify children in the following categories:</p> <ul style="list-style-type: none"> i. All cases in which a child has been placed in four or more different placements, with the fourth or additional placement occurring in the last 12 months and the placement is not a permanent placement; ii. All cases in which a child has had a permanency goal of adoption for more than one year and has not been placed in an adoptive home; iii. All children who have been returned home and have reentered care more than twice and have a plan of return home at the time of the report; iv. Children with a permanency goal of reunification for more than 18 months; v. Children placed in emergency facilities for more than 90 days; 	For 90% of children identified in corrective action categories, required reviews will occur and corrective action plans will be developed and implemented as appropriate.	<p>a. CFSA produces a monthly report that identifies cases of these children/families that have been flagged for discussion during applicable reviews.</p> <p>b. 100% of required special corrective action plans were developed this period.</p>	<p>a. CFSA produces a monthly report that identifies cases of these children/families that have been flagged for discussion during applicable reviews.</p> <p>b. 100% of required special corrective action plans were developed this period.</p>	Yes

⁹⁰ Due to shortened report timeline, March 2019 data were not available for inclusion in this report. Between July 2018 and February 2019, 216 foster parents had their license renewed and 190 (88%) foster parents completed the required in-service training hours.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>vi. Children placed in foster homes or facilities that exceed their licensed capacities or placed in facilities without a valid license;</p> <p>vii. Children under 14 with a permanency goal of APPLA; and</p> <p>viii. Children in facilities more than 100 miles from the District of Columbia.</p> <p>b. CFSA shall conduct a child-specific case review by the Director or Director’s designee(s) for each child identified and implement a child-specific corrective action plan, as appropriate.</p> <p>(IEP citation I.D.30.)</p>				
<p>56. <i>Performance-Based Contracting</i>: CFSA shall have in place a functioning performance-based contracting system that (a) develops procurements for identified resource needs, including placement and service needs; (b) issues contracts in a timely manner to qualified service providers in accordance with District laws and regulations; and (c) monitors contract performance on a routine basis.</p> <p>(IEP citation I.D.31.)</p>	<p>Evidence of functionality and ongoing compliance. Evidence of capacity to monitor contract performance on a routine basis.</p>	<p>CFSA monitors NCCF, congregate care providers, and other contracted community-based agencies on a regular basis. CFSA has specific measures of performance for each provider. CFSA provides feedback and corrective action plans are</p>	<p>CFSA monitors NCCF, congregate care providers, and other contracted community-based agencies on a regular basis. CFSA has specific measures of performance for each provider. CFSA provides feedback and corrective action plans are developed as</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
		developed as necessary based on findings from the monitoring.	necessary based on findings from the monitoring.	
<p>57. <i>Interstate Compact for the Placement of Children (ICPC)</i>: CFSA shall continue to maintain responsibility for managing and complying with the ICPC for children in its care.</p> <p>(IEP citation I.D.32.)</p>	Elimination of the backlog of cases without ICPC compliance.	CFSA reports there are no children placed without ICPC approval.	CFSA reports there are no children placed without ICPC approval.	Yes
<p>58. <i>Licensing Regulations</i>: CFSA shall have necessary resources to enforce regulations effectively for original and renewal licensing of foster homes, group homes and independent living facilities.</p> <p>(IEP citation I.D.33.)</p>	CFSA shall have necessary resources to enforce regulations effectively for original and renewal licensing of foster homes, group homes and independent living facilities.	CFSA reports 22 FTE positions for Foster Family and Facility Licensing and that all positions are filled.	CFSA reports 22 FTE positions for Foster Family and Facility Licensing and that all positions are filled.	

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>59. <u>Budget and Staffing Adequacy:</u> The District shall provide evidence that the Agency’s annual budget complies with Paragraph 7 of the October 23, 2000 Order providing customary adjustments to the FY 2001 baseline budget and adjustments to reflect increases in foster parent payments and additional staff required to meet caseload standards, unless demonstrated compliance with the MFO can be achieved with fewer resources.</p> <p>The District shall provide evidence of compliance with Paragraph 4 of the October 23, 2000 Order that CFSA staff shall be exempt from any District-wide furloughs and from any District-wide Agency budget and/or personnel reductions that may be otherwise imposed.</p> <p>(IEP citation I.D.34.)</p>	<p>The District shall provide evidence that the Agency’s annual budget complies with Paragraph 7 of the October 23, 2000 Order providing customary adjustments to the FY 2001 baseline budget and adjustments to reflect increases in foster parent payments and additional staff required to meet caseload standards, unless demonstrated compliance with the MFO can be achieved with fewer resources.</p>	<p>The actual FY2018 budget is \$221.3 million and includes 775 FTEs.</p>	<p>The approved FY2019 budget is \$224.2 million and includes 819 FTEs.</p> <p>The proposed FY2020 budget is \$220.2 million and includes 819 FTEs.</p> <p>CFSA continues to report the budget provides adequate funding for required staffing, services, and supports.</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>60. <i>Federal Revenue Maximization</i>: CFSA shall demonstrate compliance with Sections A and B of Chapter XVIII of the Modified Final Order concerning federal revenue maximization and financial development.</p> <p>(IEP citation I.D.35.)</p>	Evidence of consistent and appropriate claiming of all appropriate and available federal revenue.	CFSA continues to receive Title IV-E capped payments on a quarterly basis as part of the federal Title IV-E Waiver Demonstration Project and has maintained consistent levels of federal revenue. CFSA is claiming Medicaid for health care services provided through the Healthy Horizons Assessment Clinic.	<p>CFSA continues to maintain consistent levels of federal revenue through Title IV-E and Title XIX. In accordance with the FFPSA, CFSA submitted a Title IV-E Prevention Plan, which includes spending on select prevention services for FY2020.⁹¹</p> <p>CFSA is claiming Medicaid for health care services provided through the Healthy Horizons Assessment Clinic.</p>	Yes

⁹¹ The Family First Prevention Services Act (FFPSA) was passed February 2018 as part of the Bipartisan Budget Act. Under FFPSA, states will be able to claim Title IV-E reimbursement for mental health, substance use, and in-home parent skill-based programs that are identified as well-supported, supported, or promising practices. CFSA will receive reimbursement for these services when they are provided to eligible children and families, which includes pregnant and parenting youth in foster care and children who are candidates for foster care.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>61. <u>Entering Reports Into Computerized System</u>: CFSA shall immediately enter all reports of abuse or neglect into its computerized information systems and shall use the system to determine whether there have been prior reports of abuse or neglect in that family or to that child.</p> <p>(IEP citation II.A.1.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
<p>62. <u>Maintaining 24 Hour Response System</u>: CFSA shall staff and maintain a 24-hour system for receiving and responding to reports of child abuse and neglect, which conforms to reasonable professional standards.</p> <p>(IEP citation II.A.2.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
<p>63. <u>Checking for Prior Reports</u>: Child abuse and/or neglect reports shall show evidence that the investigator checked for prior reports of abuse and/or neglect.</p> <p>(IEP citation II.A.3.)</p>	Ongoing Compliance	Ongoing Compliance	Ongoing compliance	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>64. <i>Reviewing Child Fatalities</i>: The District of Columbia, through the City-wide Child Fatality Committee, and an Internal CFSA Committee, shall conform to the requirements of the MFO regarding the ongoing independent review of child fatalities of members of the plaintiff class, with procedures for (1) reviewing child deaths; (2) making recommendations concerning appropriate corrective action to avert future fatalities; (3) issuing an annual public report; and (4) considering and implementing recommendations as appropriate.</p> <p>(IEP citation II.A.4.)</p>	Ongoing Compliance	<p>Internal Committee: The Committee reviewed 21 child fatalities between January - June 2018. The 2017 Child Fatality Annual Report was finalized in October 2018.⁹²</p> <p>City-wide Committee: The Committee reviewed 23 child fatalities between January and June 2018. The Committee voted to finalize its 2017 Annual Report on September 27, 2018.⁹³</p>	<p>Internal Committee: The Committee reviewed 32 child fatalities between July 2018 - March 2019. The 2018 Child Fatality Annual Report is in the process of being finalized.</p> <p>City-wide Committee: The Committee reviewed 73 infant and child fatalities between July and December 2018.</p>	Yes

⁹² CFSA's 2017 Child Fatality Report may be found at: https://cfsa.dc.gov/publications-list?keys=RPTS&type=79&sort_by=title&sort_order=ASC

⁹³ The 2017 City-wide Child Fatality Report may be found at: https://ocme.dc.gov/sites/default/files/dc/sites/ocme/agency_content/CFRC%20Annual%20Report-Web.pdf

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>65. <u>Investigations of Abuse and Neglect in Foster Homes and Institutions</u>: Reports of abuse and neglect in foster homes and institutions shall be comprehensively investigated; investigations in foster homes shall be completed within 35 days and investigations involving group homes, day care settings or other congregate care settings shall be completed within 60 days.</p> <p>(IEP citation II.A.5.)</p>	90% of reports of abuse and neglect in foster homes shall be completed within 35 days and within 60 days for investigations involving group homes, day care settings or other congregate settings.	Monthly performance was 100% every month	Monthly performance was 100% every month	Yes
<p>66. <u>Policies for General Assistance Payments</u>: CFSA shall have in place policies and procedures for appropriate use of general assistance payments for the care of children by unrelated adults, including provision of any applicable oversight and supervision.</p> <p>(IEP citation II.B.6.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
<p>69. <u>Timely Approval of Foster/Adoptive Parents</u>: CFSA should ensure training opportunities are available so that interested families may begin training within 30 days of inquiry.</p> <p>(IEP citation II.B.9.)</p>	Ongoing Compliance	Training opportunities were offered every month during the monitoring period.	Training opportunities were offered every month during the monitoring period except for December 2018.	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>70. <u>Placement within 100 Miles of the District</u>: No more than 82 children shall be placed more than 100 miles from the District of Columbia. (Children placed in college, vocational programs, correctional facilities, or kinship or pre-adoptive family-based settings under the ICPC shall be exempt from this requirement.)</p> <p>(IEP citation II.B.10.)</p>	Ongoing Compliance for no more than 82 children.	Monthly range of 10 – 13 children placed more than 100 miles from the District	Monthly range of 12 – 15 children placed more than 100 miles from the District	Yes
<p>71. <u>Licensing and Placement Standards</u>:</p> <p>a. Children shall be placed in foster homes and other placements that meet licensing and other MFO placement standards.</p> <p>b. Children in foster home placements shall be in homes that (a) have no more than three foster children or (b) have six total children including the family's natural children; (c) have no more than two children under two years of age or (d) have more than three children under six years of age. The sole exception shall be those instances in which the placement of a sibling group, with no other children in the home, shall exceed these limits.</p> <p>c. No child shall be placed in a group-care setting with a capacity in excess of eight (8) children without express written approval by the Director or designee based on written documentation that the child's needs can only</p>	Ongoing compliance for 95% of children.	<p>a. Monthly range of foster and group homes that met licensing and placement standards: 93 – 97%</p> <p>b. Monthly range of children over-placed in foster homes: 3 – 7%</p> <p>c. Children in group care settings with capacity in excess of 8 children: 0</p>	<p>a. Monthly range of foster and group homes that met licensing and placement standards: 95 – 98%</p> <p>b. Monthly range of children over-placed in foster homes: 1 – 4%</p> <p>c. Children in group care settings with capacity in excess of 8 children: 0</p>	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>be met in that specific facility, including a description of the services available in the facility to address the individual child's needs.</p> <p>d. Children shall not be placed in a foster care home or facility in excess of its licensed capacity. The sole exception shall be those instances in which the placement of a sibling group, with no other children in the home, shall exceed the limits.</p> <p>(IEP citation II.B.11.)</p>		d. No exceptions were provided for the children placed in excess of licensing capacity during this monitoring period.	d. No exceptions were provided for the children placed in excess of licensing capacity during this monitoring period.	
<p>72. <i>Case Planning Process</i>: Case plans shall be developed within 30 days of the child entering care and shall be reviewed and modified as necessary at least every six months thereafter, and shall show evidence of appropriate supervisory review of case plan progress.</p> <p>(IEP citation II.B.12.)</p>	90% of case plans shall be developed within 30 days of the child entering care and shall be reviewed and modified as necessary at least every six months thereafter.	Monthly range of 92 – 98%	Monthly range of 92 – 98%	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>73. <u>Appropriate Permanency Goals</u>: No child under the age of 12 shall have a permanency goal of legal custody with permanent caretakers unless he or she is placed with a relative who is willing to assume long-term responsibility for the child and who has legitimate reasons for not adopting the child and it is in the child's best interest to remain in the home of the relative rather than be considered for adoption by another person. No child under the age of 12 shall have a permanency goal of continued foster care unless CFSA has made every reasonable effort, documented in the record, to return the child home, to place the child with an appropriate family member, and to place the child for adoption, and CFSA has considered and rejected the possibility of the child's foster parents assuming legal custody as permanent caretakers of the child.</p> <p>(IEP citation II.B.13.)</p>	Ongoing Compliance	Ongoing Compliance	Ongoing Compliance ⁹⁴	Yes

⁹⁴ As of March 31, 2019, CFSA reports that 1 child under the age of 12 had the goal of APPLA. This child (age 6) is medically fragile and CFSA reports requires 24 hour hospitalization to ensure his medical stability and best quality of life given his extraordinary, complex medical needs.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>74. <i>Timely Adoption</i>: Within 95 days of a child’s permanency goal becoming adoption, CFSA shall convene a permanency planning team to develop a child-specific recruitment plan which may include contracting with a private adoption agency for those children without an adoptive resource.</p> <p>(IEP citation II.B.14.)</p>	For 90% of children whose permanency goal becomes adoption, CFSA shall convene a permanency planning team to develop a child-specific recruitment plan which may include contracting with a private adoption agency for those children without an adoptive resource.	79%	97% ⁹⁵	Yes
<p>75. <i>Post-Adoption Services Notification</i>: Adoptive families shall receive notification at the time that the adoption becomes final of the availability of post-adoption services.</p> <p>(IEP citation II.B.15.)</p>	Ongoing compliance for 90% of cases.	CFSA reports the Permanency Specialty Unit continues to have 3 social workers dedicated to providing case management and information and referrals to contracted therapeutic services for adoptive and guardianship families. CFSA	CFSA reports the Permanency Specialty Unit continues to have 3 social workers dedicated to providing case management and information and referrals to contracted therapeutic services for adoptive and guardianship families. CFSA	Yes

⁹⁵ A total of 79 total children this monitoring period had their goal changed to adoption and required a child specific recruitment plan at the time of their goal change. Forty-three of the 79 children had a Letter of Intent completed or petition to adopt filed before the 95 days, and thus were no longer in need of a recruitment plan. Of the remaining 36 children, 35 had a planning meeting to develop a child-specific recruitment plan within 95 days.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
		reports information about both the CFSA unit and contracted services are sent to families within 60 days of achieving permanency	reports information about both the CFSA unit and contracted services are sent to families within 60 days of achieving permanency CFSA maintained 2 contracts for post-adoption services; CASE (current contract amount \$108,869) and Adoptions Together Post Permanency Family Center (\$648,100.46)	
76. <i>Family Court Reviews</i> : A case review hearing will be conducted in Family Court at least every six months for every child as long as the child remains in out-of-home placement, unless the child has received a permanency hearing within the past six months. (IEP citation II.D.16.)	Ongoing Compliance for 90% of cases.	As of June 30, 2018, 96% of applicable children had required judicial review.	As of March 31, 2019, 95% of applicable children had required judicial review.	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>77. <u>Permanency Hearings</u>: CFSA shall make every reasonable effort to ensure that children in foster care have a permanency hearing in Family Court no later than 14 months after their initial placement.</p> <p>(IEP citation II.D.17.)</p>	Ongoing compliance for 90% of cases.	Monthly range of 95 – 99% of children had a timely permanency hearing.	Monthly range of 90 – 97% of children had a timely permanency hearing.	Yes
<p>78. <u>Use of MSWs and BSWs</u>: Unless otherwise agreed, all social worker hires at CFSA shall have an MSW or BSW before being employed as trainees.</p> <p>(IEP citation II.E.18.)</p>	Ongoing compliance for all social work hires.	Ongoing compliance	Ongoing compliance	Yes
<p>79. <u>Social Work Licensure</u>: All social work staff shall meet District of Columbia licensing requirements to carry cases independently of training units.</p> <p>(IEP citation II.E.19.)</p>	Ongoing compliance for all social workers.	Ongoing compliance	Ongoing compliance	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>80. <u>Training for Adoptive Parents</u>: Adoptive parents shall receive a minimum of 30 hours of training, excluding the orientation process.</p> <p>(IEP citation II.F.20.)</p>	Ongoing compliance for 90% of adoptive parents.	97%	89% ⁹⁶	Yes ⁹⁷
<p>81. <u>Needs Assessment and Resource Development Plan</u>:</p> <p>a. CFSA shall complete a needs assessment every two years, which shall include an assessment of placement support services, to determine what services are available and the number and categories of additional services and resources, if any, that are necessary to ensure compliance with the MFO. The needs assessment shall be a written report. The needs assessment, including the report, shall be repeated every two years. CFSA shall provide evidence of adequate Resource Development capacity within the Agency, with sufficient staff and other resources to carry out MFO resource development functions.</p> <p>b. The District shall develop a Resource Development Plan, which shall be updated annually by June 30th of each year. The Resource Development Plan shall: (a) project the number of emergency placements, foster</p>	Ongoing Compliance	CFSA submitted a draft FY2018 Needs Assessment to the Monitor on August 1, 2018. The Monitor provided feedback on August 8, 2018. A revised Needs Assessment and Resource Development Plan was provided to the Monitor on October 1, 2018.	CFSA submitted a final Needs Assessment and Resource Development Plan to the Monitor on October 1, 2018. Select Implementation updates are discussed throughout in this report.	Yes

⁹⁶ Of the 89 foster and adoptive parents licensed between July and December 2018, 79 parents received 30 hours of training.

⁹⁷ The Monitor considers this deviation to be insubstantial and this Exit Standard to be maintained.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>homes, group homes, therapeutic foster homes and institutional placements that shall be required by children in CFSA custody during the upcoming year; (b) identify strategies to assure that CFSA has available, either directly or through contract, a sufficient number of appropriate placements for all children in its physical or legal custody; (c) project the need for community-based services to prevent unnecessary placement, replacement, adoption and foster home disruption; (d) identify how the Agency is moving to ensure decentralized neighborhood and community-based services; and (e) include an assessment of the need for adoptive families and strategies for recruitment, training and retention of adoptive families based on the annual assessment. The Plan shall specify the quantity of each category of resources and services, the time period within which they shall be developed and the specific steps that shall be taken to ensure that they are developed. CFSA shall then take necessary steps to implement this plan.</p> <p>(IEP citation II.G.21.)</p>				

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>83. <u>Quality Assurance</u>: CFSA shall have a Quality Assurance system with sufficient staff and resources to assess case practice, analyze outcomes and provide feedback to managers and stakeholders. The Quality Assurance system must annually review a sufficient number of cases to assess compliance with the provisions of the MFO and good social work practice, to identify systemic issues, and to produce results allowing the identification of specific skills and additional training needed by workers and supervisors.</p> <p>(IEP citation II.G.23.)</p>	Ongoing Compliance	<p>Ongoing compliance</p> <p>The QSR unit includes 8 full-time QSR reviewers, 2 dedicated administrative assistants, and a Program Manager.</p>	<p>Ongoing Compliance.</p> <p>The QSR unit has 5 full-time QSR reviewers, 2 dedicated administrative assistants, and 1 Program Manager. This unit also has 3 full-time staff who conduct Child and Family Service Reviews (CFSR) in response to the agency PIP with the Administration for Children and Families (ACF).</p>	Yes
<p>84. <u>Maintaining Computerized System</u>:</p> <p>a. CFSA shall develop and maintain a unitary computerized information system and shall take all reasonable and necessary steps to achieve and maintain accuracy.</p> <p>b. CFSA shall provide evidence of the capacity of FACES.NET Management Information System to produce appropriate, timely, and accurate worker/supervisor reports and other management reports that shall assist the Agency</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
in meeting goals of safety, permanency and well-being and the requirements of the MFO and court-ordered Implementation and Exit Plan. (IEP citation II.H.24.)				
85. <u>Contracts to Require the Acceptance of Children Referred</u> : CFSA contracts for services shall include a provision that requires the provider to accept all clients referred pursuant to the terms of the contract, except for a lack of vacancy. (IEP citation II.H.25.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
86. <u>Provider Payments</u> : CFSA shall ensure payment to providers in compliance with DC's Quick Payment Act for all services rendered. (IEP citation II.H.26.)	90% of payments to providers shall be made in compliance with DC's Quick Payment Act for all services rendered.	Monthly range of 80 – 95%	Monthly range of 87 – 98% ^{98,99}	Yes

⁹⁸ Due to shortened report timeline, March 2019 data were not available for inclusion in this report. Reported performance includes July 2018 through February 2019 performance.

⁹⁹ Monthly performance for timely provider payments are as follows: July 2018, 93%; August 2018, 87%; September 2018, 91%; October 2018, 94%; November 2018, 98%; December 2018, 97%; January 2019, 97%; February 2019, 90%.

Table 2: Outcomes to be Maintained				
Implementation and Exit Plan Requirement	Exit Standard	January - June 2018 Performance	July 2018 – March 2019 Performance ⁵¹	Exit Standard Maintained
<p>87. <u>Foster Parent Board Rates</u>: There shall be an annual adjustment at the beginning of each fiscal year of board rates for all foster and adoptive homes to equal the USDA annual adjustment to maintain rates consistent with USDA standards for costs of raising a child in the urban south.</p> <p>(IEP citation II.H.27.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance ¹⁰⁰	Yes
<p>88. <u>Post-Adoption Services</u>: CFSA shall make available post-adoption services necessary to preserve families who have adopted a child committed to CFSA.</p> <p>(IEP citation II.H.28.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing Compliance ¹⁰¹	Yes

¹⁰⁰ CFSA readjusted its foster parent board rate in CY2018 as part of the Temporary Safe Haven Redesign; the standard daily foster home rate beginning January 1, 2018 is \$38. Higher rates are provided for youth in Special Opportunities for Youth (SOY) homes, youth who are teen parents and placed with their child(ren), and children who are determined to meet a difficulty of care standard due to severe developmental and/or behavioral challenges.

¹⁰¹ CFSA reports for FY2018, the adoption subsidy budget amount is \$18,361,084 and the guardianship subsidy budget amount is \$10,599,875. For FY2019, the adoption subsidy budget amount is \$16,799,191 and the guardianship subsidy budget amount is \$9,458,243.

IV. DISCUSSION OF *LASHAWN A. v. BOWSER* IMPLEMENTATION AND EXIT PLAN PERFORMANCE

A. GOAL: CHILD SAFETY

In this section of the report, the Monitor examines CFSA's performance on responses to allegations of child abuse and/or neglect through its 24-hour Hotline and child protective services (CPS) investigations and Family Assessments (FA).

Three IEP Exit Standards that have not been achieved pertain to CPS practice, specifically: (1) timely initiation of CPS investigation and FAs, (2) timely completion and closure of investigations, and (3) the quality of investigations and FAs. Performance data reflect improvements this period for all three Exit Standards, however, not to the level required by the IEP.

1. Hotline

CFSA maintains a 24-hour, seven-day-a-week Hotline to screen reports of alleged child abuse and neglect in the District of Columbia made by mandated reporters, family members, and others in the community. Since 2011, and up until April 2019, CFSA utilized a Differential Response (DR) system to determine the appropriate response to referrals using one of the following pathways: (1) screen out or no action required because the referral does not include an allegation of abuse or neglect, the alleged victim is age 18 or older, the alleged child victim resides outside of the District of Columbia, or the alleged perpetrator is not a parent, guardian, or custodian¹⁰²; (2) initiate a CPS investigation; (3) initiate a CPS FA¹⁰³, or (4) Information and Referral (I&R)¹⁰⁴. These determinations are made either by Hotline staff at the time the referral is received using the Hotline Structured Decision Making (SDM) tool or after consultation in the Hotline R.E.D. Team¹⁰⁵, which includes participation from multidisciplinary staff who meet every weekday.

CFSA has made several policy and procedural changes within Entry Services during this monitoring period. As of April 1, 2019, CFSA has ceased using FA as a response to Hotline reports

¹⁰² In the summer of 2017, the District passed the Child Neglect and Sex Trafficking Amendment Act of 2017 (D.C. Law 22-7, 64 DCR 5302) which broadened the definition of neglected and abused child to include victims of sex trafficking. Their perpetrators are not limited to a parent, guardian, or custodian.

¹⁰³ Family Assessment (FA) response is utilized consistent with District law (DC Code Section 4-1301.04) and is designed for families for whom a Hotline report has been made but with no identified significant safety concerns. For these families, instead of a CPS investigation, CFSA uses a strength-based, family-centered assessment process to support families in identifying needs and accessing services. In every FA, a safety assessment is mandatory and part of the initial response. If the safety assessment identifies immediate concerns, CFSA reports the FA is converted to a CPS investigation. If there are no immediate safety concerns identified, an assessment is conducted and families are engaged and encouraged to develop a family agreement for receipt of services.

¹⁰⁴ Information and Referral is the pathway for requests from other jurisdictions and information or reports outside the parameters of CFSA involvement. Some examples include request by another jurisdiction for a courtesy interview; notice of a foster child running away, return from running away, or curfew violation; or non-CPS assaults.

¹⁰⁵ The Hotline R.E.D. Team (Review, Evaluate, Direct) process and decision-making framework requires workers and supervisors to work collaboratively to systematically review the allegations, family and case history, and family strengths and needs.

and now responds to all screened-in reports of child abuse or neglect with a CPS investigation.¹⁰⁶ In coming to this decision, CFSA's leadership reviewed quantitative and qualitative data on outcomes of FA practice, and considered how the voluntary nature of FA pathway impacted the number of families who elected to participate in needed services. CFSA's investigative practice will seek to incorporate the strengths of the FA model, with a strong focus on engaging parents and family supports from the start and throughout an investigation. Additionally, as a way to support the District's overall efforts to improve school attendance and prevent educational neglect, CFSA is implementing a strategy to create a social work unit dedicated to accepted educational neglect referrals and assigning Family Support Workers and social workers to a cluster of schools to serve as a point of contact in supporting families who present with educational neglect concerns. CFSA is also working to improve its approach to investigating abuse in institutional settings. Efforts include revamping the screening and decision-making process; improving joint investigations with other District agencies, such as the Metropolitan Police Department; and enhancing internal agency collaboration during investigations involving foster homes.

Table 3 below shows the number of calls the Hotline received between July 2018 and March 2019 and specifies the DR pathway selected for each referral. The volume of calls to the Hotline this monitoring period ranged between 1,068 and 2,153 a month, with a total of 14,112 calls during the nine month monitoring period. An average of 26 percent of Hotline calls received during the period were accepted for an investigation or linked¹⁰⁷ to a current investigation, and an average of 19 percent of Hotline calls were accepted for a FA or linked to a current FA (beginning April 2019, all of those calls would be accepted for investigation). Finally, an average of three percent of calls were designated as I&R, and a monthly range of 43 to 62 percent of calls were screened out at the Hotline or after a Hotline R.E.D. Team review.

¹⁰⁶ As this change did not take effect until after the monitoring period, performance data discussed in this section include FA practice.

¹⁰⁷ "Linked" indicates that the agency already had an open investigation or FA and the new referral was linked to the currently opened referral.

**Table 3: Calls to the Child Abuse and Neglect Hotline by Differential Response Pathway
July 2018 – March 2019**

Month	Total	Information and Referral (I&R)	Investigation		Family Assessment (FA)		Screened Out by Hotline or Hotline R.E.D. Team
		Accepted	Accepted	Linked	Accepted	Linked	
Jul 2018	1,074	57 (5%)	284 (26%)	35 (3%)	181 (17%)	9 (1%)	508 (47%)
Aug 2018	1,068	41 (4%)	301 (28%)	42 (4%)	215 (20%)	13 (1%)	456 (43%)
Sept 2018	1,390	54 (4%)	381 (24%)	53 (4%)	259 (19%)	13 (1%)	630 (45%)
Oct 2018	1,638	62 (4%)	387 (24%)	70 (4%)	321 (20%)	24 (1%)	774 (47%)
Nov 2018	1,500	44 (3%)	349 (23%)	46 (3%)	334 (23%)	25 (2%)	702 (45%)
Dec 2018	1,561	32 (2%)	325 (21%)	46 (3%)	265 (17%)	15 (1%)	878 (56%)
Jan 2019	1,757	32 (2%)	373 (21%)	40 (2%)	312 (18%)	9 (1%)	991 (56%)
Feb 2019	1,971	43 (2%)	361 (18%)	47 (2%)	328 (17%)	24 (1%)	1,168 (59%)
March 2019	2,153	53 (2%)	407 (19%)	64 (3%)	283 (13%)	15 (1%)	1,331 (62%)
Total	14,112	418 (3%)	3,168 (22%)	443 (3%)	2,498 (18%)	147 (1%)	7,438 (53%)

Source: CFSA Administrative Data, FACES.NET report INT003

* Percentages may not equal 100% due to rounding.

2. Child Protective Services Caseloads

CPS social workers are in most instances the first to respond to allegations of abuse and/or neglect from the community. Social workers have a responsibility to first ensure the safety of the child(ren) and then engage the family and collaterals to assess the current situation, determine if the allegations are substantiated, if referrals for services are needed, or if an open in-home or foster care case is necessary to ensure the ongoing safety and well-being of the child(ren).

Staff retention and turnover issues occur in all child welfare systems, and frontline CPS staff are particularly impacted due to the stress of the work and secondary trauma. On December 31, 2018, there were six vacant CPS social worker positions, which CFSA reports were all filled as of February 4, 2019. As of April 15, 2019, there were seven vacant CPS social worker positions.

CFSA reports five candidates have been identified for these positions, and expect to have all positions filled by June 2019.

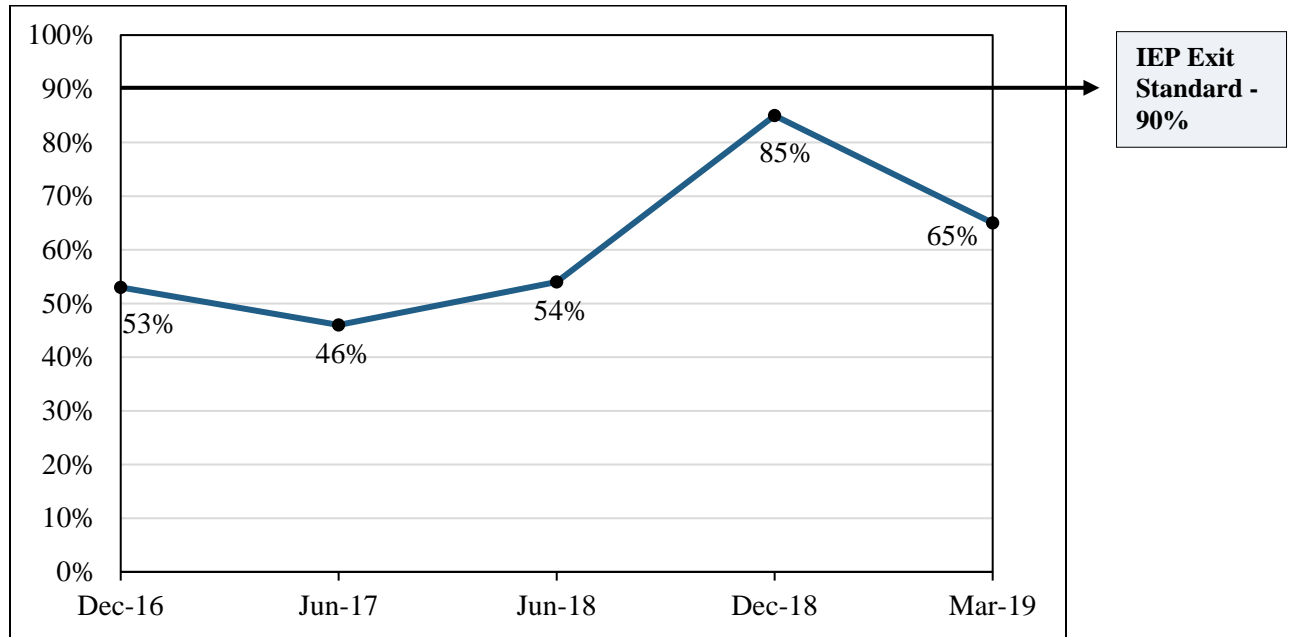
In measuring performance with the IEP caseload standards for CPS, the Monitor analyzes data for both investigative and FA worker caseloads together, as all of these workers are responsible for the District's CPS response. During the last monitoring period due to concerns with the accuracy of the data, the Monitor was only able to validate caseload data for two months (May and June 2018). CFSA reports, and the Monitor has verified through its current monitoring, that the identified issues have been resolved. The Monitor was able to validate caseload data for July 2018 through March 2019, as is discussed in this section.¹⁰⁸

While caseloads were within the required level during the first half of the monitoring period, caseloads increased substantially during the second half of the monitoring period; the Monitor considers the caseload Exit Standard, which also includes ongoing worker caseloads that is discussed later in this report, to be partially maintained.

IEP Requirement	<p>46. <u>Caseloads</u>:</p> <p>a. The caseload of each worker conducting investigations of reports of abuse and/or neglect shall not exceed the MFO standard, which is 1:12 investigations.</p> <p>(IEP citation I.D.25.a.)</p>
Exit Standard	<p>90% of investigators and social workers will have caseloads that meet the above caseload requirements. No individual investigator shall have a caseload greater than 15 cases.</p>

¹⁰⁸ Beginning in December 2016, the Monitor analyzes the data and reports on each worker's caseload based on the number of referrals they are assigned each day throughout the month. A worker is considered to be in compliance only if their caseload meets the required level and does not exceed 12 referrals at any time during the month.

