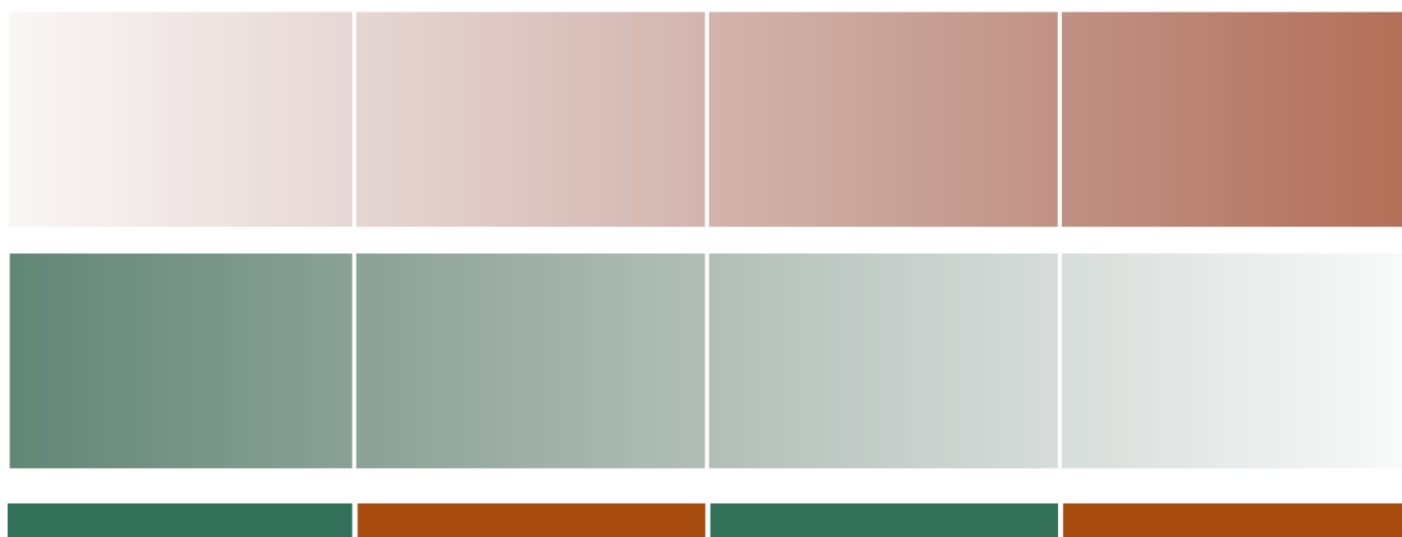




***LASHAWN A. v. BOWSER PROGRESS REPORT
FOR THE PERIOD JULY 1 – DECEMBER 31, 2017***



May 4, 2018

LaShawn A. v. Bowser
Progress Report for the Period July 1 – December 31, 2017

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LaShawn A. v. Bowser
Progress Report for the Period July 1 – December 31, 2017

I. INTRODUCTION

This report on the performance of the District of Columbia's child welfare system for the period of July 1 through December 31, 2017 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)¹ in accordance with the *LaShawn* Modified Final Order (MFO).²

The IEP establishes the Court's expectations regarding 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 annually.³ 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 21, 2017. With few exceptions, this current report is based on performance data from the District's Child and Family Services Agency (CFSA) for July 1 through December 31, 2017 to determine progress in meeting the IEP Exit Standards and the objectives of the *LaShawn* 2017 Strategy Plan.

A. Methodology

The primary sources of information about performance are data provided by the District's CFSA. The Monitor reviews extensive aggregate and back-up data for select measures and has access to hard copy and electronic case records on FACES.NET⁴ to verify performance.

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

¹ Implementation and Exit Plan (Dkt. No. 1073), December 17, 2010.

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

³ The *LaShawn* 2017 Strategy Plan was filed on April 3, 2017 and the 2018 Strategy Plan was filed on April 6, 2018, both after consultation with the Monitor and Plaintiff's counsel (see Appendix B and C).

⁴ FACES.NET is CFSA's State Automated Child Welfare Information System (SACWIS).

➤ ***Validation of Caseload Data***

The Monitor validated caseload size and assignment of cases between July and December 2017 for caseworkers within Entry Services, Community Partnerships and Permanency. The Monitor also reviewed referrals and cases that were awaiting assignment to an investigator, Family Assessment worker or ongoing caseworker to assess the length of time they were “in transfer” to the appropriate caseworker. Additionally, the Monitor validated supervisory responsibilities including caseloads 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 staff reviewed records of all children under the age of 12 who were placed in a congregate care setting for more than 30 days, including those children under the age of six who were placed into 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 staff reviewed cases in which a child or youth’s adoption was finalized between July and December 2017 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.

➤ ***Quality Service Reviews***

Qualitative data are 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 with 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, the Monitor is a lead reviewer for approximately two QSRs each month⁵ and participates in oral case presentations⁶.

⁵ CSSP provided reviewers for 17 QSRs in CY2017 and CSSP staff participated in all oral case presentations during the period.

⁶ Each case is presented to a panel consisting of CFSA representatives from the QSR unit and Monitor staff to ensure inter-rater reliability on ratings across reviews.

Between January and December 2017, a total of 128 QSRs were completed to assess case planning, service delivery and health outcomes. Of these 128 cases, 40 involved a child receiving in-home services and the remaining 88 cases involved a child placed in out-of-home care. This represents an increase in the number and proportion of cases reviewed where the child was receiving in-home services in comparison to previous years.

➤ ***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 licensure data for those foster and adoptive parents whose licensure took more than 150 days to determine if the delay was due to circumstances outside the District's control.

➤ ***Focus Group with Entry Services Supervisors***

In March 2019, the Monitor conducted four focus groups with Entry Services investigation and FA supervisors to better understand what is working well and the challenges staff experience in carrying out their job responsibilities and supporting frontline workers.

➤ ***Other Monitoring Activities***

The Monitor attends numerous CFSA meetings including partnership meetings with CFSA and private provider agencies, Temporary Safe Haven Redesign and Transition Meetings, Safe and Stable Families Redesign Meetings, the CFSA Internal Child Fatality Review Committee and the City-wide Child Fatality Review Committee. The Monitor also meets frequently with senior leadership and managers throughout the agency. Additionally, the Monitor 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 and December 2017 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 six 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

December 2017 on the IEP outcomes remaining to be achieved and the outcomes previously achieved that need to be maintained.⁷ 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* 2017 Strategy Plan.

II. SUMMARY OF PERFORMANCE

The District's Child and Family Services Agency (CFSA) launched new and important changes in agency design and operations in CY2017 with a goal of improving outcomes for the children, youth and families it serves. The primary strands of this work were:

- restructuring the provision of foster care services to children placed in the District of Columbia and neighboring Maryland (called the Temporary Safe Haven Redesign) through contractual changes, a greater focus on foster parent engagement and support and beginning work to develop an array of specialized placements in response to child and youth needs;
- revamping service delivery expectations and contracts with community-based providers supporting families and children who come to the attention of the child welfare system through Child Protective Services investigations or Family Assessments and/or have open in-home child protection cases (called the Safe and Stable Families Redesign);
- refocusing attention on clinical social work practice through training and coaching workers and supervisors, establishing new expectations for family and youth engagement; and
- placing greater importance on a range of quality improvement processes designed to strengthen the assessment of children and families, case planning and decision making to support children's safety, permanency and well-being.

The Temporary Safe Haven Redesign (TSHR) was begun with publicly shared expectations to reset the public/provider agency/foster parent relationships and improve outcomes. Its goals are to reduce placement instability, provide a greater continuum of placement options and supports geared to child and youth needs and promote permanency and well-being outcomes. TSHR has four major components – first, transitioning from multiple to a single child placing agency in Maryland and revamping the contractual relationship to set clear standards of care and quality

⁷ In some instances where December 2017 performance data are not available, the most recent performance data are cited with applicable timeframes.

expectations; second, improving foster parent support including emphasizing open information sharing and communication, access to supportive services and involvement of foster parents as partners with the agency; third, enhancing the placement array so that additional placement options are available to meet the specialized needs of the children and youth CFSA serves and currently has great difficulty finding stable and affirming placements; and fourth, improving placement matching so that children's needs and preferences are better matched with skills and capacities of caregivers.

During this current monitoring period, CFSA managed a competitive procurement process to select a single Maryland provider capable of providing high quality services to almost half of the children in the District's custody and successfully transitioned foster parents, children and staff from multiple other providers who have been under CFSA contract to the new provider. The selected provider, the National Center for Children and Families (NCCF), was an existing Maryland provider. Under the new arrangement, NCCF has entered into a contract with clear expectations for placements and social work services aimed at ensuring a child's safety, stability, well-being and permanency. The transition was done in a compressed timeframe and was complex, with the danger if not done correctly of destabilizing many children and youth and of alienating many existing foster parents. A successful transition required coordination of a range of activities including updating home studies and clearances for foster parent license transfer; tracking license and social worker transfers; hiring additional staff; communicating with families and youth, Judges, service providers, officials in the State of Maryland and the public, among many others.

The transition process was largely a success, with most foster parents' licenses and homes transitioned prior to December 31, 2017, with limited contract extensions until March 31, 2018 to accomplish some license transfers. CFSA's data supports that approximately 20 children and youth out of the more than 400 who were directly impacted experienced a placement disruption as a result of the provider changes. CFSA staff demonstrated focus and exemplary planning and execution during this process. The work in CY2018 now turns to ensuring that the foster parents and workers who moved to NCCF are supported to remain engaged and that the structural changes in the contract expectations and requirements produce the intended outcomes for children and youth. When embarking on this big change, CFSA hoped to create a new public private partnership and to move to a system where expectations and practice for children and families would be comparable whether the child was placed in DC and managed by a CFSA worker or Maryland and managed by a private agency worker. Smoothing out the kinks of implementation is ongoing as CFSA is simultaneously focusing increased attention to the other three components of the TSHR that are intended to improve placement matching, increase the array of available specialized placements and improve foster parent supports.

CFSA's *Safe and Stable Families Redesign* is intended to improve case planning and services to children and families who come to its attention due to allegations of child abuse or neglect but where children are assessed to be able to remain safely in their homes. CFSA re-structured its in-home case practice by developing and implementing "levels of care" for families based upon their

needs. The frequency and intensity of social worker visits and interactions with the family are expected to be based on the level of care assessed. This too is a work in progress but as discussed later in the report, there are early signs that these changes are making a difference; qualitative data assessing CFSA's case practice with in-home families was improved in CY2017.

As part of the Safe and Stable Families Redesign, CFSA renegotiated contracts with the District's five geographically-based Healthy Families/Thriving Communities Collaboratives and increased their capacity to provide case management and services to families while also requiring improvements in data collection and reporting on referrals and intervention outcomes. This change addresses a long-standing void in which families were referred for services but CFSA was unable to determine whether they were connected to and received services and/or the outcomes of any interventions.

Along with the two big structural reforms just discussed, CFSA has been working to address identified problems in Entry Services – by adding additional staff, focusing on management processes and providing refresher training to workers and supervisory training and coaching. In the last several reports, the Monitor has expressed significant concern about Entry Services and performance on a range of measures related to the timeliness and quality of investigations of alleged child abuse or neglect and the Family Assessment service track. Data for the July through December 2017 period reflect that CFSA has been paying attention to the identified concerns even though problems still remain. There were improvements in timely initiation (88% in December 2017) and completion of investigations (monthly range of 67 to 79%). CFSA has focused managerial efforts on these areas for some time, and these efforts appear to have resulted in some improvements. The quality of investigations, an equally critical component of practice, was not newly assessed this period, and due to the Monitor's concerns about data in FACES.NET reflecting a high number of referrals and cases "in-transfer" status, the Monitor was unable to validate Entry Services caseload data for reporting this period.