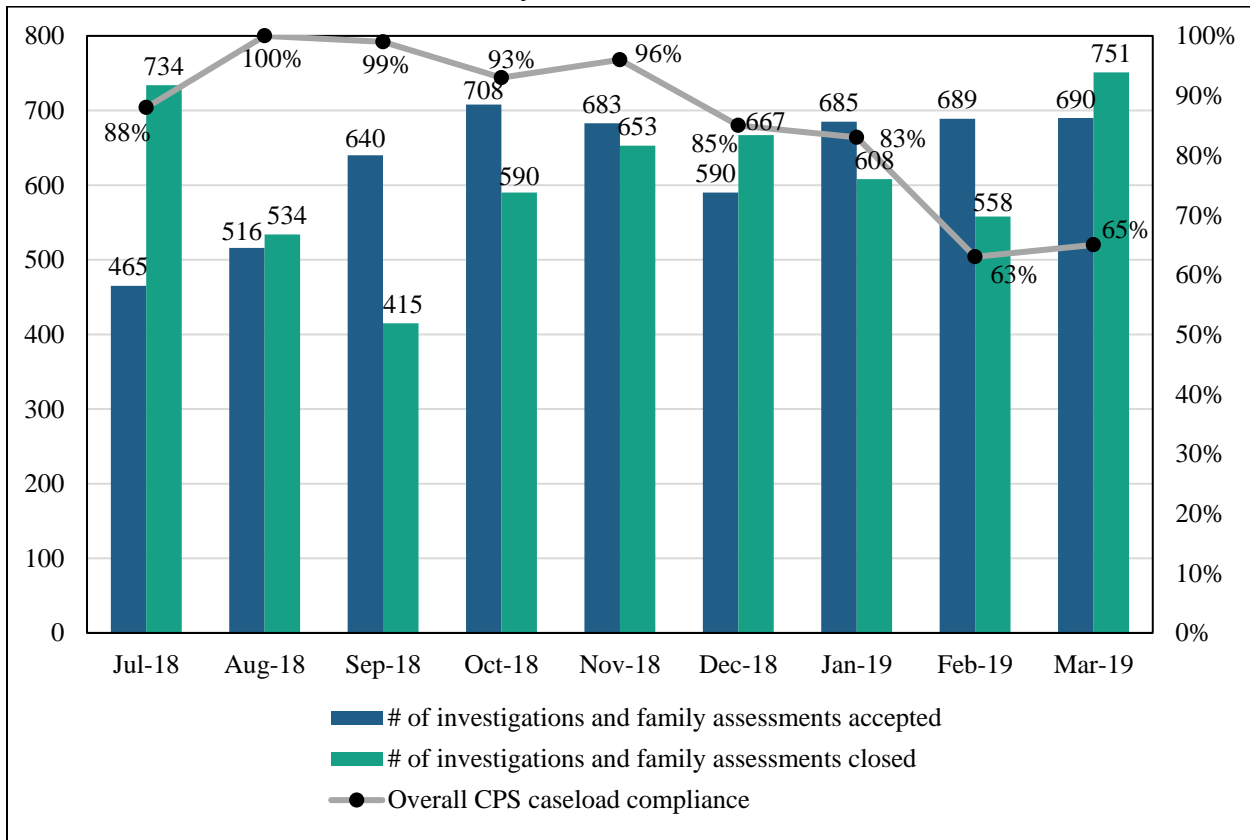
**Figure 1: Percentage of CPS Workers who Met Exit Standard Requirement for Caseloads
December 2016 – March 2019 ¹⁰⁹**



Source: CFSA Administrative Data, FACES.NET report INV145

¹⁰⁹ Data reported as of December 2015 and prior were based on a point-in-time analysis, pulling caseload data from the last day of each month and analyzing each worker's caseload on that day. As the methodology for reporting performance has changed, historical data from December 2015 and earlier are not included in this Figure. Due to identified concerns in the way caseloads were managed and captured in FACES.NET, beginning in December 2016, the Monitor utilizes a methodology to analyze each worker's caseload throughout the entire month in order to obtain a more accurate reflection of caseloads. From December 2016 onward, the Monitor also analyzes investigative and FA worker caseloads together as they both fall under CPS. Data are not reported for December 2017 due to concerns with the accuracy of the data provided to the Monitor.

**Figure 2: Monthly Workflow of Investigations and Family Assessments Accepted and Closed and Worker Caseload Compliance
July 2018 – March 2019**



Source: CFSA Administrative Data, FACES.NET reports INT003, INV004, INV140, INV145

Performance for the period July 1, 2018 through March 31, 2019:

Between July 2018 and March 2019, 63 to 100 percent of CPS workers had caseloads of 12 or fewer referrals each month (see Figure 2 and 3). Figure 2 also shows the number of referrals that were opened each month, closed each month, and overall caseload compliance. CFSA has long struggled to maintain caseloads at the level required by the IEP. In August 2018, an additional CPS unit was added and staffed to accept referrals. While caseload data for July through November 2018 met the level required by the IEP, caseloads once again began to rise in December 2018 and were out of compliance from December 2018 through March 2019. Specifically in December 2018, 85 percent of all workers had a caseload of 12 or fewer cases and one worker was responsible for managing more than 15 referrals.¹¹⁰ In March 2019, only 65 percent of workers met the required caseload standard of 12 or fewer referrals and two workers were responsible for more than 15 referrals for one day during the month.^{111,112}

¹¹⁰ This worker was within the FA administration and responsible for over 15 referrals for 5 days during the month.

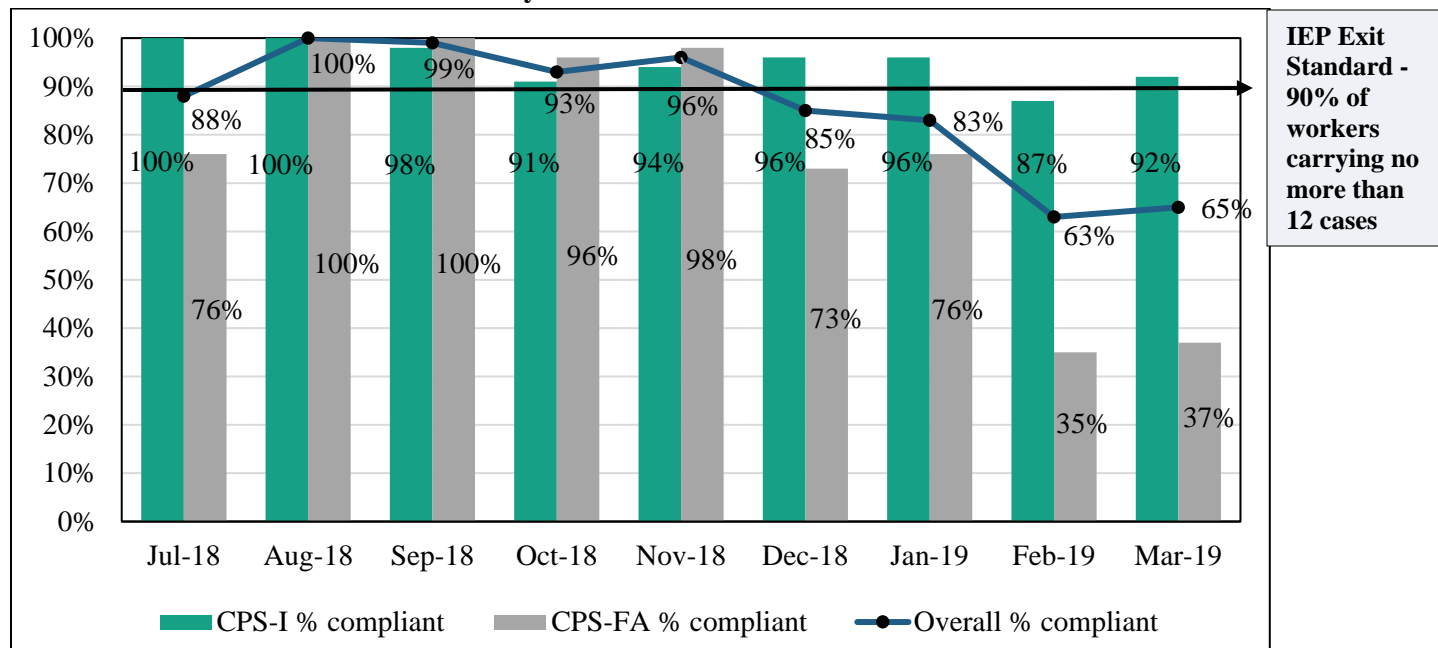
¹¹¹ Both of these workers were within the FA administration.

¹¹² During the monitoring period, a range of 3 to 16 supervisors were assigned at least 1 referral for 1 day at any time during the month. CFSA reports that these referrals are only kept in supervisors' boxes and shown as their case responsibility for the elapsed

Every day there a number of referrals that are designated as “in-transfer” from the Hotline to CPS. These referrals may remain “in-transfer” for one or two days depending on when the referral is accepted at the Hotline. For example, there are typically more referrals designated as “in-transfer” over the weekend and holidays. Previously, the Monitor was concerned that these referrals were inaccurately designated in FACES.NET as “in-transfer” but in reality were assigned to a worker. Based on review of the data (daily caseload counts, the number of referrals “in- transfer” on a daily basis, and the patterns in fluctuation in the number of “in-transfer referrals”), the Monitor believes that inaccurate designations are not occurring. During the current monitoring period, the number of referrals designated as “in-transfer” peaked in December 2018 and ranged from 10 to 71 referrals on any given day. In March 2019, the number of referrals designated as “in-transfer” ranged from 19 to 44 referrals on any given day.

The CPS caseload data below are disaggregated by type of worker – investigative worker and FA worker. As discussed earlier in this section, during the current monitoring period, CFSA made the decision to end Differential Response with an implementation date beginning April 1, 2019. During this period, however, CFSA began the caseload transition by assigning one unit both FAs and investigations. Workers in this unit, while designated as FA workers for purposes of data validation, were responsible for mixed caseloads in the first quarter of 2019.

**Figure 3: CPS (Investigation and FA) Workers with Compliant Caseloads
July 2018 – March 2019**



Source: CFSA Administrative Data, FACES.NET INV145

time when they are assigned and transferred to workers. The Monitor does not believe CFSA is currently manipulating caseload data by leaving cases in supervisor’s boxes to artificially depress worker’s caseloads, but rather that this reflects expected and routine practice. The Monitor continues to look at the number of cases in this transfer status and for how long they remain in transfer to validate this.

Investigative Caseloads

Caseloads for workers conducting investigations were substantially lower than caseloads for FA workers (see Figure 3). During the monitoring period, performance ranged from 87 to 100 percent of investigative workers with 12 or fewer referrals and at no time during the monitoring period was an investigative worker responsible for more than 15 referrals at a time.

Family Assessment Caseloads

Caseloads for FA workers continue to raise concern as many more FA workers carried high caseloads during the monitoring period. Between July 2018 and March 2019, FA worker caseloads ranged from 35 to 100 percent compliant, only meeting the required level of performance during three of the nine months assessed. Caseloads were extremely high in February (35% of workers met the caseload standard) and March 2019 (37% of workers met the caseload standard). Additionally, between December 2018 and February 2019, one worker was responsible for carrying more than 15 referrals for at least one day, and in March 2019, two workers were responsible for carrying more than 15 referrals for at least one day. CFSA reports that an increase in educational neglect referrals to the Hotline contributed to an increase in FA caseloads.

3. Investigations and Family Assessments

Referrals that allege serious safety concerns for children, including child fatality, suspected sex abuse, or allegations that a child is at imminent risk for or has experienced abuse or neglect that is severe, require a CPS investigation even under the DR protocol.¹¹³ As part of an investigation, the IEP and CFSA policy require workers to:

- initiate an investigation immediately or within 48 hours of the referral to the Hotline¹¹⁴ or document good faith efforts to initiate the investigation when the alleged victim child(ren) cannot be immediately located (IEP citation I.A.1.a.);
- complete the investigation and enter the final report of findings into FACES.NET within 35 days of the referral to the Hotline (IEP citation I.A.1.b.);
- comprehensively review family history for families who are subject to a new investigation for whom the current report of child maltreatment is the fourth or greater report with the most recent report occurring within the last 12 months (IEP citation I.A.1.c.)¹¹⁵;
- conduct investigations of acceptable quality (IEP citation I.A.2.); and

¹¹³ DC Code Section 4-1301.04.

¹¹⁴ DC law requires that an investigation be initiated as soon as possible and at least within 24 hours of receipt of the report (DC Code Section 4-1301.04).

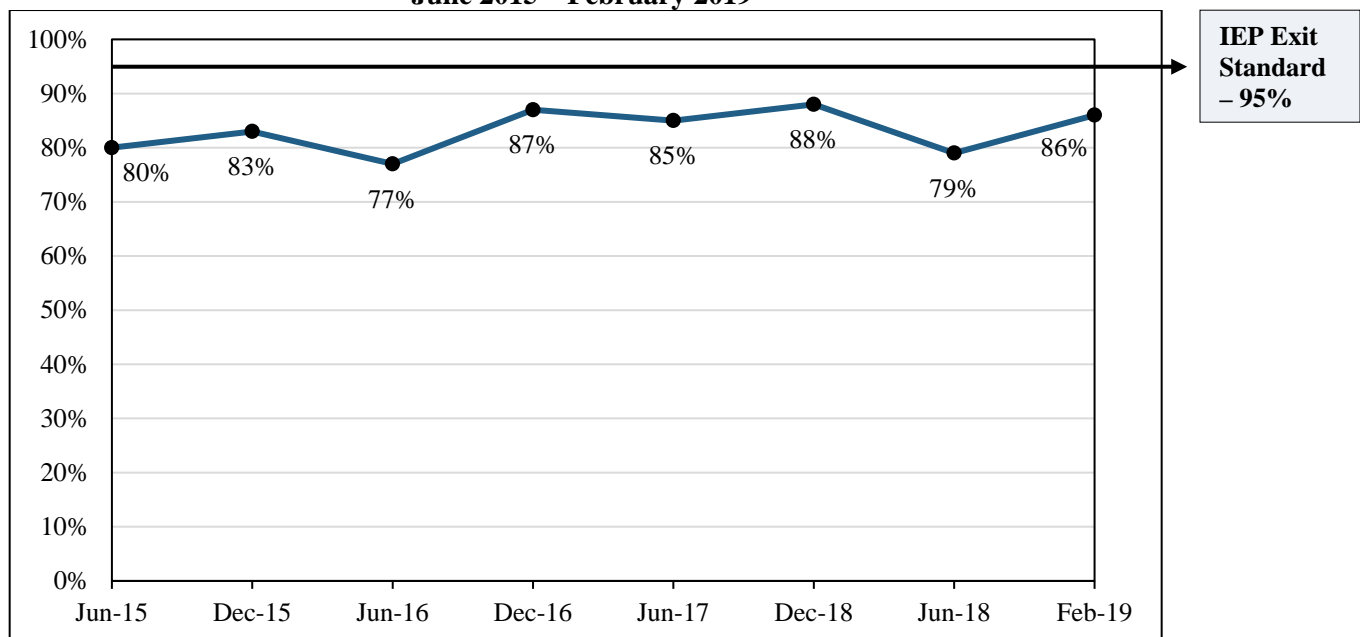
¹¹⁵ This Exit Standard is designated as an Outcome to be Maintained and is discussed earlier in Table 2 of this report.

- refer families whose circumstances are deemed to place a child in their care at low or moderate risk of abuse and who are in need of and agree to additional supports to an appropriate Collaborative or community agency for follow-up (IEP citation I.C.19.).

Timely Initiating Investigations and Family Assessments

IEP Requirement	1. <u>Investigations</u> : Investigations of alleged child abuse and neglect shall be initiated or documented good faith efforts shall be made to initiate investigations within 48 hours after receipt of a report to the Hotline of child maltreatment. (IEP citation I.A.1.a.)
Exit Standard	95% of all investigations will be initiated within 48 hours or there will be documented good faith efforts to initiate investigations whenever the alleged victim child(ren) cannot be immediately located. ¹¹⁶

**Figure 4: Timely Initiation of Investigations
June 2015 – February 2019**



Source: CFSA Administrative Data, FACES.NET report INT052 and secondary review of administrative data to validate completion of good faith efforts.

¹¹⁶ Documented good faith efforts to see alleged victim children within the first 48 hours shall satisfy this requirement if they include: (1) visiting the child's home at different times of the day; (2) visiting the child's school and/or day care in an attempt to locate the child if known; (3) contacting the reporter, if known, to elicit additional information about the child's location; (4) reviewing the CFSA information system and other information systems (e.g. ACEDS, STARS) for additional information about the child and family; and (5) contacting the police for all allegations that a child(ren)'s safety or health is in immediate danger.

Performance for the period July 1, 2018 through March 31, 2019:

Investigations

Initiation of an investigation includes seeing all alleged victim children and talking with them outside the presence of their caretaker, or making all applicable good faith efforts to locate and interview them within the 48 hour timeframe.¹¹⁷ CFSA provided the Monitor with findings from its secondary review of FACES.NET data for the months of August and December 2018, and February 2019 to validate data on investigations where the alleged victim child(ren) had not been seen in 48 hours to determine if good faith efforts to locate and interview the child(ren) had been made.

For the three months assessed this period, performance for timely initiation ranged between 82 and 89 percent.¹¹⁸ Specifically, in February 2019, 293 CPS investigations were applicable to this measure.¹¹⁹ All alleged victim children were seen within 48 hours in 215 (73%) investigations and good faith efforts were made in an additional 38 (13%) investigations, for a total of 86 percent of investigations initiated timely. Although improved from the prior period, current performance does not meet the required level of 95 percent; this Exit Standard continues to be an Outcome to be Achieved.

For the remaining months in the monitoring period, monthly performance data on timeliness of investigation initiation (without inclusion of good faith efforts) ranged from 64 to 69 percent. Documentation of good faith efforts were not validated for these months and credit for valid efforts made would likely increase performance metrics.

Family Assessments

Similar to investigations, FA practice requires workers to see and interview all children in the household to assess for safety within a specified timeframe after receipt of the referral. CFSA policy sets different response times for the initiation of a FA depending upon the allegations reported to the Hotline – either within 72 or up to 120 hours from the Hotline referral. Of the 330 applicable FAs closed in March 2019, contact was made with all alleged victim children within 72 hours of receipt of referral in 121 (37%) referrals; in an additional 70 (21%) referrals, all alleged victim children were contacted within 120 hours of receipt of the referral, for a total of 58 percent

¹¹⁷ For younger and non-verbal children, observation is acceptable.

¹¹⁸ Monthly performance on timely initiation of investigations during those months in which good faith efforts were validated are as follows: August 2018, 89%; December 2018, 82%; February 2019, 86%.

¹¹⁹ A total of 14 investigations were removed from the universe of applicable investigations due to the following: 13 investigations were closed before 48 hours had elapsed and the alleged child victim was not seen and one investigation was a conversion from FA for the purpose of allowing CFSA to open a case and the victim child was previously interviewed.

of FAs initiated within 120 hours. Monthly performance for FA initiation within 120 hours ranged between 46 and 67 percent this monitoring period.¹²⁰

Like good faith efforts to initiate an investigation, FA workers who are unable to locate and interview children and families within required timeframes may complete and document reasonable actions¹²¹ to initiate a FA in a timely manner; data on reasonable actions were not validated this monitoring period and are not included in these data. Inclusion of referrals in which workers made reasonable actions would likely increase performance levels. One of the impacts of the change to eliminate the FA pathway is that all accepted reports of alleged abuse or neglect will need to be initiated with 48 hours.

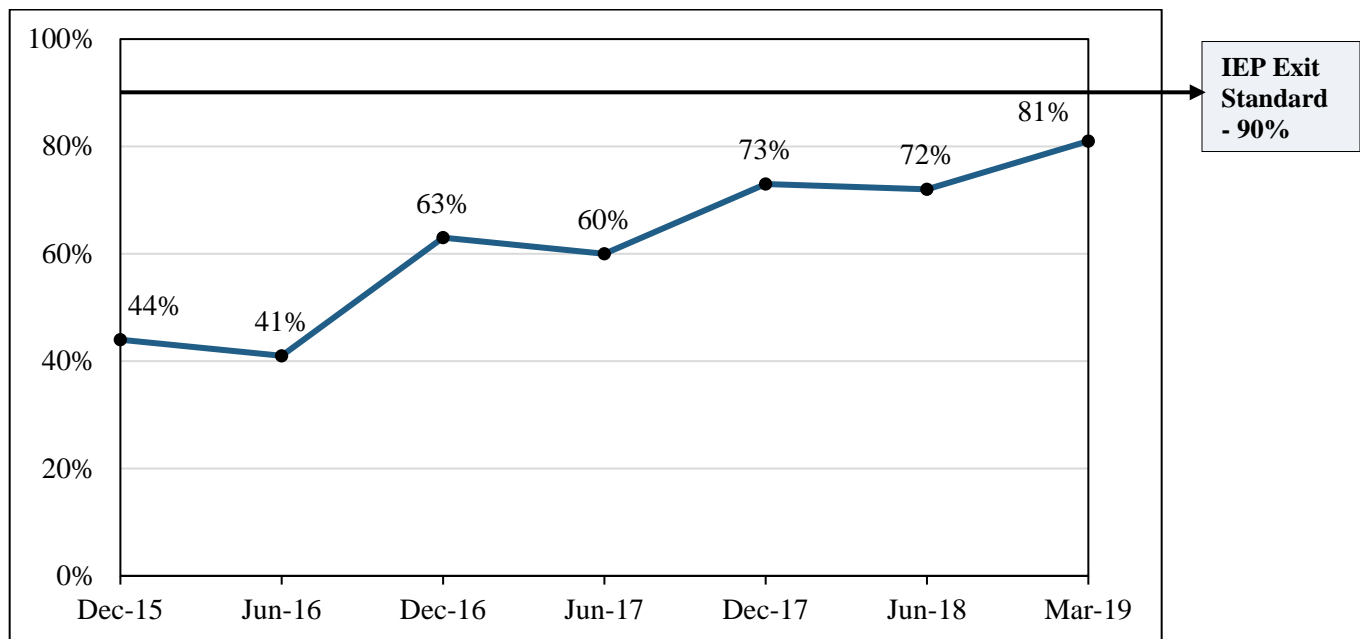
Timely Completion of Investigations and Family Assessments

IEP Requirement	<p>2. <u>Investigations</u>: Investigations of alleged child abuse and neglect shall be completed within 30 days after receipt of a report to the Hotline of child maltreatment and the final report of findings for each investigation shall be completed within five days of the completion of the investigation.</p> <p>(IEP citation I.A.1.b.)</p>
Exit Standard	<p>90% of investigations will be completed and a final report of findings shall be entered in FACES.NET within 35 days.</p>

¹²⁰ Monthly performance for initiation of FA within 120 hours are as follows: July 2018, 54%; August 2018, 46%; September 2018, 59%; October 2018, 65%; November 2018, 67%; December 2018, 67%; January 2019, 57%; February 2019, 57%.

¹²¹ Reasonable actions is the term CFSA utilizes to represent good faith efforts to initiate a FA. Documented reasonable actions to initiate or see the alleged victim child(ren) within 120 hours of the referral include: 1) visiting the child's home at different times of the day (at least 2 attempted visits); 2) visiting the child's school and/or day care in an attempt to locate the child if known; 3) contacting the reporter, if known, to elicit additional information about the child's location; and 4) reviewing the CFSA information system and other information systems (e.g. ACEDS, ASPEN/DATA TICKETS) for additional information about the child and family.

**Figure 5: Timely Completion of Investigations
December 2015 – March 2019**



Source: CFSA Administrative Data, FACES.NET report INV004

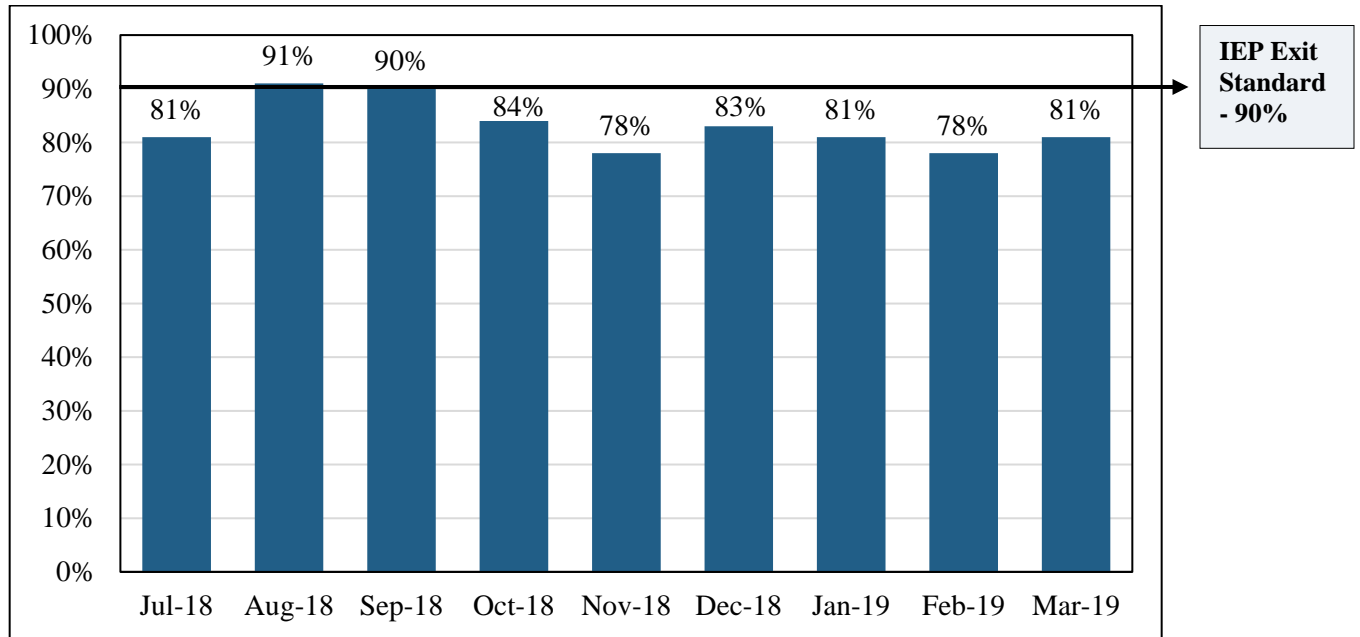
Performance for the period July 1, 2018 through March 31, 2019:

Investigations

CFSA is required to complete 90 percent of investigations within 35 days of receipt of an accepted report by the Hotline. Performance this monitoring period fluctuated between 78 and 91 percent of investigations completed timely each month (see Figure 6). Specifically, in March 2019, there were 391 non-institutional abuse investigations completed; 315 (81%) were completed and had findings entered in FACES.NET within 35 days after receipt of the report. Current performance met the required level during August and September 2018 but declined below the required level in the remaining months of the monitoring period. The number of investigations not completed within the required timeframe (the investigation backlog) remains relatively small each month, from five to 36 investigations.¹²²

¹²² During this monitoring period, CFSA reports the following backlog of investigations each month not completed within 35 days: July 2018, 5; August 2018, 11; September 2018, 19; October 2018, 36; November 2018, 25; December 2018, 24; January 2019, 39; February 2019, 30; March 2019, 21.

**Figure 6: Timely Completion of Investigations
July 2018 – March 2019**



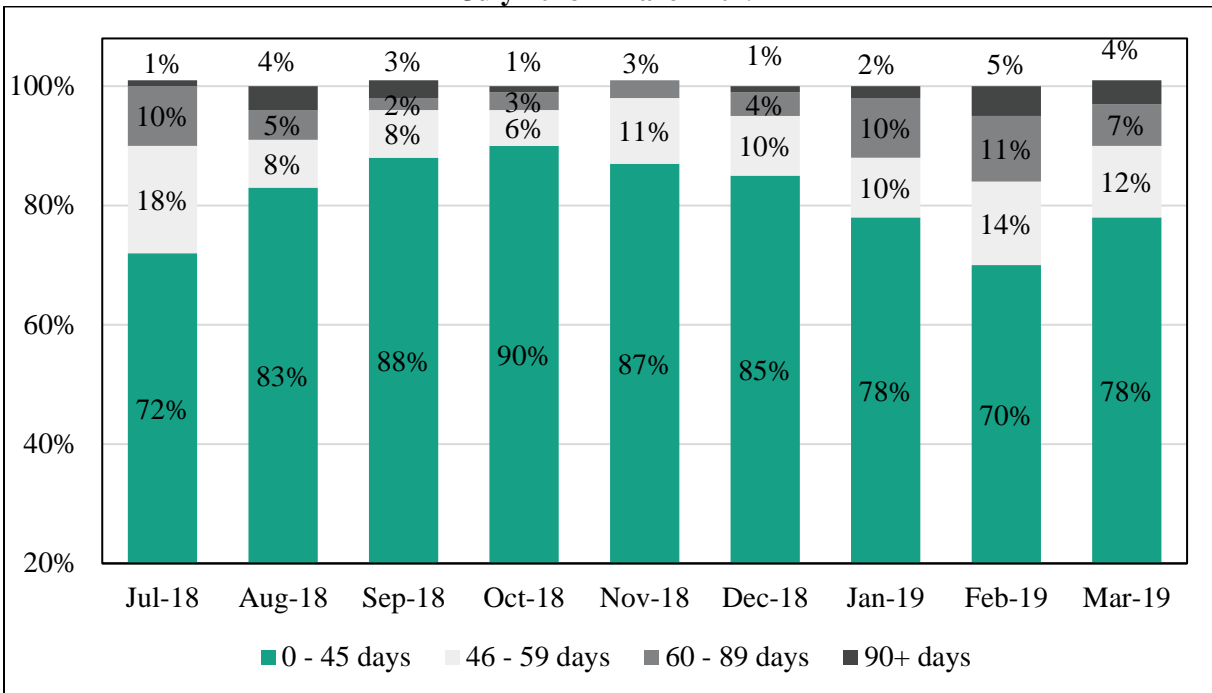
Source: CFSA Administrative Data, FACES.NET report INV004

Family Assessments

CFSA's policy and practice guidance provides that a FA referral should be completed within 45 days. FA referrals can be kept open longer when circumstances indicate that doing so will be helpful to case resolution and service linkage.

Between July 2018 and March 2019, a monthly range of 70 to 90 percent of FAs were completed within 45 days of referral to the Hotline (see Figure 7). Specifically, in March 2019, a total of 360 FAs were completed; 279 (78%) of these FAs were completed within 45 days of the FA referral. Completion data for the remaining FAs in March 2019 are as follows: 42 (12%) FAs were completed within 46 to 59 days; 24 (7%) FAs were completed within 60 to 89 days; and 15 (4%) FAs were completed in 90 days or longer.

**Figure 7: Timeline for FA Completion
July 2018 – March 2019**



Source: CFSA Administrative Data, FACES.NET report INV140

*Percentages may not equal 100% due to rounding

Quality of Investigations and Family Assessments

IEP Requirement	<p>4. <u>Acceptable Investigations</u>: CFSA shall routinely conduct investigations of alleged child abuse and neglect that are of acceptable quality.¹²³</p> <p>(IEP citation I.A.2.)</p>
Exit Standard	80% of investigations will be of acceptable quality.

¹²³ Evidence of acceptable investigations includes: (a) use of CFSA's screening tool in prioritizing response times for initiating investigations; (b) interviews with and information obtained from the 5 core contacts – the victim child(ren), the maltreater, the reporting source (when known), medical resources, and educational resources (for school-aged children); (c) interviews with collateral contacts that are likely to provide information about the child's safety and well-being; (d) interviews with all children in the household outside the presence of the caretaker, parents, or caregivers, or documentation, by the worker, of good-faith efforts to see the child and that the worker has been unable to locate the child; (e) medical and mental health evaluations of the children or parents when the worker determines that such evaluations are needed to complete the investigation, except where a parent refuses to consent to such evaluations; (f) use of risk assessment protocol in making decisions resulting from an investigation; and (g) initiation of services during the investigation to prevent unnecessary removal of children from their homes.

Performance for the period July 1, 2018 through March 31, 2019:

To assess the quality of investigative practice, the Monitor and CFSA jointly conducted a review of a statistically significant sample of CPS investigations closed in November 2018. A total of 183 investigations were reviewed, representing a $\pm 5\%$ margin of error with 95% confidence in its results. In assessing for the quality of investigations, the review focused on the following: interviews with core witnesses, including the alleged child(ren) victims, non-victim child(ren) who live in the home, alleged maltreater, and reporter; interviews with collateral witnesses who may have information relevant to the allegations, including, for example, law enforcement, other adults in the home, relatives, or neighbors; collection of information regarding the child(ren)'s health and educational status; assessment of safety and risk; and identification of and linkage to services to prevent removal of children from their home.

Overall, of the 183 investigations reviewed, 133 (73%) investigations were assessed as demonstrating acceptable quality. Of the 50 investigations determined not to be of acceptable quality, the most frequent reasons for this determination included: one or more key collateral contact was not interviewed (35 investigations) or insufficient information obtained during interviews with core contacts (20 investigations).¹²⁴

Current performance is an improvement over investigations assessed in March 2018, when 66 percent of investigations were determined to be of acceptable quality, but does not meet the IEP required level of 80 percent acceptable quality.

Performance on Strategy Plan:

CFSA has employed the following strategies to improve the quality of investigations (IEP I.A.2.):

- *No later than 30 days after the upcoming joint CFSA-CSSP reviews of the quality of practice in Entry Services, CFSA will begin implementing, tracking and reporting on jointly agreed upon recommendations for improvement. The jointly agreed upon recommendations will be incorporated into this Strategy Plan (2018 Strategy Plan, p.1).*

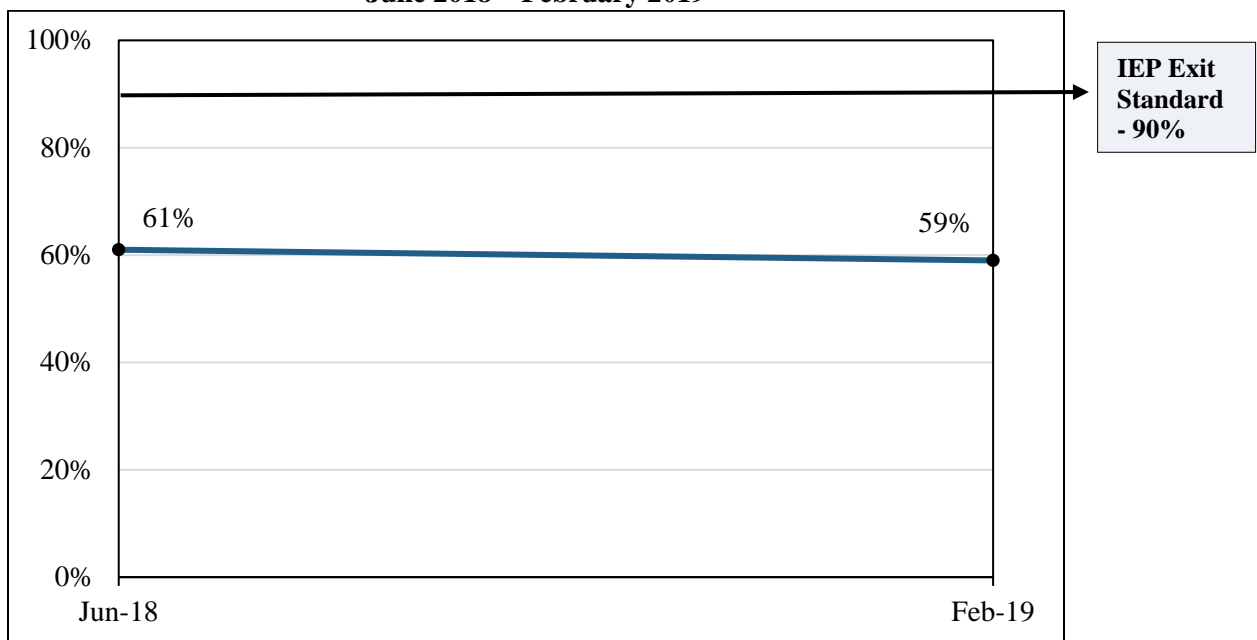
In June 2018, following the qualitative review of investigations closed in March 2018, CFSA developed strategies to improve practice, specifically: sharing the findings from the review with Entry Services staff, developing continuous quality improvement (CQI) processes, and implementing specific practice improvement actions. Improved performance in the quality of investigations closed in November 2018 suggest that these strategies have had a beneficial effect. Following the most recent case record review, Entry Services leadership reports implementing additional strategies. One of these is weekly meetings with CPS supervisors and program managers to review a randomly selected CPS investigation and FA that closed the prior month to discuss the quality, specifically strengths in practice and areas for improvement.

¹²⁴ Reviewers can provide more than one reason for an unacceptable determination.

Community-Based Service Referrals for Low & Moderate Risk Families

IEP Requirement	35. <u>Community-Based Service Referrals for Low & Moderate Risk Families:</u> (IEP citation I.C.19.)
Exit Standard	90% of families who have been the subject of a report of abuse and/or neglect, whose circumstances are deemed to place a child in their care at low or moderate risk of abuse and neglect and who are in need of and agree to additional supports shall be referred to an appropriate Collaborative or community agency for follow-up. Low and moderate risk cases for which CFSA decides to open an ongoing CFSA case are excluded from this requirement.

**Figure 8: Community-Based Service Referrals for Low & Moderate Risk Families
June 2018 – February 2019**



Source: FACES.NET data provided by CFSA with reconciliation from data report on referrals to Collaboratives; joint review by CFSA and Monitor staff representing a sample with a $\pm 5\%$ margin of error with 95% confidence in its results.

Performance for the period July 1, 2018 through March 31, 2019:

The Monitor and CFSA jointly reviewed cases of a statistically significant sample of families with a closed CPS investigation or FA in February 2019, whose circumstances were assessed to place a child in their care at low or moderate risk of abuse or neglect. A total of 148 referrals were reviewed, representing a sample with a $\pm 5\%$ margin of error with 95% confidence in its results.

This Exit Standard requires that when a family's circumstances are assessed to place a child in their care at low or moderate risk of abuse or neglect, and service needs are identified and the family agrees to services, the CPS investigative or FA worker should refer the family to community-based services. Of the 148 families reviewed, 104 families were determined not to apply to this requirement for one of the following reasons: no service needs were identified for the family (38); the family was already receiving services (37); or service needs were identified, but the family declined services (29) (see Table 4 below). Of the remaining 44 families, 26 (59%) families were linked by CFSA staff to services. Performance during the current monitoring period is consistent with performance from the previous period (see Figure 8). The Monitor does not consider this Exit Standard to be maintained.

**Table 4: Service Linkage for Families with a Closed CPS Investigation or FA
February 2019**

Families Not Applicable to Measure		
Reason	Number	
No Service Needs Identified	38	
Service Need(s) Identified, and Family Declined Services	29	
Pre-Existing Services	37	
Total	104	
Families Who had Service Needs and Agreed to Services		
Reason	Total	Percentage
Families Linked to Collaborative or Other Community Agency	26	59%
Families not Linked to Services	18	31%
Total	44	100%

Source: FACES.NET data provided by CFSA with reconciliation from data report on referrals to Collaboratives; joint review by CFSA and Monitor staff representing a sample with a $\pm 5\%$ margin of error with 95% confidence in its results.

Of the 18 families that were not linked to services, for seven families, either the social worker identified a need and the family agreed to a referral but the referral was not made or the family requested services but was not connected to a service provider by the worker. For the remaining 11 families, case documentation did not specifically reflect that the social worker identified a need, however, based upon the documentation, the reviewer identified a need for the family and the family was not linked. In 64 percent (7 of 11) of these referrals, the need identified by the reviewer was for mental health services for either the parent and/or child.

The Monitor has consistently noted concerns with a lack of outcome data for families referred from CFSA to the Collaboratives or other community service providers. In CFSA's 2018 Resource Development Plan (RDP), CFSA committed to better understanding why families do not complete services with the Collaboratives. CFSA reports they are developing and implementing a protocol to review and follow-up on cases where a family declines to engage in services after a referral has been made. CFSA staff will begin reviewing these data with the Collaboratives in June 2019. CFSA reports the data system utilized by the Collaboratives – *Evidence to Outcomes* – was modified to include a "client identifier" that will allow for CFSA and the Collaboratives to review these data on a monthly basis in order to identify and then address any barriers to families engaging in services and/or safety concerns in real-time. However, at this time, CFSA still does not have outcome data for those families that were linked to services, including the Collaboratives, and this has been a long-standing concern.

Community Papering

To provide for the safety of children in families receiving in-home services, one strategy that can be used is Community Papering, which is a legal process where CFSA files a petition in Family Court to obtain court oversight of a family and their case plan. Social workers, in consultation with their supervisor and program manager, recommend Community Papering¹²⁵ when there are concerns about a child's ability to remain safely in their home without effective intervention. CFSA may seek to Community Paper a case when a parent has not accessed recommended and necessary services for themselves or their child despite social worker efforts to engage the family. Seeking family court oversight can be a helpful support in keeping the family together and avoids a child's removal to foster care. Between July and December 2018, 46 cases involving 118 children were presented to the Office of the Attorney General (OAG) for Community Papering. Outcomes from these requests are outlined in Table 5 below.

¹²⁵ Social workers, supervisors, and program managers make a recommendation for Community Papering to the Office of the Attorney General (OAG), who then decides whether or not there is a legal basis to file a petition in court.

Table 5: Community Papering Outcomes July – December 2018
N=118 Children; 46 Cases

Petition was Accepted by OAG	80 Children; 34 Cases¹²⁶
Outcomes:	
Conditional Release Granted	36 Children; 18 Cases
Shelter Care Granted	29 Children; 11 Cases
Emergency Removal Occurred Prior to Initial Hearing	1 Child; 1 Case
Agency Did Not File in Court	13 Children; 8 Cases
Case Dismissed by Court	1 Child; 1 Case
Petition was Not Accepted by OAG	38 Children; 14 Cases
Outcomes:	
No Legal Basis for Filing	13 Children; 3 Cases
Additional Efforts Needed to be Explored	20 Children; 9 Cases
Additional Information Requested by Attorney	5 Children; 2 Cases

Source: CFSA Manual Data

Substantiated Maltreatment within Six and 12 Months following Entry Services Involvement

The Monitor reviewed CFSA data on the number of families who had subsequent substantiations of abuse or neglect within six and 12 months after ending their involvement with CFSA with a closed FA or investigation that resulted in substantiated allegations. The federal government and states use repeat maltreatment data as an indicator of the effectiveness of a child welfare system's interaction with families and the degree to which services offered and provided were successful in preventing future abuse or neglect.

Investigations

Of the 770 children with a substantiated investigation between January and June 2018, 71 (9%) children had a subsequent occurrence of maltreatment that was substantiated within six months of investigation closure. Additionally, of the 617 children with a substantiated maltreatment between

¹²⁶ The number of cases and children may not add up as children within some sibling groups may experience different outcomes.

July and December 2017, 90 (15%) children had a substantiated maltreatment within 12 months of investigation closure.^{127,128}

The data discussed above are based on a six month cohort of children who were victims of substantiated abuse or neglect. There are similar findings when utilizing a 12 month cohort for FY2017. Specifically, of the 1,531 children with a substantiated maltreatment between October 2016 to September 2017, 237 (15%) children were victims of another abuse or neglect occurrence within the next 12 months.

Family Assessments

There were 2,070 children with a completed FA between January and June 2018; 62 (3%) children had a subsequent investigation that substantiated maltreatment within six months of FA completion. This is a decline from the prior monitoring period (6% of children with a completed FA between July and December 2017 had a substantiated occurrence of maltreatment within six month of closure). Additionally, there were 1,726 children with a closed FA between July and December 2017; 112 (6%) children had a substantiated occurrence of abuse or neglect within 12 months of FA closure.

B. GOAL: PERMANENCY

1. Placement

a. Demographics, Placement Settings, and Placement of Young Children

Children enter foster care when they cannot safely remain with their caretakers, and once this occurs, CFSA is responsible for locating and placing children in the most appropriate and least restrictive setting to meet their needs. A goal of CFSA, and other child welfare systems across the country, is to place children with relatives whenever possible.

As discussed below, the percentage of children placed with kin has increased over the past nine months. However, the data also reflect continued challenges with placing children in stable, long-

¹²⁷ The Children's Bureau utilizes statewide data indicators and national standards to determine conformity with Titles IV-B and IV-E of the Social Security Act through the Child and Family Services Reviews. Reoccurrence of maltreatment is 1 of 7 statewide data indicators and assesses of those children who were victims of a substantiated maltreatment report during a 12 month period, the percentage who were victims of another substantiated report within 12 months of their initial report. The national standard is 9.1%.

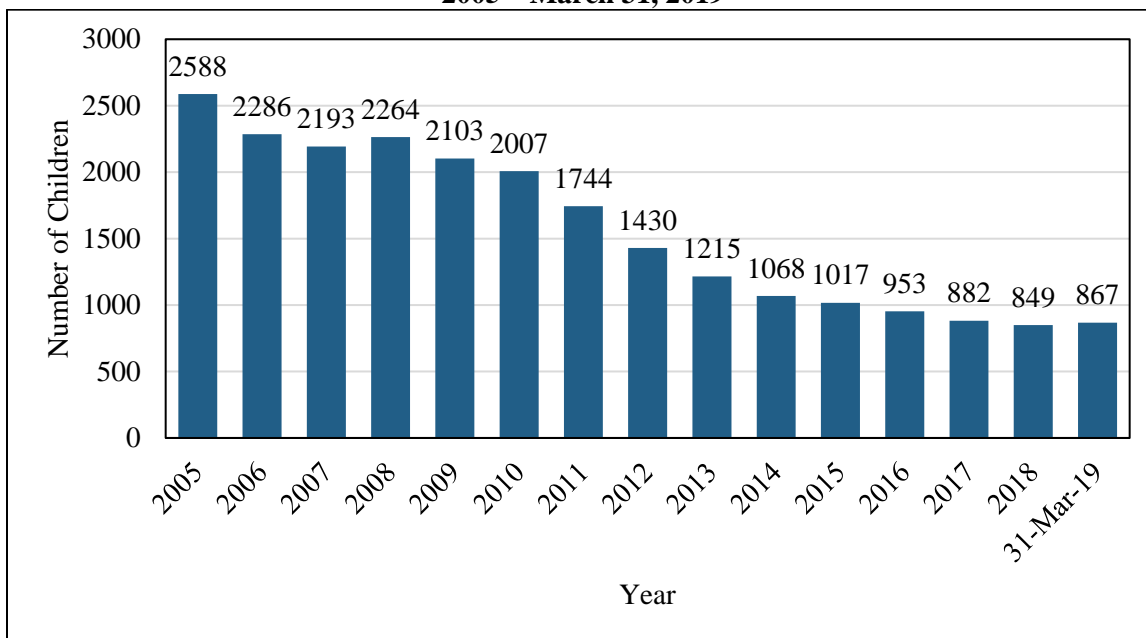
¹²⁸ There are 2 minor differences between the repeat maltreatment federal reporting methodology and the methodology used to provide data here. First, the federal methodology utilizes a 12 month fiscal year cohort for initial substantiations and these calculations utilize a 6 month cohort (to align with the monitoring period); both methodologies track these children for a 12 month period of time. Second, the federal methodology excludes subsequent reports that occur within 14 days of receipt of the initial report; although this logic was not applied to the data reported by the Monitor, the Monitor did not identify any subsequent investigations that met this criteria.

term, and appropriate placements. Most concerning, is the increase in the number of children who have stayed in short-term, emergency placements for longer than 30 days due to challenges in locating a long-term, stable placement, and the number of children that continue to stay overnight at the CFSA office building while placements are being identified.

Data Trends of Children in Out-of-Home Placement and Served through In-Home Services

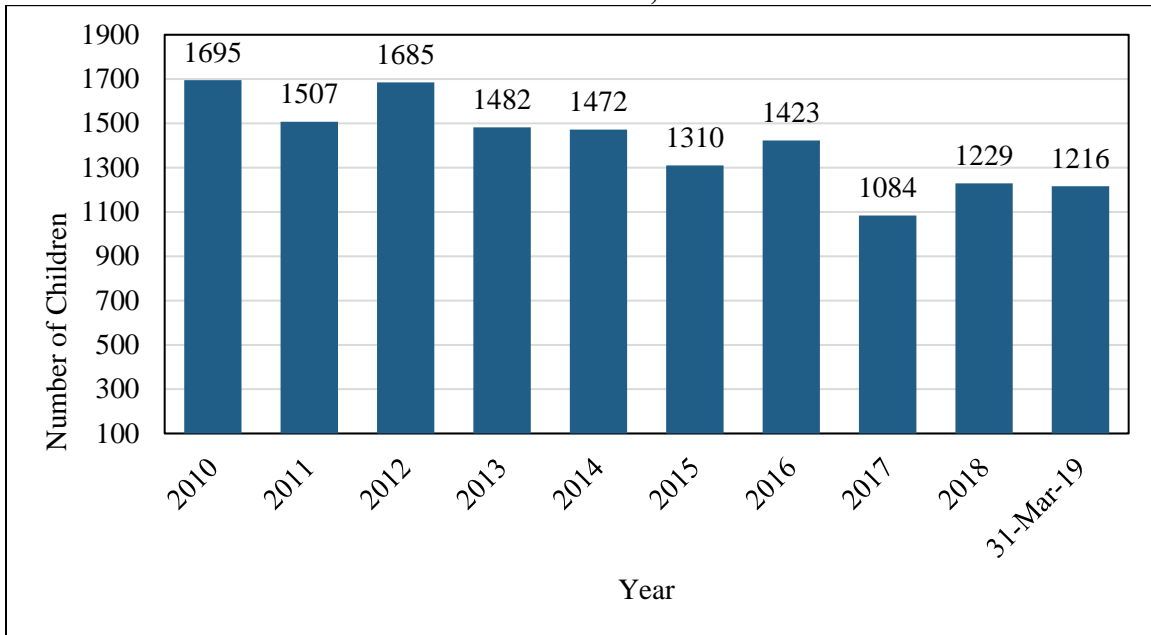
On March 31, 2019, the District had 867 children in foster care and 1,216 children were being served by CFSA through in-home child protection cases (see Figure 10). The number of children in foster care has increased slightly since December 31, 2018 (see Figure 9).

**Figure 9: Number of Children in Out-of-Home Placements
on Last Day of the Year
2005 – March 31, 2019**



Source: CFSA Administrative Data, FACES.NET report PLC156

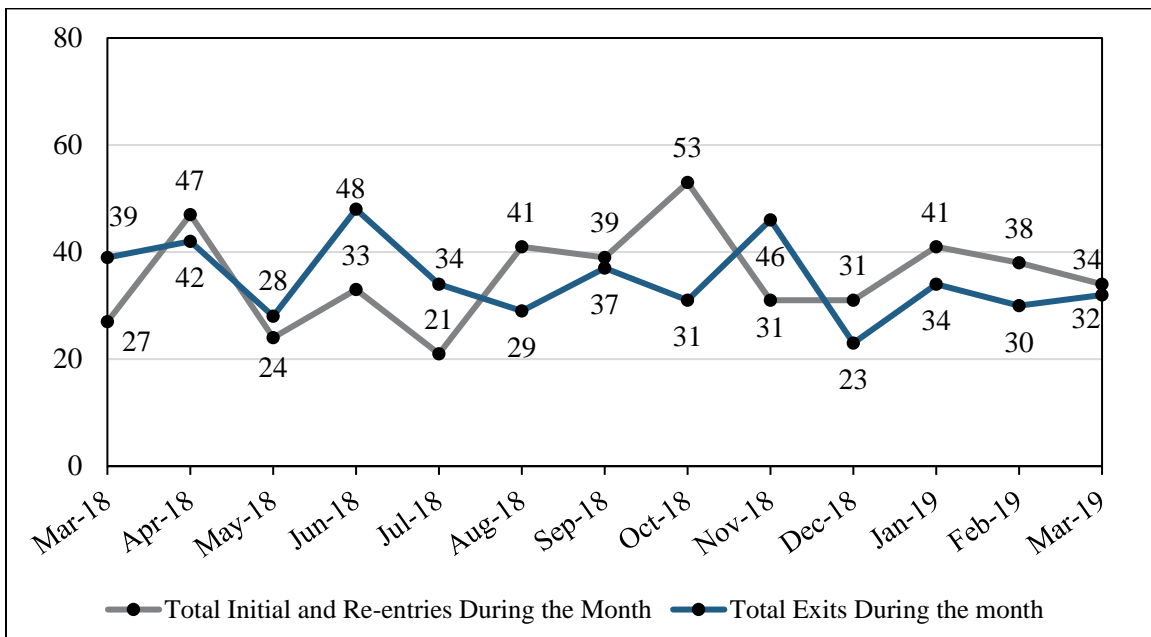
**Figure 10: Number of Children Served through In-Home Child Protection Cases on Last Day of Year
2010 – March 31, 2019**



Source: CFSA Administrative Data, FACES.NET report CMT232

Figure 11 shows the number of children entering (initial and re-entry) and exiting foster care each month over the last 12 months. There are fluctuations in both entries and exits every month, without a recognizable pattern.

**Figure 11: Entries and Exits into Foster Care by Month
March 2018 – March 2019**



Source: CFSA Administrative Data, FACES.NET report PLC155 as of March 2019

Demographics of Children in Out-of-Home Care

Table 6 below shows basic demographic information of the children in out-of-home placement as of March 31, 2019. Of the 867 children in foster care, the majority are identified as African American (91%)¹²⁹. Consistent with national data trends, 33 percent of children in care are between the ages of 15 and 21 and 30 percent are ages five or younger.

**Table 6: Demographics of Children in Out-of-Home Placement
as of March 31, 2019**

N=867

Gender	Number	Percent*
Male	455	52%
Female	412	48%
Total	867	100%
Race	Number	Percent
Black or African American	792	91%
White	24	3%
Asian	7	1%
American Indian/Alaskan Native	1	<1%
Unable to Determine/Unknown	3	<1%
No Race Data Reported	38	4%
Native Hawaiian or Other Pacific Islander	2	<1%
Total	867	100%
Ethnicity	Number	Percent
Hispanic	121	14%
Non-Hispanic	669	77%
Unable to Determine	5	1%
Unknown	72	8%
Total	867	100%
Age	Number	Percent
1 year or less	85	10%
2-5 years	175	20%
6-8 years	115	13%
9-11 years	111	13%
12-14 years	92	11%
15-17 years	139	16%
18-21 years	150	17%
Total	867	100%

Source: CFSA Administrative Data, FACES.NET report PLC156

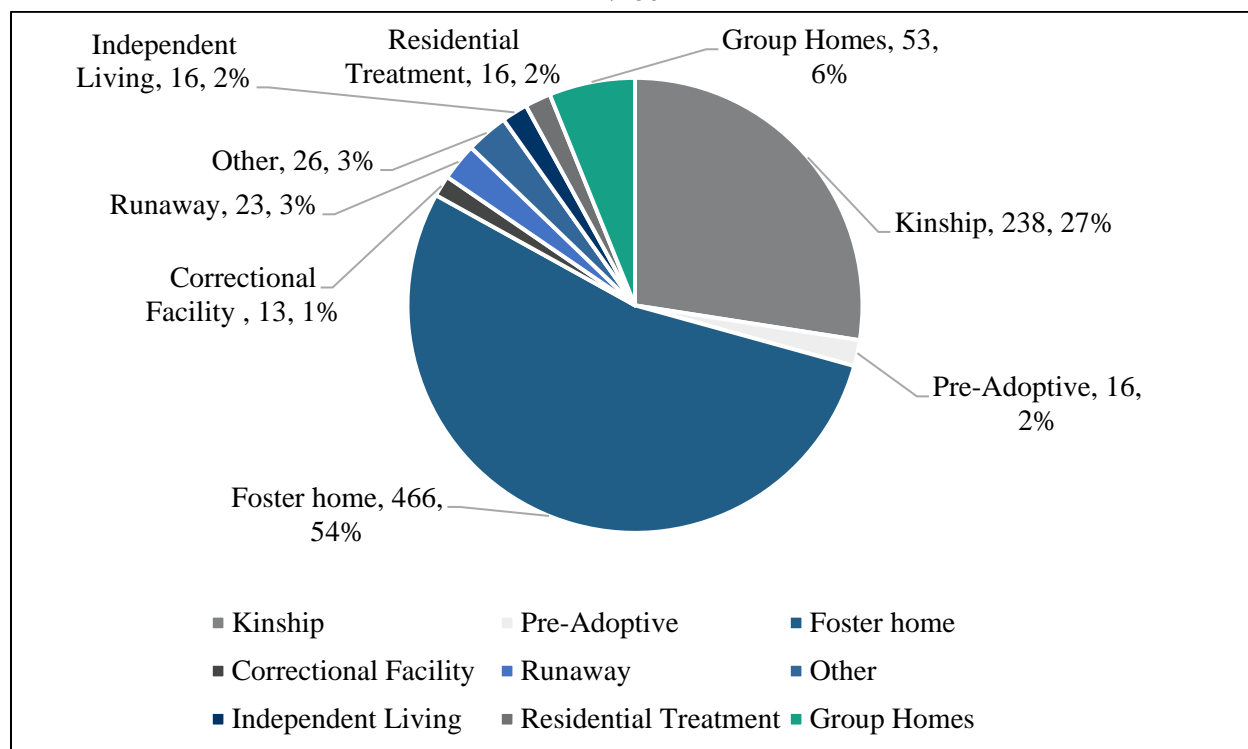
*Percentages may not equal 100% due to rounding.

¹²⁹ This percentage may be higher, as no race data were recorded for 4 percent of children in FACES.NET.

Placement of Children in Most Family-Like Setting

As reflected in Figure 12 below, of the 867 children in out-of-home care on March 31, 2019, 720 (83%) children were placed in family-based settings, including 238 (27%) children in kinship homes. The percentage of children in kinship homes has increased since the end of the last monitoring period (as of June 30, 2018, 23% of children were in kinship homes). Ten percent of children were placed in group settings, including six percent in group homes, two percent in independent living homes or facilities, and two percent in residential treatment.

Figure 12: Placement Type for Children in Out-of-Home Care as of March 31, 2019
N=867



Source: CFSA Administrative Data, FACES.NET report CMT232 and CMT389

*Other includes college/vocational, hospital, not in legal placement, juvenile foster care (non paid), and diagnostic and emergency care.

Performance for the period July 1, 2018 through March 31, 2019:

There are three Exit Standards pertaining to a child's placement in the most family-like setting. The first Exit Standard, which is designated as an Outcome to be Maintained, requires that 90 percent of children be placed in the least restrictive, most family-like setting appropriate to his or her needs (IEP citation I.B.8.a.). Aggregate data as of March 31, 2019 show that 83 percent of children are placed in family-based settings, and a review of individual cases is necessary to assess whether children not placed in family settings are placed in the least restrictive setting appropriate to, and capable of, meeting their needs. Prior reviews conducted in March 2012, March 2013, and December 2015 all determined that CFSA's performance exceeds the required level, finding more

than 90 percent of children are in a family-like setting or the least restrictive setting appropriate to, and capable of, meeting their needs. This standard was not reassessed this period beyond the review of aggregate data.

The second Exit Standard, also designated as an Outcome to be Maintained, requires that no child remain in an emergency, short-term or shelter facility, or foster home for more than 30 days (IEP citation I.B.8.b.).¹³⁰ Between July 2018 and March 2019, nine children were placed in an emergency or short-term placement for more than 30 days. Five of these nine children were placed for 31 or 32 days, three children were placed for 40 days, and one child was placed in a short-term placement for 114 days. The emergency and short-term placements were primarily within a congregate care facility (Sasha Bruce) and emergency foster homes. CFSA states that almost all of these placements extended beyond the short-term limit due to challenges in locating a foster home that would accept the child. This is a substantial and concerning decline in performance over the prior period – when no child stayed in an emergency placement for more than 30 days – and reinforces the need for more family-based and appropriate placements for children and youth with significant treatment needs. Required performance toward this Exit Standard is not maintained this period.

The third Exit Standard, which is designated as an Outcome to be Achieved, requires that no child stay overnight in the CFSA office building (IEP citation II.B.8.). Between July 2018 and March 2019, there were 17 overnight stays by children in foster care in the CFSA office building.¹³¹ Table 7 below reflects the number of children each month.

¹³⁰ Based on individual review, the Monitor's assessment will exclude, on a case-by-case basis, children placed in an emergency, short-term, or shelter facility, or foster home for more than 30 days where moving them would not be in their best interests.

¹³¹ Two children experienced more than 1 overnight stay at the CFSA office building during this period. In July 2018, 1 child had numerous overnight stays, thus the total number of stays referenced may underrepresent the actual amount.

**Table 7: Number of Children who Stayed Overnight at CFSA Office Building
July 2018 – March 2019**

Month	Number of Children
July 2018	2 ¹³²
August 2018	1
September 2018	2
October 2018	3
November 2018	0
December 2018	1
January 2019	2
February 2019	1
March 2019	5 ¹³³
Total	17

Source: CFSA notification to Monitor

CFSA attributes these continued overnight stays to lack of responsiveness or willingness of foster parents to accept children who present with challenging behaviors – likely a result of trauma, loss, and mental health conditions – and in some cases, communication issues between staff. This Exit Standard continues to be unmet and the increase in the number of effected children toward the end of the period, as well as into April and May 2019 is very concerning. The data suggest that additional actions are urgently needed to develop and support appropriate placements for children with physical, mental health, and/or behavioral challenges.

Placement of Young Children

The IEP limits the use of congregate care placements for young children unless there is appropriate justification that the child requires special treatment or has exceptional needs that cannot be met in a home-like setting.¹³⁴ There are two Exit Standards related to placement of young children in congregate settings and both are designated as Outcomes to be Maintained. CFSA continued to meet the required performance for both during the current monitoring period.

¹³² One youth experienced multiple overnight stays at CFSA in July 2018, thus the total number of stays referenced may underrepresent the actual amount.

¹³³ One youth experienced 2 overnight stays at CFSA in March 2019; both are accounted for in the total number of overnights.

¹³⁴ Placement exceptions were agreed upon in July 2011 and include: (1) medically fragile needs where there is evidence in the child's record and documentation from the child's physician that the child's needs can only be met in a hospital or skilled nursing facility, or another highly specialized treatment facility; (2) developmentally delayed or specialized cognitive needs where there is evidence that the child's condition places the child in danger to himself or others, and that ensuring the child's safety or the safety of others requires placement in a congregate treatment program which can meet the child's needs; or (3) court order where the Court has ordered that the child remain in the group care setting.

Performance for the period July 1, 2018 through March 31, 2019:

The IEP requires that no child under the age of 12 be placed in a congregate care setting for more than 30 days without appropriate justification (IEP citation I.B.9.a.). Between July 2018 and March 2019, four children between the ages of six and 12 were placed in congregate care settings for more than 30 days. CFSA and Monitor staff reviewed these placements and determined that all of these children had specialized needs that required placement within those settings.

The IEP also requires that no child under the age of six be placed in group care, non-foster home settings for any period of time without appropriate justification (IEP citation I.B.9.b.). During the current monitoring period, one child under the age of six was placed in a congregate care setting and CFSA and Monitor staff agreed that his specialized needs required placement within that setting.

Performance on Strategy Plan:

The 2018 Strategy Plan includes the following strategy to decrease the use of CFSA as an overnight placement for children (IEP I.B.8.b.):

- *In addition to strategies identified as part of overall Temporary Safe Haven Redesign to appropriately adjust the total placement array, by March 1, 2018, as part of the Needs Assessment and Resource Development Plan process, analyze placement challenges for high-needs youth. Develop and implement a resource plan to build services to meet identified gaps. (2018 Strategy Plan, p.4).*

The Temporary Safe Haven Redesign (TSHR), which CFSA began implementation of last year, is comprised of four major components: (1) transitioning from multiple to a single Maryland child placing agency for children placed in foster care in Maryland; (2) improving foster parent support; (3) enhancing the placement array; and (4) improving placement matching. The last monitoring report – issued in November 2018¹³⁵ for the period January through June 2018 – included detailed updates for each of these components. Discussed below is work CFSA has done since the last monitoring report to improve placement matching and expand the placement array.

Placement Matching

Too often decisions about a child’s placement are made based on the availability of a vacancy rather than a full assessment of a child’s characteristics, strengths, and needs, and a process to link these with a placement provider’s skills and characteristics. This may be due, in part, to the lack of a sufficient number and array of qualified foster home placements that are able to meet the needs of children in CFSA custody. Additionally, CFSA has lacked the ability to assess the foster parent population in real-time, including a method to get timely and accurate information on vacancies

¹³⁵ To access this report, see <https://cssp.org/wp-content/uploads/2018/12/LaShawn-A-v-Bowser-Progress-Report-for-the-Period-Jan-Jun-2018.pdf>

and provider skills and references. The system also has not had a reliable data program to compare child characteristics and provider preferences as an aid in making successful matches. Over the last nine months, CFSA has worked to produce reliable, automated data on the number and reasons for placement changes (e.g., replacements, placement disruptions, and exit reasons) and to develop an algorithm in FACES.NET that can be used to identify providers with vacancies whose preferences match the characteristics of the child¹³⁶ who is in need of placement. CFSA began using this algorithm in mid-December 2018 to assess foster care placements licensed and supervised by CFSA and National Center for Children and Families (NCCF) in the District of Columbia and Maryland. NCCF, CFSA's provider for homes in Maryland, utilizes different processes for placement matching for those children whose cases they supervise and manage. The automated algorithm provides an important tool, but it does not provide the entire solution for appropriate placement matching. Once possible placements are identified, staff who are knowledgeable of the child must be involved to determine which placement may be the best match and what supportive services are necessary to ease the transition and ensure the child and placement providers' needs are met.

Updates on Needs Assessment and Resource Development Plan

One aspect of CFSA's Needs Assessment and Resource Development Plan (RDP) process included an analysis of placement challenges for high-needs youth and the creation of a resource plan to build services to meet identified gaps. CFSA submitted a draft FY2018 Needs Assessment to the Monitor on August 1, 2018. Based on the Monitor's feedback, an updated Needs Assessment and RDP were provided by CFSA to the Monitor on October 1, 2018. Bulleted below are updates on several strategies in the Resource Development Plan related to expanding placement resources and supports:

- In response to a need for a more structured environment for youth with intellectual and behavioral health challenges, in August 2018, CFSA awarded a contract to Innovative Life Solutions for the placement of up to five children in a group home with services for this population.
- In early 2017, CFSA began utilizing SOY (Specialized Opportunities for Youth) foster homes as placement resources for youth with significant behavioral challenges. SOY foster parents receive additional skill training and an increased stipend payment. CFSA has found these homes to be successful with many youth, and thus sought to expand their capacity. In FY2019, CFSA increased the number of SOY foster homes to 11 homes, capable of serving a total of 24 children. CFSA has committed to increasing this total by adding new homes with capacity for an additional 10 beds by September 2019.

¹³⁶ Characteristics may include the following: sexually acting out behaviors, gang ties or affiliations, LGBTQ, pet or food allergies or diet restrictions, physical limitations or special medical needs, medical limitations that require assistance, developmental delays, parenting or expecting a child, requires transportation, participates in extracurricular or community activities, required to visit with biological parents or pre-adopt guardianship prospects, requires religious accommodations, pending legal issues, verbally aggressive, physically aggressive, and practices daily living skills (i.e., cleaning, cooking, washing clothes, etc.).

- CFSA added three professional resource homes for pregnant and parenting youth to provide alternatives to independent living settings for this population. These resource parents receive 20 hours of in-service training above and beyond the hours required for pre-service training, provide monthly progress reports on the youth placed in their home, and serve as supports to one another.
- CFSA has assessed that the programming, services, and effectiveness of congregate care facilities where youth are placed varies greatly among providers. In response, during the summer of 2018, CFSA revised the scope of work for both traditional and therapeutic congregate care settings and in January 2019, released Requests for Proposals (RFPs) to secure capacity for 40 youth in traditional congregate care facilities and 12 youth in therapeutic congregate settings; proposals were due on March 29, 2019. The traditional congregate care solicitation seeks placements for children between the ages of 13 to 21 and requires the facility to provide an array of services, including daily structured programming, behavior modification management system, health care services, recreation, life skills training, and community connections. The therapeutic congregate care solicitation defines the population to be served as youth between the ages of 13 to 21, who present with a mental health diagnosis, substance abuse issues, sexual deviance, aggression, post-traumatic stress disorder, or depression. The proposals will be evaluated as part of the procurement process with an expected contract date of October 2019.
- CFSA has worked with its Maryland partner, NCCF, to identify and resolve challenges in providing stable placements for some youth. One of the challenges identified by NCCF is perceived verbal aggression of youth. In response, NCCF provided training to foster parents on verbal aggression and have focused recruitment efforts on foster parents with the temperament and skills to support older youth.
- CFSA trained Resource Parent Support Workers and social workers on Triple P Parenting¹³⁷, an evidence-based program that teaches hands-on parenting skills.

b. Relative Resources

CFSA social workers seek to maintain family ties for children through early identification of family members, temporary emergency licensure support, and striving to make a kinship home the first and preferred placement for children entering care. CFSA's Kinship Support Unit is responsible for many of these efforts and seeks to engage families who are at-risk of having their children removed in Family Team Meetings (FTMs). CFSA's policy requires a referral to the Diligent Search Unit to locate parents, grandparents, and other relatives at the same time a FTM referral is made.¹³⁸ It is CFSA's practice, and a requirement of the IEP, to identify family members

¹³⁷ For more information on Triple P Parenting, see <https://www.triplep.net/glo-en/find-out-about-triple-p/triple-p-in-a-nutshell/>

¹³⁸ The Kinship Family Licensing Unit and Diligent Search Unit work in tandem to assess the homes of potential kinship resources and complete necessary background checks. Additionally, staff are available to conduct fingerprinting on-site at CFSA, which increases the speed and ease of licensing kinship resources.

who may be able to join in the FTM planning process in order to provide information and support to children and parents and also be considered as placement options if needed.

Both of the IEP Exit Standards regarding identification and inclusion of relative resources in FTMs (IEP citations I.B.7.a. & b.) are designated as Outcomes to be Maintained and as discussed below, required performance was maintained during this period.

Performance for the period July 1, 2018 through March 31, 2019:

Between July 2018 and February 2019¹³⁹, of the 101 cases in which children were at-risk of being removed from their families, CFSA took necessary steps to offer or facilitate pre-removal FTMs in 91 (90%) cases.¹⁴⁰ Additionally, of the 139 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate, and invite known relatives to the FTM in 136 (98%) cases.

c. Sibling Placements and Visits

Maintaining connections to siblings when children enter foster care mitigates some of the trauma of family separation and can help children sustain their critically important lifelong connections and supports. CFSA policy and practice promotes sibling relationships by seeking to place siblings together and ensuring regular visitation if they are placed apart. CFSA continued to meet the Exit Standards related to placement of siblings together (80%) (IEP citation I.C.20.a.) and the frequency of visitation between siblings when they are placed apart (IEP citation I.C.20.b.).

Performance for the period July 1, 2018 through March 31, 2019¹⁴¹:

As of March 31, 2019, of the 107 applicable children¹⁴² who entered foster care between October 2018 and March 2019 with their siblings or within 30 days of their siblings, 80 percent (86 children) were placed with some or all of their siblings.¹⁴³ Performance meets the level required by the Exit Standard.