In March 2018, the Monitor conducted focus groups with Entry Services supervisors who reported their struggles with maintaining required caseloads for social workers. They found it difficult to provide support in conducting quality investigations with simultaneous pressures to encourage workers to close investigations and FAs and take on new referrals, often on a daily basis. CFSA added new Entry Services staff positions in CY2017, and when fully staffed, CFSA believes it now has sufficient staff to handle the workload. However, as in any system, at any point in time, there are workers on vacation and medical leave, which reduces the number of available staff and support. In order to ensure adequate resources to respond timely to referrals of abuse and neglect, conduct quality safety and risk assessments and interviews with core and collateral staff, the Monitor has encouraged CFSA to go even further and to consider "over-staffing" within the Entry Services administration. The CFSA Director has also recently made managerial changes in Entry Services.

Progress on IEP Exit Standards

CFSA's work this period has hopefully provided a foundation that will begin to influence and demonstrate progress on the remaining *LaShawn* IEP outcomes. Between July and December 2017, of the 15 Exit Standards not yet achieved, six Exit Standards could not be or were not newly assessed this period⁸. Of the remaining nine Exit Standards, none were fully achieved.⁹ Two Exit Standards, both related to CPS investigative practice, although not achieved showed improved performance. Three Exit Standards showed declines in performance (all related to frequency of visitation) and three Exit Standards remained unchanged (including two quality of practice measures and one placement measure).

Of importance is that of the 67 Exit Standards currently designated as Outcomes to be Maintained (as of the beginning of this monitoring period) that were due this period¹⁰, performance for the vast majority (58 Exit Standards/87%) continued to meet IEP requirements. There was slippage in some areas as noted in the report. Two Exit Standards were not maintained (IEP citation I.B.8.b. – children in emergency placements over 30 days and IEP citation I.D.30. – special corrective action plans) and seven Exit Standards were partially maintained¹¹.

This has been a high velocity period at CFSA where simultaneous work was carried out or launched in many different areas – each aiming to contribute to progress addressing long standing problems and improved outcomes. Through the early success of the THSR transition, CFSA has demonstrated effective assessment, planning and implementation on a broad scale – consistently tracking implementation details and making adjustments while staying on course and keeping community partners engaged and informed. This same consistency and focus needs to be applied to the other areas requiring improvement and CFSA leaders seem committed, ready and able to do so.

⁸ The quality of investigations Exit Standard (IEP citation I.A.2.), which requires a case record review to collect and analyze performance, was not newly assessed this period; a review is scheduled for the January through June 2018 monitoring period and performance data will be included in the next monitoring report. There are three Exit Standards related to social workers assessing for and documenting safety during visits with children (IEP citations I.A.4.c., I.A.5.d. & I.A.6.e.); these Exit Standards also require a qualitative review, which will be conducted during the next monitoring period. The timely permanency Exit Standard which remains to be achieved (IEP citation I.B.16.c.) is measured on a fiscal year, and performance data were included in the last monitoring report; FY2018 performance is due September 2018. Finally, data and information provided to the Monitor for reporting on the Exit Standard requiring completion of assessments and plan development for children experiencing a placement disruption (IEP citation I.C.21.) were insufficient to validate performance. The Monitor is working with CFSA to collect necessary information for the next monitoring period.

⁹ One Exit Standard was partially achieved; specifically, requirement for foster parent timely receipt of Medicaid numbers and cards.

¹⁰ Performance for two Exit Standards – in-service training for social workers (IEP citation I.D.28.a.) and in-service training for supervisors (IEP citation I.D.28.b.) – are assessed between July 1st and June 30th every year. Performance data for community-based service referrals for low and moderate risk families (IEP citation I.C.19) were unable to be validated this period. Performance data for these Exit Standards will be included in the next monitoring period.

¹¹ These seven Exit Standards that were partially maintained include: process for assignment of APPLA goals (IEP citation I.B.12.b.), completion of health screenings prior to replacements (IEP citation I.C.22.a.), completion of medical evaluations for children in foster care (IEP citation I.C.22.b.i.), caseloads (IEP citation I.D.25.), in-service training for foster parents (IEP citation I.D.29.b.), placement and licensing standards for children in care (IEP citation II.B.11.) and timely development of case plans (IEP citation II.B.12.).

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

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
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. (IEP citation I.A.1.a.)	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.	March 2017 performance, 87% June 2017 performance, 85%	September 2017 performance, 90% December 2017 performance, 88% ¹⁶	No	↑

¹² The IEP includes three historical, time limited adoption measures that are no longer applicable and have been removed from this Table. These include IEP citation I.B.16.a.ii, I.B.16.b.i. and I.B.16.b.ii.

¹³ In some instances where December 2017 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.

¹⁴ “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.

¹⁵ 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 judgment, 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.

¹⁶ Reported performance reflects CFSA’s secondary analysis of FACES.NET data in September and December 2017 to validate instances where the supervisor indicated staff had made “good faith efforts” in cases 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. Monthly performance data for timely initiation of investigations **without** taking into consideration efforts made when the alleged victim child(ren) cannot be located ranged from 68 to 78 percent; inclusion of valid good faith efforts would likely increase performance.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<p>2. <i>Investigations</i>: 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>	90% of investigations will be completed and a final report of findings shall be entered in FACES.NET within 35 days.	Monthly range of 56 – 69%	Monthly range of 67 – 79% ^{17,18}	No	↑
<p>4. <i>Acceptable Investigations</i>: CFSA shall routinely conduct investigations of alleged child abuse and neglect.¹⁹</p> <p>(IEP citation I.A.2.)</p>	80% of investigations will be of acceptable quality.	75% of investigations of acceptable quality.	Measure not reassessed this period ²⁰	No	N/A

¹⁷ Monthly performance data for timely completion of investigations are as follows: July, 67%; August, 70%; September, 74%; October, 79%; November, 77%; December, 73%.

¹⁸ During this monitoring period, CFSA reports the following backlog of investigations each month not completed within 35 days: July, 52; August, 27; September, 16; October, 24; November, 27; December, 29.

¹⁹ 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. When a parent refuses to consent to such an evaluation, the investigative social worker and supervisor shall consult with the Assistant Attorney General to determine whether court intervention is necessary to ensure the health and safety of the child(ren); (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.

²⁰ A review of a statistically significant sample of investigations closed during March 2018 is scheduled to be completed in April and May 2018; performance data will be included in the next monitoring report.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<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. The Monitor will determine performance-based on the QSR Implementation and Pathway to Safe Closure indicators.</p>	<p>50% of cases were acceptable based CY2016 QSR data.</p>	<p>49% of cases were acceptable based on CY2017 QSR data.²¹</p>	<p>No</p>	<p>↔</p>

²¹ Data collected during QSRs conducted in CY2017 determined that 69% of cases (88 of 128) were rated acceptable on the *Implementing Supports and Services* indicator, 59% of cases (75 of 128) were rated acceptable on the *Pathway to Case Closure* indicator and 49% of cases (63 of 128) were rated acceptable on *both* indicators.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<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.	May 2017 performance, 47%	Measure not reassessed this period ²²	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.	May 2017 performance, 51%	Measure not reassessed this period ²³	No	N/A

²² A review of a statistically significant sample of cases is scheduled for the January through June 2018 monitoring period; performance data will be included in the next monitoring report.

²³ Ibid.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<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 85 – 89% of applicable children had 4 visits in first 4 weeks of new placement or placement change.</p> <p>d. May 2017 performance, 75%</p>	<p>a.-c. Monthly range of 73 – 78% of applicable children had 4 visits in first 4 weeks of new placement or placement change.²⁴</p> <p>d. Measure not reassessed this period²⁵</p>	No	↓

²⁴ Monthly performance data for worker visits during first 4 weeks of a new placement or placement change are as follows: July, 73%; August, 78%; September, 77%; October, 75%; November, 73%; December, 77%.

²⁵ A review of a statistically significant sample of cases is scheduled for the January through June 2018 monitoring period; performance data will be included in the next monitoring report.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<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>May 2017 performance, 47%</p>	<p>Measure not reassessed this period²⁶</p>	<p>No</p>	<p>N/A</p>
<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.²⁷</p>	<p>Monthly range of 60 – 81%</p>	<p>Monthly range of 62 – 73%²⁸</p>	<p>No</p>	<p>↓</p>

²⁶ Ibid.

²⁷ This Exit Standard is also satisfied when there is documentation that the parent(s) is(are) unavailable or refuses to cooperate with the agency.

²⁸ Reported performance includes instances where there is documentation in the record that the parent was unavailable or refuses to cooperate with the agency despite efforts by the agency. Monthly performance data are as follows: July, 73%; August, 65%; September, 67%; October, 62%; November, 71%; December, 62%.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<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. ²⁹	Monthly range of 77 – 87%	Monthly range of 74 – 83% ³⁰	No	↓

²⁹ 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.

³⁰ Reported performance includes instances where there is documentation in the record 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. Monthly performance data are as follows: July, 83%; August, 78%; September, 79%; October, 76%; November, 76%; December, 74%.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
32. <u>Timely Permanency</u> : Timely permanency through reunification, adoption or legal guardianship. (IEP citation I.B.16.c.)	i. Of all children who entered foster care for the first time in FY2016 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, 2017.	Not yet due; measured on full FY	FY2017 performance: As of September 30, 2017, 40% of children in this cohort achieved permanency. ³¹	No	N/A
	ii. Of all children who are in foster care for more than 12 but less than 25 months on September 30, 2016, 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2017.	Not yet due; measured on full FY	As of September 30, 2017, 26% of children in this cohort achieved permanency. ³²		
	iii. Of all children who are in foster care for 25 months or longer on September 30, 2016, 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2017, whichever is earlier.	Not yet due; measured on full FY	As of September 30, 2017, 27% of children in this cohort achieved permanency. ³³		

³¹ FY2018 performance for this cohort of children was 22% as of December 31, 2017.

³² FY2018 performance for this cohort of children was 10% as of December 31, 2017.

³³ FY2018 performance for this cohort of children was 9% as of December 31, 2017.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<p>33. <u>Case Planning Process:</u></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>	<p>80% of cases reviewed through the Quality Service Reviews (QSR) will be rated as acceptable.</p>	<p>54% of cases were acceptable based on CY2016 QSR data.</p>	<p>52% of cases were acceptable based on CY2017 QSR data.³⁴</p>	<p>No</p>	<p>↔</p>

³⁴ Data collected during QSRs conducted in CY2017 determined that 65% (83 of 128) of cases were rated acceptable overall on the *Planning Interventions* indicator, 59% (75 of 128) of cases were rated acceptable on the *Pathway to Case Closure* indicator and 52% (67 of 128) of cases were acceptable on *both* indicators.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<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.	Monthly range of 67 – 89% of children experiencing a placement disruption had a comprehensive assessment and a plan developed to promote stability.	Unable to determine ³⁵	No	N/A

³⁵ In October 2016, CFSA began convening Placement Disruption Staffings when a child was at risk of a placement disruption or required a change in placement. These staffings include the child's social worker, Resource Development Specialist from CFSA's Placement Unit, the placement provider and other members of the child's team. The purpose of the staffing is to determine what supports and services can be put in place to stabilize a child's placement and prevent replacement, or if a disruption occurred, to assess the child's needs and determine the most appropriate placement and supports to meet the child's needs and stabilize a new placement. Data and information provided to the Monitor this period on this requirement were insufficient to validate completion of appropriate assessments and staffings. The Monitor is working with CFSA to collect necessary information for the next monitoring period.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<p>43. <u>Health and Dental Care</u>: 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.</p> <p>(IEP citation I.C.22.d.)</p>	<p>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.</p>	<p>Monthly range of 83 – 99% of foster parents received the Medicaid number within five days of the child’s placement.</p> <p>Monthly range of 85 – 100% of foster parents received the Medicaid card within 45 days of the child’s placement.</p>	<p>Monthly range of 79 – 100% of foster parents received the Medicaid number within five days of the child’s placement.³⁶</p> <p>Unable to determine³⁷</p>	<p>Partially³⁸</p>	<p>↔</p>

³⁶ Monthly performance data for receipt of Medicaid number within 5 days of placement are as follows: July, 93%; August, 79%; September, 98%; October, 99%; November, 100%; December, 98%.