The IEP requires that 80 percent of siblings who are not placed together visit at least monthly and 75 percent of siblings visit at least twice a month. Between July 2018 and March 2019, a monthly range of 90 to 95 percent of siblings had at least monthly sibling visits, and a range of 86 to 92 percent of siblings each month had at least twice monthly visits with at least one of their siblings.

¹³⁹ Due to shortened report timeline, March 2019 data were not available for inclusion in this report.

¹⁴⁰ CFSA reports that all FTMs not held require a review by a supervisor and program manager to determine if reasonable efforts were made to engage the family and hold the FTM.

¹⁴¹ Performance for a 6 month entry cohort is utilized for reporting on this measure.

¹⁴² There was 1 child who was in a diagnostic/emergency setting who was excluded from the analysis as placement with a sibling was not possible.

¹⁴³ Data were also available for all children in care at a point in time (not limited to those who entered care between October 2018 and March 2019). As of March 31, 2019, 75% of children currently in foster care who entered care with their siblings or within 30 days of their siblings were placed with 1 or more sibling.

Current performance exceeds the required level for both sub-parts of this Exit Standard; this Exit Standard continues to be maintained.

d. Reduction of Multiple Placements for Children in Care

The Exit Standard on placement stability has three sub-parts with different required performance levels based on the length of time children are in care, due to the different placement trajectories and reasonable expectations for children who have been in care for shorter versus longer periods of time (IEP citation I.B.13.a.-c.). The overall goal is to minimize placement moves for all children to the greatest extent possible, recognizing the substantial evidence that demonstrates how children's well-being is harmed by multiple foster care placements. This Exit Standard is designated as an Outcome to be Maintained.

During the last monitoring period, the Monitor identified discrepancies between data that have been reported for this measure and the daily placement tracking data, which identify placement activity for children who are initially placed into foster care, re-enter foster care, or experience a change in placement. The Monitor discussed this issue with CFSA leadership and they agreed that reports available through FACES.NET on this measure were not accurate at that time. Following work to modify the FACES.NET placement screens and data entry processes, CFSA has reported increased confidence in placement data beginning in November 2018.¹⁴⁴ Thus, performance data for November 2018 through March 2019 are discussed below.

Performance for the period July 1, 2018 through March 31, 2019:

The first sub-part of the Exit Standard requires that 83 percent of children placed in foster care during the previous 12 months who were in care at least eight days and less than 12 months have two or fewer placements. Between November 2018 and March 2019, CFSA's performance ranged monthly from 81 to 83 percent.¹⁴⁵

The second sub-part of the Exit Standard requires that 60 percent of children placed in foster care during the previous 12 months who were in care for at least 12 months but less than 24 months have two or fewer placements. Between November 2018 and March 2019, monthly performance for this sub-part ranged from 64 to 70 percent.

The third sub-part focuses on children in care 24 months or longer, and is purposefully focused on the child's placement experiences in the past 12 months, since many of these children have child welfare histories with multiple past placements. The analysis examines whether these children have achieved stability in the most recent 12 month period, and the Exit Standard requires that 75

¹⁴⁴ The Monitor has not independently validated these data.

¹⁴⁵ Monthly performance for children in care at least 8 days and less than 12 months with 2 or fewer placements are as follows: November 2018, 82%; December 2018, 82%; January 2019, 83%; February 2019, 82%; March 2019, 81%.

percent have two or fewer placements in that 12 month period. Between November 2018 and March 2019, performance ranged from 73 to 75 percent.¹⁴⁶

CFSA's performance for two sub-parts of this Exit Standard fell slightly below the required level during some months in the monitoring period. The Monitor considers these deviations to be insubstantial and temporary and this outcome to be maintained.

e. Assessments for Children Experiencing a Placement Disruption

In an effort to increase the stability of children's placements, the IEP requires CFSA to ensure that children in its custody who experience a placement disruption are provided with a comprehensive and appropriate assessment to determine their service and re-placement needs with a follow-up action plan developed no later than within 30 days of a child's re-placement. This assessment is a review that includes, as applicable, the child, their family, kin, current and former caregivers, and Guardian ad Litem (GAL) (IEP citation I.C.21.). This Exit Standard has not been achieved.

There have been multiple challenges in data collection and reporting for this Exit Standard for over a year, which have resulted in the Monitor's inability to report current performance. The most significant challenge has been ensuring that the data provided on the occurrences of placement disruptions were complete and accurate. CFSA has acknowledged this challenge, and as discussed earlier in this section, has made modifications to FACES.NET to ensure a single, uniform system for data entry by staff. An additional obstacle has been ensuring that staff within CFSA and at the provider agencies have a clear understanding of what constitutes a placement disruption (which is sometimes complicated by children with multiple runaway episodes or children purposefully moved from a short term to longer term placement), and thus enter the data about the placement change correctly. The work to resolve both of these challenges took more time than CFSA originally anticipated, however, CFSA has reported that both of these issues were resolved in late-2018. These data have not been independently validated by the Monitor.

Beyond the data validation questions, the Monitor is currently unable to report performance on this measure because CFSA continues to struggle with consistently carrying out the teaming and planning processes required by this Exit Standard. Over the past several years, CFSA has used a range of practices to assess and develop plans for children who experience a placement disruption. Most recently, Resource Development Specialists from CFSA's Placement Unit have been charged with facilitating Placement Disruption Staffings when a child is at risk of a placement disruption or requires a change in placement. The purpose of this staffing is to determine what supports and services can be put in place to stabilize a child's placement and prevent a disruption, or if a disruption has occurred, to assess the child's needs and determine the most appropriate

¹⁴⁶ Monthly performance for children in care 24 months or longer with 2 or fewer placements within the last 12 months are as follows: November 2018, 73%; December 2018, 74%; January 2019, 74%; February 2019, 75%; March 2019, 75%.

placement and supports to meet the child's needs and ensure future stability. These meetings have not routinely occurred as required and necessary. Information provided by CFSA also reflects a lack of teaming across divisions within CFSA and with its private partners. For example, a child's social worker and other team members may meet to discuss the need for a new placement and plan for services for a child, but staff from the Placement Unit are frequently not notified or invited.¹⁴⁷

For the reasons stated above, performance data for this measure are not available for reporting this period.

2. Visitation

Social worker visits with children in out-of-home placement and with their families promote placement stability and increase the likelihood that successful reunification will occur. These visits also are opportunities for engagement with children and their caregivers and enable social workers to assess safety, progress on case plans, and link children and families to needed services, as appropriate. It is important for workers to visit children more frequently when they are newly placed in foster care or have experienced a placement change to ensure they are adjusting well, that their safety and well-being are attended to, and to determine unmet concerns or needs of the child or the placement provider.

Two visitation Exit Standards are designated as Outcomes to be Maintained – frequency of worker visits to children in out-of-home care (IEP citation I.A.5.a-c.)¹⁴⁸ and worker visits to families with in-home services (IEP citation I.A.4.a.&b.)¹⁴⁹. Both of these Exit Standards were maintained this period. Specifically, for social worker visits with children in out-of-home care, a monthly range of 96 to 98 percent of children were visited at least monthly¹⁵⁰ and 95 to 97 percent of children were visited twice during the month by a social worker¹⁵¹. Between July 2018 and March 2019, 92 to

¹⁴⁷ The data provided to the Monitor for this Exit Standard, in some instances, states that a Placement Disruption Staffing is “not applicable” as the team is already planning a meeting. The Monitor agrees that the team meeting being scheduled may negate the need for a Placement Disruption Staffing, and that this meeting may meet the requirements of this *LaShawn* Exit Standard, however, data must be provided for reporting on this standard to reflect all of these meetings, and “not applicable” is not an appropriate designation.

¹⁴⁸ This Exit Standard requires 95% of children in out-of-home care should be visited at least monthly and 90% shall have at least twice monthly visits.

¹⁴⁹ This Exit Standard requires 95% of families receiving in-home services should be visited at least monthly and 85% shall have at least twice monthly visits.

¹⁵⁰ Monthly performance data for monthly out-of-home worker visits are as follows: July 2018, 98%; August 2018, 98%; September 2018, 97%; October 2018, 97%; November 2018, 98%; December 2018, 98%; January 2019, 97%; February 2019, 97%; March 2019, 96%.

¹⁵¹ Monthly performance data for twice monthly out-of-home worker visits are as follows: July 2018, 97%; August 2018, 97%; September 2018, 97%; October 2018, 97%; November 2018, 97%; December 2018, 97%; January 2019, 96%; February 2019, 96%; March 2019, 95%.

96 percent of families receiving in-home services were visited monthly by a social worker¹⁵² and 88 to 94 percent of families received at least two visits by a social worker during the month¹⁵³.

The remaining visitation Exit Standards are designated as Outcomes to be Achieved and pertain to the following – workers assessing for safety during visits with children; frequency of visitation between workers and children during a child’s first month in a new placement; visits between workers and parents; and visits between parents and their children. CFSA newly achieved required performance toward frequency of visits between parents and their children with a goal of reunification, and partially achieved the Exit Standards pertaining to frequency of social worker visits to children newly placed during the month and frequency of visits between workers and parents.

In the prior monitoring period, the Monitor and CFSA jointly conducted case record reviews of statistically significant samples¹⁵⁴ of children with in-home and out-of-home cases open in August 2018 to collect data for the three Exit Standards related to workers assessing for safety during visits. All three Exit Standards require that 90 percent of cases will have documentation verifying each child was visited and seen outside the presence of a caretaker and that safety was assessed during each visit (IEP citation I.A.4.c., 5.d., & 6.e.). CFSA’s performance for all three standards was far below the 90 percent required level. These data were included in the last monitoring report and listed below:

Social Workers Assessment of Safety during Visits – Families with In-Home Services

In August 2018, of the 164 children reviewed, documentation supported that the child was seen outside the presence of the caretaker and safety was fully assessed during two or more monthly visits for 54 (33%) children.

Social Workers Assessment of Safety during Visits – Children in Out-of-Home Care

In August 2018, of the 158 children reviewed, documentation supported that the child was seen outside the presence of the caretaker and safety was fully assessed during two or more monthly visits for 69 (44%) children.

¹⁵² Monthly performance data for monthly in-home worker visits are as follows: July 2018, 94%; August 2018, 95%; September 2018, 92%; October 2018, 93%; November 2018, 95%; December 2018, 94%; January 2019, 93%; February 2019, 93%; March 2019, 96%.

¹⁵³ Monthly performance data for twice monthly in-home worker visits are as follows: July 2018, 88%; August 2018, 92%; September 2018, 88%; October 2018, 91%; November 2018, 94%; December 2018, 91%; January 2019, 90%; February 2019, 89%; March 2019, 94%.

¹⁵⁴ Sampling represents a $\pm 7\%$ margin of error with 95% confidence in its results.

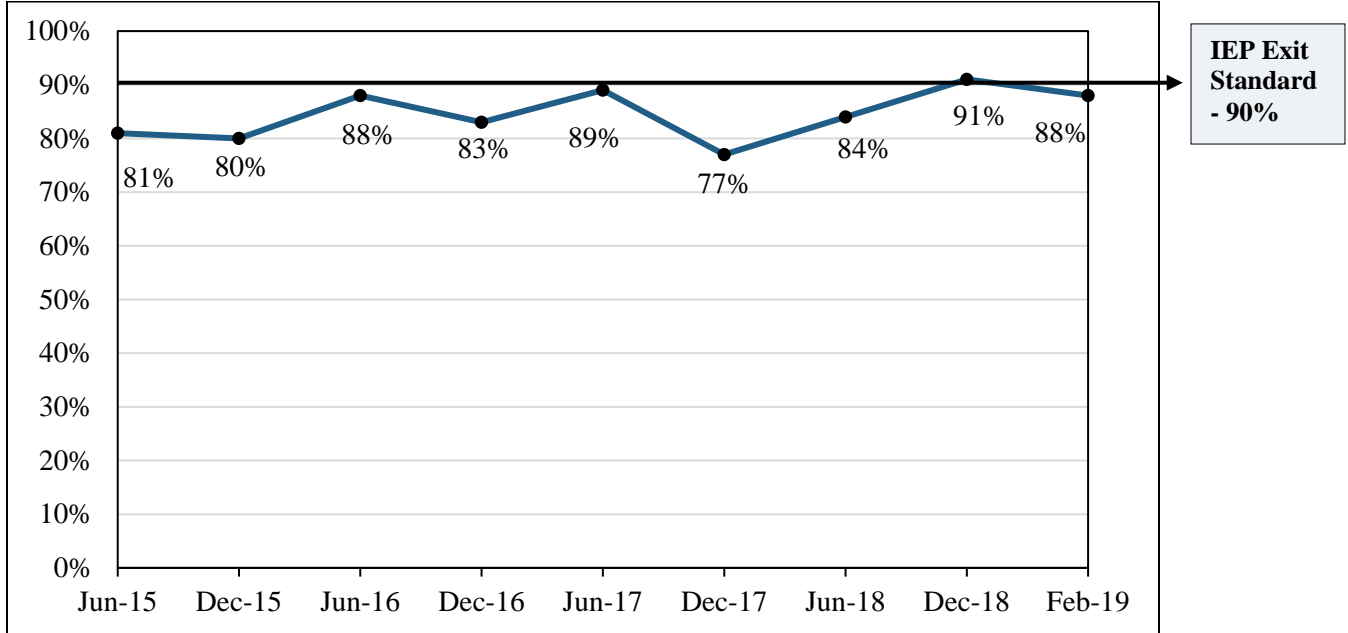
Social Workers Assessment of Safety during Visits – Children Experiencing a New Placement or a Placement Change

Of the 60 children reviewed who were initially placed or experienced a placement change in July 2018, documentation supported that safety was fully assessed during four or more monthly visits for 25 (42%) children.

Social Worker Visits – Children Experiencing a New Placement or a Placement Change

IEP Requirement	<p>10. <u>Visitation for Children Experiencing a New Placement or a Placement Change:</u></p> <ul style="list-style-type: none">a. A CFSA social worker or private agency social worker with case management responsibility shall make at least two visits to each child during the first four weeks of a new placement or a placement change.b. A CFSA social worker, private agency social worker, family support worker or nurse care manager shall make two additional visits to each child during the first four weeks of a new placement or a placement change.c. At least one of the above visits during the first four weeks of a new placement or a placement change shall be in the child's home.d. At least one of the visits during the first four weeks of a new placement or a placement change shall include a conversation between the social worker and the resource parent to assess assistance needed by the resource parent from the Agency. <p>(IEP citation I.A.6.a-d.)</p>
Exit Standard	<p>90% of children newly placed in foster care or experiencing a placement change will have four visits in the first four weeks of a new placement or placement change as described.</p>

**Figure 13: Required Number of Worker Visits to Children in New Placements
June 2015 – February 2019**



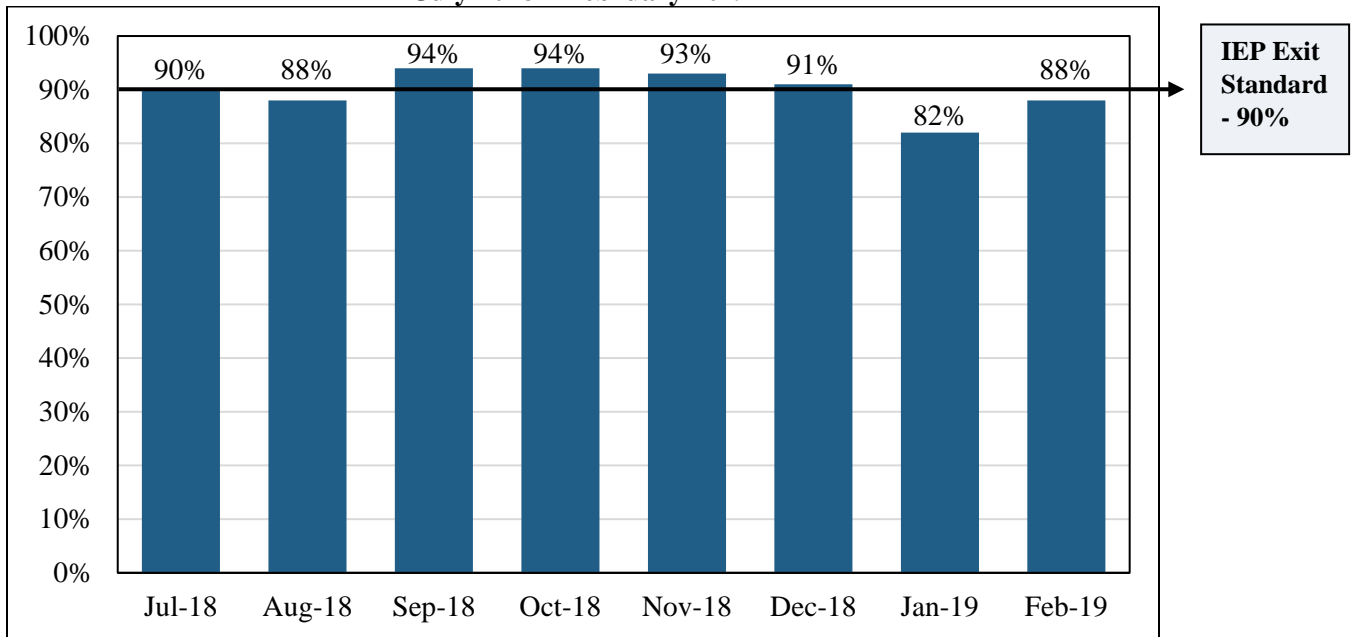
Source: CFSA Administrative Data, FACES.NET report CMT014

Performance for the period July 1, 2018 through March 31, 2019:

Between July 2018 and February 2019¹⁵⁵, monthly performance ranged between 82 and 94 percent of children who were newly placed or experienced a placement change had the required number of visits by a worker (see Figure 14). Specifically, during the month of February 2019, there were 98 individual child placements applicable to this measure and 86 (88%) children had the required number of weekly visits by a CFSA social worker, private agency social worker, family support worker, or nurse care manager with at least one visit occurring in the child's home. CFSA met the required level of performance during five of the eight months assessed. The Monitor considers this Exit Standard to be partially achieved.

¹⁵⁵ Monthly performance data require tracking visits for 28 days following the initial placement or placement change; therefore, data are 1 month behind other reports and March 2019 performance was not available at the time of writing this report.

**Figure 14: Required Number of Worker Visits to Children in New Placements
July 2018 – February 2019**



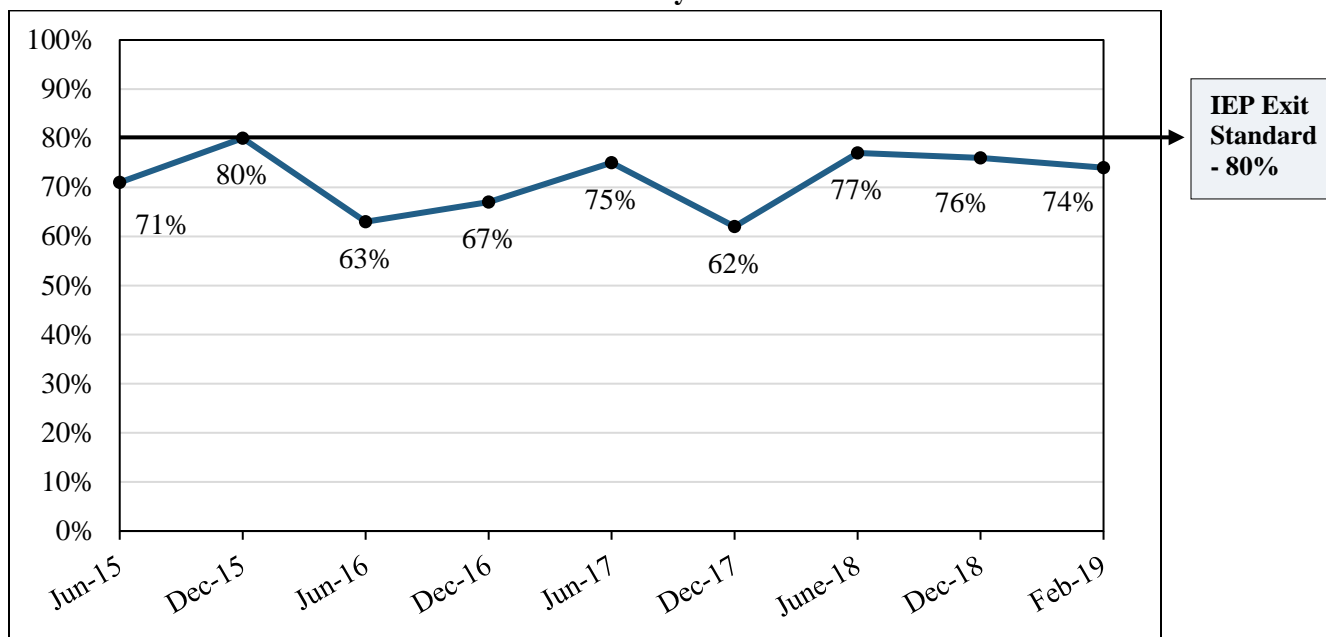
Source: CFSA Administrative Data, FACES.NET report CMT014

The Exit Standard also requires that at least one of the visits during the first four weeks of a new placement or a placement change include a conversation between agency staff and the resource parent to determine what, if any, assistance is needed from the agency. Performance data for July 2018 were collected during the prior period and were included in the last monitoring report. Of the 60 children reviewed who experienced a new placement or placement change in July 2018, documentation supported a conversation between agency staff and the resource parent in 63 percent (38 of 60) of cases.

Visits between Parents and Workers

IEP Requirement	<p>18. <u>Visits between Parents and Workers:</u></p> <p>a. For children with a permanency goal of reunification, in accordance with the case plan, the CFSA social worker or private agency social worker with case-management responsibility shall visit with the parent(s) at least one time per month in the first three months post-placement.¹⁵⁶</p> <p>b. A CFSA social worker, nurse care manager or family support worker shall make a second visit during each month for the first three months post-placement.</p> <p>(IEP citation I.B.10.)</p>
Exit Standard	80% of parents will have twice monthly visitation with workers in the first three months post-placement.

**Figure 15: Households with Twice Monthly Visits between Workers and Parents with Goal of Reunification
June 2015 – February 2019**



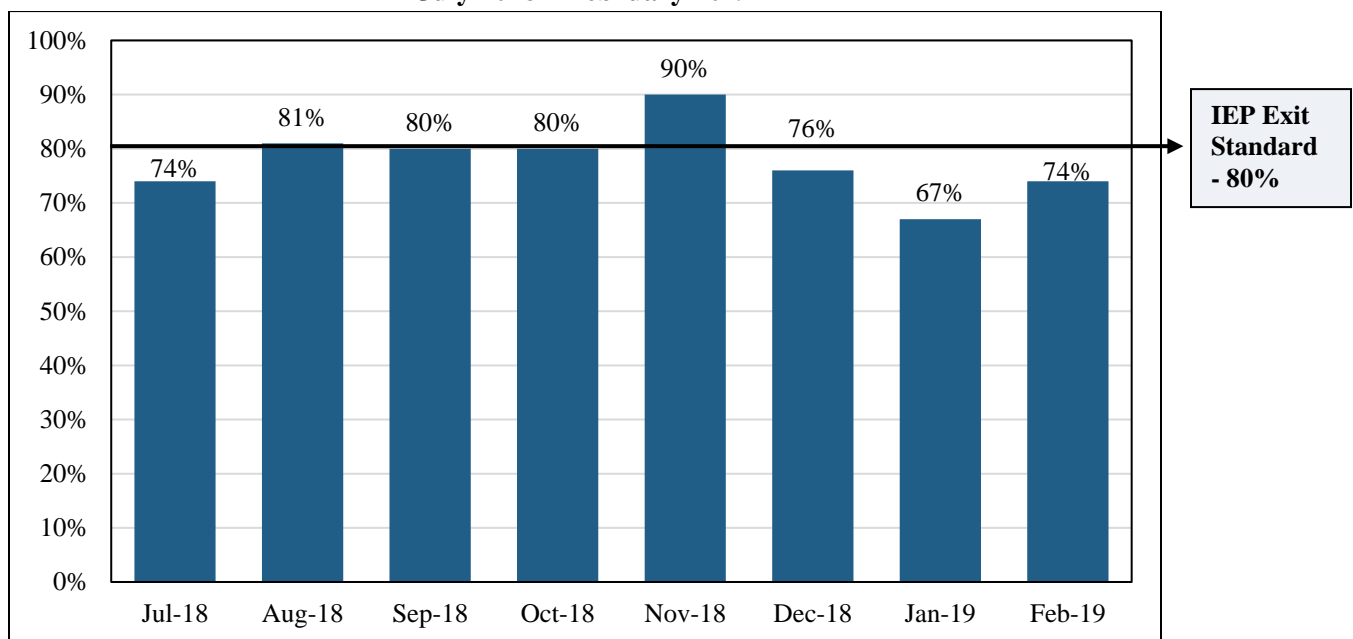
Source: CFSA Administrative Data, FACES.NET report CMT267 and findings from CFSA internal audit of missed visits efforts

¹⁵⁶ This Exit Standard is also satisfied when there is documentation that the parent(s) is(are) unavailable or refuses to cooperate with the Agency.

Performance for the period July 1, 2018 through March 31, 2019:

Between July 2018 and February 2019¹⁵⁷, monthly performance on this measure ranged between 67 and 90 percent, meeting or exceeding the required level of performance during four of eight months this period (see Figure 16). Specifically, in February 2019, there were 54 families of children with a goal of reunification applicable to this measure and parents in 40 (74%) families received two social worker visits each month or there was documentation in the record that the parent was unavailable or refused to cooperate despite agency efforts (see Figure 15). The Monitor considers this Exit Standard partially achieved.

**Figure 16: Households with Twice Monthly Visits between Workers and Parents with Goal of Reunification
July 2018 – February 2019**



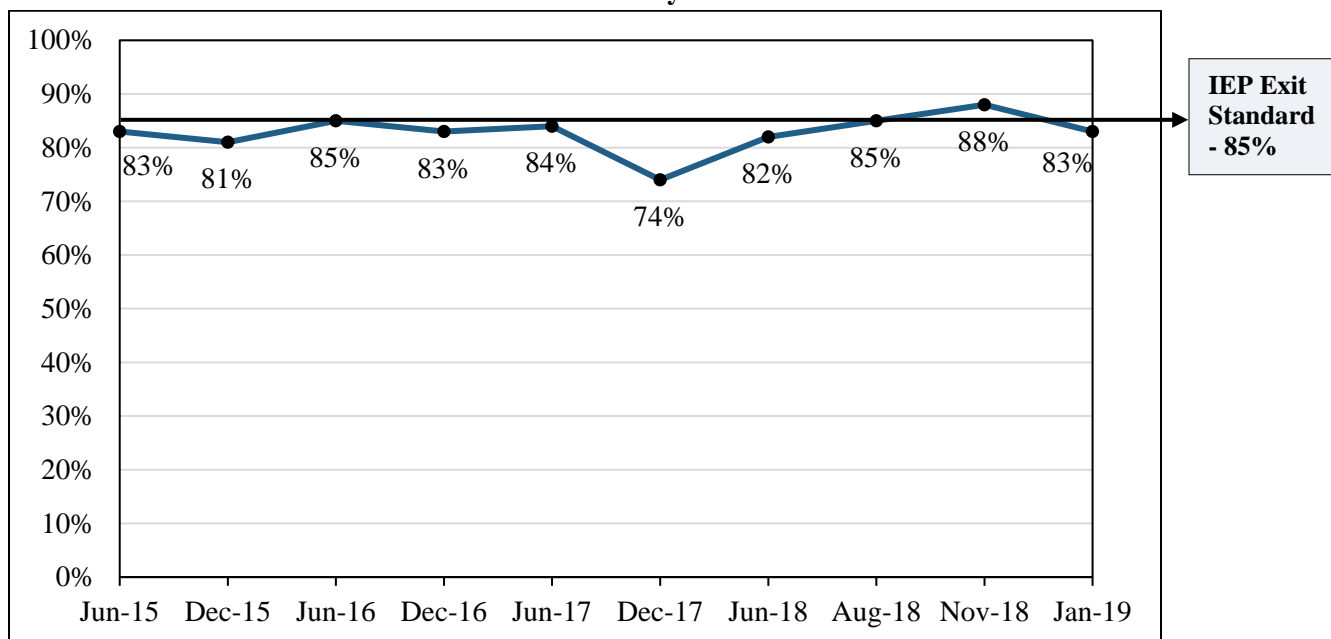
Source: CFSA Administrative Data, FACES.NET report CMT267 and findings from internal audit of missed visits efforts

¹⁵⁷ Due to shortened report timeline, March 2019 data were not available for inclusion in this report.

Visits between Parents and Children

IEP Requirement	<p>19. <i>Visits between Parents and Children</i>: There shall be weekly visits between parents and children with a goal of reunification unless clinically inappropriate and approved by the Family Court. In cases in which visitation does not occur, the Agency shall demonstrate and there shall be documentation in the case record that visitation was not in the child's best interest, is clinically inappropriate or did not occur despite efforts by the Agency to facilitate it.</p> <p>(IEP citation I.B.11.)</p>
Exit Standard	<p>85% of children with the goal of reunification will have weekly visitation with the parent with whom reunification is sought.¹⁵⁸</p>

**Figure 17: Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought
June 2015 – January 2019**



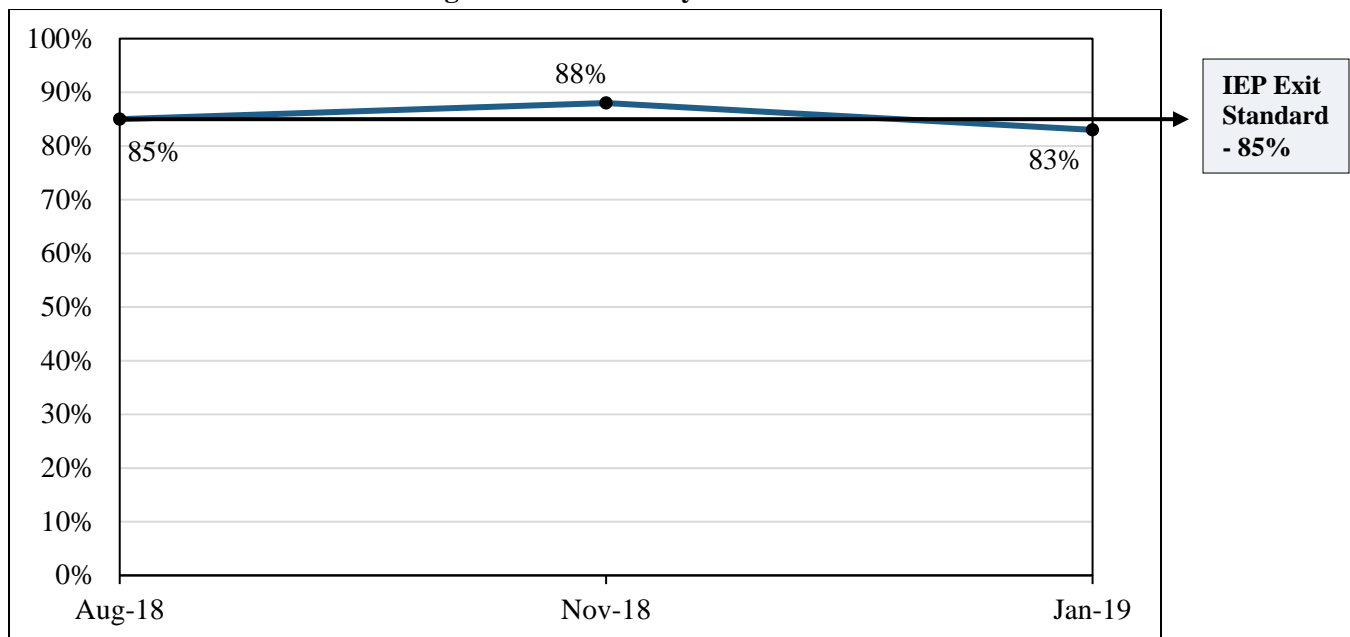
Source: CFSA Administrative Data, FACES.NET report CMT012 and findings from internal audit of missed visits efforts

¹⁵⁸ This Exit Standard is also satisfied in cases where it is documented that a visit is not in the child's best interest, is clinically inappropriate, or did not occur despite efforts by the agency to facilitate it.

Performance for the period July 1, 2018 through March 31, 2019:

Assessing performance for this measure requires validation of those cases in which required visits did not occur, however, the social worker made necessary efforts in an attempt to facilitate visits. This validation was completed for performance in August 2018, November 2018, and January 2019, and performance ranged between 83 and 88 percent (see Figure 18). Specifically, in January 2019, 417 children were applicable to this measure and 346 (83%) had weekly visits with the parent with whom reunification is sought or there was documentation in the record that visits did not occur because the visit was not in the child's best interest, was clinically inappropriate, or did not occur despite efforts made by the agency. CFSA's performance met the required target of 85 percent during two of the three months assessed this period, and was two percent below the required level in the third month; the Monitor considers this Exit Standard to be newly achieved.

**Figure 18: Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought
August 2018 – January 2019**



Source: CFSA Administrative Data, FACES.NET report CMT012 and findings from internal audit of missed visits efforts

Performance on Strategy Plan:

CFSA developed one strategy to increase performance on visitation requirements that remained to be achieved (IEP I.A.4.c., I.A.5.d., I.A.6.e.), specifically:

- *No later than 30 days after the upcoming joint CFSA-CSSP reviews of the safety assessments during visitation, CFSA will implement, track and report on jointly agreed upon recommendations for improvement. The jointly agreed upon recommendations will be incorporated into this Strategy Plan (2018 Strategy Plan, p.3).*

The joint case record review referenced in this strategy began in September 2018 and was completed in late-October 2018. Although data reflect CFSA's performance was far below the required level, CFSA did not develop any recommendations for improvements.

3. Services to Families and Children to Promote Safety, Permanency and Well-Being, and Case Planning Process

CFSA uses Quality Service Reviews (QSRs) to assess case planning and service delivery to children and families. Key elements of acceptable case planning include engaging families, utilizing accurate functional assessments,¹⁵⁹ and teaming with professional and informal supports including mental health providers, schools, foster parents, and family members. These core elements of practice – engagement, ongoing assessment, and teaming – are essential to the development of the case plan and the implementation of appropriate supports to ensure child safety and reach the identified permanency and well-being goals for the child and family.

Two Exit Standards related to the quality of case practice – provision of services (IEP citation I.A.3.) and case planning (IEP citation I.B.17.) – are Outcomes to be Achieved that are measured through QSRs. In CY2018, CFSA reviewed 137 cases using the QSR methodology. The cases reviewed are randomly selected using a stratified sample and over the past two years, CFSA has increased the number and percentage of in-home families reviewed to more closely resemble the percentage of in-home families served by CFSA. Of the 137 cases reviewed in CY2018:

- 83 cases involved children in out-of-home care and 54 involved children who were living with their family and receiving in-home support from the agency.
- Children in 102 cases were managed by CFSA, 31 cases were managed by NCCF, two cases were managed by Latin American Youth Center (LAYC), and two cases were case managed by Lutheran Social Services (LSS)¹⁶⁰.

a. Services to Families and Children to Promote Safety, Permanency, and Well-Being

Services to families and children to promote safety, permanency, and well-being are central to CFSA's work. Two indicators from the QSR protocol are used to measure CFSA's performance on the Exit Standard pertaining to appropriate service provision to families and children to promote these goals. These indicators, *Implementing Supports and Services* and *Pathway to Case Closure*, are described in further detail in Figures 19 and 20 below. These descriptions include the

¹⁵⁹ CFSA uses the Caregiver Strength and Barriers Assessment, a functional assessment tool that focuses on parents' capacity, strengths, and needs, and the Child and Adolescent Functional Assessment Scale (CAFAS) or Preschool and Early Childhood Functional Assessment Scale (PECFAS), a functional assessment tool for understanding the behaviors of children in different domains – including home, school, and the community. These functional assessments allow workers to assess behaviors and behavior changes over time in response to interventions – for example, therapy – and changing conditions.

¹⁶⁰ The 2 cases managed by LSS involved youth who were in the Unaccompanied Refugee Minor program.

parameters QSR reviewers consider in rating performance, as well as descriptions of minimally acceptable performance and unacceptable performance as described in the QSR protocol.

<p>IEP Requirement</p>	<p><u>5. Services to Families and Children to Promote Safety, Permanency and Well-Being:</u> Appropriate services, including all services identified in a child or family’s safety plan or case plan shall be offered and children/families shall be assisted to use services to support child safety, permanence and well-being.</p> <p>CFSA shall provide for or arrange for services through operational commitments from District of Columbia public agencies and/or contracts with private providers. Services shall include:</p> <ul style="list-style-type: none"> a. Services to enable children who have been the subject of an abuse/neglect report to avoid placement and to remain safely in their own homes; b. Services to enable children who have or will be returned from foster care to parents or relatives to remain with those families and avoid replacement into foster care; c. Services to avoid disruption of an adoptive placement that has not been finalized and avoid the need for replacement; and d. Services to prevent the disruption of a beneficial foster care placement and avoid the need for replacement. <p style="text-align: right;">(IEP citation I.A.3.)</p>
<p>Exit Standard</p>	<p>In 80% of cases, appropriate services, including all services identified in a child’s or family’s safety plan or case plan shall be offered along with an offer of instruction or assistance to children/families regarding the use of those services.¹⁶¹</p>

¹⁶¹ The Monitor will determine performance based on the QSR implementation and pathway to safe closure indicators for which 80% of cases will be rated acceptable on both indicators, as applicable (a score of 4 or higher on the 6 point QSR indicator scale).

Figure 19: QSR *Implementing Supports and Services* Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance^{162,163}

Implementing Supports and Services Indicator

- *Parameters Reviewers Consider:* Degree to which: (1) strategies, formal and informal supports, and services planned for the child, parent or caregiver, and family are available and provided on a timely and adequate basis. (2) The combination of supports and services fit the child and family situation so as to maximize potential results and benefits while minimizing conflicting strategies and inconveniences. (3) Delivery of planned interventions is sufficient and effective to help the child and family make adequate progress toward attaining the life outcomes and maintaining those outcomes beyond case closure.
- *Description of Acceptable/Unacceptable Performance:*

Minimally Acceptable Implementation means that a fair array of supports and services somewhat matches the intervention strategies identified in the case plan and is minimally to fairly helping the child and family meet near-term needs and make progress toward planned outcomes. A minimally adequate to fair set of supports and services is usually available, used and seen as somewhat satisfactory by the family. The array provides few options, limiting professional judgment and family choice in the selection of providers. The team is considering taking steps to mobilize additional resources to give the family choice and/or provide resources to meet the particular family needs but has not yet taken any steps.

Unacceptable Implementation means that supports and services identified in the case plan are at least somewhat limited or may not be readily accessible or available to the family. A limited set of supports and services may be inconsistently available and used but may be seen as partially unsatisfactory by the family. The service/support array provides few options, substantially limiting use of professional judgment and family choice in the selection of providers. The team has not yet considered taking steps to mobilize additional resources to give the family greater choice and/or provide resources to meet particular family needs.

¹⁶² *Quality Service Review Protocol for a Child and Family: Reusable Protocol for Examination of Child Welfare and Mental Health Services for a Child and Family*, Shared Practice Protocol. Human Services and Outcomes, January 2015, p. 70-71.

¹⁶³ This indicator is considered to be acceptable when all of the sub-parts – for the child, birth mother, birth father, and substitute caregiver – are rated acceptable. When a birth parent or substitute caregiver is not involved in the case and is not rated in the review, that sub-part is not considered in determining the overall rating for the indicator.

Figure 20: QSR Pathway to Case Closure Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹⁶⁴

Pathway to Case Closure Indicator

- *Parameters Reviewers Consider:* To what degree: (1) Is there a clear, achievable case goal including concurrent and alternative plans? (2) Does everyone involved, including family members, know and agree on what specific steps need to be achieved in order to achieve the case goal and close the case safely? (3) Is the child/family making progress on these steps and informed of consequences of not meeting the necessary requirements within the required timelines? (4) Are team members planning for the youth's transition from care in APPLA cases? (5) Are reasonable efforts being made to achieve safe case closure for all case goals?

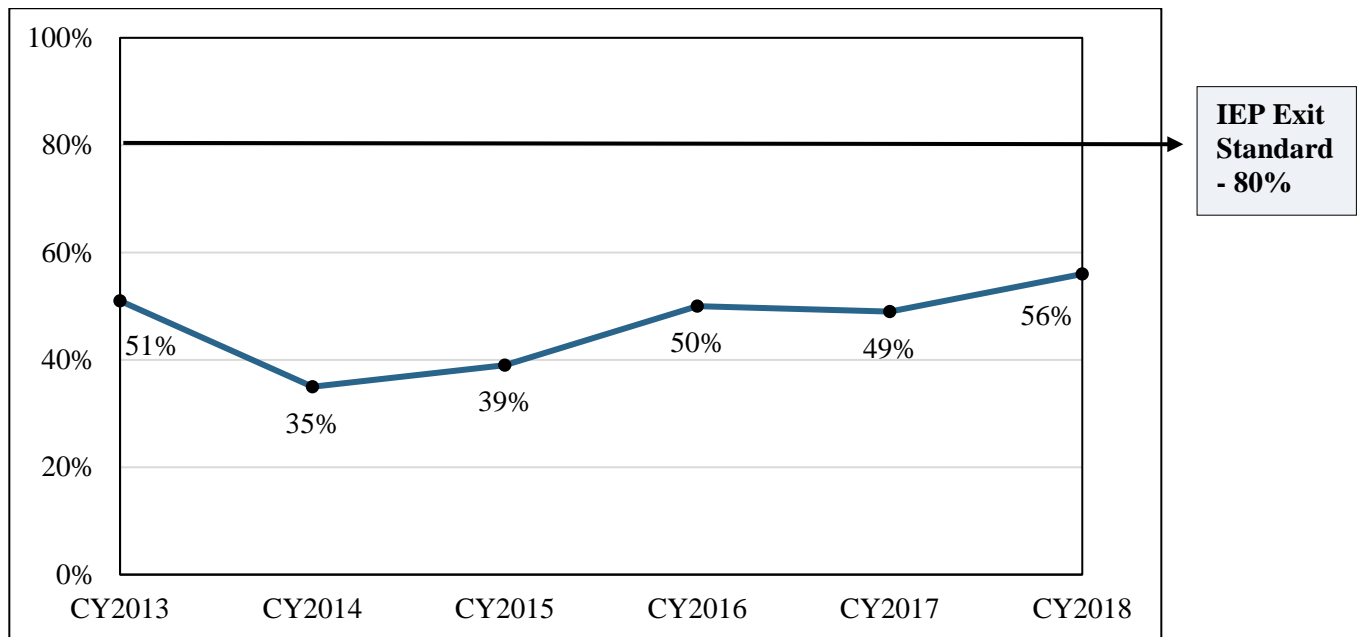
- *Description of Acceptable/Unacceptable Performance:*

Minimally Acceptable Pathway to Case Closure means some people involved in the case understand the case goal, including any plan alternatives. Minimally adequate to fair efforts are being made to achieve the permanency goal and to remove any barriers to permanency. Some people have agreed upon the steps that must be accomplished and requirements that must be met for safe case closure. Some team members are aware of timelines and consequences for not meeting requirements and the team is making some progress towards closure, though not in a timely manner - or - the team has established a good plan but has not made sufficient progress on it.

Unacceptable Pathway to Case Closure means few people involved in the case understand or agree with the case goal, including any plan alternatives. Marginal or inconsistent efforts are being made to achieve the permanency goal and to remove any barriers to permanency. Few steps that must be accomplished or requirements that must be met for safe case closure, timelines and consequences for not meeting requirements have been defined and/or agreed upon by family members and providers. The case is not making sufficient progress towards closure - or - the team has established a fair plan but has not made progress on it.

¹⁶⁴ *Quality Service Review Protocol for a Child and Family: Reusable Protocol for Examination of Child Welfare and Mental Health Services for a Child and Family*, Shared Practice Protocol. Human Services and Outcomes, January 2015, p. 62-63.

**Figure 21: QSR Findings on Services to Children and Families to Promote Safety, Permanency, and Well-Being
CY2013 – CY2018**

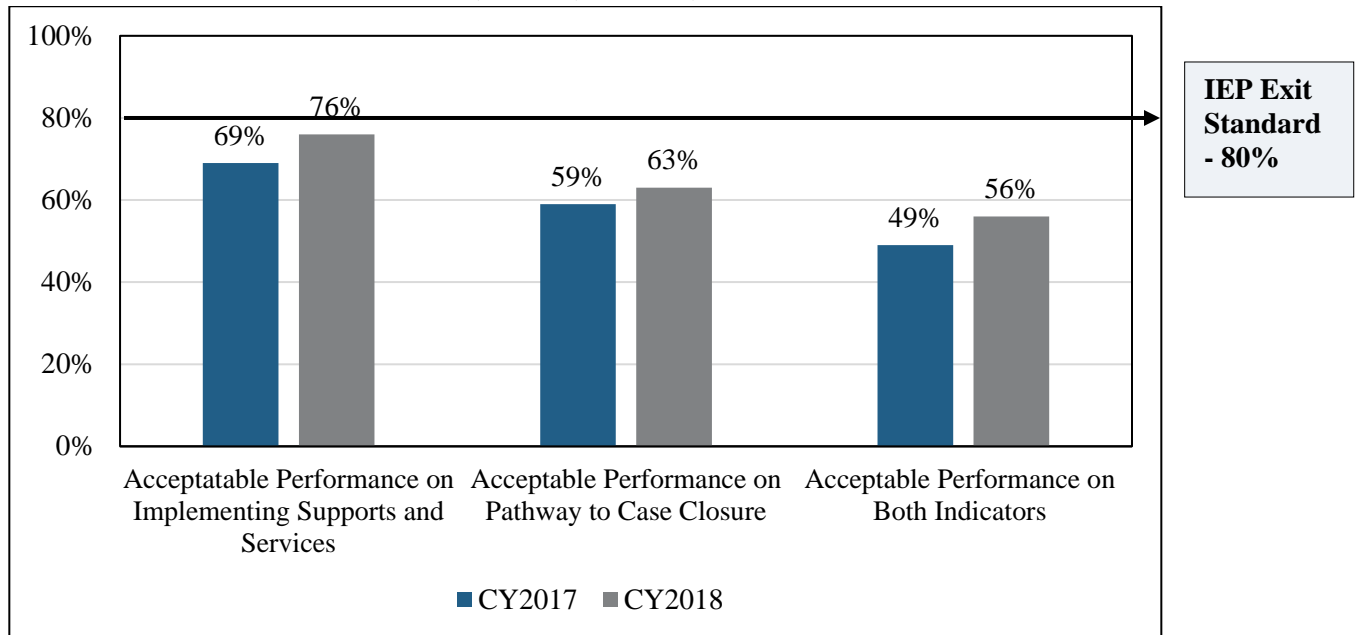


Source: QSR Data, CY2013 – 2018

Performance for the period January 1 through December 31, 2018:

As reflected in Figure 21 above, CFSA's overall performance on this Exit Standard improved in CY2018 from previous years. Over half of the cases reviewed in CY2018 (56%; 77 of 137) were rated acceptable on *both* the *Implementing Supports and Services* and *Pathway to Case Closure* indicators, a noteworthy improvement from performance in CY2017 (49%). Ratings for each individual indicator varied, with performance on *Implementing Supports and Services* rated acceptable in 76 percent (104 of 137) of cases and *Pathway to Case Closure* rated acceptable in 63 percent (86 of 137) of cases (see Figure 22).

**Figure 22: QSR Findings by Indicator on Services to Children and Families to Promote Safety, Permanency, and Well-Being
CY2017, N=128; CY2018, N=137**



Source: QSR Data, CY2017 – 2018

This is the first time since the Monitor began disaggregating data by provider and administration that performance on *both* indicators for cases managed by CFSA in-home, CFSA out-of-home, and private providers have all been 50 percent or higher (see Table 8). The overall increase in performance may be attributable, in part, to the reduction in the number of private partners managing children involved with CFSA, which appears to have resulted in more consistent practice and more accountability to shared standards of practice, one of the goals of TSHR. Also, while still not at an acceptable level, it is also worth noting that private agency performance on *both* indicators increased substantially from 35 percent in CY2017 to 51 percent in CY2018.

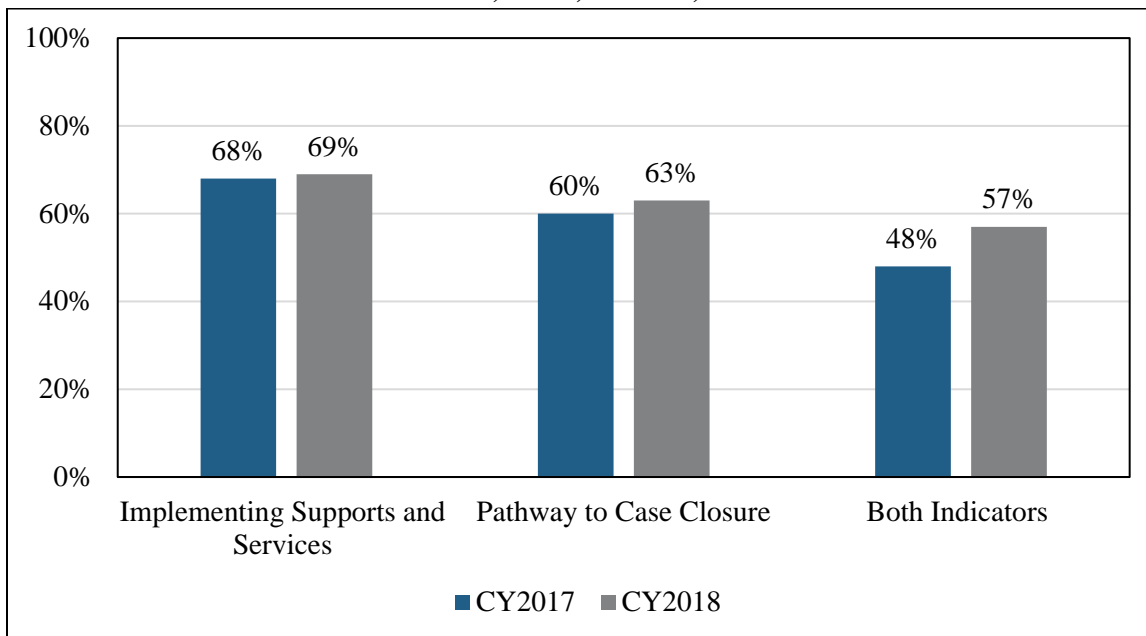
**Table 8: Performance on Services to Children and Families to Promote Safety, Permanency, and Well-Being across Administration (CY2018)
CFSA in-home, N=54; CFSA out-of-home, N=48; Private Agencies, N=35**

	CFSA In-Home	CFSA Out-of-Home	Private Agencies	All
<i>Implementing Supports and Services</i>	69%	81%	80%	76%
<i>Pathway to Case Closure</i>	63%	69%	54%	63%
<i>Both Indicators</i>	57%	58%	51%	56%

Source: QSR Data, CY2018

Practice with families receiving in-home services has also improved in the last year. Since CY2017, CFSA's performance has improved on *both* indicators assessed for this Exit Standard by 9 percent (see Figure 23).

Figure 23: Performance on QSR Indicators for In-Home Cases
CY2017, N=40; CY2018, N=54



Source: QSR Data, CY2017 – 2018

During CY2018, CFSA continued to use its Levels of Care construct to identify practice expectations and requirements for worker contact with families receiving in-home services. There are three Levels of Care: Intensive, Intermediate, and Graduation.¹⁶⁵ Based on a review of the data and the written case narratives completed by reviewers for each QSR, the Monitor observed positive changes in practice likely attributable to clearer guidance and expectations specifically related to teaming and engaging informal supports earlier in the case planning process. Through better engagement of team members outside of CFSA – for example, therapists, school staff, and extended family members – workers and supervisors are better able to accurately assess both the child and family needs and connect the family to appropriate supports within the community. Additionally, by gaining a better, more complete assessment of families, staff are able to build on existing family strengths to achieve safe case closure.

While there have been improvements overall in performance with in-home families, when separately assessing the two indicators for this Exit Standard, there is poorer performance on *Implementing Supports and Services* in these cases. CFSA has made investments in community

¹⁶⁵ CFSA assigns a Level of Care to each in-home case based on the allegations, risk factors, and identified needs of the family, as well as the family's progress, and adjusts the Level of Care as necessary and appropriate. Cases assigned an Intensive Level of Care require more frequent and intense support from the social worker compared to Intermediate and Graduation level cases. Graduation level cases are those where the focus is on stabilizing the family, closing the CFSA case, and sometimes transitioning case management to a Collaborative.

services and developed contracts with providers to increase access and availability of services, however, there continue to be challenges in connecting families with open in-home cases to quality services, including those for mental health and substance use. Utilization data from the Title IV-E Waiver Demonstration Project highlight a significant gap, with capacity of providers under contract far exceeding actual utilization rates (see Table 9).

**Table 9: Utilization of Title IV-E Waiver Demonstration Project Programs
As of December 31, 2018**

Intervention	Provider	Current Capacity	Enrolled as of 12/31/18	FY18: # of Families Served	FY18: # of Children Served	FY19: # of Families Served	FY19: # of Children Served
<i>Project Connect</i>	Progressive Life Center	110	8	17	33	14	28
<i>Parent Education and Support Program (PESP)</i>	Collaborative Solutions for Communities (CSC)	75	36	145	190	36	48
	East River Family Strengthening Collaborative (ERFSC)	200	74	325	382	74	142
<i>Parent & Adolescent Support Services (PASS)</i>	Department of Human Services (DHS)	70	12	56	56	12	12
<i>Family Peer Coaches</i>	Department of Behavioral Health (DBH)	40	11	31	104	17	19
<i>Mobil Crisis Stabilization</i>	Catholic Charities	300	25	150	300	21	56

Source: CFSA Manual Data

CFSA can learn from past challenges as they transition to providing services through Family First Prevention Services Act (FFPSA).¹⁶⁶ As CFSA outlined in its 2018 Resource Development Plan (RDP), through planning for implementation of FFPSA, CFSA and the Department of Behavioral Health (DBH) completed an environmental scan of available DBH programs and services in the community and identified a number of evidence-based programs which had the capacity to serve

¹⁶⁶ The Family First Prevention Services Act (FFPSA) was passed in February 2018 as part of the Bipartisan Budget Act. Under FFPSA, states will be able to claim Title IV-E reimbursement for mental health, substance use, and in-home parent skill-based programs that are identified as well-supported, supported, or promising practices. CFSA will receive reimbursement for these services when they are provided to eligible children and families, which includes pregnant and parenting youth in foster care and children who are candidates for foster care.

additional families.¹⁶⁷ In the third quarter of FY2019, CFSA is planning to have additional conversations with DBH and substance abuse treatment providers in the District to explore current capacity to work with parents. As CFSA takes the opportunity provided through FFPSA to increase federal funding for community-based services, attention will have to be paid to issues of whether there is a match between contracted and real capacity to quickly link services to families in need and to ensuring that the treatment modalities are diverse and can provide evidence of effectiveness.

b. Case Planning Process

Timely and effective case planning at the beginning and throughout a child and family's child welfare involvement depends upon engagement with the family and teaming with formal and informal supports. CFSA policy requires that every effort be made to locate family members and develop case plans in partnership with children and families, formal resources working with a family, and informal support networks as identified by the child and family. Case plans should identify specific services, supports, and timetables for providing services needed to achieve identified goals, including permanency outcomes.

IEP Requirement	<p>33. <u>Case Planning Process:</u></p> <ul style="list-style-type: none"> a. CFSA, with the family, shall develop timely, comprehensive and appropriate case plans in compliance with District law requirements and permanency timeframes, which reflect family and children's needs, are updated as family circumstances or needs change, and CFSA shall deliver services reflected in the current case plan. b. Every reasonable effort shall be made to locate family members and to develop case plans in partnership with youth and families, the families' informal support networks and other formal resources working with or needed by the youth and/or family. c. Case plans shall identify specific services, supports and timetables for providing services needed by children and families to achieve identified goals. <p style="text-align: right;">(IEP citation I.B.17.)</p>
Exit Standard	<p>80% of cases reviewed through the Quality Service Reviews (QSR) will be rated as acceptable.¹⁶⁸</p>

¹⁶⁷ DBH now funds 48 slots for Functional Family Therapy and 40 slots for the Parents as Teachers home-visiting model for teen parents in foster care and fathers with young children.

¹⁶⁸ The Monitor will determine performance based on the QSR case planning process and pathway to safe closure indicators for which 80% of cases will be rated acceptable on both indicators, as applicable (a score of 4 or higher on the 6 point QSR indicator scale).

As required by the IEP, two indicators from the QSR protocol – *Planning Interventions* and *Pathway to Case Closure* – are used to measure CFSA’s performance on the Exit Standard pertaining to appropriateness and quality of case planning. The *Pathway to Case Closure* indicator is described in Figure 20, presented earlier in this section. The *Planning Interventions* indicator is described in further detail in Figure 24 below, which summarizes the parameters reviewers consider in rating performance as well as descriptions of minimally acceptable performance and unacceptable performance as contained within the QSR protocol.

Figure 24: QSR Planning Interventions Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance^{169,170}

Planning Interventions

- *Indicator Focus:* the planning interventions are a set of strategies and actions, based on assessed needs, which result in changes for the child, youth and family. Intervention planning is an ongoing process throughout the life of the case and the interventions should be consistent with the long-term view for the child, youth and family.
- *Parameters Reviewers Consider:* to what degree meaningful, measurable and achievable life outcomes (e.g. safety, permanency, well-being, family functioning in fulfilling life roles, transition and life adjustment, and education) for the child and family are supported by well-reasoned, agreed-upon goals, intervention strategies and actions for attainment.
- *Indicator sub-parts:*
 - Safety and Protection
 - Permanency
 - Well-Being
 - Daily Functioning and Life Role Fulfillment
 - Transition and Life Adjustment
 - Early Learning and Education
 - Other Planned Outcomes and Interventions
- *Description of Acceptable/Unacceptable Performance:*

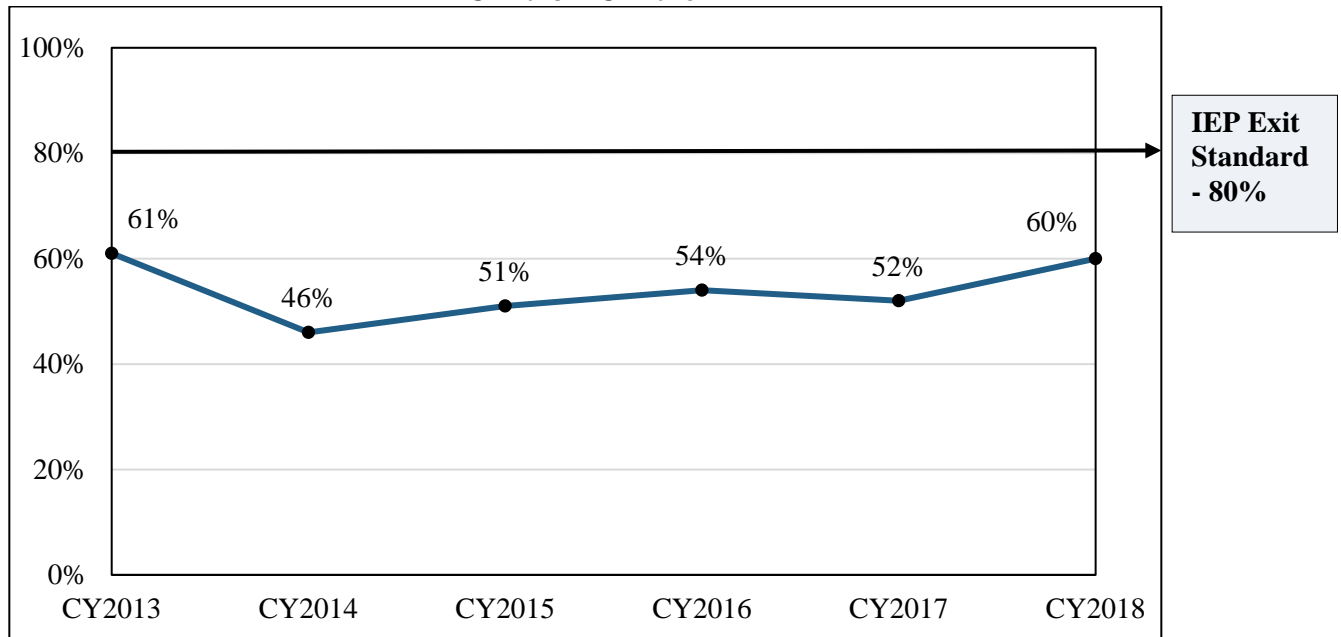
Minimally Acceptable Planning means a minimally reasoned, periodic planning process is used to match intervention strategies to stated goals that are somewhat consistent with the long-term view. Choices are at least minimally supported by the child and family and by a slim team consensus. The strategies selected reflect a minimally adequate to fair assessment and are loosely linked to the planned goals and outcomes to meet the needs of the child and family and to help them be successful in daily living after exiting the service system. Plans include a minimally described set of steps to which key participants are somewhat committed. Strategies and actions across providers and funding sources are somewhat aligned and minimally integrated.

Unacceptable Planning is evident from a somewhat or substantially inadequately reasoned, occasional planning process. Intervention strategies may not have clear goals and may be somewhat inconsistent with the long-term view. Choices may be marginally supported by the child and family. A vague or shifting consensus may exist around some goals and strategies. Interventions described may reflect an authorized services category rather than a clear strategy for change. The intervention may be related to an inferred area of need by my lack clear goals or strategies. Plans may include some general activities for which some participants are authorized to provide services. Planning across providers and funding sources is somewhat misaligned or inconsistently integrated.

¹⁶⁹ *Quality Service Review Protocol for a Child and Family: Reusable Protocol for Examination of Child Welfare and Mental Health Services for a Child and Family*, Shared Practice Protocol. Human Services and Outcomes, January 2015. p. 66-69.

¹⁷⁰ This indicator has multiple sub-parts. Cases are rated as overall acceptable when *Safety and Protection* is rated as acceptable and the majority of the other sub-parts (*Permanency*, *Well-Being*, *Daily Functioning and Life Role Fulfillment*, *Transition and Life Adjustment*, and *Early Learning and Education*) are also rated as acceptable.

**Figure 25: QSR Findings on Case Planning Process
CY2013 – CY2018**

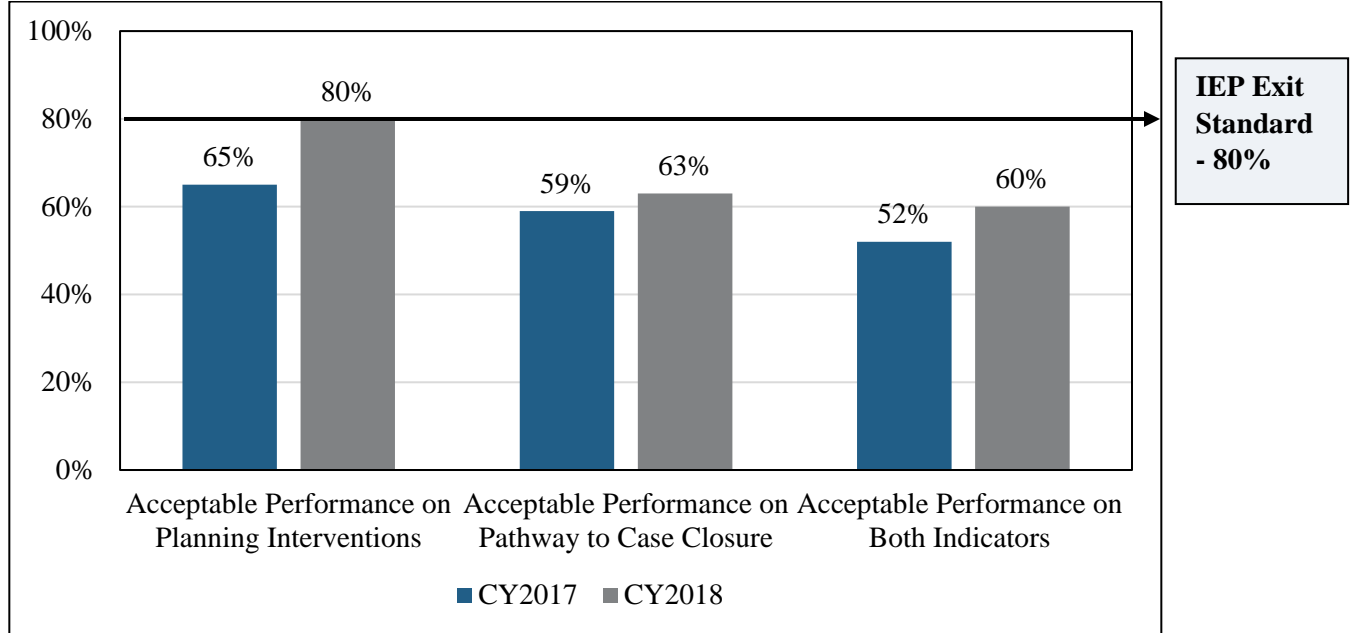


Source: QSR Data, CY2013 – 2018

Performance for January 1 through December 31, 2018:

Of the 137 cases reviewed using the QSR methodology in CY2018, 60 percent (82 of 137) were rated as acceptable on *both* the overall *Planning Interventions* and *Pathway to Case Closure* indicators (see Figure 26). In some cases, reviewers rated practice on one indicator as acceptable, while their assessment of practice on the other indicator was unacceptable. Specifically, 80 percent (109 of 137) of cases were rated acceptable on the *Planning Interventions* indicator and 63 percent (86 of 137) of cases were rated acceptable on the *Pathway to Case Closure* indicator. As seen in Figure 26 below, CY2018 performance on the *Planning Interventions* indicator has improved 15 percent as compared to CY2017.

Figure 26: QSR Findings by Indicator on Case Planning Process
CY2017, N=127; CY2018, N=137



Source: QSR Data, CY2017 – 2018

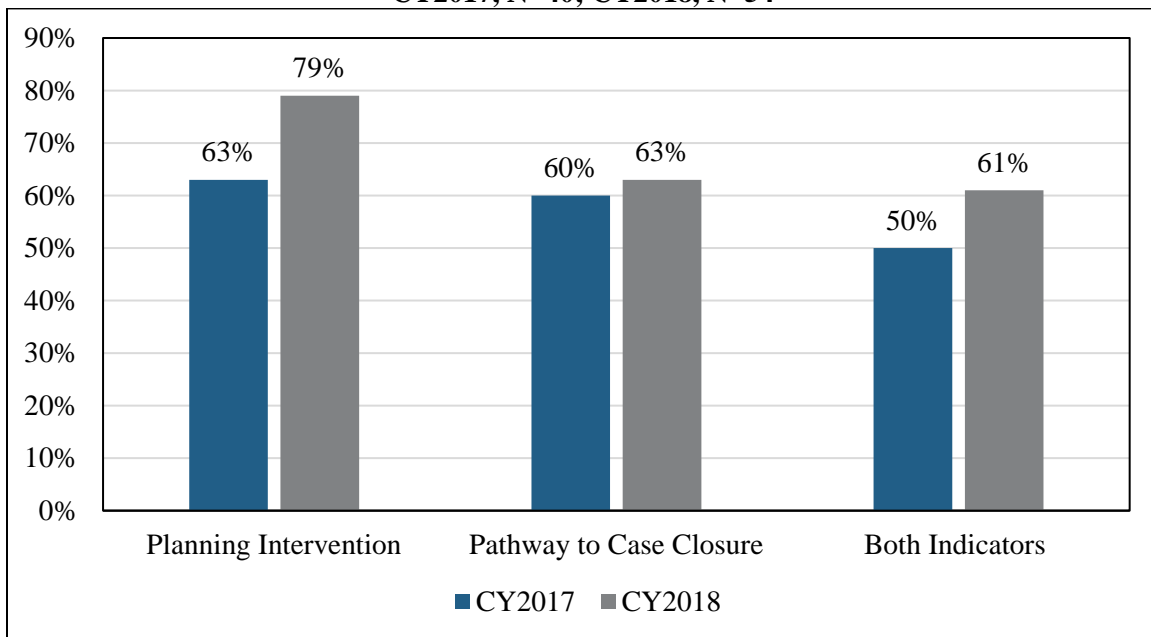
Similar to performance measuring *Services to Families and Children to Promote Safety, Permanency, and Well-being* – discussed earlier in this section – overall performance improved since CY2017 and was above 50 percent for all cases reviewed regardless of which agency or administration was responsible for case management (see Table 10). The overall increase is likely due to improvements in performance in cases where children and families were receiving in-home services (increase of 11% from CY2017) and cases that were managed by one of the three private agencies (increase of 10% from CY2017; see Table 10). However, there continues to be a disconnect in performance between the two indicators used to assess performance for this measure, which highlights the challenges and barriers that exist in implementing plans that lead to successful closure and ensuring that all team members – including both parents – are aware of and agree with the plans, including any back-up plans, around permanency and transitions.

Table 10: Performance on Case Planning across Administration (CY2018)
CFSA in-home, N=54; CFSA out-of-home, N=48; Private Agencies, N=35

	CFSA In-Home	CFSA Out-of-Home	Private Agencies	All
<i>Planning Interventions</i>	78%	90%	69%	80%
<i>Pathway to Case Closure</i>	63%	69%	54%	63%
<i>Both Indicators</i>	61%	65%	51%	60%

Source: QSR Data, CY2018

**Figure 27: Performance on QSR Indicators for In-Home Cases
CY2017, N=40; CY2018, N=54**



Source: QSR Data, CY2017 – 2018

Performance on Strategy Plan:

CFSA employed the following strategies to increase performance on the services provided to children and families to promote safety, permanency, and well-being (IEP I.A.3) and case planning (IEP I.B.17):

- *Office of Well Being (OWB) will build internal infrastructure that moves the agency from a fully DBH-dependent model to a model with therapists on staff within OWB to provide time-limited therapeutic services to children upon entry into foster care and for children in care who are experiencing placement instability.*
 - *Between April and August 2018: develop infrastructure for model including identifying positions, hiring new staff, and using screenings at initial placement to connect children to appropriate services in a more timely manner.*
 - *Between September and December 2018: full staff will be in place to implement initial phase for all children entering foster care, with full implementation for new entries and re-placements by no later than the start of the new year. (2018 Strategy Plan, p.1).*

CFSA continues to build capacity to provide therapeutic services within its Office of Well-Being. CFSA has hired a program manager, clinical supervisor, and three therapists to work with children entering care. CFSA reports a position has been posted for a psychiatric nurse practitioner to support children who are in need of psychiatric services, and recruitment efforts are underway to

fill the position. CFSA is working with the Department of Health Care Finance (DHCF) to determine if and how CFSA can bill Medicaid for these new services.