³⁷ Due to data discrepancies, the Monitor is unable to assess performance for this sub-part of the Exit Standard.

³⁸ CFSA met the required level of performance for the sub-part requiring the distribution of Medicaid numbers for 5 of 6 months and the Monitor was unable to determine performance for the sub-part requiring the distribution of Medicaid cards. The Monitor considers this Exit Standard partially achieved.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement ¹²	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ¹³	Exit Standard Achieved ¹⁴	Direction of Change ¹⁵
<p>68. <i>Placement of Children in Most Family-Like Setting</i>: No child shall stay overnight in the CFSA Intake Center or office building.</p> <p>(IEP citation II.B.8.)</p>	Ongoing Compliance	Between Jan – June 2017, 5 children stayed overnight at CFSA.	Between July – December 2017, 2 children stayed overnight at CFSA. ³⁹	No	↔

³⁹ Both overnight placements occurred in October 2017 and involved older youth.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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 92 – 97%	Monthly range of 90 – 92% ⁴¹	Yes

⁴⁰ In some instances where December 2017 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.

⁴¹ Monthly performance data for comprehensive review of families with 4 or more reports are as follows: July, 91%; August, 90%; September, 91%; October, 91%; November, 90%; December, 92%.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>6. <u>Worker Visitation to Families with In-Home Services:</u></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>	<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>	<p>a. Monthly range of 90 – 95% of families were visited monthly</p> <p>b. Monthly range of 86 – 93% of families were visited twice during the month</p>	<p>a. Monthly range of 92 – 95% of families were visited monthly⁴²</p> <p>b. Monthly range of 89 – 93% of families were visited twice during the month⁴³</p>	<p>Yes⁴⁴</p>

⁴² Monthly performance data for monthly in-home worker visits are as follows: July, 93%; August, 95%; September, 92%; October, 94%; November, 94%; December, 92%.

⁴³ Monthly performance data for twice monthly in-home worker visits are as follows: July, 90%; August, 93%; September, 91%; October, 93%; November, 92%; December, 89%.

⁴⁴ Performance for the sub-part which requires 95% of families receive monthly visits was below the required level during 5 of the 6 months in this period; performance for 2 of these months was only 1% below, at 94%. CFSA met the required level of performance each month for the sub-part which requires twice monthly visits with families. The Monitor considers current performance for this Exit Standard to be an insubstantial deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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% had monthly visits</p> <p>b. Monthly range of 95 – 97% had twice monthly visits</p>	<p>a. Monthly range of 92 – 97% had monthly visits⁴⁵</p> <p>b. Monthly range of 89 – 95% had twice monthly visits⁴⁶</p>	<p>Yes⁴⁷</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 2017, CFSA took necessary steps to offer/facilitate pre-removal FTMs in 94% of applicable cases.</p>	<p>Between July — December 2017, CFSA took necessary steps to offer/facilitate pre-removal FTMs in 96% of applicable cases.</p>	<p>Yes</p>

⁴⁵ Monthly performance data for monthly out-of-home worker visits are as follows: July, 97%; August, 97%; September, 94%; October, 95%; November, 94%; December, 92%.

⁴⁶ Monthly performance data for twice monthly out-of-home worker visits are as follows: July, 95%; August, 95%; September, 92%; October, 93%; November, 92%; December, 89%.

⁴⁷ Performance for the sub-part which requires 95% of families receive monthly visits was below the required level during 3 of the 6 months in this period; performance for 2 of these months was only 1% below, at 94%. Additionally, the sub-part which requires 90% of families receive twice monthly visits was 1% below the required level during 1 month this period. The Monitor considers current performance for this Exit Standard to be an insubstantial deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
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 98 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate and invite known relatives to the FTM in 99% of cases.	Of the 91 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate and invite known relatives to the FTM in 99% of cases.	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 ⁴⁸	Yes

⁴⁸ The method of determining performance on placement of children in the least restrictive, most family-like setting appropriate to his or her 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 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>15. <i>Placement of Children in Most Family-like Setting</i>: 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>	<p>No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days.⁴⁹</p>	<p>Between January – June 2017, no children were placed in emergency, short-term foster home or shelter for more than 30 days.</p>	<p>Between July – December 2017, there were 11 placements of children in emergency, short-term foster home or shelter for more than 30 days.^{50,51}</p>	<p>No</p>
<p>16. <i>Placement of Young Children</i>: 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>	<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.</p>	<p>Between January – June 2017, a total of 2 children under 12 were applicable to this standard and both children met an agreed upon exception.</p>	<p>Between July – December 2017, a total of 3 children under 12 were applicable to this standard and all children met an agreed upon exception.</p>	<p>Yes</p>

⁴⁹ 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, or shelter facility or foster home for more than 30 days where moving them would not be in their best interest.

⁵⁰ These 11 placements involved 9 youth; 2 youth experienced 2 emergency placements for over 30 days.

⁵¹ For one of these children, CFSA staff made a clinical decision to maintain the child in the emergency setting beyond 30 days as it was not in the child’s best interest to move. The Monitor was notified when this occurred and agreed with this decision.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<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> <p>(IEP citation I.B.9.b.)</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 2017, 1 child under 6 years of age was placed in a group care non-foster home setting and met an agreed upon exception.	Between July – December 2017, 1 child under 6 years of age was placed in a group care non-foster home setting and met an agreed upon exception.	Yes
<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 range of 95 – 98%	Monthly range of 94 – 97%	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
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. (IEP citation I.B.12.b.)	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 13 youth whose goal changed to APPLA between January – June 2017. All but one youth had their goal change initiated by the Court or GAL, 6 youth had a LYFE/FTM conference.	There were 24 youth whose goal changed to APPLA between July – December 2017. Two youth had their goal change initiated by the Agency (with approval) and 9 youth had documentation of a LYFE/FTM conference. Private agencies failed to provide documentation for 5 youth.	Partially ⁵²

⁵² Performance on this Exit Standard is assessed as partially due to lack of documentation for 5 youth.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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 2017, 96% of youth ages 18 and older had a timely YTP.</p>	<p>Between July – December 2017, 90% of youth ages 18 and older had a timely YTP.⁵³</p>	<p>Yes</p>
<p>23. <u>Reduction of Multiple Placements for Children in Care</u>:</p> <p>(IEP citation I.B.13.)</p>	<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.</p>	<p>Monthly range of 81 – 85%</p>	<p>Monthly range of 83 – 87%</p>	<p>Yes</p>
	<p>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.</p>	<p>Monthly range of 65 – 69%</p>	<p>Monthly range of 59 – 67%⁵⁴</p>	

⁵³ Of the 221 youth ages 18 and older under CFSA care between July and December 2017, 17 youth were in long-term runaway status, developmentally disabled, incarcerated or declined participation in the development of a YTP and were excluded from analysis. Thus, out of 204 youth, 183 (90%) had a YTP.

⁵⁴ Monthly performance for children in care 12 to 24 months with 2 or fewer placements are as follows: July, 67%, August, 64%; September, 64%; October, 63%; November, 62%; December, 59%.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
	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.	Monthly range of 75 – 78%	Monthly range of 77 – 81%	
24. <i>Timely Approval of Foster/Adoptive Parents</i> : 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. (IEP citation I.B.14.)	70% of homes licensed beginning November 1, 2010, will have been approved, and interested Parties will have been notified within 150 days.	76% of foster homes licensed between January – June 2017 received their license within 150 days.	75% of foster homes licensed between July – December 2017 received their license within 150 days. ⁵⁵	Yes
25. <i>Legal Action to Free Children for Adoption</i> : 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. (IEP citation I.B.15.a.)	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.	93%	100% ⁵⁶	Yes

⁵⁵ Of the 40 homes that are compliant in the current monitoring period, 8 homes whose licensure took longer than 150 days are considered compliant due to circumstances that were beyond the District's control.

⁵⁶ There were a total of 37 applicable children who required legal action to free them for adoption and all (100%) had legal action to free them within 45 days.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
26. <i>Legal Action to Free Children for Adoption</i> : 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. (IEP citation I.B.15.b.)	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% ⁵⁷	Yes
27. <i>Timely Adoption</i> : Children with a permanency goal of adoption shall be in an approved adoptive placement within nine months of their goal becoming adoption. (IEP citation I.B.16.a.i.)	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.	65%	83% ⁵⁸	Yes

⁵⁷ While court action was scheduled for all cases, some court actions were delayed. Several cases were delayed as Family Court continues to review all cases that had a goal change from reunification to adoption in order to ensure that the government has met its burden under *In re Ta.L.*, 149 A.3d 1060 (D.C. 2016) (en banc). The Court of Appeals determined in this case that the current standards for changing a child's permanency goal from reunification to adoption are not constitutionally sufficient to protect parents' due process rights. The Family Court developed new procedures for any permanency hearing where there is a requested goal change. Procedures include providing an evidentiary hearing as a matter of right and a right to immediately appeal the goal change from reunification to adoption after the evidentiary hearing.

⁵⁸ During the monitoring period, 33 of 40 applicable children were placed in an approved adoptive placement by the end of the ninth month from when their goal changed to adoption. 2 children were removed from the applicable universe because their goal changed from adoption to guardianship during the nine month period.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
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. (IEP citation I.B.16.b.iii.)	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.	From January – June 2017, 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.	From July – December 2017, 93% 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. ⁵⁹	Yes
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. (IEP citation I.B.18.)	95% of foster homes and group homes with children placed will have a current and valid license.	Monthly range of 94 – 95% with current and valid license	Monthly range of 92 – 95% with current and valid license ⁶⁰	Yes ⁶¹

⁵⁹ CFSA reports that 54 adoptions were finalized during this monitoring period. Of those 54, 29 adoptions were finalized within 12 months and reasonable efforts were made to finalize adoptions within 12 months for an additional 21 children.

⁶⁰ Monthly performance data for placement licensing are as follows: July, 95%; August, 94%; September, 94%; October, 94%; November, 94%; December, 92%.

⁶¹ Monthly performance fell 1% below the required level during 4 months and 3% below in 1 month of the monitoring period. The Monitor considers this an insubstantial deviation.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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>In June 2017, CFSA reports 27 families with an open or recently closed investigation were referred to a Collaborative.</p>	<p>Unable to determine⁶²</p>	<p>N/A</p>
<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>91% of children placed between January – June 2017 with their siblings or within 30 days of their siblings were placed with at least some of their siblings.</p>	<p>85% of children placed between July – December 2017 with their siblings or within 30 days of their siblings were placed with at least some of their siblings.⁶³</p>	<p>Yes</p>

⁶² CFSA is revising the Collaborative referral data collection process based on changes to the Collaborative contracts which were not in effect the entire monitoring period. Due to data discrepancies, the Monitor cannot validate these data until the next reporting period.