Beginning October 11, 2018, the Office of Well-Being began providing mental health evaluations for children entering care, and based on the findings of the evaluation, connecting children to services as needed. CFSA reports that as of March 31, 2019, 88 children had received a mental health evaluation and 43 were assessed to need mental health services.¹⁷¹

- *Beginning January 2018, assess quarterly the impact of the revised Collaborative contract on identification, provision, and impact of services. Make on-going course corrections, as needed (2018 Strategy Plan, p.1).*

Through the Safe and Stable Families Redesign,¹⁷² which was implemented in CY2017, CFSA restructured contracts with the Collaboratives¹⁷³ to support additional case management services based on level of need, as defined by Front Yard, Front Porch, or Front Door¹⁷⁴. The Collaboratives provide a range of essential services including case management, evidence-based parenting classes, parenting support and skill-building groups, educational workshops, access to “flex funds” to assist with financial needs, and referrals to other agencies across the District. While services vary slightly between Collaboratives, families are able to access services at a Collaborative outside of the Ward in which they reside if it provides a unique service. In FY2018, 858 families were accepted by one of the Collaboratives for service provision (see Table 11).

¹⁷¹ Of the 43 children who were assessed to need services, 32 children received services through the Office of Well-Being. CFSA reports the remaining 11 children did not receive services for the following reasons: 1 child required a higher level of care; 2 children ran away and were unable to be served, 4 children were already connected to a community-based provider, 2 children declined to participate, and the parents of 2 children declined to have their children participate.

¹⁷² CFSA initiated Safe and Stable Families Redesign to improve case planning and services to children and families who are being served through an in-home case with CFSA and/or the Collaboratives. Through this work, CFSA increased the capacity within the Collaboratives to provide direct case management for families.

¹⁷³ There are 5 Collaboratives, each of which is responsible for serving families living in the surrounding Ward. The Collaboratives are: Collaborative Solutions for Communities (Wards 1 and 2); Georgia Avenue Family Support Collaborative (Wards 1 and 4); Edgewood/Brookland Family Support Collaborative (Wards 5 and 6); East River Family Strengthening Collaborative (Ward 7); and Far Southeast Family Strengthening Collaborative (Ward 8).

¹⁷⁴ Front Yard cases involve families in the community who do not have CFSA involvement including young, homeless families, and Grandfamilies. Front Porch cases are those in which CFSA is closing the case and transitioning case management to a Collaborative, including community diverted cases from CPS investigations and FAs, and cases stepping down from in-home and foster care. Front Door cases are those where CFSA has an open, active case and is teaming with a Collaborative to support the family.

Table 11: Collaborative Cases Accepted for Case Management FY2018**N= 858**

Case Management Type	Population	Total
Front Yard	<i>Young Homeless Families</i>	33 (4%)
	<i>Grandfamilies</i>	14 (2%)
	<i>Other</i>	265 (31%)
Front Porch	<i>Community Diverted (CPS-I)</i>	167 (19%)
	<i>Family Assessment</i>	209 (24%)
	<i>In-Home Step Down</i>	67 (8%)
	<i>Out-of-Home Step Down</i>	1 (<1%)
Front Door	<i>In-Home Support/Teaming</i>	72 (8%)
	<i>Out-of-Home Support/Teaming</i>	30 (3%)
Total		858 (100%)

Source: CFSA Manual Data

*Percentages may not total 100% due to rounding

CFSA also tracks data related to timely assignment of families to a Collaborative worker and timely linkage of families to services once a case is opened with a Collaborative. In FY2018, 788 referrals were closed by a Collaborative¹⁷⁵ and in 534 (68%) of these referrals, the family had been linked to services within 30 days of the referral or connection to the Collaborative.¹⁷⁶ Timely connection to services increases the likelihood that a family will engage in an identified service, and that the benefits of these services can be obtained. As of December 2018, preliminary data for FY2019 show that 132 (63%) of 209 families were linked to services timely. Moving forward, CFSA must work with the Collaboratives to identify and remedy any delays in connecting families to services timely although.

- *Beginning in March 2018, upon removal, assign initial case assessments (CAFAS/PECFAS) to Office of Well Being to standardize completion and increase connection of assessments to case planning and day-to-day practice (2018 Strategy Plan, p.2).*

CFSA staff within the Office of Well-Being (OWB) began facilitating initial case planning meetings with families, workers, children, family identified supports, and foster parents, as appropriate, in March 2018. Between March and December 2018, 93 initial case planning meetings were facilitated by OWB staff with clinical specialists participating in all (100%) of these meetings. CFSA reports participation of the clinical specialists has improved the team's ability to identify appropriate services that meet the parent's needs and complete more timely approvals for substance abuse, therapeutic services, and educational resources. While the social worker maintains primary responsibility for case management, clinical specialists continue to be available to workers for consultations on an as needed basis.

¹⁷⁵ The number of cases closed in FY2018 (788) differs from the number of cases accepted in FY2018 (858) as reflected in Table 11, as some cases accepted in FY2018 may still be open in FY2019.

¹⁷⁶ CFSA reports that the Collaboratives have not been tracking the date Front Yard families initiate services with the Collaborative, which prevents them from tracking timely linkages to community-based services for these families.

- *By March 31, 2018, establish birth parent support unit within Program Ops to increase agency capacity for intensive work with birth parents, including the family's successful participation in case planning (2018 Strategy Plan, p.2).*

To improve engagement with parents and decrease the length of time to permanency, CFSA developed a PEER¹⁷⁷ Support Unit. This unit – consisting of one supervisor and five PEER support workers – is dedicated to supporting and strengthening engagement with parents who have had their children removed from their homes and are working to reunify with them. In addition to working directly with parents, PEER support workers also assist the assigned social worker to more effectively reach out to and engage with parents. CFSA reports the PEER support workers completed pre-service training and began working with families in early June 2018. Between June and December, 2018, CFSA reports PEER support workers served 124 parents, completed 60 one-on-one orientations, supervised 84 parent and child visits, facilitated 57 connections to services, and participated in numerous team meetings, including FTMs and initial case planning meetings. Since inception of the PEER Support Unit, CFSA reports improvements in time to reunification for parents and children working with PEER support workers.¹⁷⁸

Additionally, CFSA conducted a survey to understand the experiences of stakeholders – including parents – participating in the PEER program. There were 179 people who responded to this survey including 98 parent attorneys, 26 Assistant Attorney Generals (AAGs), 45 social workers, and 10 parents. CFSA reports survey results reflected a positive impact of PEER workers in supporting the parent in accessing resources and coping with the challenges that led to CFSA involvement. Moving forward, CFSA reports they are planning to increase PEER worker participation in initial FTMs, implement Birth Parent Cafes at Collaboratives to strengthen family protective factors, and have supervisors use supervision with workers to identify where a PEER worker can help with engagement in specific cases.

- *In March 2018, initiate adjustments to the case teaming process for new entries that will intensify the focus on specific permanency barriers and action steps. Adjustments include:*
- *Addition of a comprehensive team planning meeting at 12-15 days; a follow-up FTM meeting at 90 days; a reunification stat at 100-140 days; and a Permanency FTM at 180 days*
 - *Consistent facilitation by OWB clinicians*
 - *Consistent participation of birth parents, foster parents, clinical specialists (2018 Strategy Plan, p.2).*

¹⁷⁷ PEER is an acronym for Parent Engagement, Education, and Resource. PEER workers are parent advocates who have experienced involvement themselves with the child welfare system as a parent and successfully reunified with their children.

¹⁷⁸ CFSA reports of the 191 children who reunified with a parent since inception of the PEER Support Unit, 44 children who had a parent that worked with a PEER worker achieved reunification in an average of 11 months, and the remaining 147 children whose parent was not connected to a PEER worker reunified in an average of 16 months.

In accordance with the revised timeline outlined in this strategy, CFSA began conducting permanency goal review meetings in July 2018; more on these meetings is discussed in the *Permanency Outcomes* section (IV.B.4) of this report.

- *Beginning in February 2018, provide six months of direct clinical coaching for all ES, IH, and Program Ops supervisors to include a focus on improving case planning. Each supervisor will participate in 90-minute small group coaching session every other week. Additionally, the coaches are available for individual consultation with supervisors as needed. PMs and PAs are updated monthly on the progress of the supervisory coaching sessions (2018 Strategy Plan, p.2).*

CFSA implemented the above strategy to address gaps in practice with case planning and to support supervisor's skill development in providing clinical support and oversight. CFSA contracted with an independent clinician to provide six months of on-site and remote clinical coaching to supervisors. Consistent with the contract, the clinician conducted a total of twelve, 90-minute, coaching sessions for small groups of six supervisors. While supervisors who attended reported positive practice change as a result of participating in the sessions, as is discussed in the *Staff Training* section of this report (IV.D.2.), only 56 percent of in-home, permanency, and CPS supervisors attended half of the sessions.¹⁷⁹ As a result of inconsistent participation and attendance, CFSA continued to provide these coaching sessions beyond the initially planned six months on a voluntary basis to supervisors, and reports improved performance during the second six month period. CFSA reports a third round of coaching sessions began in March 2019. It appears to the Monitor that supervisors continue to not fully take advantage of training opportunities, including ones that had been identified as mandatory.¹⁸⁰

4. Permanency Outcomes

a. Appropriate Permanency Goals

The IEP has several Exit Standards that measure both the processes and outcomes related to children in out-of-home care achieving timely permanency. CFSA has met and maintained performance on the IEP Exit Standards that require specific permanency planning processes including, timely filing and resolution of a motion to terminate parental rights, and making reasonable efforts to finalize adoptions within 12 months of a child's placement in an adoptive home. However, as discussed in more detail in this section, CFSA continues to struggle overall to

¹⁷⁹ CFSA reports increased participation during the second 6-month period of coaching (September 2018 through February 2019) and has indicated there will be a third 6-month period of monthly coaching available (March 2019 through August 2019).

¹⁸⁰ The Monitor previously noted a lack of accountability for supervisors who do not attend mandatory training, including, for example, *Mastering the Art of Child Welfare Supervision 2.0 (MACWS)* in CY2017. This lack of accountability is also apparent in participation in the learning webinars in CY2018.

achieve outcomes of timely exit to permanency for children in out-of-home placement. The cohort performance data discussed below is measured by fiscal year and performance as of September 30, 2018 was available and also included in the last monitoring report.

b. Timely Adoption and Permanency

There are a number of Exit Standards that track processes designed to facilitate timely achievement of permanency for children. These include:

- Placing children in approved adoptive homes within nine months of their permanency goal becoming adoption (IEP citation I.B.16.a.i.)
- Making reasonable efforts to finalize adoptions within 12 months of placement in the approved adoptive home (IEP citation I.B.16.b.iii.)
- Achieving permanency within established timeframes through adoption, guardianship, and reunification (IEP citation I.B.16.c.)

Approved Adoptive Placement

The IEP requires that 80 percent of children with a goal of adoption are placed in an approved adoptive placement within nine months of their permanency goal becoming adoption.¹⁸¹ There is one current applicable Exit Standard to measure this outcome (IEP citation I.B.16.a.i.).¹⁸² From July 2018 to March 2019, 59 (83%) of the 71 applicable children were placed in an approved pre-adoptive home by the end of the ninth month from when their goal changed to adoption, continuing to meet the required level of performance.

Reasonable Efforts to Finalize Adoptions

CFSA is required to ensure that 90 percent of children are legally adopted, or reasonable efforts are made to have them adopted, within 12 months of being placed in a pre-adoptive home (IEP citation I.B.16.b.iii.). This Exit Standard is designated as an Outcome to be Maintained, and CFSA maintained the required performance level during the current monitoring period.

From July 2018 to March 2019, 97 percent of adoptions were completed, or reasonable efforts were made to complete adoptions, within 12 months of the child being placed in a pre-adoptive home. Specifically, 67 adoptions were finalized during the monitoring period and of those 67, 42 cases were finalized within 12 months and CFSA, through a case review, confirmed that

¹⁸¹ Pursuant to the IEP, the Monitor considers a placement an approved adoptive placement based on documentation of an intent to adopt, filing of an adoption petition, or indication in the FACES.NET service line of an approved adoptive placement.

¹⁸² CFSA sufficiently achieved performance on the Exit Standard for children whose permanency goal changed to adoption prior to July 1, 2010 and because the review period for this IEP Exit Standard has expired and CFSA ultimately achieved compliance, the Monitor is no longer tracking performance for this measure.

reasonable efforts were made to finalize adoptions within 12 months for 23 children whose adoptions took longer to complete¹⁸³.

Timely Permanency Outcomes

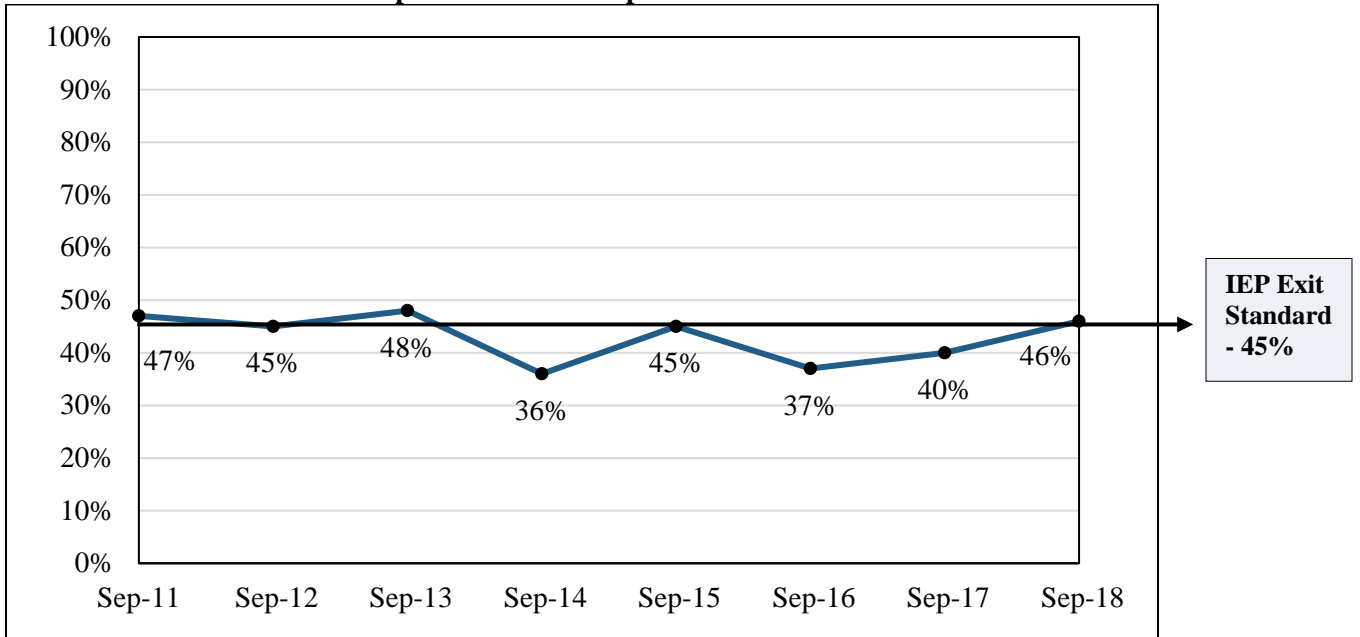
IEP Requirement	<p>32. <u>Timely Adoption</u>: Timely permanency through reunification, adoption or legal guardianship.</p> <p>(IEP citation I.B.16.c.)</p>
Exit Standard	<ul style="list-style-type: none"> i. Of all children who entered foster care for the first time in FY2017 and who remain in foster care for 8 days or longer, 45% will achieve permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2018. ii. Of all children who are in foster care for more than 12 but less than 25 months on September 30, 2017, 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2018. iii. Of all children who are in foster care for 25 months or longer on September 30, 2017, 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2018, whichever is earlier.

Performance for the period July 1, 2018 through March 31, 2019:

The IEP requires timely exits for children to a permanent family through adoption, guardianship, or reunification. This Exit Standard, which remains an Outcome to be Achieved, has three performance sub-parts that must each be met before compliance can be reached for the entire Exit Standard, with different compliance percentages for cohorts of children based on their length of stay in foster care. Performance on this Exit Standard is measured annually based on fiscal year and is reported most recently as of September 30, 2018 (see Figures 28, 29, and 30 below).

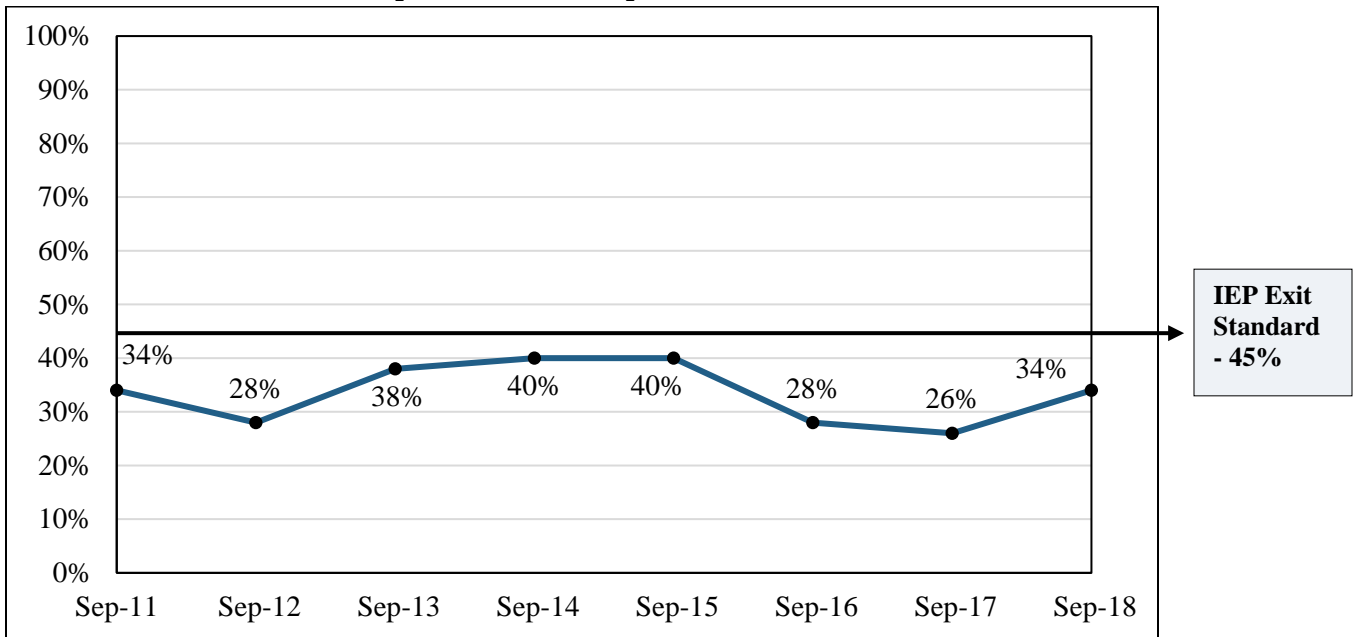
¹⁸³ Some of the identified barriers to finalizing adoptions within 12 months include court delays (due to changes in parents' attorneys or judges), filing of competing adoption petitions, and delays in a child becoming legally free. In one case, delays occurred because efforts were made to finalize adoption of a large sibling group at the same time. When encountering these barriers, many of which were outside of CFSA's control, documentation reflected that in all but 2 cases, CFSA appropriately kept the families informed and attempted to ensure the matters were resolved in a timely manner.

**Figure 28: Timely Permanency for Children in Care between 8 days and less than 12 months
September 2011 – September 2018**



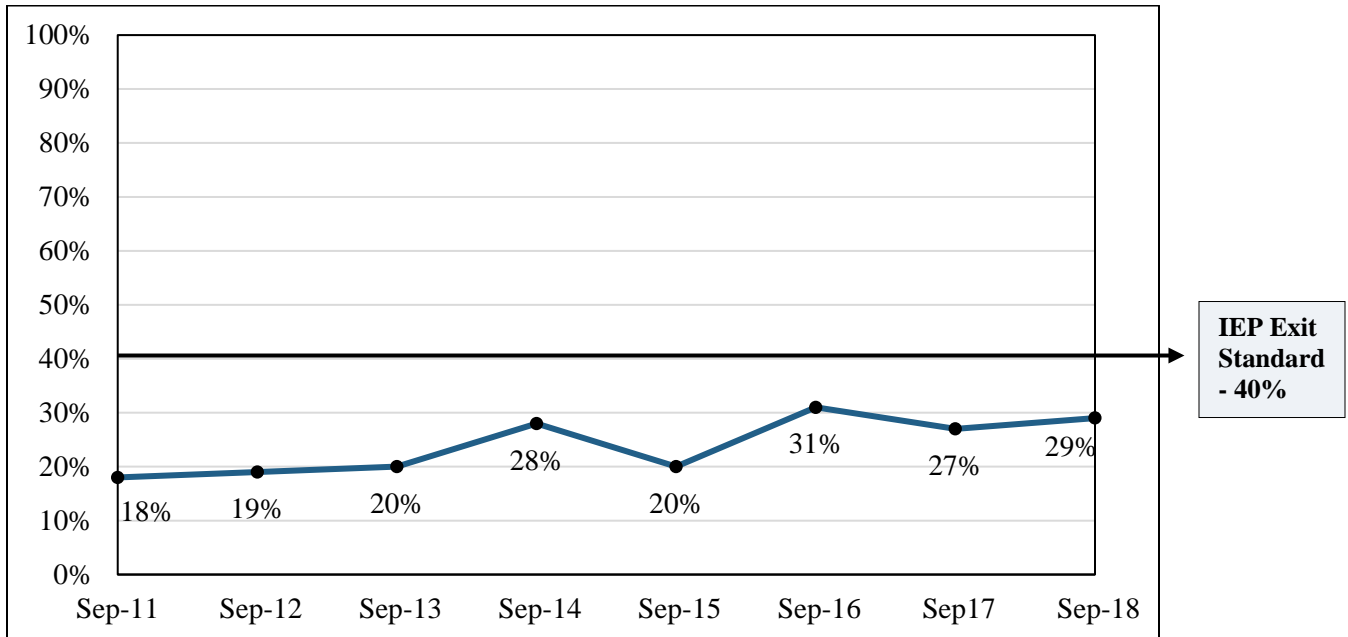
Source: CFSA Administrative Data, FACES.NET report CMT384

**Figure 29: Timely Permanency for Children in Care More Than 12 and less than 25 months
September 2011 – September 2018**



Source: CFSA Administrative Data, FACES.NET report CMT385

**Figure 30: Timely Permanency for Children in Care for 25 months or longer
September 2011 – September 2018**



Source: CFSA Administrative Data, FACES.NET report CMT385

Timely Permanency for Children in Care between 8 days and less than 12 months

Of the 245 children who entered foster care in FY2017 and remained in foster care for eight days or more, 113 (46%) children exited to positive permanency by September 30, 2018 (see Figure 28 and Table 12). Performance on this sub-part of the Exit Standard improved six percent over FY2017 performance and met the required level of performance.

Timely Permanency for Children in Care more than 12 and less than 25 months

Of the 210 children who were in care more than 12 months and less than 25 months on September 30, 2018, 72 (34%) children achieved positive permanency by September 30, 2018 (see Figure 29 and Table 12). While performance is improved from FY2017, it remains below the Exit Standard requirement of 45 percent.

Timely Permanency for Children in Care for 25 months or longer

For the 409 children who had been in care 25 or more months on September 30, 2018, 118 (29%) children achieved permanency by September 30, 2018 (see Figure 30 and Table 12). While this performance represents a slight improvement over the last fiscal year, performance for this sub-part remains substantially below the performance level required by the Exit Standard (40%).

**Table 12: Children and Youth Exiting to Permanency by Cohort
as of September 30, 2018**

Length of time in out-of-home care during FY2017	Total number of children/youth in cohort	Exit to Reunification	Exit to Guardianship – Kin	Exit to Guardianship – NonKin	Exit to Adoption	Total Exits to Permanency by September 30, 2018	IEP Target
8 days – 12 months	245	103 (42%)	1 (<1%)	0 (0%)	9 (4%)	113 (46%)	45%
12 – 24 months	210	29 (14%)	9 (4%)	2 (1%)	32 (15%)	72 (34%)	45%
25 months or more	409	18 (4%)	13 (3%)	31 (8%)	56 (14%)	118 (29%)	40%

Source: CFSA Administrative Data, FACES.NET reports CMT384 and CMT385

*Percentages may not equal 100% due to rounding.

Performance on Strategy Plan:

CFSA identified the following strategies to support timely permanency efforts for children and youth (IEP 1.B.16.c):

- *By March 31, 2018, establish birth parent support unit within Program Ops to increase agency capacity for intensive work with birth parents that will help facilitate timely reunification (2018 Strategy Plan, p. 4).*

Implementation of this strategy is discussed above in the *Services to Children and Families* and *Case Planning* section (IV.B.3.) of this report.

- *Beginning in February 2018, implement shared parenting principles and practices in relevant program functions within Program Operations, including:*
 - *Incorporate Shared Parenting expectations in pre-evaluation tool for prospective Foster Parents and foster parent pre-service and in-service training.*
 - *Include shared parenting in 1:1 orientation for all newly entering birth parents.*
 - *Include foster parents in case teaming at 12-15 days and in other team meetings as needed (2018 Strategy Plan, p.4).*

CFSA continues to use a screening tool for potential resource parents. The tool includes 30 items, and four of these items are related to potential resource parents' commitment to "shared parenting" with birth parents. CFSA reports between August 1, 2018 and April 30, 2019, 86 potential resource

parents completed the tool and 87 percent of these resource parents indicated a willingness to work with birth families, while 13 percent were either unwilling or unsure.

CFSA reports shared parenting principles are discussed in both pre-service and in-service training opportunities. Since September 2018, CFSA has offered the *Be Strong Families Shared Parenting* course – created and originally offered by the Foster and Adoptive Parent Advocacy Center (FAPAC) – as an in-service training option for foster parents. The course helps foster parents increase their ability to engage in shared parenting practices and develop more empathy towards birth parents as they co-parent. CFSA reports that foster parents who participated in this course indicated feeling better equipped to build positive relationships with birth parents.

In 2019, CFSA began working with FAPAC to develop a survey for resource parents to gather more information about experiences with shared parenting. This survey was distributed electronically in April of 2019, and efforts are underway to collect more responses from foster parents by hard copy.

- *Beginning in February 2018, provide six months of direct clinical coaching for all ES, IH and Program Ops supervisors to include a focus on improving permanency practice (2018 Strategy Plan, p.4).*

Implementation of this strategy is discussed above. In addition, as noted in the *Training* section (IV. D.2.) of this report, there continue to be concerns that all supervisors are not fully taking advantage of this coaching.

- *Beginning January 2018, in collaboration with A Second Chance, Inc., assess agency practice on engaging kin and develop and implement, track and report on recommendations for improved practice (2018 Strategy Plan, p.4).*

As discussed in the last monitoring report (for the period of January through June 2018, issued in November 2018¹⁸⁴), CFSA engaged with a Second Chance¹⁸⁵ in an effort to improve the number of children in kinship placements and to ensure relatives were adequately supported by the agency. Through this partnership, CFSA developed a business process map and has continued to conduct additional internal analysis of intervention opportunities. Following recommendations from A Second Chance, CFSA has since increased teaming between Entry Services and the Kinship Program unit; added questions about kin to the Hotline protocol; trained R.E.D. Team members to better document detailed kin information in FACES.NET; developed and distributed material to staff to reinforce the importance of identifying and working with kin; and issued an Administrative Issuance on engaging kin without the consent of the parent.

¹⁸⁴ To access this report, see <https://cssp.org/resource/lashawn-a-v-gray-progress-report-january-1-june-30-2018/>

¹⁸⁵ For more information on A Second Chance, see <http://www.asecondchance-kinship.com/>

In addition, CFSA reports that the agency is currently developing kinship caregiver training workshops in partnership with the Child Welfare Training Academy (CWTA); the workshops will be piloted with CFSA staff in June 2019 and implemented between July and September 2019. Under a newly received federal Kinship Navigator Grant, CFSA is forming a new Kinship Parent Advisory Committee, which is projected to hold its first meeting in June 2019.

- *Beginning February 2018, use the Adoption/Guardianship STAT format and team to conduct regular (90 day) permanency reviews and track follow-up (2018 Strategy Plan, p.4).*
- *By September 30, 2018, develop implementation plan to resolve systemic barriers identified in the adoption STATs (e.g., need for 6-month review following goal change; assignment of a subsidy social worker upon adoption petition receipt; and enhanced focus on child-specific recruitment) (2018 Strategy Plan, p.4).*

CFSA initially began using the Permanency STAT process in June 2017 to review and monitor cases to ensure that children with a goal of reunification, guardianship, or adoption are receiving appropriate support and services to achieve timely permanency, and to address any case level or institutional barriers. The process began with Adoption STAT meetings (held within 60 days of a child's adoption goal being established), Guardianship STAT meetings were added in October 2017 (held within 60 days of a child's permanency goal of guardianship being established), and Reunification STAT meetings were begun in January 2018 (held at 150 days from removal).

Reunification STAT Findings

From January to October 2018, CFSA reports using a STAT process to review 283 reunification cases five months after a child's removal. Data collected during these meetings revealed three top barriers to reunification – lack of engagement with birth parents, court delays, and no identified resource and/or recruitment for concurrent planning.

Adoption STAT Findings

CFSA reports that between June 2017 and December 2018, the Adoption STAT team reviewed 414 adoption cases and individual follow-up occurred in 253 of these cases. The top barriers to timely permanency identified were struggles in recruiting a permanent home, delays in agreement of an adoption subsidy, and court delays. Additionally, CFSA found that they were averaging more than a year between goal changes to adoption and the filing of adoption petitions.

Guardianship STAT Findings

CFSA reports that between October 2017 and December 2018, the CFSA STAT team reviewed 371 guardianship cases and individual follow-ups occurred in 18 of these cases. The top barriers to

timely permanency identified were similar to the barriers in adoption cases – specifically, recruitment and completion of the guardianship subsidy. An additional barrier identified was delays in Interstate Compact for the Placement of Children (ICPC). CFSA continues to work within Program Operations to implement practice improvements to address these barriers.

Adjustments to the STAT Process

The agency reports that the Permanency STAT process was discontinued in October 2018 and has begun utilizing alternative processes, including Permanency Goal Review Meetings (PGRM).

In June 2018, CFSA began utilizing PGRMs to review significant barriers to reunification and develop plans for resolution, which may include exploring a change in permanency goal. PGRMs participants include a case's program manager, program administrator, supervisor, social worker, resource parent support social worker, kinship program manager, and Diligent Search staff. CFSA has continued to modify the PGRM process for effectiveness since implementation. Recent modifications include requiring a permanency FTM for cases with a goal of reunification at six months post-removal and using PGRMs at seven months to track progress on next steps identified during the FTM.

CFSA and NCCF have reviewed 201 cases since beginning the PGRM process in June 2018.^{186,187} Data collected from the 201 cases reflect that in almost a quarter of the cases reviewed, the agency lacked effective engagement with family members which was delaying reunification progress. Additional barriers to reunification include parental challenges with substance use, mental health, and housing. Specifically, mental health was a barrier in more than half (56%) of reunification cases reviewed.

C. GOAL: CHILD WELL-BEING

CFSA is responsible for promoting, supporting, and planning for the overall well-being of children and youth in foster care. CFSA's Office of Well-Being, which includes the Healthy Horizons Assessment Center, is largely responsible for activities to support the physical, emotional, developmental, and behavioral health of children in foster care. CFSA's Office of Youth Empowerment (OYE) provides case management for almost half of the youth in foster care over the age of 15.¹⁸⁸ In addition to social workers who provide case management, OYE employs Career and Educational specialists who can assist all youth in CFSA custody with planning for independence.

¹⁸⁶ CFSA reviewed 159 cases and NCCF reviewed 42 cases.

¹⁸⁷ In addition to these 201 cases, in July and August of 2018, OYE and the Permanency Administration held PGRMs on backlog cases or any cases with a renunciation goal for longer than six months. While NCCF did not conduct PGRMs on backlog cases, the agency began conducting PRGMs on new cases in October of 2018. Seven backlog cases of LAYC were reviewed in October of 2018.

¹⁸⁸ NCCF, LAYC, and LSS serve the other half of youth in foster care over the age of 15.

Performance data discussed in this section cover provision of health and dental care to children in foster care, planning and services to support older youth, and development of special corrective action plans for children who experience challenges to securing stable and appropriate placement and achieving timely permanency.

1. Health and Dental Care

Children receive a health screening when they enter care or change placements and comprehensive medical and dental evaluations are provided on an ongoing basis. These screenings and assessments are important to identify health conditions that require prompt medical attention, chronic medical needs, and developmental or mental health concerns that are then shared with the child's foster parent or caregiver, social worker, and other service providers.

The IEP has multiple Exit Standards to ensure that children in foster care receive appropriate and routine medical and dental services and have timely access to appropriate health care. All of these standards are designated as Outcomes to be Maintained and performance continued to be maintained during the current monitoring period. With the exception of the Exit Standard related to the distribution of Medicaid cards and numbers to caregivers of children in foster care, which was newly achieved during the previous monitoring period, all of the Exit Standards related to the health and dental care of children have been maintained since 2015.

Health Screenings

Performance for the period July 1, 2018 through March 31, 2019:

CFSA's performance on health screenings prior to an initial placement or upon re-entry into foster care and before a placement change improved slightly from the previous monitoring period.¹⁸⁹ Specifically, CFSA's performance for health screenings prior to initial placement or re-entry into care ranged monthly from 89 to 100 percent,¹⁹⁰ meeting the required level of performance in eight of nine months this period. Monthly performance for health screenings prior to a placement change ranged from 85 to 96 percent¹⁹¹ this period, meeting the required level in the four of nine months. The Monitor considers any deviations below the standard to be insubstantial and this Exit Standard to be maintained.

¹⁸⁹ The IEP requires 95% of children have a health screening prior to an initial placement in foster care or upon re-entry into care and 90% of children have a health screening before a change in placement (IEP citation I.C.22.a.).

¹⁹⁰ Monthly performance data for initial and re-entry health screenings are as follows: July 2018, 89%; August 2018, 100%; September 2018, 97%; October 2018, 96%; November 2018, 96%; December 2018, 97%; January 2019, 97%; February 2019, 97%; March 2019, 97%.

¹⁹¹ Monthly performance data for replacement health screenings are as follows: July 2018, 85%; August 2018, 88%; September 2018, 88%; October 2018, 88%; November 2018, 92%; December 2018, 90%; January 2019, 91%; February 2019, 96%; March 2019, 89%.

Full Medical Evaluations

Performance for the period July 1, 2018 through March 31, 2019:

CFSA also maintained required performance on the Exit Standard requiring comprehensive medical evaluations for children in foster care.¹⁹² Specifically, performance on the completion of full medical evaluations for children ranged monthly from 89 to 95 percent within 30 days of placement (exceeding the required level of 85%) and from 95 to 99 percent for evaluations completed within 60 days of placement (meeting or exceeding the required level of 95%).

Full Dental Evaluations

Performance for the period July 1, 2018 through March 31, 2019:

CFSA partially maintained performance on the Exit Standard requiring comprehensive dental evaluations for children in foster care.¹⁹³ A monthly range of 46 to 64 percent of children received a full dental evaluation within 30 days of placement (exceeding the required level of 25%), and within 60 days of placement, a monthly range of 71 to 82 percent of children had a full dental evaluation (exceeding the required level of 50%). CFSA has experienced inconsistent performance on the third sub-part of this Exit Standard that requires 85 percent of children have dental evaluations within 90 days of placement. During the current monitoring period, CFSA's performance ranged monthly from 73 to 84 percent.¹⁹⁴ The Monitor considers this Exit Standard to be partially maintained. CFSA reports they have taken additional steps to ensure children receive a dental evaluation timely, including closely tracking data and sending emails to social workers when a child is approaching the 90 day mark without a dental evaluation, and holding weekly meetings with Program Administrators from the Office of Well-Being and Permanency. It continues to be unclear to the Monitor what barriers exist to ensuring all children have necessary dental care.

Medicaid Coverage

Performance for the period July 1, 2018 through March 31, 2019:

Through the District's Medicaid State Plan, all children are eligible for Medicaid immediately upon entering care, including those who do not have legal status or had private health insurance prior to entering care. CFSA has worked diligently over the past several years with the Departments of Health Care Finance (DHCF) and Human Services (DHS) to expeditiously enroll

¹⁹² The IEP requires 85% of children receive a full medical evaluation within 30 days of placement in foster care and 95% of children receive a full medical evaluation within 60 days of placement in foster care (IEP citation I.C.22.b.i.).

¹⁹³ The IEP requires 25% of children receive a full dental evaluation within 30 days of placement in foster care, 50% of children receive a full dental evaluation within 60 days of placement in foster care and 85% of children receive a full dental evaluation within 90 days of placement in foster care (IEP citation I.C.22.b.ii.).

¹⁹⁴ Monthly performance data for children with completed dental evaluations within 90 days of placement are as follows: July 2018, 73%; August 2018, 82%; September 2018, 81%; October 2018, 79%; November 2018, 81%; December 2018, 81%; January 2019, 84%; February 2019, 74%; March 2019, 75%.

children entering foster care into the District's Medicaid plan and provide information about health care coverage to caregivers.

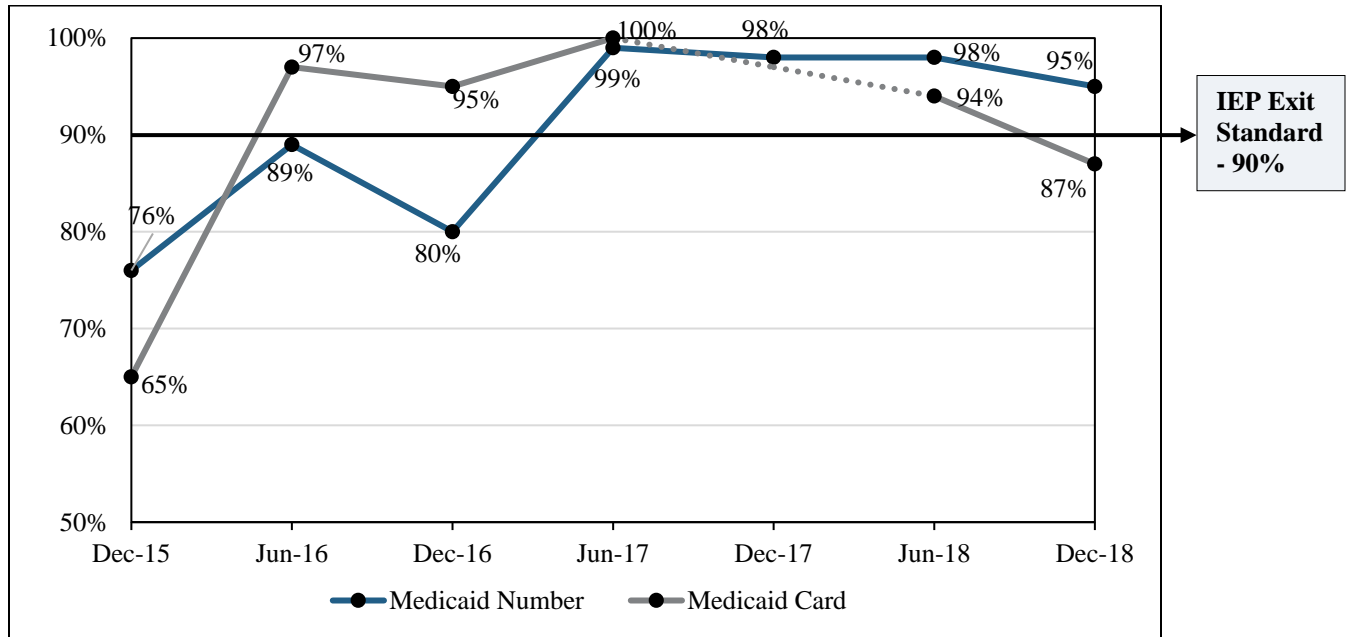
CFSA achieved this Exit Standard for the first time during the previous monitoring period.¹⁹⁵ Between July and December 2018, CFSA continued to manually track the distribution of Medicaid numbers and cards to caregivers when a child is initially placed in foster care and Medicaid numbers to foster parents when a child experiences a placement change. CFSA maintained required performance between July and December 2018, with performance on distribution of Medicaid numbers to caregivers within five days ranging monthly from 95 to 100 percent and performance on distribution of Medicaid cards to caregivers within 45 days ranging monthly from 79 to 100 percent (see Figure 31).¹⁹⁶

The Monitor is unable to assess performance on the distribution of Medicaid cards and numbers between January and March 2019 due to a lapse in CFSA's data collection and tracking due to a change in personnel. CFSA is implementing a new process going forward to improve consistency and accuracy. Based on performance data provided for July through December 2018, the Monitor considers deviations in required performance to be temporary and insubstantial and this Exit Standard to be maintained.

¹⁹⁵ The IEP requires that 90% of children's caregivers are provided with documentation of Medicaid coverage within 5 days of placement and Medicaid cards within 45 days of placement.

¹⁹⁶ Monthly performance data for caregiver receipt of Medicaid card within 45 days: July 2018, 100%; August 2018, 97%; September 2018, 89%; October 2018, 79%; November 2018, 94%; December 2018, 87%.

**Figure 31: Distribution of Medicaid Number and Medicaid Card to Foster Parents
December 2015 – December 2018¹⁹⁷**



Source: CFSA Manual Data

2. Adolescent Practice

As discussed earlier in this report, youth age 15 to 21 currently represent over one-third (33%) of children involved with CFSA. Seventeen percent of these youth are between the ages of 18 and 21. The Office of Youth Empowerment (OYE) provides case management for almost half of these youth and the remaining youth have social workers assigned through NCCF, Latin American Youth Center (LAYC), or Lutheran Social Services (LSS), based on their placement. Planning for the well-being of older youth occurs through regular youth transition planning meetings and through connections to services provided through the OYE. For older youth who are likely to exit care without achieving positive permanency through reunification, guardianship, or adoption, effective youth transition planning is essential to laying the groundwork for their success after foster care.¹⁹⁸

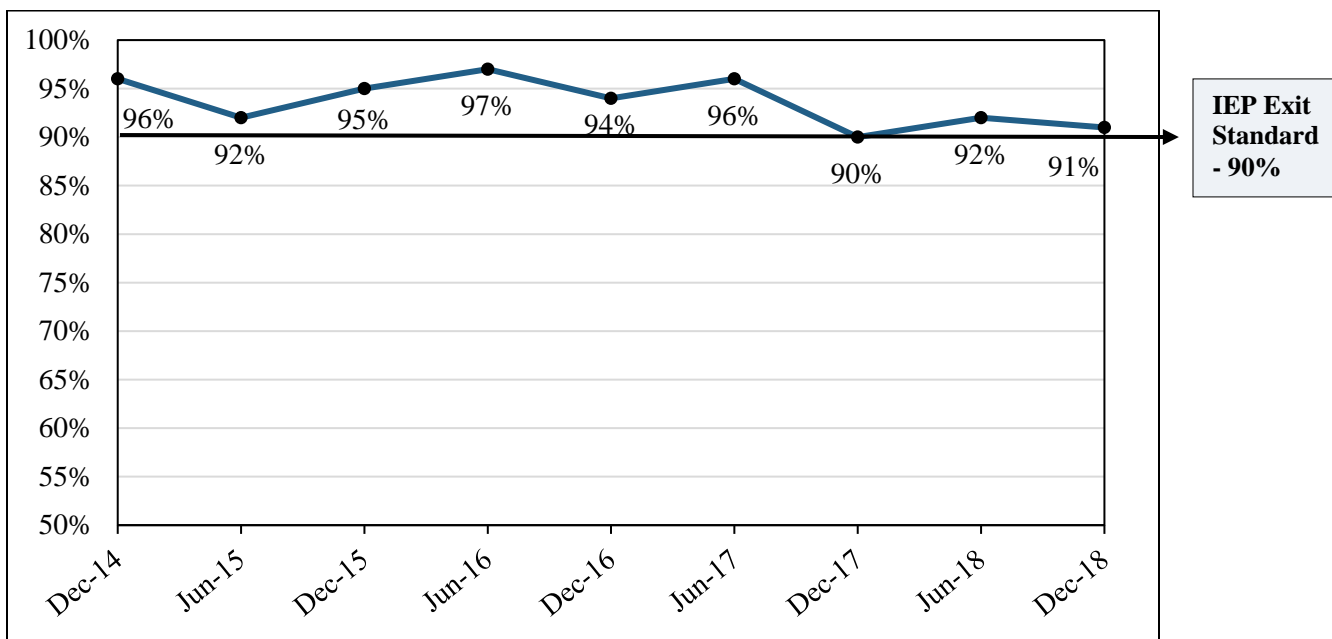
Discussion in this section includes CFSA's current performance on the Exit Standard that requires youth transitioning out of care to have a transition plan developed with the youth that summarizes case planning work to date, the youth's goals, and provides guidance on next steps required to support the youth in transitioning from foster care (IEP citation I.B.12.c.). All youth ages 18 and older are required to have a current Youth Transition Plan (YTP) developed with their involvement, their social worker, and others whom the youth identifies to participate as a member of their team. Further, plans should provide the youth with appropriate connections to specific

¹⁹⁷ The Monitor was unable to report performance data for Medicaid Card distribution for December 2017.

¹⁹⁸ As of December 31, 2018, there were 233 youth in care between the ages of 16 and 20.

options for housing, health insurance, education, and linkages to continuing adult support services agencies. Since June 2013, CFSA has met this IEP Exit Standard, designated as an Outcome to be Maintained, which requires at least 90 percent of youth ages 18 and older have a current YTP (Figure 32).

**Figure 32: Youth Ages 18 and Older with a Youth Transition Plan
June 2015 – December 2018**



Source: CFSA Manual Data and FACES.NET report CMT391

Data represent performance for each six month monitoring period (January – June and July – December)

Performance for the period July 1 through December 31, 2018¹⁹⁹:

Between July 1 and December 31, 2018, out of 169 applicable youth²⁰⁰, 154 (91%) youth had a YTP developed. The Monitor considers performance on this Exit Standard to be maintained.

CFSA's quality assurance staff continue to conduct a limited case record review of YTPs for all youth who turn 20.5 years old during the monitoring period to determine if the plans address appropriate connections to specific options for housing, health insurance, education, and linkages to continuing adult support services agencies.²⁰¹ Fifty youth turned 20.5 years old during this monitoring period, and all of those youth's plans were reviewed; one case was excluded from review because the youth was incarcerated outside of the agency's jurisdiction. Of the 49 remaining youth, CFSA found that 46 of the youth had YTPs that addressed appropriate connections. In the three cases where the YTP did not adequately address the youth's needs, the

¹⁹⁹ Due to the timing of this report, January through March 2019 data were not available for inclusion.

²⁰⁰ Seven youth were excluded from analysis due to: being in runaway from placement and hard to locate; struggling with significant mental illness and unable to participate; or declining to participate in the development of a YTP.

²⁰¹ The Monitor participated in 1 of these reviews and reviewed seven cases with CFSA during the monitoring period.

youth needed additional support in both connecting to services, and creating and achieving goals before emancipation.

3. Special Corrective Action

The IEP identified special corrective action categories to highlight markers of unacceptable practice and identify those children and families where additional efforts are needed. The conditions that require special corrective action include children who have experienced placement instability or inadequate progress toward achieving permanency goals, among others. The special corrective action requirements are intended to provide special focus on efforts to alleviate the issue(s) in individual cases. This Exit Standard requires production of monthly reports identifying children in special corrective action categories and the completion of child-specific case reviews to develop and then implement corrective action plans as appropriate (IEP citation I.D.30.).

CFSA reports that plans are completed for children who newly enter corrective action categories during bi-monthly Special Corrective Action R.E.D. Team meetings which include participation of a program manager, supervisory social worker, the assigned social worker, and performance monitor. Depending upon the special corrective action category being reviewed, other participants may include a licensing specialist, placement specialist, resource development specialist, or an Assistant Attorney General (AAG).

The notion behind special corrective action is that once identified, plans will address the issues and the children's status would no longer fall within the category. However, some children remain in categories for multiple months and CFSA recently started a process to review and reassess plans developed for these children and their implementation. Depending upon the category, the reviews may occur monthly or on a quarterly basis to determine if plan modifications are necessary.

Performance for the period July 1, 2018 through March 31, 2019:

Data on the number of children in special corrective action categories during the monitoring period are presented in Table 13 below. Similar to prior periods, the categories that impact the largest number of children are placement instability (specifically, 183 children in March 2019 had four or more placements since entering care with a placement change in the last 12 months) and delays in reunification and identifying adoptive resources.

Between July 2018 and February 2019²⁰², a total of 356 children were newly identified in one of the special corrective action categories; of these, CFSA determined that 263 corrective action plans were required²⁰³. CFSA completed all 263 (100%) of the required plans. CFSA maintained required performance for this Outcome to be Maintained.

²⁰² Due to the timing of this report, March 2019 data were not available for inclusion.

²⁰³ A plan may not be required if the issue has been resolved by the time of review, if data were entered erroneously, or the reason for a child's placement change is positive, such as a move to a pre-adoptive home.

Table 13: Children in Special Corrective Action Categories by Month
July 2018 – March 2019²⁰⁴

Special Corrective Action Category	Jul 2018	Aug 2018	Sep 2018	Oct 2018	Nov 2018	Dec 2018	Jan 2019	Feb 2019	Mar 2019
Placement Categories									
CFSA Children with 4 or More Placements with a Placement Change in the Last 12 Months and the Placement is not a Permanent Placement	196	193	193	187	187	191	183	187	183
Children Placed in Emergency Facilities Over 90 Days	0	0	0	0	1	0	0	0	0
Children Placed in Foster Homes without Valid Permits/Licenses	12	17	12	16	20	23	23	33	20
Children Placed in Foster Homes that Exceed their Licensed Capacity	24	12	8	8	12	8	8	16	8
Children in Facilities More than 100 Miles from DC	12	12	12	13	12	11	11	12	13
Permanency Categories									
Children with the Goal of Adoption for More than 12 Months who are not in an Approved Adoptive Home	32	28	31	35	33	34	40	42	44
Children in Care who Returned Home twice and Still have the Goal of Reunification	1	1	1	1	1	3	3	3	3
Children under 14 with a Goal of APPLA	3	3	3	3	3	3	2	2	2
Children with the Goal of Reunification for More than 18 Months	57	55	56	51	52	50	46	47	36

Source: CFSA Administrative Data, FACES.NET report COR013

D. INFRASTRUCTURE, RESOURCE DEVELOPMENT, AND SYSTEM ACCOUNTABILITY

A solid infrastructure and ability to collect and analyze accurate data are essential to CFSA's ability to support children and families, and maintain and improve good practice. This includes ensuring a stable workforce that is able to meet the needs of children and families; foster parents who are ready and available to care for children and youth; continuous quality improvement processes to assess and inform practice; sufficient financial resources to support a healthy, well-functioning system; and up-to-date policies and procedures that support a transparent system that is accountable to the children and families served, staff, community partners, and the public.

²⁰⁴ Individual children may be included and counted in more than one category.

CFSA continues to struggle with ensuring supervisors and foster parents receive the required pre-service and in-service training. Since December 2014, CFSA's performance to ensure foster parents complete the required number of in-service training hours prior to relicensure has been below the required level of 95 percent, falling to 88 percent this period. There appears to be continued lapses in communication and accountability contributing to these performance declines.

1. Ongoing Caseloads and Supervisory Responsibilities

a. Ongoing Caseloads

Maintaining caseloads for in-home, permanency, CPS, and home study workers in accordance with caseload standards is a fundamental pre-requisite to good practice and outcomes. For the past several years, with the exception of CPS staff, most other case-carrying staff have had manageable caseloads within the required limits. The Exit Standard measures caseloads within all divisions and although this IEP Exit Standard (I.D.25.&26.) had previously been designated as an Outcome to be Maintained, the Monitor has changed the assessments to only *partially* maintained due to ongoing challenges with CPS social worker (investigations and FA) caseloads, discussed earlier in this report²⁰⁵.

The discussion below includes caseload compliance for in-home, permanency, and home study workers.

²⁰⁵ See *Child Safety* section IV.A.2 of this report.

IEP Requirement	<p>46. <u>Caseloads</u>:</p> <ul style="list-style-type: none"> a. The caseload of each worker conducting investigations of reports of abuse and/or neglect shall not exceed the MFO standard, which is 1:12 investigations. b. The caseload of each worker providing services to children and families in which the child or children in the family are living in their home shall not exceed 1:15 families. c. The caseload of each worker providing services to children in placement, including children in Emergency Care and children in any other form of CFSA physical custody, shall not exceed 1:15 children for children in foster care. d. The caseload of each worker having responsibility for conducting home studies shall not exceed 30 cases. e. There shall be no cases unassigned to a social worker for more than five business days, in which case, the supervisor shall provide coverage but not for more than five business days. <p style="text-align: right;">(IEP citation I.D.25.)</p>
Exit Standard	<p>90% of investigators and social workers will have caseloads that meet the above caseload requirements. No individual investigator shall have a caseload greater than 15 cases. No individual social worker shall have a caseload greater than 18 cases. No individual worker conducting home studies shall have a caseload greater than 35 cases.</p>

Performance for the period July 1, 2018 through March 31, 2019:

Caseloads for permanency and in-home social workers continued to meet the level required by the IEP, with performance ranging monthly from 98 to 100 percent of workers in compliance. In November and December 2018, two workers were responsible for more than 15 cases and in March 2019, one worker was responsible for more than 15 cases. At no point during the monitoring period was a worker responsible for more than 18 cases.

The number of in-home and permanency cases unassigned for more than five days ranged each month from a high of 45 cases in February 2019 to a low of 11 cases in March 2019 to (1 to 3% of total permanency and in-home cases), which is slightly higher than during the previous monitoring period when the number of unassigned cases ranged monthly from nine to 26 cases.²⁰⁶

²⁰⁶ In addition to these unassigned cases, a number of ongoing cases (ranging from 8 to 30 during the current monitoring period) remained assigned to investigative social workers, supervisors, and program managers even after an ongoing case was opened. CFSA indicates that these cases are awaiting transfer from an investigative worker to a worker in an ongoing unit. During this transfer period, the investigative worker is tasked with maintaining case carrying responsibility, which includes visiting the family, ensuring the children are safe and providing services. It is unclear from the data how long these cases have been in the transfer process.

Monthly performance data for workers conducting homes studies improved from the prior monitoring period, with 100 percent of workers this period carrying fewer than 30 cases each month.

b. Supervisory Responsibilities

There are two Exit Standards related to supervisory caseloads and expectations for supervisors, each of which is designated as an Outcome to be Maintained.

Performance for the period July 1, 2018 through March 31, 2019:

The first Exit Standard requires that supervisors are responsible for supervising no more than five case-carrying social workers and one case aide or family support worker (FSW) (IEP citation I.D.26.a.i.). Monthly performance during this period ranged from 93 to 98 percent of supervisors meeting the required standard for number of supervisees. During staffing transitions, program managers may be required to temporarily provide direct supervision to frontline staff until a vacant supervisor position is filled. In both January and February 2019, there was at least one program manager responsible for exceeding the *LaShawn* IEP expectation for the number of case-carrying staff and case-aides being supervised. The Monitor considers such situations to be temporary and the Exit Standard to be maintained.

The second Exit Standard requires that 95 percent of ongoing permanency and in-home cases be assigned to social workers (IEP citation I.D.26.b.ii.). Between July 2018 and March 2019, the percentage of ongoing cases carried by social workers ranged monthly from 91 to 97 percent²⁰⁷, meeting the required level of performance during three of nine months this monitoring period, and within three percent for five of the remaining six months. The Monitor considers current performance to be insubstantial deviations and this Exit Standard to be maintained.

1. Staff Training

Training is a core function in any child welfare agency and a primary mechanism to ensure that social workers, supervisors, and managers have the competencies necessary to carry out their jobs effectively.

²⁰⁷ Monthly performance data for cases assigned to social workers are as follows: July 2018, 95%; August 2018, 93%; September 2018, 92%; October 2018, 92%; November 2018, 93%; December 2018, 95%; January 2019, 93%; February 2019, 91%; March 2019, 97%.

Training for Social Workers²⁰⁸

Performance for the period July 1, 2018 through March 31, 2019:

The IEP requires that 90 percent of newly hired CFSA and private agency case-carrying staff receive 80 hours of pre-service training prior to being assigned cases (IEP citation I.D.27.a.). During the current monitoring period, all but two workers met the required number of pre-service training hours (97%; 57 out of 59²⁰⁹). Of the two workers who did not complete the required pre-service training, one is no longer employed by the agency. This Exit Standard has been maintained.

Training for Supervisors²¹⁰

Performance for the period July 1, 2018 through March 31, 2019:

Ninety percent of newly hired CFSA and private agency supervisors are required by the IEP to complete 40 hours of pre-service training on supervision within eight months of assuming supervisory responsibility (IEP citation I.D.27.b.). Between July 2018 and March 2019, there were 11 supervisors to whom this Exit Standard was applicable; nine (82%) of these supervisors completed pre-service training within eight months of assuming supervisory responsibility, below the required performance level of 90 percent. This is second consecutive period in which performance has been below the level required by the IEP. While the Monitor considers this Exit Standard to be maintained due to the small number of applicable supervisors, the Monitor is concerned about performance and training accountability for supervisors.²¹¹

Performance on Strategy Plan:

CFSA has employed the following strategy to improve the quality of case practice through training:

- *Beginning in February 2018, provide six months of direct clinical coaching for all ES, IH, and Program Ops supervisors to include a focus on improving case planning. Each supervisor will participate in 90-minute small group coaching session every other week. Additionally, the coaches are available for individual consultation with supervisors as needed. PMs and PAs are updated monthly on the progress of the supervisory coaching sessions (2018 Strategy Plan, p.2).*

²⁰⁸ The IEP also requires that 80 percent of previously hired CFSA and private agency social work staff receive 30 hours of in-service training annually (IEP citation I.D.28.a.). These data are measured on an annual basis and will be assessed in the next monitoring report.

²⁰⁹ One direct service staff received a waiver due to having previously completed the training.

²¹⁰ The IEP also requires that 80 percent of previously hired CFSA and private agency supervisors complete 24 hours of in-service training annually (IEP citation I.D.28.b.). These data are measured on an annual basis and will be assessed in the next monitoring report.

²¹¹ CFSA has invested in improving supervisor capacity to support workers in developing and implementing effective case plans with families through *Mastering the Art of Child Welfare Supervision 2.0 (MACWS)* trainings. As the Monitor has reported in past report, there are continuing concerns over accountability for supervisors completing required training. As of December 2018, 15 (20%) have completed all required tiers of the MACWS training.

As was previously discussed in the *Services to Families and Children* and *Case Planning* section of this report (IV.D.3.), CFSA implemented a strategy to conduct group supervision and provide individual support as needed for supervisors. Unfortunately, participation during the first six months of implementing this strategy remained low, with only 56 percent of in-home, permanency, and CPS supervisors attending half of the coaching sessions. The lack of participation continues to be a concern for the Monitor.

Updates on Needs Assessment and Resource Development Plan

Based on QSR data and other qualitative data collected through the 2018 Needs Assessment, CFSA identified a need to improve staff capacity in engaging youth and families who struggle with substance abuse and increasing staff understanding of the cycle of addiction. As outlined in the accompanying Resource Development Plan (RDP), the Child Welfare Training Academy (CWTA) is researching SBIRT (Screening, Brief Intervention, and Referral to Treatment for Substance Use) so that they can implement the curriculum in the first quarter of FY2020.

2. Training for Foster and Adoptive Parents

Foster parents are critical partners in any child welfare system, responsible for meeting the needs and supporting the well-being of children in their care. There are two Exit Standards related to pre-service training for foster and adoptive parents, bulleted below:^{212,213}

- 95 percent of foster parents must complete a required 15 hours of pre-service training hours (IEP citation I.D.29.a.), and
- 90 percent of adoptive parents must complete a required 30 hours of pre-service training (IEP citation II.F.20.).

Pre-Service Training for Foster and Adoptive Parents

Performance for the period July 1, 2018 through March 31, 2019:

During the current monitoring period, 100 percent (89 of 89) of foster and adoptive parents received 15 hours of pre-service training and 89 percent (79 of 89) of foster and adoptive parents received 30 hours pre-service training. The Monitor considers these Exit Standards to be maintained.

²¹² Kinship foster parents who receive a temporary, provisional license are not included in these calculation. Foster parents who are licensed by another jurisdiction outside of the District or Maryland for the purpose of completing an ICPC placement are also excluded from these calculations.

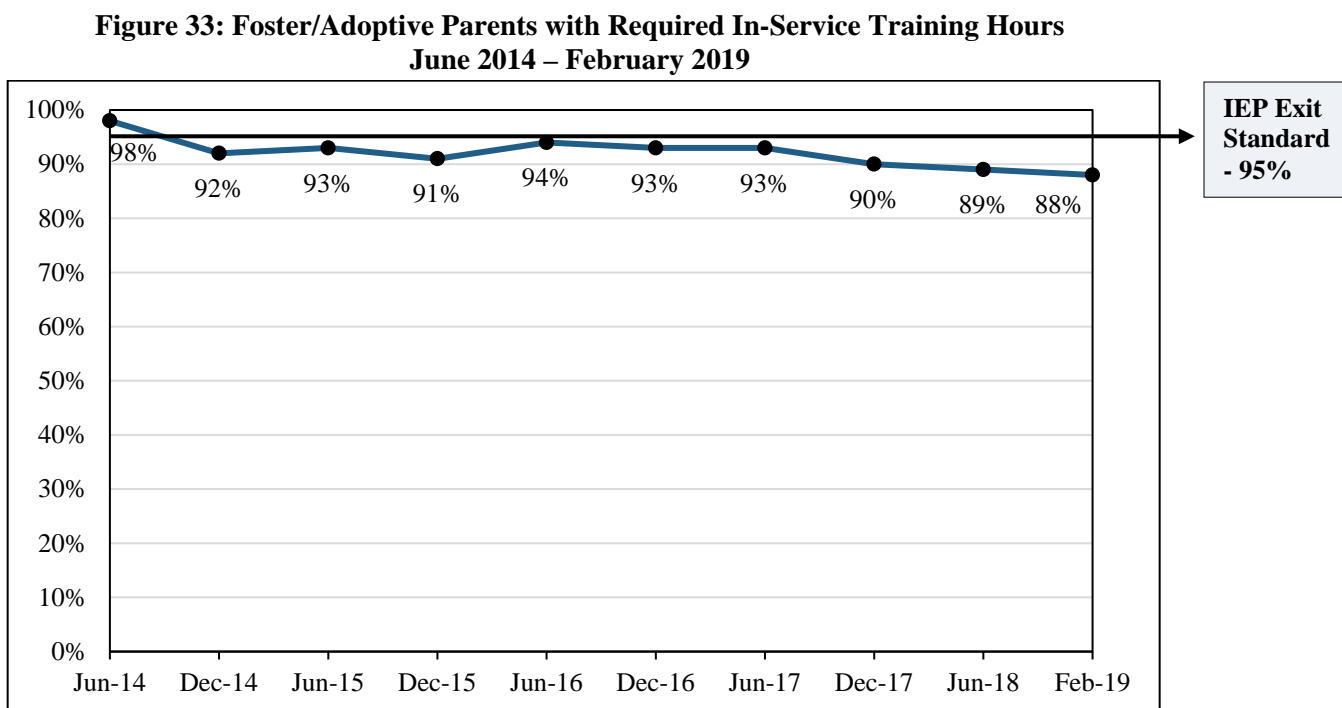
²¹³ CFSA does not differentiate between foster and adoptive parents during pre-service training. According to CFSA policy, all new foster and adoptive parents are required to complete either the PRIDE or PS-MAPP training curriculum, both of which are 30 hours.

In-Service Training for Foster Parents

Performance for the period July 1, 2018 through March 31, 2019:

The IEP requires that 95 percent of foster parents receive 15 hours of in-service training annually (IEP citation I.D.29.b.).²¹⁴ This requirement is monitored through the relicensure process, which occurs annually or biannually depending upon a foster parent's license. Between July 2018 and February 2019²¹⁵, 216 foster parents had their license renewed and 190 (88%) foster parents completed the required in-service training hours.

As shown in Figure 33, CFSA has been below the required level of performance on in-service training for foster parents since December 2014. Although this deficit has generally been within five percent of the required performance level, performance during the past nine months reflects continued decline, now at seven percent below the target. The Monitor has determined that this Exit Standard has not been maintained.²¹⁶



Source: CFSA Administrative Data, FACES.NET report TRN009

Data represent performance for each 6 month monitoring period (January – June and July – December); February 2019 represents data for July 2018 – February 2019.

²¹⁴ CFSA and private agencies license foster parents for either 1 or 2 years. Foster parents are required to complete 15 hours of in-service training for each year of their license.

²¹⁵ Due to the timing of this report, March 2019 data were not available for inclusion.

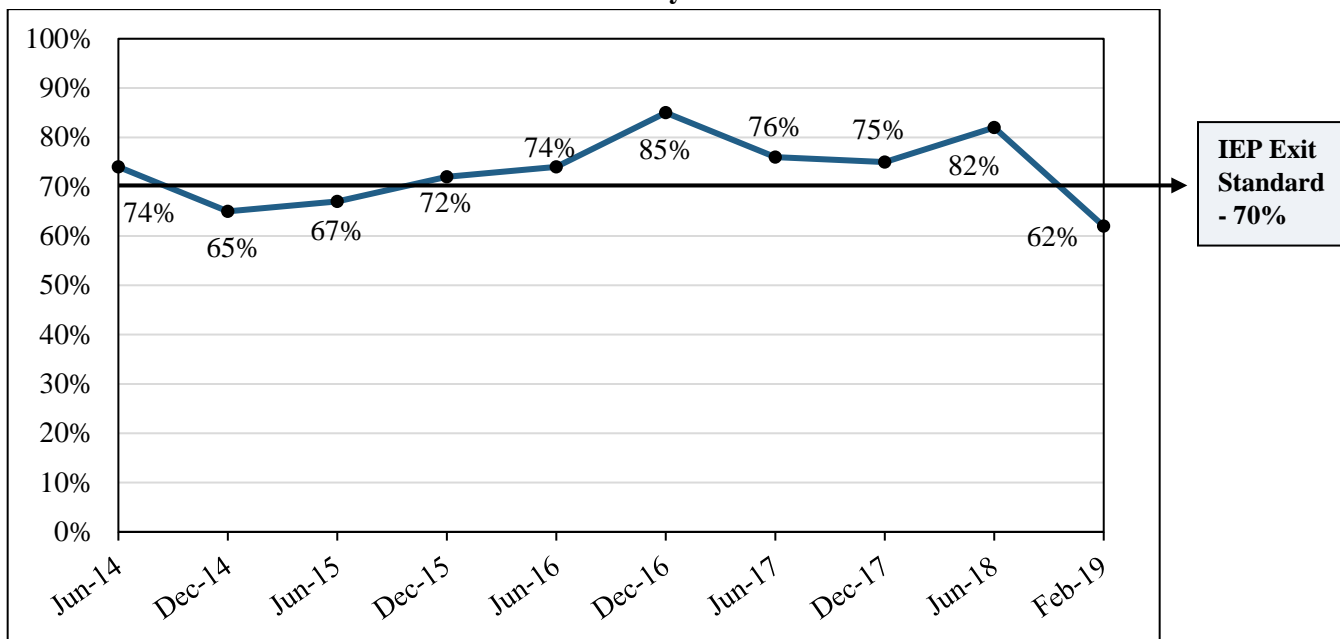
²¹⁶ To improve accountability and ensure foster parents complete in-service training timely, CFSA reports implementing new processes, including having the assigned relicensing worker review the Individual Training Record with the resource parent during each quarterly visit and sharing this information with the assigned Resource Support Worker, and the relicensing supervisor sending a newly created report to the in-service training coordinator on the 15th of each month which highlights foster parents who have completed fewer than 60% of the required training hours and are within 90 days of relicensure.

As discussed in the previous monitoring report, as a result of the Temporary Safe Haven Redesign (TSHR), a significant number of foster parent transitioned from one agency to another and need to have their licenses re-issued by the new agency. In some instances, this reduced the relicensing period for specific homes. During this transition process, CFSA was unable to adequately track foster parent in-service training hours. Specifically, of the 66 foster parents who were due to be relicensed during the current monitoring period but were instead relicensed prior to June 2018 due to TSHR, 12 (18%) foster parents had completed the required number of hours prior to receiving their new license. The remaining 54 foster parents did not complete the required number of hours at the time they were relicensed, and CFSA and NCCF lacked accountability measures to ensure these foster parents were engaging in ongoing in-service training. Of note, 22 (33%) of the 66 foster parents have since closed their home.

3. Timely Approval of Foster Parents

CFSA and its District partner agencies, LAYC and LSS, are responsible for licensing and monitoring foster homes in the District, and NCCF is responsible for licensing homes in Maryland. This Exit Standard requires that 70 percent of homes licensed will have been approved within 150 days of the foster parent beginning training (IEP citation I.B.14.). It was established to ensure that the licensure process is timely and efficient. This Exit Standard is designated as an Outcome to be Maintained, however required performance was not maintained during this period (see Figure 34).

**Figure 34: Approval of Foster Parents within 150 Days of Beginning Training
June 2014 – February 2019**



Source: CFSA Administrative Data, FACES.NET report PRD202

Data represent performance for each 6 month monitoring period (January – June and July – December); February 2019 represents data for July 2018 – February 2019.