⁶³ CFSA also provided data for all children in care at a point in time (not limited to those who entered care between July and December 2017) for this Exit Standard. As of December 31, 2017, 74% 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 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
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). (IEP citation I.C.20.b.)	80% of children shall have monthly visits with their separated siblings and 75% of children shall have twice monthly visits with their separated siblings.	Monthly range of 87 – 91% with at least monthly visits Monthly range of 76 – 82% with at least twice monthly visits	Monthly range of 83 – 93% with at least monthly visits ⁶⁴ Monthly range of 72 – 89% with at least twice monthly visits ⁶⁵	Yes ⁶⁶
39. <u>Health and Dental Care</u> : Children in foster care shall have a health screening prior to placement. (IEP citation I.C.22.a.)	95% of children in foster care shall have a health screening prior to an initial placement or re-entry into care. 90% of children in foster care who experience a placement change shall have a replacement health screening.	Initial and re-entries: monthly range of 89 – 100% with health screening Replacements: monthly range of 83 – 90% with health screening	Initial and re-entries: monthly range of 88 – 100% ⁶⁷ with health screening Replacements: monthly range of 82 – 91% ⁶⁸ with health screening	Partially ⁶⁹

⁶⁴ Monthly performance data for monthly visits between siblings are as follows: July, 93%; August, 83%; September, 87%; October, 83%; November, 83%; December, 85%.

⁶⁵ Monthly performance data for twice monthly visits between siblings are as follows: July, 89%; August, 80%; September, 82%; October, 74%; November, 79%; December 72%.

⁶⁶ Performance on twice monthly visits fell 1% below the required standard in October 2017 and 3% below in December 2017. The Monitor considers these deviations to be insubstantial.

⁶⁷ Monthly performance data for initial and re-entry health screenings are as follows: July, 96%; August, 100%; September, 96%; October, 91%; November, 88%; December, 97%.

⁶⁸ Monthly performance data for replacement health screenings are as follows: July, 87%; August, 87%; September, 85%; October, 82%; November, 91%; December, 91%.

⁶⁹ CFSA met the required level of performance for initial and re-entry screenings in 4 out of 6 months and replacement screenings in 2 out of 6 months. 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 2017 Performance	July – December 2017 Performance ⁴⁰	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 91 – 98% with full medical evaluation</p> <p>Within 60 days: monthly range of 93 – 100% with full medical evaluation</p>	<p>Within 30 days: monthly range of 80 – 93% with full medical evaluation⁷⁰</p> <p>Within 60 days: monthly range of 90 – 97% with full medical evaluation⁷¹</p>	Partially ⁷²

⁷⁰ Monthly performance data for evaluations completed within 30 days of placement are as follows: July, 92%; August, 84%; September, 90%; October, 93%; November, 80%; December, 80%.

⁷¹ Monthly performance data for evaluations completed within 60 days of placement are as follows: July, 97%; August, 90%; September, 96%; October, 97%; November, 93%; December, 97%.

⁷² CFSA met the required level of performance for evaluations within 30 days in 3 out of 6 months and evaluations within 60 days in 4 out of 6 months during the monitoring period. 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 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<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 39 – 76% with full dental evaluation</p> <p>Within 60 days: monthly range of 71 – 88% with full dental evaluation</p> <p>Within 90 days: monthly range of 71 – 93% with full dental evaluation</p>	<p>Within 30 days: monthly range of 44 – 71% with full dental evaluation</p> <p>Within 60 days: monthly range of 68 – 89% with full dental evaluation</p> <p>Within 90 days: monthly range of 70 – 89% with full dental evaluation⁷³</p>	<p>Yes⁷⁴</p>

⁷³ Monthly performance data for children with completed dental evaluations within 90 days of placement are as follows: July, 89%; August, 74%; September, 79%; October, 88%; November, 70%; December, 72%.

⁷⁴ CFSA met the required level of performance for the sub-parts requiring evaluations within 30 and within 60 days of placement for every month. CFSA met the sub-part requiring evaluations within 90 days of placement in 2 out of 6 months during the monitoring period. The Monitor considers this an insubstantial deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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.	92% of cases were acceptable based on CY2016 QSR data.	90% of cases were acceptable based on CY2017 QSR data. ⁷⁵	Yes
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. (IEP citation I.D.23.)	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.	Some but not all of the proposals in the Plan have been implemented. Strategies for Temporary Safe Haven and Safe and Stable Families Redesign were prioritized.	To improve development and use of the Needs Assessment and Resource Development Plan, the timeline for this Exit Standard has been modified based on an agreement reached by Parties and the Monitor. The Monitor will assess and report on compliance in the next monitoring report.	Yes ⁷⁶

⁷⁵ Of the 88 cases reviewed through QSR in CY2017 where the child or youth was placed in foster care at the time of the review, 79 (90%) cases were rated as acceptable on *both* of the *Health Status* indicators.

⁷⁶ The new timeline requires a draft Needs Assessment by June 30, 2018 and the final Needs Assessment and Resource Development Plan complete by October 1, 2018.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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>In FY2017, CFSA allocated \$20.96 million for community-based services.</p> <p>In FY2018, CFSA has allocated \$19.41 million for community-based services in the approved budget. The approved FY2018 budget also includes \$4.1 million for Community Partnership Services, which includes funding for Rapid Rehousing.</p>	<p>The proposed FY2019 budget includes \$16.2 million for community-based services. The change from the FY2018 budget includes a \$2.8 million reduction as a result of the Title IV-E waiver ending March 31, 2019.</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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. Monthly range of 38 – 58% of CPS workers met the caseload requirements. Monthly range of 22 – 38 CPS workers had a caseload of more than 15.</p> <p>b. & c. Monthly range of 99 – 100% of ongoing workers met the caseload requirements. No social worker had a caseload of more than 18.</p> <p>d. 100% of workers conducting home studies met required</p>	<p>a. The Monitor is unable to report on this standard.⁷⁷</p> <p>b. & c. Monthly range of 98 – 100% of ongoing workers met the caseload requirements. No social worker had a caseload of more than 18.</p> <p>d. 40 – 100% of workers conducting home studies met required performance of no greater than 30 cases.⁷⁸</p>	<p>Partially⁸⁰</p>

⁷⁷ CFSA collects and maintains data on worker caseloads through FACES.NET. The Monitor and CFSA have worked over time to fine tune the methodology and management reports used to report on caseloads for Entry Service staff. In validating Entry Service caseload data for the current monitoring period, the Monitor identified new concerns which impact the accuracy and validity of the data. Therefore, as discussed in detail in Section IV.A.2., the Monitor is unable to report on Entry Service caseload data for this monitoring period.

⁷⁸ Monthly performance data are as follows: July, 100%; August, 75%; September, 75%; October, 40%; November, 40%; December, 80%. CFSA reports decline in performance is due to an increased demand for home studies during this period and a change in staffing. CFSA filled vacancies in this unit in November 2017 and anticipates being able to meet the required level of performance for this sub-part moving forward.

⁸⁰ CFSA maintained the required level of performance for 3 of 4 sub-parts of the caseload standard. The Monitor is unable to report performance on the sub-part related to Entry Service caseloads. 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 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
		performance of no greater than 30 cases. e. Monthly range of 16 – 34 (1 – 2% of total open cases) were unassigned to a social worker for more than 5 business days.	e. Monthly range of 14 – 31 (1 – 2% of total open cases) were unassigned to a social worker for more than 5 business days. ⁷⁹	
<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 89 – 97% of supervisors met the required standard.	Monthly range of 82 – 98% of supervisors met the required standard. ⁸¹	Yes ⁸²

⁷⁹ Between July and December 2017, in addition to these unassigned cases, a monthly range of 15 to 39 ongoing in-home and permanency cases were assigned to investigative social workers, supervisors, program managers and program administrators. 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 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.

⁸¹ Monthly performance data for supervisory responsibilities are as follows: July, 98%; August, 95%; September, 94%; October, 92%; November, 83%; December, 82%.

⁸² CFSA reports that declines in monthly performance were due to supervisors being out on FMLA. The Monitor considers this to be a temporary deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>48. <u>Supervisory Responsibilities</u>:</p> <p>b. No supervisor shall be responsible for the on-going case management of any case.</p> <p>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 90 – 93% of cases assigned to social workers.	Monthly range of 93 – 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%	96%	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.	100%	100%	Yes

⁸³ Monthly performance data for cases assigned to social workers are as follows: July, 93%; August, 94%; September, 95%; October, 95%; November, 97%; December, 95%.

⁸⁴ CFSA met the required level of performance in 4 out of 6 months during the monitoring period and was below the standard by 1 to 2% during the other 2 months. The Monitor considers this an insubstantial deviation and the 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.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
51. <u>Training for Previously Hired Social Workers:</u> Previously hired direct service staff ⁸⁶ 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. (IEP citation I.D.28.a.)	80% of CFSA and private agency direct service staff shall receive the required annual in-service training.	95%	Not yet due ⁸⁷	N/A
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. (IEP citation I.D.28.b.)	80% of CFSA and private agency supervisors and administrators who have casework responsibility shall receive annual in-service training.	94%	Not yet due ⁸⁸	N/A
53. <u>Training for Foster Parents:</u> CFSA and contract agency foster parents shall receive a minimum of 15 hours of pre-service training. (IEP citation I.D.29.a.)	95% of CFSA and contract agency foster parents shall receive a minimum of 15 hours of pre-service training.	98%	99%	Yes
54. <u>Training for Foster Parents:</u> CFSA and contract agency foster parents shall receive 30 hours of in-service training every two years. (IEP citation I.D.29.b.)	95% of foster parents whose licenses are renewed shall receive 30 hours of in-service training.	93%	90%	Partially ⁸⁹

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

⁸⁷ 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.

⁸⁸ Ibid.

⁸⁹ CFSA's performance last met the required level in July 2014 when performance was 98%. Between December 2014 and December 2017, performance has been between 1 to 5% below the required performance level.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>55. <u>Special Corrective Action</u>:</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; vi. Children placed in foster homes or facilities that exceed their licensed capacities or placed in facilities without a valid license; vii. Children under 14 with a permanency goal of APPLA; and viii. Children in facilities more than 100 miles from the District of Columbia. 	<p>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>	<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. 89% of required special corrective action plans were developed.</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. 73% of required special corrective action plans were developed.</p>	<p>No⁹⁰</p>

⁹⁰ This is the third monitoring period in which CFSA's performance has fallen below the required level for this measure, primarily due to a continued misunderstanding by staff on licensing capacity requirements. Specifically, even if a home in MD is licensed for 4 children, the *LaShawn* placement standards only allow for 3 foster children except for instances where there is a large sibling group. Also, placement of 2 sibling groups which consist of 2 children each in the same home does not meet the placement exception for large sibling groups – the large sibling group must be from a single family. The Monitor considers the Exit Standard as not maintained and will be recommending redesignation as an Outcome to be Achieved.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance⁴⁰	Exit Standard Maintained
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. (IEP citation I.D.30.)				