Performance for the period July 1, 2018 through March 31, 2019:

Between July 2018 and February 2019²¹⁷, CFSA and NCCF newly licensed 81 foster homes; 50 (62%) of these homes were licensed with the required number of pre-service training hours and within the 150 day timeframe.²¹⁸

The Monitor is not aware of what new barriers or challenges CFSA and its partner agencies encountered over the last eight months that resulted in such a decline in performance, but is troubled by this practice during a time when placement resources are so critically needed. The Monitor does not consider this Exit Standard to be Maintained and will be requesting strategies be put in place to immediately address barriers to timely licensure.²¹⁹

4. Reviewing Child Fatalities

The District of Columbia's City-wide Child Fatality Review Committee, a requirement of the *LaShawn* MFO and IEP, was created by Mayoral Order in October 1992 and in subsequent legislation.²²⁰ The Committee is charged with reviewing the circumstances surrounding the deaths of children who are residents or wards of the District of Columbia, including those children or families who were known to the child welfare system at any point during the four years prior to their death in order to determine systemic, legal, or policy and practice deficits and to make recommendations for improvement. The Committee is required to be composed of representatives from various District agencies^{221, 222} and community members. The Monitor and staff are members of the Committee, which is organizationally located and staffed within the Office of the Chief Medical Examiner (OCME). The Committee reviews cases when all requested documents have been received.

CFSA also has an Internal Child Fatality Review Committee, which reviews the deaths of District children who were known to the child welfare agency at any time within four years prior to their

²¹⁷ Due to shortened report timeline, March 2019 data were not available for inclusion in this report.

²¹⁸ Of the 50 homes that are considered compliant during the current monitoring period, 16 homes whose licensure took longer than 150 days are considered compliant due to circumstances that were beyond the District's control.

²¹⁹ CFSA reports implementing several strategies to address performance, including prioritizing the submission of out-of-state clearance requests so that this occurs within the first 15 days of pre-service training; licensing workers will initiate the process for obtaining a fire inspection by the third pre-service training class; CFSA will be scheduling a meeting with the Department of Energy and Environment to develop strategies and address barriers to ensure that lead inspections are conducted within 30 days of a request; licensing workers will send weekly emails to prospective foster parents detailing where they are in the licensing process and what remains outstanding; and CFSA will create a centralized tracking form to monitor the process for all foster parents.

²²⁰ D.C. Code §4-1371.

²²¹ These agencies include DHS, Department of Health, OCME, CFSA, Metropolitan Police Department, Fire and Emergency Medical Services Department, Office of the State Superintendent of Education, District of Columbia Public Schools, District of Columbia Housing Authority, Office of the Attorney General, Superior Court of DC, Office of the US Attorney, DBH, DHCF, Department of Youth Rehabilitation Services, DC hospitals where children are born or treated, college or university schools of social work, Mayor's Committee on Child Abuse and Neglect, and 8 community representatives.

²²² Since the initial creation of the Fatality Review Committees, consistent with the MFO, the Monitor has served as a member of both the City-wide and Internal Child Fatality Review Committees. In June 2014, the Monitor and staff were appointed by Mayoral Order to the City-wide Committee.

death. The review assesses the quality of CFSA service delivery to the child and family, identifies patterns of risks and trends in cases involved with CFSA, and determines any systemic issues that need further attention. The Committee is composed of a multidisciplinary team including representatives from Quality Assurance, Child Welfare Training Academy, Office of Well-Being, Program Operations, Office of the Attorney General, and other related departments. The Monitor participates in these reviews as well. The Internal Committee's procedures require review of cases within 60 days²²³ of notification of the child's death.

This Exit Standard is designated as an Outcome to be Maintained.

Performance for the period July 1, 2018 through March 31, 2019:

City-wide Child Fatality Review Committee:

Between July and December 2018²²⁴, the Committee reviewed a total of 73 cases – 51 cases were reviewed by the Infant Mortality Review Team, some using a cluster²²⁵ review method, and 22 cases were reviewed by the Child Fatality Review Team. As of February 2019, the Committee continued to have 131 fatalities from prior years pending review – specifically, five fatalities from CY2016, 43 fatalities (including 34 infant fatalities) from CY2017, and 83 fatalities (including 53 infant fatalities) from CY2018.

During fatality reviews in this six month period, findings and recommendations were made by Committee members, and the recommendations subcommittee met on March 22, 2019 to further develop these recommendations and vote on which will be adopted and forwarded to District agencies. When recommendations are adopted, they are incorporated into agency performance plans and their implementation is tracked by the City Administrator.

The Committee voted to approve the 2017 Annual Report on September 27, 2018. The report is available to the public on the OCME's website²²⁶. Several of the recommendations developed in 2017 pertained to practice within CFSA. Specifically,

- CFSA should consistently implement its policy on community papering to ensure judicial oversight in cases where the safety/well-being of the child is at risk and the families declined to participate in voluntary services.

CFSA Response: Agree with recommendation.

²²³ In March 2016, CFSA changed their procedural timeline for review from 45 to 60 days. This change has not yet been made within policy.

²²⁴ Due to shortened report timeline, January through March 2019 updates were not available for inclusion in this report.

²²⁵ There are 2 primary approaches utilized by the Committee to review cases. The first is review of individual fatalities and the second reviews a cluster of fatalities identified by a specific category or characteristic.

²²⁶ The 2017 City-wide Child Fatality Report may be found at:

https://ocme.dc.gov/sites/default/files/dc/sites/ocme/agency_content/CFRC%20Annual%20Report-Web.pdf

- CFSA should continue to provide supportive services to its front line social work staff and improve their access to existing programs that promote well-being.
CFSA Response: CFSA does not accept the recommendation, with explanation and alternative recommendation. CFSA responded that this recommendation falls outside the scope of the Committee, and does not understand the correlation between well-being services to front line social workers and the impact on child fatalities in the District. CFSA acknowledges that employee well-being is important and has made it a priority, with a robust wellness program offered to staff that includes a meditation room, fitness and health classes, counseling, and intervention post traumatic events.
- CFSA should strengthen the agency's Entry Services policy and practice to ensure families with multiple referrals to CPS receive an intensive historical review. The intended result is that service intervention will be designed to prevent further reoccurrence of maltreatment.
CFSA Response: Agree, with modification. CFSA's policy provides for review of families with multiple referrals to the agency, specifically the four plus staffings, which should be held within 15 days of the new referral being accepted.

The OCME staff shared with Committee members that the Annual Report was well received by the Executive Office of the Mayor and the Council of the District of Columbia.

Internal Child Fatality Review Committee:

Between July 2018 and March 2019, CFSA's Internal Child Fatality Review Committee met monthly and reviewed a total of 32 fatalities that occurred in families who had active or prior involvement with CFSA. A number of these fatalities were not reviewed within 60 days of the child's death, primarily due to CFSA receiving delayed notice of the fatality²²⁷.

In CY2018, CFSA made a number of recommendations pertaining to safe sleep, community papering, medical neglect, intervention plans, four plus staffings, and cases with multiple prior referrals. Implementation updates are bulleted below:

Identify and remove communication and service gaps around safe sleeping as related to CFSA

- CFSA has been attending the District's City-wide Infant Mortality Committee Meetings to learn more about other District government agencies' efforts to prevent sleep related deaths.
- The Committee has reviewed a summary of best practices shared from other jurisdictions.

²²⁷ Most of these fatalities were discovered when the OCME contacted CFSA for agency records in preparing for review of the fatality by the City-wide Child Fatality Committee.

- Committee members are examining data and information on the correlation between parental substance abuse and sleep-related risks.

Promote consistent protocols for elevating matters that warrant community papering

- The Office of the Attorney General is reviewing protocols with the District’s Family Court.
- CFSA will include updated guidance on community papering in a revised version of the In-Home Procedural Operations Manual (POM) that will be completed in the spring of 2019.

Timely obtain documentation regarding medical neglect in order to determine the level of acuity to appropriately identify next steps

- CFSA reports that through an increased partnership with the Children’s National Medical Center, CFSA nurses are now receiving medical records within 24 to 48 hours of submitting a request, a significant improvement.
- In 2018, staff from Healthy Horizons and CPS met to clarify and strengthen communication and teaming processes. CFSA reports progress through continued collaboration.

Ensure that intervention plans have SMART²²⁸ goals, are appropriate for the family, and are documented

- CFSA reports that Entry Services has been working with staff in OPPPS (Office of Planning, Policy, and Program Support) to revise and implement new intervention and safety planning protocols and training. CFSA anticipates finalizing these protocols in late April 2019.

Make four-plus staffings²²⁹ more consistent

- CFSA developed new guidance for these staffings, including requirements for documentation, to specify the purpose of the meeting, the content of what occurred, an assessment of the information, and identification of next steps or plan.

Explore protocols for receiving cases where multiple referrals have occurred (e.g., for educational neglect)

- CFSA eliminated the FA track effective April 1, 2019, and a new unit has been established for cases involving educational neglect.

²²⁸ Specific, measureable, achievable, relevant, and time-bound.

²²⁹ “Four-plus staffings” refers to a comprehensive review of case history and current circumstances that is completed for families who are subject to a new investigation for whom the current report of maltreatment is the fourth or greater report, with the most recent report occurring within the last 12 months (IEP citation I.A.c.).

Throughout this monitoring period, CFSA worked with the Monitor and Committee members to develop consistent protocols for proposing and adopting recommendations through the child fatality review process, and for tracking follow-up activities on recommendations.

As of the writing of this report, CFSA's 2018 Child Fatality Annual Report is in the process of being finalized and will be posted on CFSA's website when complete.

5. Infrastructure

Policies and Procedures

Agency policies and procedures define how CFSA carries out its mission to promote the safety, well-being, and permanency of children; serve birth families; and support foster parents and staff. Among other things, policies and procedures direct the internal operations of the agency, case practice, methods of communication between agencies and families, data collection, and reporting. Further, they are critical in outlining expected practice and creating a system of accountability and transparency for children, families, staff, and the public. A high-functioning child welfare system must have policies and procedures in place that support best practice and are available for staff and the public to access.

CFSA's OPPPS Administration is responsible for creating new policies and updating existing policies in line with best practice and identified needs of the agency. During the current monitoring period, CFSA continued to review existing policies that were in need of updates to reflect current and best practice and develop new policies as needed. There are a number of important policies, and associated procedural manuals, that are in the process of being finalized including *In-Home Services*, *Safety Planning*, *Investigations*, *Hotline*, *Family Team Meetings*, and *Engaging Incarcerated Parents*. The Monitor reviews and provides comments and recommendations on new and revised policies.

Quality Assurance

Sufficient capacity and strong commitment to continuous quality improvement (CQI) processes are necessary infrastructure for an agency to assess practice and make changes when and where needed. These processes are also essential to creating a system that is accountable to children and families, foster parents, staff, and the community. During the current monitoring period, CFSA continued to engage in CQI processes, including collaborating with the Monitor to develop a case review instrument to assess performance on referrals to community-based services for families who had a low or moderate risk rating at the time their investigation or FA was closed.

In addition, CFSA's Contract Monitoring Division (CMD) was planning to begin conducting case reviews of randomly selected cases referred to the Collaboratives, however no start date has been identified. CFSA reports there have been delays due to a need to make edits to the review tool and contract negotiations. It is critical that CFSA and the Collaboratives put this process in place, something the Monitor has stressed for some time, as these data will close an important feedback loop that has prevented CFSA from assessing what happens to families who are referred for services at the Collaboratives.

Data and Technology

CFSA submitted a response to the federal Administration for Children and Families (ACF) regarding their intent to update their Statewide Automated Child Welfare Information System (SACWIS) system and transition to a Comprehensive Child Welfare Information System (CCWIS) to improve the functionality of FACES.NET moving forward. CFSA continues to report they are on track to achieve full implementation in FY2024.²³⁰

In the 2018 Needs Assessment, CFSA identified a need to more effectively communicate available services to foster parents and youth. Within the corresponding RDP, CFSA developed a strategy to contract with a vendor who will create an electronic database that will provide a searchable, community resource directory and will also allow for workers to complete automated referrals through this system. CFSA reports that they have identified a vendor and are in the process of finalizing the contract. Per the RDP, this database should be available approximately four months after the contract is signed. CFSA anticipates the contract will be signed in June 2019.

6. Financing

Federal Revenue

CFSA continues to demonstrate its ability to maximize federal Title IV-E revenue through quarterly claims for Title IV-E²³¹ as well as providing documentation to support its claiming under the Title IV-E Waiver Demonstration Project²³². Through the Title IV-E Waiver Demonstration Project, CFSA was provided significant federal resources that were invested in community-based services, both within the Collaboratives and other local community organizations, as well as mental health specialists, parent coaches, and the Rapid Rehousing program. The federal Waiver was set to expire March 31, 2019, however, CFSA received an extension until September 30, 2019.

²³⁰ CFSA is responsible for covering the cost of the transformation upfront, minus the federal matching funds. The federal government will then reimburse the cost at a rate of approximately 50%.

²³¹ The District of Columbia continues to claim federal Title IV-E dollars for adoption, guardianship, and training outside of their Title IV-E waiver.

²³² The District of Columbia's federal Title IV-E Waiver plan was approved in September 2013 and implementation began in 2014. CFSA has been able to reinvest waiver funds to support family stabilization, preservation, and reunification. CFSA's Allocation Cap for FY2017 was \$39.5 million.

The ending of Waiver support provides a funding gaps for involved states, including the District of Columbia. After September 2019, CFSA is hopeful that they can transition to funding for prevention activities through FFPSA, although, there is the potential for a gap in federal support due to timing and funding restrictions. As a result, CFSA moved rapidly to plan for implementation of the FFPSA, which will allow increased claims for Title IV-E reimbursement to fund specific mental health, substance abuse, and in-home parent skill-based programs in the community. CFSA submitted the District’s Title IV-E Prevention Plan to the Children’s Bureau for approval on April 10, 2019 and is awaiting feedback. The goal is to finalize an approved plan prior to October 1, 2019, in order to begin maximizing federal claiming for prevention services through FFPSA in FY2020.

Table 14 and Table 15 present federal Title IV-E penetration rates and the actual, approved, or proposed Title IV-E federal resources used to support services to children and families involved with CFSA.

Table 14: CFSA’s Title IV-E Penetration Rates
July 2018 – March 2019

Time Period	Foster Care Penetration Rate	Adoption Penetration Rate
<i>July – September 2018</i>	64.2%	77.3%
<i>October – December 2018</i>	64.7%	77.0%
<i>January – March 2019</i>	68.1%	76.0%

Source: CFSA

**Table 15: CFSA's Actual and Budgeted Gross Title IV-E Federal Funds Operating Budget
FY2009 – 2020**

Fiscal Year	Total Title IV-E Federal Resources (in millions)	Overall Budget (in millions)
FY2009 (actual)	\$49.7	\$289.1
FY2010 (actual)	\$58.1	\$277.3
FY2011(actual)	\$52.4	\$249.4
FY2012 (actual)	\$55.5	\$238.5
FY2013 (actual)	\$56.8	\$227.3
FY2014 (actual)	\$60.8	\$223.2
FY2015 (actual)	\$59.3	\$230.7
FY2016 (actual)	\$59.7	\$218.4
FY2017 (actual)	\$57.5	\$223.6
FY2018 (actual)	\$56.6	\$221.3
FY2019 (approved)	\$57.6	\$224.3
FY2020 (proposed)	\$54.5	\$220.2

Source: CFSA FY2010 – 2018 Actual Budget, FY2019 Approved Budget, FY2020 Proposed Budget, and Financial Plan and District's Financial System (SOAR)

Budget

FY2018 Budget: October 1, 2017 – September 30, 2018:

CFSA's actual FY2018 budget (local and federal funds) was \$221,301,837, of which \$159,025,000 (72%) was local funding²³³, and provided funding for 775 staff (FTEs). The majority of funding was allocated to four areas:

- Agency Programs – \$89.9 million,²³⁴ which includes permanency and kinship support;
- Entry Services – \$20.5 million, which includes CPS and the Healthy Horizon's Assessment Clinic;
- Office of Well-Being – \$10.1 million; and

²³³ Includes both local funds and Special Purpose Revenue funds.

²³⁴ CFSA's FY2018 budget was based on a projection of 1,000 children in foster care at any time. CFSA continues to maintain fewer than 1,000 children in foster care.

- Community Partnerships – \$24.7 million, which includes in-home and community-based services.

A driving factor in the FY2018 budget was the transition from multiple to a single foster care placement and services provider in Maryland. The result of this change has led to some administrative cost savings within the approved FY2019 and proposed FY2020 budgets discussed below.

Approved FY2019 Budget: October 1, 2018 – September 30, 2019:

CFSA's approved FY2019 overall budget is \$224,278,974, of which \$162,239,000 (72%) is local funding²³⁵ and includes 819 FTEs. Overall, the majority of funding is allocated to four areas:

- Agency Programs – \$75.8 million²³⁶
- Entry Services²³⁷ – \$29.1 million,
- Office of Well-Being – \$8.3 million
- Community Partnerships – \$28.1 million

Proposed FY2020 Budget: October 1, 2019 – September 30, 2020:

CFSA's proposed FY2020 budget is \$220,206,929, of which \$161,248,000 (73%) is local funding²³⁸. This represents an overall decrease of 1.8 percent, of which the majority is attributable to a decline in federal dollars due to the ending of the federal Title IV-E Waiver. The FY2020 budget includes 819 staff (FTEs), the same as the prior year. Overall, the majority of funding continues to be allocated to four areas:

- Agency Programs – \$72.2 million²³⁹
- Entry Services – \$30.7 million
- Office of Well-Being – \$7.0 million
- Community Partnerships – \$28.3 million

CFSA's proposed FY2020 budget is tighter than in prior years. This is primarily the result of changes in federal child welfare financing (discussed below) and the impact of the 2019 federal

²³⁵ Includes both local funds and Special Purpose Revenue funds.

²³⁶ CFSA's FY2019 budget is based on a projection of 947 children in foster care at any time. As of the writing of this report, CFSA continues to have fewer than 900 children in foster care.

²³⁷ The FY2019 budget shifts resources to Entry Services including an increase of \$2.7 million and 17 FTEs to CPS investigations and FA units. This increase reflects a change in staffing that was made during FY2018 and will be sustained through the FY2019 approved budget.

²³⁸ Includes both local funds and Special Purpose Revenue funds.

²³⁹ CFSA's FY2020 budget is based on a projection of 906 children in foster care at any time. As of the writing of this report, CFSA continues to have fewer than 900 children in foster care.

government shutdown, which significantly impacted the District's reserve funds. CFSA's proposed FY2020 budget includes three key focus areas: community-based prevention services, the consolidation of CPS-I and CPS-FA, and a focus on placement.

Community-Based Prevention Services

CFSA's proposed FY2020 budget is complicated by two major changes in federal financing:

- the ending of the Title IV-E Waiver Demonstration Project, which provided considerable flexible funding to the District that was programmed for services to prevent foster home placement, and
- the enactment of FFPSA, which will allow the District to claim federal reimbursement for select evidence-based prevention services provided to candidates of foster care at imminent risk of entry into care, and pregnant and parenting youth in foster care. Eligible prevention services funded under FFPSA are more narrowly defined than those under the previous Waiver demonstration.

While CFSA has utilized the Waiver extension period to plan for ongoing and new investments in community-based prevention services, including those that will be newly eligible for federal reimbursement through FFPSA, the agency is predicting a loss of approximately \$3 million in federal dollars as a result of this transition. It is difficult, however, to predict the true fiscal impact of FFPSA on CFSA's budget due to many unknowns and ambiguities in current federal guidance, including the Children's Bureau's approval of the District's Title IV-E Prevention Plan.

That being said, the Monitor believes that CFSA is in a strong position to move forward with implementation of FFPSA in FY2020 and is supportive of the work the agency has done with other District agencies and community partners in the development of their federally-required prevention plan. Further, the Monitor supports the Mayor's broad prevention plan, budgeted at \$4.7 million in local dollars – Families First DC – which will increase the availability of primary prevention services in the community that are available to children and families and can prevent families from ever becoming known to CFSA. Key to the Mayor's vision is recognizing the services reimbursable through FFPSA as well as those that are not, and the need to provide a broad array of prevention services in the District that can meet the diverse needs of children and families.

Budgetary Implications of Changes to Entry Services

As was previously discussed in this report, CFSA made the decision to end the Differential Response model beginning April 1, 2019. CFSA reports that they do not expect that this change will have staffing and budget implications. However, there are more stringent timeline requirements for initiation and closure of CPS investigations (as opposed to Family Assessments).

In conjunction with rising caseloads, this change may lead to a need for increased staffing in Entry Services. CFSA is well aware of these differences in practice, and the increase in investigation caseloads in the first quarter of 2019. This analysis suggests that current capacity will be sufficient. However, it remains to be seen if CFSA will need to increase the FTEs available to Entry Services to address rising caseloads and differing expectations within investigative practice.

Placement

CFSA has reported that it has been able to reduce placement costs by approximately \$4.2 million as a result of administrative efficiencies from TSHR. The CFSA Director believes the current and proposed budget provide the resources necessary to improve the current placement array and in-home supports for foster parents. However, given the apparent placement shortages and the need for more intensive placement options for higher need children (as evidenced by the number of children who have spent the night at the CFSA office building during the current monitoring period), the Monitor believes that CFSA will need to make additional investments in improving the placement array.

Other Investments

CFSA has also successfully secured federal funding to implement the Kinship Navigator program.²⁴⁰ Implementation of these services to support kinship resources are intended to support relatives assuming caregiving roles and should over time have a positive impact on the need for non-relative foster care resources.

Additionally, as was discussed previously, CFSA is continuing to move forward the implementation of a new data system, CCWIS, and the FY2020 budget includes the appropriate financial investment (\$9 million in FY2020) to support this work.

²⁴⁰ These dollars are not included in the current budget because they are provided to CFSA after the FY2020 begins.

APPENDIX A

Glossary of Acronyms

ACEDS: Automated Client Eligibility Determination System
APPLA: Another Planned Permanent Living Arrangement
ASFA: Adoption and Safe Families Act
BSW: Bachelor of Social Work
CAFAS: Child and Adolescent Functional Assessment Scale
CCWIS: Comprehensive Child Welfare Information System
CFRC: Child Fatality Review Committee
CFSA: Child and Family Services Agency
CFSR: Child and Family Services Review
CMD: Contract Monitoring Division
CPS: Child Protective Services
CQI: Continuous Quality Improvement
CSBA: Caregiver Strengths and Barriers Assessment
CSSP: Center for the Study of Social Policy
CWTA: Child Welfare Training Academy
CY: Calendar Year
DHS: Department of Human Services
FA: Family Assessment
FACES.NET: CFSA's automated child welfare information system
FAPAC: Foster and Adoptive Parent Advocacy Center
FSW: Family Support Worker
FTE: Full Time Employment
FTM: Family Team Meeting
FY: Fiscal Year
GAL: Guardian ad Litem
HMO: Health Maintenance Organization
ICPC: Interstate Compact for the Placement of Children
IEP: Implementation and Exit Plan
I&R: Information and Referral
LAYC: Latin American Youth Center
LSS: Lutheran Social Services
LYFE: Listening to Youth and Families as Experts
MACWS: Mastering the Art of Child Welfare Supervision
MFO: Modified Final Order
MSW: Master of Social Work

NCCF: National Center for Children and Families
OAG: Office of the Attorney General
OCME: Office of the Chief Medical Examiner
OWB: Office of Well-Being
OYE: Office of Youth Empowerment
PAQIA: Performance Accountability and Quality Improvement Administration
PECFAS: Preschool and Early Childhood Functional Assessment Scale
PEER: Parent Engagement, Education and Resource
PIP: Performance Improvement Plan
PGRM: Permanency Goal Review Meeting
QA: Quality Assurance
QSR: Quality Service Review
RDP: Resource Development Plan
RDS: Resource Development Specialist
R.E.D.: Review, Evaluate and Direct Statewide Automated Child Welfare
SACWIS: Statewide Automated Child Welfare Information System
SDM: Structured Decision Making
SSI: Supplemental Security Income
STARS: Student Tracking and Reporting System
TSHR: Temporary Safe Haven Redesign
USDA: United States Department of Agriculture
YTP: Youth Transition Plan

APPENDIX B
LaShawn 2018 Strategy Plan

IEP Requirement	<i>LaShawn</i> Performance Metric	Strategy to Achieve Benchmark
Acceptable Investigations [IEP I.A.2.]	CFSA shall routinely conduct investigations of alleged child abuse and neglect. <u>80%</u> of investigations will be of acceptable quality.	1. No later than 30 days after the upcoming joint CFSA-CSSP reviews of the quality of practice in Entry Services, CFSA will begin implementing, tracking and reporting on jointly agreed upon recommendations for improvement. The jointly agreed upon recommendations will be incorporated into this Strategy Plan.
Services to families and children to promote safety, permanency and well-being [IEP I.A.3.]	In <u>80%</u> of cases, appropriate services, including all services identified in a child's or family's safety plan or case plan shall be offered along with an offer of instruction or assistance to children/families regarding the use of those services.	1. Office of Well Being (OWB) will build internal infrastructure that moves the agency from a fully DBH-dependent model to a model with therapists on staff within OWB to provide time-limited therapeutic services to children upon entry into foster care and for children in care who are experiencing placement instability. <ul style="list-style-type: none"> Between April and August 2018: develop infrastructure for model including identifying positions, hiring new staff and using screenings at initial placement to connect children to appropriate services in a more timely manner. Between September and December 2018: full staff will be in place to implement initial phase for all children entering foster care, with full implementation for new entries and re-placements by no later than the start of the new year. 2. Beginning January 2018, assess quarterly the impact of the revised Collaborative contract on identification, provision and impact of services. Make on-going course corrections, as needed.

IEP Requirement	<i>LaShawn</i> Performance Metric	Strategy to Achieve Benchmark
Case planning process [IEP I.B.17.]	80% of cases reviewed through the Quality Service Reviews (QSR) will be rated as acceptable. The Monitor will determine performance based on the QSR case planning process and Pathway to Safe Closure indicators.	<ol style="list-style-type: none"> 1. Beginning in March 2018, upon removal, assign initial case assessments (CAFAS/PECFAS) to Office of Well Being to standardize completion and increase connection of assessments to case planning and day-to-day practice. 2. By March 31, 2018, establish birth parent support unit within Program Ops to increase agency capacity for intensive work with birth parents, including the family's successful participation in case planning. 3. By September 30, 2018, establish standardized protocols and research methodologies for supervisors/managers to conduct regular peer review of case practice in several program areas, including: Acceptable Investigations; Family Assessment; Safety assessments during visits; and Case plans. 4. In March 2018, initiate adjustments to the case teaming process for new entries that will intensify the focus on specific permanency barriers and action steps. Adjustments include: <ul style="list-style-type: none"> • Addition of a comprehensive team planning meeting at 12-15 days; a follow-up FTM meeting at 90 days; a reunification stat at 100-140 days; and a Permanency FTM at 180 days • Consistent facilitation by OWB clinicians • Consistent participation of birth parents, foster parents, clinical specialists 5. Beginning in February 2018, provide six months of direct clinical coaching for all ES, IH and Program Ops supervisors to include a focus on improving case planning. Each supervisor will participate in 90-minute small group coaching session every other week. Additionally, the coaches are available for individual consultation with supervisors as needed. PMs and PAs are updated monthly on the progress of the supervisory coaching sessions.

IEP Requirement	<i>LaShawn</i> Performance Metric	Strategy to Achieve Benchmark
Safety Assessment During Visitation [IEP I.A.4.c., I.A.5.d., I.A.6.e.]	<p>Workers are responsible for assessing and documenting the safety (e.g., health, educational, and environmental factors and the initial safety concerns that brought this family to the attention of the Agency) of each child at every visit and each child must be separately interviewed at least monthly outside of the presence of the caretaker.</p> <p>90% of cases (in-home, out-of-home, and new placement or placement change) will have documentation verifying each child was visited and seen outside the presence of the caretaker and that safety was assessed during each</p>	<ol style="list-style-type: none"> 1. No later than 30 days after the upcoming joint CFSA-CSSP reviews of the safety assessments during visitation, CFSA will implement, track and report on jointly agreed upon recommendations for improvement. The jointly agreed upon recommendations will be incorporated into this Strategy Plan.

IEP Requirement	<i>LaShawn</i> Performance Metric	Strategy to Achieve Benchmark
Timely Permanency [IEP I.B.16.c.]	<p>Timely permanency through reunification, adoption, or legal guardianship.</p> <p>Benchmarks for cohorts based on length of time in foster care: Cohort i (8 days–12mo): 45% Cohort ii (12mo–25mo): 45% Cohort iii (over 25mo): 40%</p>	<ol style="list-style-type: none"> 1. By March 31, 2018, establish birth parent support unit within Program Ops to increase agency capacity for intensive work with birth parents that will help facilitate timely reunification. 2. Beginning in February 2018, implement shared parenting principles and practices in relevant program functions within Program Operations, including: <ul style="list-style-type: none"> • Incorporate Shared Parenting expectations in pre-evaluation tool for prospective Foster Parents and foster parent pre-service and in-service training. • Include shared parenting in 1:1 orientation for all newly entering birth parents. • Include foster parents in case teaming at 12-15 days and in other team meetings as needed. 1. Beginning in February 2018, provide six months of direct clinical coaching for all ES, IH and Program Ops supervisors to include a focus on improving permanency practice. 2. Beginning January 2018, in collaboration with A Second Chance, Inc., assess agency practice on engaging kin and develop and implement, track and report on recommendations for improved practice. 3. Beginning February 2018, use the Adoption/Guardianship STAT format and team to conduct regular (90 day) permanency reviews and track follow-up. 4. By September 30, 2018, develop implementation plan to resolve systemic barriers identified in the adoption STATs (e.g., need for 6-month review following goal change; assignment of a subsidy social worker upon adoption petition receipt; and enhanced focus on child-specific recruitment).
Placement-related Requirements [IEP II.B.8.]	No child shall stay overnight in the CFSA Intake Center or office building.	<ol style="list-style-type: none"> 1. In addition to strategies identified as part of overall Temporary Safe Haven Redesign to appropriately adjust the total placement array, by March 1, 2018, as part of the Needs Assessment and Resource Development Plan process, analyze placement challenges for high-needs youth. Develop and implement a resource plan to build services to meet identified gaps.

APPENDIX C
LaShawn CY2019 Strategy Plan

IEP Requirement	LaShawn Performance Metric	Strategy to Achieve Benchmark
Acceptable Investigations [IEP I.A.2.]	<p>CFSA shall routinely conduct investigations of alleged child abuse and neglect.</p> <p>80% of investigations will be of acceptable quality.</p>	<ol style="list-style-type: none"> By April 1, 2019, as part of the Entry Services restructuring to sunset the Family Assessment pathway and consolidate to a single Investigative pathway, all staff currently in the Family Assessment units will be trained on acceptable investigations. By March 31, 2019, based on the January 2019 Acceptable Investigation Review findings, individual supervisors will receive targeted training and technical assistance. By March 19, 2019, submit the Safety Plan policy to CSSP for comment. The policy will be posted upon finalization.
<p>Services to families and children to promote safety, permanency and well-being [IEP I.A.3.]</p> <p>and</p> <p>Case planning process [IEP I.B.17.]</p> <p>and</p> <p>Permanency [IEP I.B.16.c.]</p>	<p>In 80% of cases, appropriate services, including all services identified in a child's or family's safety plan or case plan shall be offered along with an offer of instruction or assistance to children/families regarding the use of those services.</p> <p>80% of cases reviewed through the Quality Service Reviews (QSR) will be rated as acceptable. The Monitor will determine performance based on the QSR case planning process and Pathway to Safe Closure indicators.</p>	<p>Out-of-home Cases:</p> <ol style="list-style-type: none"> Continued implementation of the Case Plan Development and Progress Review Process, including: <ul style="list-style-type: none"> On-going refinements to the Permanency Goal Review Meeting (PGRM) process to ensure all cases needing this level of review and follow-up receive it. On-going modifications to the new Comprehensive Adoption Tracker to better inform actions for expediting individual adoption cases and to address systemic barriers. Completion of comparable Guardianship tracking process by June 1, 2019. By April 1, 2019, finalize plans to evaluate and measure impact of the on-site mental health services for children on placement stability. The evaluation report on the first year of services will be completed by the end of Q2 of FY20. <p>In-Home Cases:</p> <ol style="list-style-type: none"> Continue monthly review of 16 randomly-selected case plans by the Deputy Director for Entry Services, Program Administrators and Program Managers to provide feedback to supervisors and social workers regarding supports, services and pathway to safe case closure. By March 29, 2019, finalize In-Home Services Policy and develop and release the In-Home POM on a rolling basis. To improve the Pathways to Safe Case Closure QSR Indicator, CFSA will: Continue clinical coaching for Program Operations supervisors, focusing on strategies to improve clinical and administrative supervision and improve permanency outcomes. By March 31, 2019, after the QSR de-brief for NCCF cases, CFSA will incorporate newly developed strategies for improving permanency into the CY2019 Strategy Plan.

IEP Requirement	<i>LaShawn</i> Performance Metric	Strategy to Achieve Benchmark
Community-Based Service Referrals for low and moderate risk families [IEP I.C.19.]	90% of families who have been the subject of a report of abuse and/or neglect, whose circumstances are deemed to place a child in their care at low or moderate risk of abuse and neglect and who are in need of and agree to additional supports shall be referred to an appropriate Collaborative or community agency for follow-up.	1. By March 15, 2019, change the Collaborative service referral form to include client identification number allowing for a monthly crossmatch to allow CFSA staff to better understand if families were successfully linked to service interventions and if not, to further assess and work with families and community-based organizations to address service needs.
Placement related Requirements [IEP II.B.8.; I.C.21; II.B.8]	90% of children experiencing a placement disruption will have a comprehensive assessment and an action plan to promote stability developed. No child shall stay overnight in the CFSA Intake Center or office building.	1. After completion of the Strengthening Our Safe Haven cross-agency review of placement issues in April 2019, CFSA will incorporate newly developed strategies into the CY2019 Strategy Plan. Already identified strategies include: 2. Refinement of the placement matching algorithm to narrow matches. 3. Based on their newly defined roles and responsibilities, continue efforts underway to improve teaming between Resource Parent Support Workers (RPSWs) and other staff working in resource homes (e.g., nurse care managers), including development of FAQs, teaming process maps, and management-level collaborative planning. 4. Expand placement array to meet the needs of children in care based on the 2018 Needs Assessment and Resource Development Plan. Including, but not limited to: <ul style="list-style-type: none"> • Refinements to congregate array to develop programs better suited for individual youth needs. • Recruit and license 10 additional SOY foster homes. • NCCF to recruit and license 10 homes to serve youth. • NCCF to recruit and license 10 homes to serve LGBTQ youth 5. Enhance current resource parent in-service training curricula to focus on effectively supporting specialized populations. In-service training sessions will be provided, in accordance with the Foster Parent Training Act of 2018, with business process and tracking protocols for accountability in place by March 1, 2019.

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		6. Following closure of CFSA traditional or kinship care homes, the CFSA Ombudsman will conduct telephone exit interviews with each resource family within 30 days. Following closure of NCCF homes, resource parents will complete a survey. Information gathered from surveys and interviews will be used to inform resource parent recruitment and retention processes. Findings from these interviews will be included the Needs Assessment and Resource Development Plan.