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<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 continued to use its performance based contract monitoring tool (which includes an exit summary, missing documentation form and program monitor report). Providers receive feedback on case practice issues and get assistance on any corrective action follow-up. CFSA reports that this process will not change with the Temporary Safe Haven Redesign but that the selected provider will have the opportunity to provide additional feedback on the tool and report as the transition occurs.</p>	<p>CFSA continued to use its performance based contract monitoring tool this period. CFSA reports changes to the review process will begin in CY2018 after the transition of placement cases in MD to one agency.</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>57. <u>Interstate Compact for the Placement of Children (ICPC)</u>: 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. <u>Licensing Regulations</u>: 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.	During this monitoring period, CFSA reports 22 FTE positions and 1 part-time contractor position for Family Licensing and Facility Licensing.	During this monitoring period, CFSA reports 23 FTE positions and 1 part-time contractor position for Family Licensing and Facility Licensing.	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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 approved FY2017 budget is \$232.6 million.⁹¹</p> <p>The approved FY2018 budget is \$226.5 million, which includes 820 FTEs.</p>	<p>The proposed FY2019 budget is \$224.2 million, which includes 821 FTEs. CFSA reports that this budget provides adequate funding for required staffing, services and supports.</p>	<p>Yes</p>

⁹¹ Three reprogramming requests were authorized in FY2017 from CFSA’s local funds budget to support activities within the Department of Behavioral Health, Department of Human Services, Office of the Deputy Mayor for Health and Human Services and Department of Youth Rehabilitative Services. These requests resulted in reprogramming \$1.9 million from CFSA’s budget to support other District agencies.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>60. <u>Federal Revenue Maximization</u>: 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 waiver demonstration program and has maintained consistent levels of federal revenue. CFSA is claiming Medicaid for health care services provided through the Healthy Horizons Assessment Clinic.	CFSA continues to receive Title IV-E capped payments on a quarterly basis as part of the federal waiver demonstration program and has maintained consistent levels of federal revenue. CFSA is claiming Medicaid for health care services provided through the Healthy Horizons Assessment Clinic.	Yes
<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

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
62. <i>Maintaining 24 Hour Response System</i> : 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. (IEP citation II.A.2.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
63. <i>Checking for Prior Reports</i> : Child abuse and/or neglect reports shall show evidence that the investigator checked for prior reports of abuse and/or neglect. (IEP citation II.A.3.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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: The Committee reviewed 13 child fatalities between December 2016 and June 2017. The 2016 Child Fatality Annual Report was finalized in August 2017.</p> <p>City-wide: The Committee meets regularly to comprehensively review fatalities. The Committee completed its 2016 Annual Report by September 30, 2017.</p>	<p>Internal: The Committee reviewed 13 child fatalities between July and December 2017. A draft of the 2017 Child Fatality Annual Report was provided to the Monitor in March 2018.</p> <p>City-wide: The Committee meets regularly to comprehensively review fatalities.⁹² The Committee completed its 2016 Annual Report by September 30, 2017.⁹³</p>	Yes

⁹² In December 2017, the Mayor's Office of Talent and Appointments swore-in five new community members to the Committee, filling vacancies that have existed for some time. The new members have background experience in medicine, child welfare and community engagement.

⁹³ The 2016 City-wide Child Fatality Committee Annual Report may be found at: <https://ocme.dc.gov/sites/default/files/dc/sites/ocme/publication/attachments/CFRC2016AR%20FINAL%20REPORT.pdf>

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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 range of 90 – 100% of investigations timely completed	Monthly range of 91 – 100% of investigations timely completed	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>67. <u>Use of General Assistance Payments</u>: CFSA shall demonstrate that District General Assistance payment grants are not used as a substitute for financial supports for foster care or kinship care for District children who have been subject to child abuse or neglect.</p> <p>(IEP citation II.B.7.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
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. (IEP citation II.B.9.)	Ongoing Compliance	Training opportunities were offered every month during the monitoring period.	Training opportunities were offered every month during the monitoring period except December 2017 due to the holidays.	Yes
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.) (IEP citation II.B.10.)	Ongoing Compliance for no more than 82 children.	Monthly range of 12 – 13 children placed more than 100 miles from the District	Monthly range of 10 – 13 children placed more than 100 miles from the District	Yes
71. <u>Licensing and Placement Standards</u> : a. Children shall be placed in foster homes and other placements that meet licensing and other MFO placement standards. 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	Ongoing compliance for 95% of children.	a. Monthly range of foster and group homes: 94 – 95% b. Monthly range of children over-placed in foster homes: 2 – 4%	a. Monthly range of foster and group homes: 92 – 95% ⁹⁴ b. Monthly range of children over-	Partially ⁹⁷

⁹⁴ Monthly performance for children placed in foster homes and other placements that meet licensing and other MFO standards are as follows: July, 95%; August, 94%; September, 94%; October, 94%; November, 94%; December, 92%.

⁹⁷ The Monitor is concerned with the percentage of children over-placed in foster homes each month, which has risen over the monitoring period, and as of December 31, 2017, is the highest it has been since reporting on the IEP began in 2011.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>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 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. (IEP citation II.B.11.)</p>		<p>c. Children in group care settings with capacity in excess of 8 children: 0</p> <p>d. No exceptions were provided for the children placed in excess of licensing capacity during this monitoring period</p>	<p>placed in foster homes: 3 – 7%^{95, 96}</p> <p>c. Children in group care settings with capacity in excess of 8 children: 0</p> <p>d. No exceptions were provided for the children placed in excess of licensing capacity during this monitoring period</p>	

⁹⁵ Monthly performance for children over-placed in foster homes are as follows: July, 3%; August, 4%; September, 3%; October, 6%; November, 5%; December, 7%.

⁹⁶ CFSA continues to report that the majority of foster homes where over-placement has occurred are Maryland homes that are licensed for 4 children. While Maryland regulations may allow for placement of 4 foster children in a home, the IEP prohibits such placements unless it is placement of a large sibling group and there are no other children in the home.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>72. <u>Case Planning Process</u>: 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>	<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.</p>	<p>Monthly range of 87 – 94%</p>	<p>Monthly range of 79 – 90%⁹⁸</p>	<p>Partially⁹⁹</p>
<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>	<p>Ongoing Compliance</p>	<p>Ongoing Compliance</p>	<p>Ongoing Compliance¹⁰⁰</p>	<p>Yes</p>

⁹⁸ Monthly performance for completion of case plans are as follows: July, 90%; August, 90%; September, 84%; October, 84%; November, 79%; December, 84%.

⁹⁹ CFSA's performance on this Exit Standard has fluctuated over the past several monitoring periods. Current monthly performance was below the required level in 4 out of 6 months during this period. The Monitor considers this Exit Standard to be partially maintained and will be requesting CFSA take steps to improve performance.

¹⁰⁰ As of December 31, 2017, CFSA reports that 1 child under the age of 12 had the goal of APPLA. This child (age 11) is an unaccompanied refugee minor.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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.	100%	100% ¹⁰¹	Yes

¹⁰¹ Data are reported by the fiscal year. Thus, performance represents data from October 1, 2017 to December 31, 2017. 20 children had their goal changed to adoption during those months and either had the required staffing, no longer required the staffing because a family was identified or were still within the 95 day timeframe. CFSA will be changing how this measure is reported to the Monitor in the next monitoring period, as the AdoptionSTAT process will be occurring within 90 days of a goal change to adoption on all cases including cases where a child-specific recruitment plan is needed. The AdoptionSTAT process will take the place of the staffings that previously occurred in cases needing recruitment.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<p>75. <u>Post-Adoption Services Notification</u>: 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 has 3 social workers dedicated to providing case management and information and referrals to contracted therapeutic services. Information about both the CFSA unit and contracted services are sent to families within 60 days of achieving permanency.	CFSA reports the Permanency Specialty Unit has 3 social workers dedicated to providing case management and information and referrals to contracted therapeutic services for adoptive and guardianship families. Information about both the CFSA unit and contracted services are sent to families within 60 days of achieving permanency.	Yes
<p>76. <u>Family Court Reviews</u>: 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.</p> <p>(IEP citation II.D.16.)</p>	Ongoing Compliance for 90% of cases.	As of June 30, 2017, 94% of applicable children had required judicial review.	As of December 31, 2017, 90% of applicable children had required judicial review. ¹⁰²	Yes

¹⁰² Family Court staff are responsible for inputting court hearing information into the child's electronic case file. Aggregate data provided indicate 86% of children had the required judicial review and CFSA provided documentation of court reviews for additional children who had not been accurately entered by court staff into the data system.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
77. <i>Permanency Hearings</i> : 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. (IEP citation II.D.17.)	Ongoing compliance for 90% of cases.	Monthly range of 91 – 95% of children had a timely permanency hearing.	Monthly range of 91 – 94% of children had a timely permanency hearing.	Yes
78. <i>Use of MSWs and BSWs</i> : Unless otherwise agreed, all social worker hires at CFSA shall have an MSW or BSW before being employed as trainees. (IEP citation II.E.18.)	Ongoing compliance for all social work hires.	Ongoing compliance	Ongoing compliance	Yes
79. <i>Social Work Licensure</i> : All social work staff shall meet District of Columbia licensing requirements to carry cases independently of training units. (IEP citation II.E.19.)	Ongoing compliance for all social workers.	Ongoing compliance	Ongoing compliance	Yes
80. <i>Training for Adoptive Parents</i> : Adoptive parents shall receive a minimum of 30 hours of training, excluding the orientation process. (IEP citation II.F.20.)	Ongoing compliance for 90% of adoptive parents.	96%	99%	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<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 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</p>	Ongoing Compliance	<p>The Needs Assessment is due in January 2018.</p> <p>A draft FY2018 Resource Development Plan was submitted by CFSA on June 30, 2017. Feedback was provided by both the Monitor and Plaintiffs' counsel and a revised Resource Development Plan was submitted on September 19, 2017.</p>	<p>To improve development and use of the Needs Assessment and Resource Development Plan, the timeline for this Exit Standard has been modified based on an agreement reached by Parties and the Monitor. The Monitor will assess and report on compliance in the next monitoring report.</p>	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
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. (IEP citation II.G.21.)				
82. <u>Foster Parent Licensure</u> : CFSA shall license relatives as foster parents in accordance with District law, District licensing regulations and ASFA requirements. (IEP citation II.G.22.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
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. (IEP citation II.G.23.)	Ongoing Compliance	Ongoing compliance The QSR unit includes 8 full-time QSR reviewers, a Supervisory QSR specialist and a dedicated administrative assistant.	Ongoing compliance The QSR unit includes 8 full-time QSR reviewers, two dedicated administrative assistants and a Program Manager.	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	Exit Standard Maintained
<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 in meeting goals of safety, permanence and well-being and the requirements of the MFO and court-ordered Implementation and Exit Plan.</p> <p>(IEP citation II.H.24.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
<p>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.</p> <p>(IEP citation II.H.25.)</p>	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
<p>86. <u>Provider Payments:</u> CFSA shall ensure payment to providers in compliance with DC’s Quick Payment Act for all services rendered.</p> <p>(IEP citation II.H.26.)</p>	90% of payments to providers shall be made in compliance with DC’s Quick Payment Act for all services rendered.	Ongoing compliance	Monthly range of 92 – 97%	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	January – June 2017 Performance	July – December 2017 Performance ⁴⁰	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 ¹⁰³	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 ¹⁰⁴	Yes

¹⁰³ CFSA uses the Expenditures on Children by Families report issued by the USDA to adjust foster parent board rates. The most recent report was issued in January 2017 and includes data from 2015. CFSA readjusted its rate beginning in CY2018 as part of the Temporary Safe Haven Redesign. Additional information will be included in the next monitoring report.

¹⁰⁴ CFSA reports for FY2017, the adoption subsidy budget amount is \$18,642,368 and the guardianship subsidy budget amount is \$11,831,094. For FY2018, the adoption subsidy budget amount is \$18,361,084 and the guardianship subsidy budget amount is \$10,599,875.

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

A. GOAL: CHILD SAFETY

In this section of the report, the Monitor examines CFSA's performance within their Entry Services administration which includes the Hotline, Child Protective Services (CPS) investigations and Family Assessments (FA) and other administrative supports. This administration manages critical functions for a child welfare system due to its role as first responders to allegations of child abuse and neglect.

Three of the IEP Exit Standards regarding Entry Services remain Outcomes to be Achieved – (1) timely initiation of investigation, (2) timely closure of investigations and (3) quality of investigations. As discussed later in this section, quality of investigations was not newly assessed this period; performance data will be collected during the January through June 2018 period and included in the next monitoring report. For the other two Exit Standards that remain to be achieved, CFSA's performance over this monitoring period improved since the last period for timely initiation of investigations and timely closure of investigations.

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 reports, family members and others in the community. CFSA utilizes a Differential Response (DR) system to determine the appropriate response to referrals using one of the following pathways: (1) no action or screen out 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 custodian;¹⁰⁵ (2) initiate a CPS investigation; (3) initiate a CPS FA;¹⁰⁶ or (4) Information and Referral (I&R).¹⁰⁷ These determinations are made either by Hotline staff at the time of referral using the Hotline Structured Decision Making (SDM) tool or after consultation in the Hotline R.E.D. Team,¹⁰⁸ which includes participation from multidisciplinary staff throughout

¹⁰⁵ 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 or severe forms of sex trafficking. Their perpetrators are not limited to parent, guardian or custodian.

¹⁰⁶ Family Assessment 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 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.

¹⁰⁷ 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 for courtesy interview, notice of child or youth run away or return from run away, non-CPS assaults or child or youth curfew violations.

¹⁰⁸ The Hotline R.E.D. Team (Review, Evaluate, Direct) process and decision-making framework requires workers and supervisors to work collaboratively to more systematically review the allegations, family and case history, family strengths and needs. Team members consist of a multi-disciplinary team of CFSA staff who meet twice each weekday to review Hotline referrals and determine pathway assignment.

the agency. Although CFSA procedure promotes use of the Hotline R.E.D. Team in making pathway decisions for referrals, data reflect that the majority of decisions are made by Hotline workers and supervisors. Specifically, in December 2017, excluding those referrals coded as I&R or immediate response for an investigation, the pathway decisions to conduct an investigation, initiate a FA or screen out the referral was made by Hotline staff and supervisors in 80 percent (940 of 1,168) of referrals. The remaining 230 referrals were reviewed by a Hotline R.E.D. Team.

Table 3 below shows the number of calls the Hotline received between July and December 2017 and specifies the Differential Response pathway selected for each referral. The volume of calls to the Hotline this monitoring period ranged between 1,085 and 1,489 a month, with a total of 7,633 calls during this six month monitoring period. An average of 31 percent of Hotline calls received during the period were accepted for an investigation or linked¹⁰⁹ to a current investigation and an average of 24 percent of Hotline calls were accepted for a FA or linked to a current FA. As indicated in Table 3, an average of five percent of calls were designated as I&R and a monthly range of 38 to 43 percent of calls were screened out at the Hotline or after a R.E.D. Team review.

**Table 3: Calls to the Child Abuse and Neglect Hotline by Differential Response Pathway
July – December 2017**

Month	Total ¹¹⁰	Information and Referral (I&R)	Investigation		Family Assessment (FA)		Screened Out by Hotline or Hotline R.E.D. Team
		Accepted	Accepted	Linked	Accepted	Linked	
July 2017	1,085	49 (5%)	299 (28%)	42 (4%)	215 (20%)	17 (2%)	463 (43%)
Aug 2017	1,113	56 (5%)	331 (30%)	42 (4%)	242 (22%)	24 (2%)	418 (38%)
Sept 2017	1,295	63 (5%)	343 (26%)	47 (4%)	306 (24%)	26 (2%)	510 (39%)
Oct 2017	1,489	73 (5%)	401 (27%)	70 (5%)	333 (22%)	28 (2%)	584 (39%)
Nov 2017	1,340	56 (4%)	330 (25%)	53 (4%)	326 (24%)	19 (1%)	556 (41%)
Dec 2017	1,311	55 (4%)	327 (25%)	44 (3%)	298 (23%)	17 (1%)	570 (43%)
Total	7,633	352 (5%)	2,031 (27%)	298 (4%)	1,720 (23%)	131 (2%)	3,101 (41%)

Source: CFSA Administrative Data, FACES.NET report INT003

* Percentages may not equal 100% due to rounding.

¹⁰⁹ “Linked” indicates that the agency already had an open investigation or FA and the new referral was linked to the previously opened referral.

¹¹⁰ When data are pulled from FACES.NET, Hotline calls awaiting approval are not included in the total denominator. The following number of calls were awaiting approval each month: July, 1 call and December, 1 call.

In early 2016, CFSA and Monitor staff worked collaboratively to review referrals received by the Hotline in January 2016 to better understand decision-making processes and the appropriateness of decisions by staff at the Hotline, educational neglect triage unit and Hotline R.E.D. Team. The review identified strengths and areas in need of improvement.¹¹¹ Following the review, CFSA and the Monitor developed recommendations to address identified issues. These recommendations were incorporated into the 2017 *LaShawn* Strategy Plan.

- *Implementation of the recommendations from the September 2016 Assessment of the District of Columbia's Child and Family Services Agency Child Abuse and Neglect Hotline and Intake Practices (2017 Strategy Plan, p.1).*

The discussion below highlights implementation updates for several of these strategies during the period under review.

Reports of Abuse and Neglect to the Hotline

CFSA's Quality Assurance (QA) Unit listens to recordings of 10 Hotline calls every month to assess for appropriate customer service, engagement with the reporter, necessary information obtained and agreement with the screening decision. Data generally reflect positive practice – in most referrals, Hotline staff are speaking in a pleasant and inquisitive tone; maintaining positive interaction; asking clarifying questions; and collecting information about the reporter, alleged victim child and alleged maltreater. Of the 109 applicable calls in CY2017,¹¹² QA staff agreed with the screening decision in 94 percent (102).

Educational Neglect Referrals

CFSA's QA Unit reviews approximately 100 educational neglect referrals a quarter to identify trends in screen-out decisions, families' identified needs, services, barriers and underlying reasons that prevent school attendance. CFSA provided data for a review of 216 educational neglect referrals screened out between July and December 2017. Relevant findings are bulleted below:

- Approximately one-third (30%) of children named in these referrals were between the ages of five and eight years old and 42 percent involved children between the ages of nine and 12 years old. Over one-third (38%) of referrals involved children who were residents in Ward 8.

¹¹¹ For more detailed findings, see *An Assessment of the District of Columbia's Child and Family Services Agency Child Abuse and Neglect Hotline and Intake Practices and Decision Making* dated September 6, 2016 and available here <https://www.cssp.org/publications/child-welfare/district-of-columbia-lashawn-a-v-fenty/document/An-Assessment-of-the-District-of-Columbias-Child-and-Family-Services-Agency-Child-Abuse-and-Neglect-Hotline-and-Intake-Practices-and-Decision-Making-1.pdf>

¹¹² 11 calls were determined not to be applicable for this question due to the call not being entered into FACES.NET or the content of the call was a general inquiry for information.

- When submitting educational neglect referrals to CFSA, schools are asked to indicate if the attendance issues have an impact on the child's academic performance. Of the 216 screened out referrals reviewed, 102 (47%) did not specify any impact on the child's academic performance and 65 (30%) described no negative impact. In 49 (23%) referrals, there was a description of the negative impact attendance had on the child's academic performance. CFSA examined these 49 referrals more closely to determine why screen out was appropriate and found that almost half (49%) of these referrals had an open case, FA or investigation with the agency at the time and this information could be incorporated into the current case; some of the reasons provided for the remaining referrals included that the referral did not include an allegation of abuse or neglect, the absences were due to truancy, the family resided out of jurisdiction or the school was actively working with the family to try and resolve the absences.
- In 45 of the educational neglect referrals reviewed, CFSA had an open in-home case, investigation or FA with the family at the time of receipt; in 36 (80%) of these referrals, documentation reflected that notification of the referral was made to the ongoing worker.
- CFSA staff reviewed 36 referrals in September 2017 to assess the accuracy of the information entered by the educational neglect triage unit staff in FACES.NET as compared to the information submitted by the school (utilizing AVOKA technology¹¹³). In more than half (20 of the 36 referrals), CFSA reviewers found discrepancies between the information submitted by the school and the information entered into FACES.NET. However, for 19 of these referrals, reviewers identified that the educational neglect triage staff followed up with the school or parents following receipt of the referral to verify or clarify information. The discrepancies primarily related to the school's efforts to engage the family (12), the number of absences (10) and clarification of the child's academic performance (7).
- Of the 216 educational neglect referrals that were screened out between July and December 2017, CFSA reviewers agreed with the decision in 96 percent (207 referrals).

Current data on reviewer agreement in screen-out decisions made by Hotline staff and for calls related to educational neglect show improvement since the review of practice in January 2016.

2. Entry Services Caseloads

CPS social workers are the first to respond to allegations of abuse and neglect from the community. Workers have to first ensure the safety of the child(ren) and then engage the family and collaterals to assess the current situation and determine if the allegations should be substantiated, if referrals for services are needed or if an open in-home or foster care case with the agency is necessary to ensure the ongoing safety of the child(ren). High worker caseloads can have a direct impact on the

¹¹³ AVOKA technology provides an online digital platform for an educational neglect standardized form to be filled out by schools and submitted electronically to CFSA.

ability of the workforce to complete accurate and comprehensive assessments of safety and well-being and engage families in effective planning and services.

The Monitor analyzes both investigative and FA worker caseloads together, as they both fall under the umbrella of CPS. CFSA has consistently struggled to implement effective strategies to ensure CPS social workers have caseloads that are in compliance with the standard set forth in the IEP. During the current monitoring period, despite management report data showing improved compliance with caseload standards, the Monitor continues to have concerns about caseloads due to the high number of referrals that are “in transfer” from the Hotline to a CPS worker and reported stress and pressure felt by CPS workers and supervisors to prevent caseloads from exceeding 12 per worker by closing investigations and FAs so that they can receive new cases.

Investigative Caseloads

IEP Requirement	46. <u>Caseloads</u> : 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. (IEP citation I.D.25.a.)
Exit Standard	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.

Performance for the period July 1 through December 31, 2017:

CFSA collects and maintains data on worker caseloads in FACES.NET. The Monitor and CFSA have worked over the years to fine tune the methodology and management reports used to track caseloads for Entry Service staff. However, in validating Entry Service caseload data for the current monitoring period, the Monitor identified new concerns which impact the accuracy and validity of these data. Therefore, as discussed in detail below, the Monitor is unable to report on Entry Service caseload data for this monitoring period.^{114,115}

During the month of December 2017, there was a range of 16 to 78 referrals each day designated as “in transfer” – meaning that the referral had been accepted at the Hotline, it was designated as

¹¹⁴ Data in FACES.NET reflect monthly performance for Entry Services CPS (investigation and FA) workers are as follows: July, 71%; August, 80%; September, 93%; October, 90%; November, 94%; December, 97%. Monthly performance data for investigative workers are as follows: July, 89%; August, 91%; September, 100%; October, 95%; November, 95%; December, 98%. Monthly performance data for FA workers are as follows: July, 49%; August, 69%; September, 84%; October, 84%; November, 93%; December, 96%.

¹¹⁵ Data in FACES.NET reflect monthly performance for Entry Services CPS (investigative and FA) workers carrying between 15 and 17 referrals at any time during the month: July, 13 workers; August, 1 worker; September, 1 worker; October, 1 worker; November, 0 workers; December, 0 workers. No worker was responsible for 18 or more referrals at any time during the current monitoring period.

either an investigation or FA and the referral was awaiting assignment to either a CPS investigator or FA worker. For example, on December 12, 2017, there were 78 referrals that were “in transfer” and these referrals had been “in transfer” for between one to 12 days. Sixty-four of these referrals were awaiting assignment to a FA worker and 14 were awaiting assignment to an investigative worker. Of the 78 “in transfer” referrals, almost half (46%) had been “in transfer” for more than two days – specifically, 12 were “in transfer” for between two and four days and 24 were “in transfer” for five to 12 days. Additionally, on December 12th, six referrals were assigned to a CPS supervisor;¹¹⁶ five (83%) of which were assigned to the supervisor for between five and 28 days. For randomly selected days in December 2017, Table 4 identifies the number of CPS referrals by DR pathway that were “in transfer” for more than two days and five or more days.

Table 4: Details of In Transfer Referrals for Selected Dates in December 2017

Date	Number of Referrals In Transfer from Hotline to Worker by DR Pathway			Number of Days Referrals are In Transfer	Number of Referrals in Transfer for 2-4 days	Number of Referrals in Transfer for 5+ days
	Total	CPS-I	CPS-FA			
12/1/17	56	19	37	1-10	7	3
12/4/17	52	11	41	1-13	36	7
12/7/17	60	14	46	1-16	5	14
12/9/17	71	13	58	1-9	13	14
12/11/17	78	7	71	1-11	38	25
12/12/17	78	14	64	1-12	12	24
12/14/17	55	12	43	1-10	12	20
12/17/17	32	13	19	1-6	4	1
12/20/17	25	10	15	1-6	0	1
12/29/17	17	7	10	1-9	2	2

Source: CFSA Administrative Data, FACES.NET report INV145

As shown in Table 4, there were multiple days during the month when more than 10 referrals were unassigned to a worker for at least five days. If these referrals were appropriately and more timely assigned to a worker, performance on the *LaShawn* caseload standard would almost certainly have been lower than reported. The high number of referrals in transfer for more than five days between December 7th and December 14th raises concerns. The Monitor is concerned that supervisors are being directly and indirectly influenced to hold referrals or place them “in transfer” status in part due to directives that their workers should not have a caseload with more than 12 referrals, which would be out of compliance with the *LaShawn* standard. Additionally, it is worth noting that in December 2017, 12 investigative and FA supervisors were assigned a referral for at least one day,

¹¹⁶ As part of the assignment process, accepted referrals are initially assigned to a supervisor who is responsible for assignment to one of the workers within their unit. Due to timelines regarding initiation, investigations and FAs should be quickly assigned to workers.

which was more than any other month during the monitoring period. This further contributes to concerns of timely assignment of referrals to workers that could impact the timely assessment of safety and suggests that staffing levels could be insufficient.

In addition to challenges of assigning referrals from the Hotline to CPS workers in a timely manner, data show delays in the timely transfer of cases from CPS workers once they finish their work to ongoing workers when a case is to be opened. On December 31, 2017, there were 21 cases that were awaiting transfer from Entry Services to an ongoing worker. The process of transferring cases from CPS to in-home appropriately requires a staffing between both workers and their supervisors to share the family history and current issues, followed by a joint home visit with the family to promote engagement and ensure the family understands the ongoing worker's role. Although workers strive to hold these meetings within three days of a decision to open a case, in practice, this process can take more than a week due to scheduling challenges between administrations as well as with the family. During this transaction period, the investigative or FA worker maintains responsibility for visiting the family and ensuring child safety and well-being. However, these cases are not captured on an investigator or FA worker's caseload, which if they were, would result in higher documented caseloads in FACES.NET.

For the reasons cited above, the Monitor is unable to report performance data for Entry Services caseloads during this period. CFSA is aware of these issues and is working to ensure timely assignment of investigations and FAs from the Hotline to an Entry Services worker as well as a smoother and quicker transition of cases from Entry Services to an ongoing worker. CFSA leaders, as discussed below, do not believe additional staff are needed but the Monitor will continue to explore this issue with them.

Performance on Strategy Plan:

CFSA has employed the following strategy to ensure Entry Service caseloads are at or below established limits:

- *By April 15, 2017, the Deputy Director for Entry Services will complete a staffing analysis of social workers and Family Support Workers (FSWs) to include number of staff, shifts, impact of extended leave and assignment process and will provide recommendations to be implemented in the next quarter (2017 Strategy Plan, strategy 3, p.2).*

A staffing analysis completed in April 2017 concluded that changes made in March 2017 to reduce staff and staff responsibilities during the overnight shift had negatively impacted day shift worker caseloads. Recommendations from this analysis were used to modify shift staffing to balance workload expectations, with the majority of casework expected to occur during day shift hours, and to create a CPS unit where the workers are trained and can be assigned to either investigations or FAs as needed. In June 2017, CFSA also added an additional unit to Entry Services, with five new social workers and one new supervisor.

The staffing analysis also concluded that there were sufficient positions in CPS to meet caseload standards if every position was consistently filled. However, especially given the District's generous Family and Medical Leave Act (FMLA) and sick leave benefits, on any given day, there is unlikely to be full coverage. The Monitor remains concerned about the impact of consistently high workloads on worker morale and on the quality of case practice and ability of workers to ensure the safety and well-being of children. During Entry Services focus groups held by the Monitor with supervisors in March 2018, the Monitor heard concerns about worker caseloads and the difficulty in finding a balance between supporting workers to complete quality investigations and enter documentation into FACES.NET and assigning new referrals timely to workers without exceeding caseload limits. Further, strategies used by leadership to support workers in managing workloads, were not viewed as "supportive" by frontline staff.

As of April 6, 2018, CFSA reports a total of nine vacancies within Entry Services. It continues to be critical that CFSA have sufficient frontline staff to absorb fluctuations and known increases in referrals to the Hotline at the end of the school year and provide frontline workers and supervisors with strategies that support high quality practice. Although CFSA has increased the number of social worker and supervisor positions within Entry Services this year, due to frequent absences related to vacation and medical leave, the Monitor believes additional staff positions are necessary.

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, always require a CPS investigation. As part of an investigation, the IEP requires CFSA to:

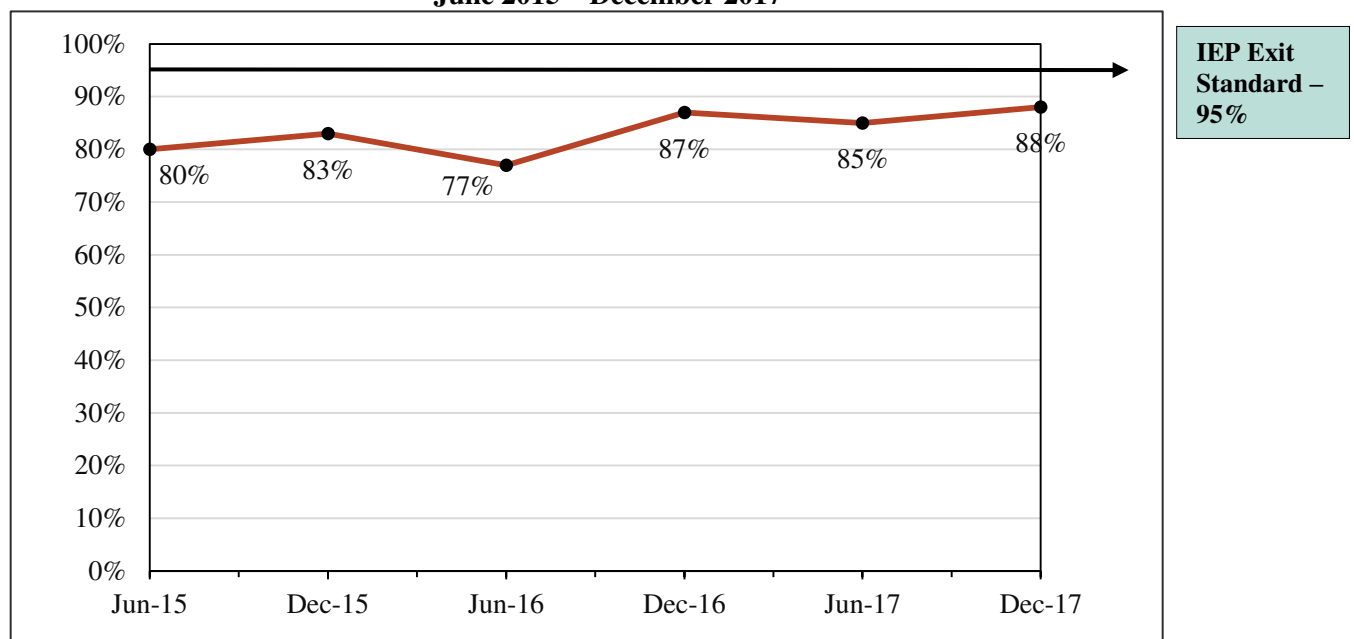
- initiate an investigation immediately or within 48 hours of the referral to the hotline or document good faith efforts to initiate the investigation when the alleged victim child(ren) cannot be immediately located (IEP citation I.A.1.a.);
- complete the investigation and enter the final report of findings 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.)¹¹⁷;
- conduct investigations of acceptable quality (IEP citation I.A.2.); and
- 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.).

¹¹⁷ Performance for this Exit Standard is discussed in Table 2 of this report.

Initiating Investigations and Family Assessments

IEP Requirement	<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>
Exit Standard	<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.¹¹⁸</p>

**Figure 1: Timely Initiation of Investigations
June 2015 – December 2017**



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

¹¹⁸ 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 through December 31, 2017:

Investigations

Initiation of an investigation includes seeing all alleged victim children and talking with them outside the presence of the caretaker or making all applicable good faith efforts to locate and see them within the 48 hour timeframe.¹¹⁹ CFSA provided findings from a secondary review of FACES.NET data for the months of September and December 2017 to validate instances 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.

In September 2017, 297 closed abuse and neglect investigations were applicable to this measure.¹²⁰ All alleged victim children were seen within 48 hours in 212 (71%) investigations and good faith efforts were made in an additional 54 (18%) investigations, for a total of 90 percent of investigations initiated timely.

In December 2017, 332 closed abuse and neglect investigations were applicable to this measure.¹²¹ All alleged victim children were seen within 48 hours in 253 (76%) investigations and good faith efforts were made in an additional 39 (12%) investigations, for a total of 88 percent of investigations initiated timely, as shown in Figure 1. Current performance has improved since June 2017 but 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 period, monthly performance data on timeliness of investigation initiation (without inclusion of good faith efforts) ranged from 68 to 78 percent. Documentation of good faith efforts were not validated for these months and credit for valid efforts made would likely increase performance.

Family Assessments

Similar to investigations, a FA referral requires workers to see and interview all children in the household to assess for safety. CFSA policy sets different response times for initiation of FA depending upon the information contained in the hotline referral – either within 72 or up to 120 hours (5 days) from the hotline referral. In December 2017, for 110 (36%) families whose FA closed that month, contact had been made with all alleged victim children within 72 hours of

¹¹⁹ For younger and non-verbal children, observation is acceptable.

¹²⁰ Three investigations were removed from the universe of applicable cases as the investigation was closed before 48 hours had elapsed and the alleged child victim was not seen; two investigations were removed as they should have been linked to an open investigation; and one investigation was removed as it was mistakenly screened in.

¹²¹ 14 investigations were removed from the universe of applicable cases for one of the following reasons: the investigation was closed before 48 hours had elapsed and the alleged child victim was not seen; the investigations should have been linked or was a companion referral; or the investigation was mistakenly screened in.

receipt of referral; for an additional 83 (28%) families all alleged victim children were contacted within 120 hours of receipt of the referral, for a total of 64 percent of FAs timely initiated. Monthly performance for FA initiation within 120 hours ranged between 57 and 69 percent this monitoring period.¹²²

Like “good faith efforts” to initiate an investigation, FA workers who are unable to reach and interview children and families within required timeframes, may complete and document reasonable actions¹²³ to initiate a FA in a timely manner; data on reasonable actions were not validated this monitoring period and are not presented in this report. Valid “reasonable actions” would likely increase performance levels.

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on timely initiation of investigations (IEP I.A.1.a.):

- *Starting April 1, 2017, Entry Service Supervisors and Program Managers will listen daily to incoming calls in real time and use instant messaging to prompt additional questions to be asked during reports (2017 Strategy Plan, strategy 1.1., p.2).*

CFSA reports that supervisors began listening to live calls in March 2017 and call system enhancements, which allow supervisors to utilize instant messaging during live calls, became functional in August 2017. However, as the data in Table 5 reflect, this practice has not yet been fully incorporated into supervisory practice, and due to such low numbers, was likely not meaningful to practice generally. CFSA reports there were implementation challenges in September and October 2017 due to leadership changes and supervisors on extended leave. Additionally, CFSA reports that some Hotline staff struggle with viewing and responding to instant messaging while also simultaneously listening and responding to the caller and documenting the reported information. Some child welfare hotlines have protocols where hotline workers put the caller on a brief hold after collecting information to allow time to check with and incorporate supervisory input in real time.

¹²² Monthly performance for initiation of FA within 120 hours are as follows: July, 60%; August, 57%; September, 63%; October, 66%; November, 69%; December, 64%.

¹²³ Reasonable actions is the term CFSA utilizes to represent good faith efforts to initiate a FA. Documented reasonable actions to 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.

**Table 5: Total Number of Calls Reviewed Monthly
by Hotline Supervisor Live-Listening
June – December 2017**

Month	Supervisor 1	Supervisor 2	Supervisor 3
June 2017	15	9	2
July 2017	3	2	15
August 2017	14	23	5
September 2017	2	7	7
October 2017	1	0	2
November 2017	15	17	10
December 2017	13	12	10
Total	63	70	51

Source: CFSA Manual Data

- *With the Truancy Task Force, the Deputy Director for Entry Services will review Educational Neglect policy, process and data to make and implement recommendations for changes by September 2017 (2017 Strategy Plan, strategy, 1.2., p.2).*

Throughout CY2017, CFSA participated in the Deputy Mayor for Education’s multi-agency working group – including the Office of the Attorney General, Office of the State Superintendent of Education, DC Public Schools – on truancy and absenteeism. In November 2017, CFSA staff recommended to Director Donald that amendments be made to the District’s Attendance Accountability Act. In late November 2017, the multi-agency working group produced a near-final draft of a legislative proposal aimed at addressing a number of challenges, including more expeditious and effective processing of educational neglect referrals to the child welfare agency. CFSA hopes that finalization of this bill will be prioritized once other school-system related issues have been resolved and a new Deputy Mayor of Education has been selected.

- *By May 15, 2017, the Diligent Search Unit will organizationally move to Entry Services Administration (2017 Strategy Plan, strategy 2.1., p.2).*
- *By April 30, 2017, Entry Services will create Response Team(s) consisting of a CPS Social Worker and Diligent Search staff to respond together to referrals and to assist with locating children and families (2017 Strategy Plan, strategy 2.2., p.2).*

The Diligent Search Unit was moved to the Entry Services Administration during the prior monitoring period. This change was to ensure quick and direct access to staff who can assist CPS workers in locating families and children when a referral is accepted. As a component of the

restructuring, CFSA instituted a Joint Response Team staffing, which includes both CPS and Diligent Search staff, for cases where workers are unable to contact caretakers or children in a timely manner, when family members are purposefully avoiding CPS staff or there are other barriers to completing the investigation or FA and Diligent Search staff can assist. CFSA reports that between July and December 2017, 102 Joint Response Team staffings occurred, and in 62 of these cases, the Diligent Search Unit's work contributed to resolution of the presenting concern or barrier.

The Monitor conducted focus groups with Entry Services supervisors in March 2018 and supervisors shared that the relocation of this unit has improved access to Diligent Search staff and has been extremely useful to social workers in locating families.

- *Entry Services will continue "huddles," during which investigative and supportive activities are assigned to social workers to move toward timely contact. The Diligent Search supervisor will be included in the huddles to support this effort (2017 Strategy Plan, strategy 2.3., p.2).*

CFSA reports that supervisors meet three times daily during huddles to review the status of open investigations and three times a week to review open FAs. FACES.NET data are used to identify investigations or FAs that have not yet been assigned to a worker and then steps are taken to ensure this occurs.

- *By April 30, 2017, the Deputy Director for Administration will complete an analysis of car access and usage and implement recommendations regarding the reservations process and access to vehicles (2017 Strategy Plan, strategy 4, p.2).*

In April 2017, CFSA completed an analysis of staff access to cars to carry out the responsibilities of their job. Workers consistently have complained that limited access to cars inhibits their timely performance. The review determined the need for increased accountability for the vehicle reservation process, enhanced vehicle safety and better functionality from the Fast Fleet¹²⁴ system. Following the review, CFSA explored additional transportation options including increasing the number of Zipcars available, establishing a contract with a taxi/cab company and allowing for personal vehicle use. These recommendations were shared with leadership in October 2017; a final determination has not yet been made.

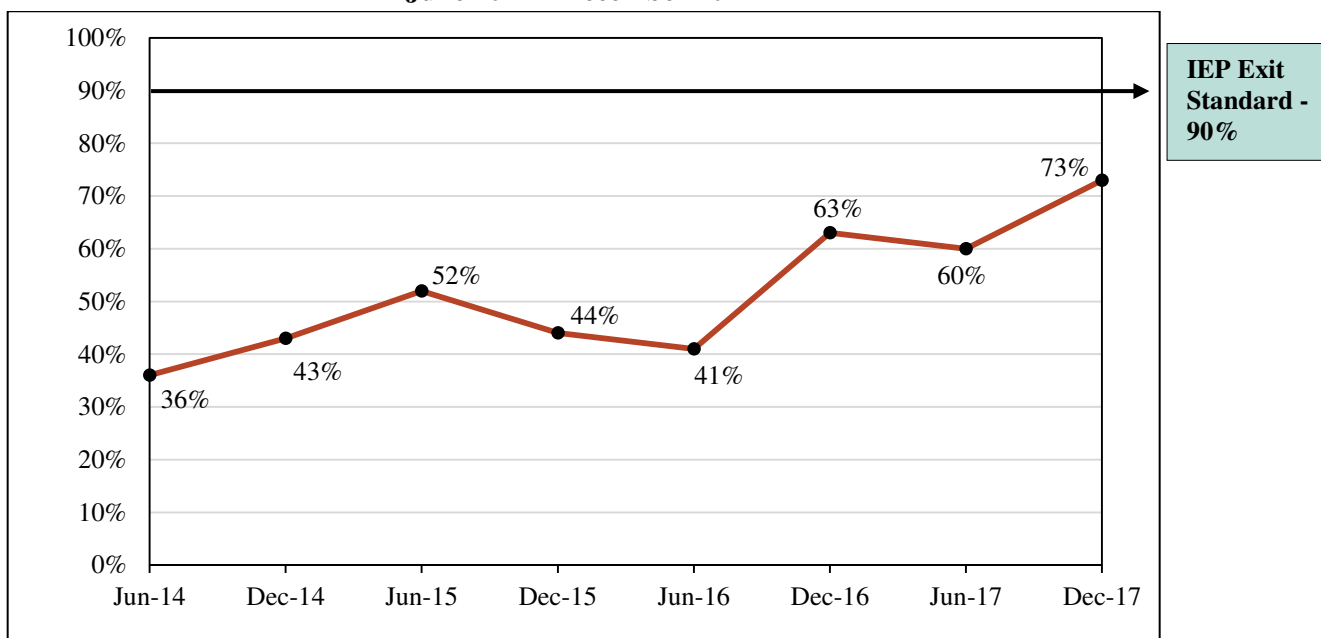
During focus groups held by the Monitor with Entry Services supervisors in March 2018, there continued to be complaints about difficulty in accessing cars. CFSA reports that leadership continues to track any concerns reported by staff related to access to vehicles to perform work-related duties, particularly assignments that require immediate response.

¹²⁴ Fast Fleet is an in-vehicle technology that allows CFSA's Fleet Office to maintain a scorecard of activities including utilization and trends.

Timely Completion of Investigations and Family Assessments

IEP Requirement	<p>2. <i>Investigations</i>: 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	90% of investigations will be completed and a final report of findings shall be entered in FACES.NET within 35 days.

**Figure 2: Timely Completion of Investigations
June 2014 – December 2017**



Source: CFSA Administrative Data, FACES.NET report INV004

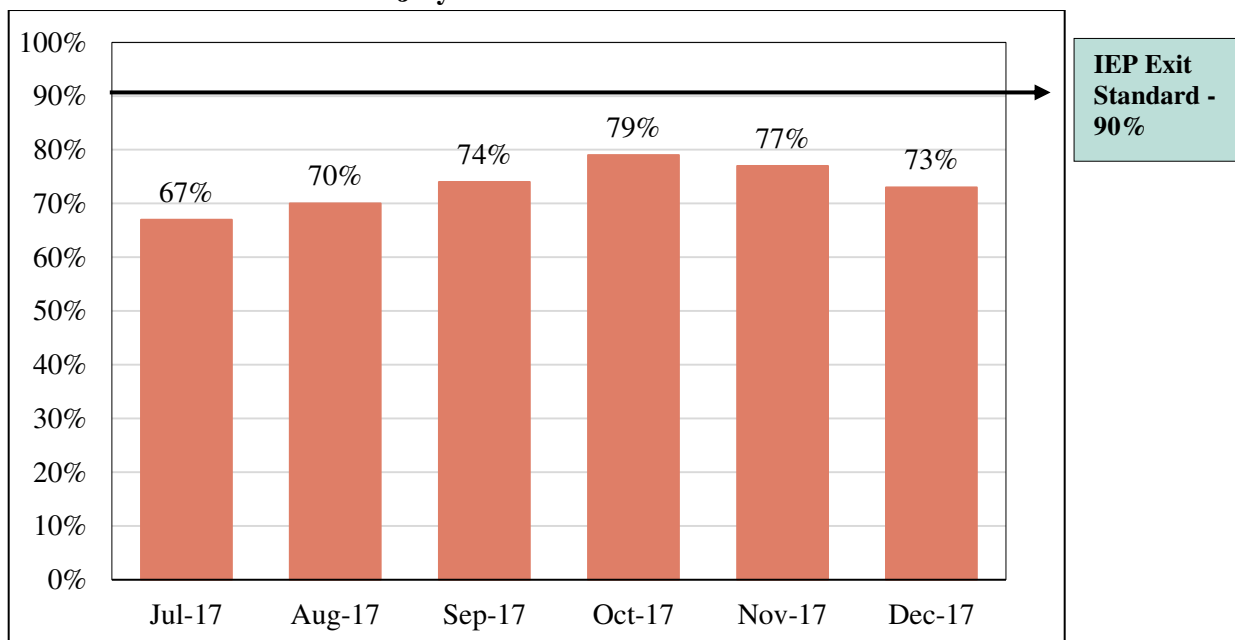
Performance for the period July 1 through December 31, 2017:

Investigations

In December 2017, there were 338 non-institutional abuse investigations completed; 246 (73%) were completed and had findings entered in FACES.NET within 35 days after receipt of the report.

As indicated in Figure 3 below, performance this monitoring period ranged between 67 and 79 percent of investigations completed timely each month, an improvement over the prior monitoring period, but still below the required performance level.¹²⁵

**Figure 3: Timely Completion of Investigations
July - December 2017**

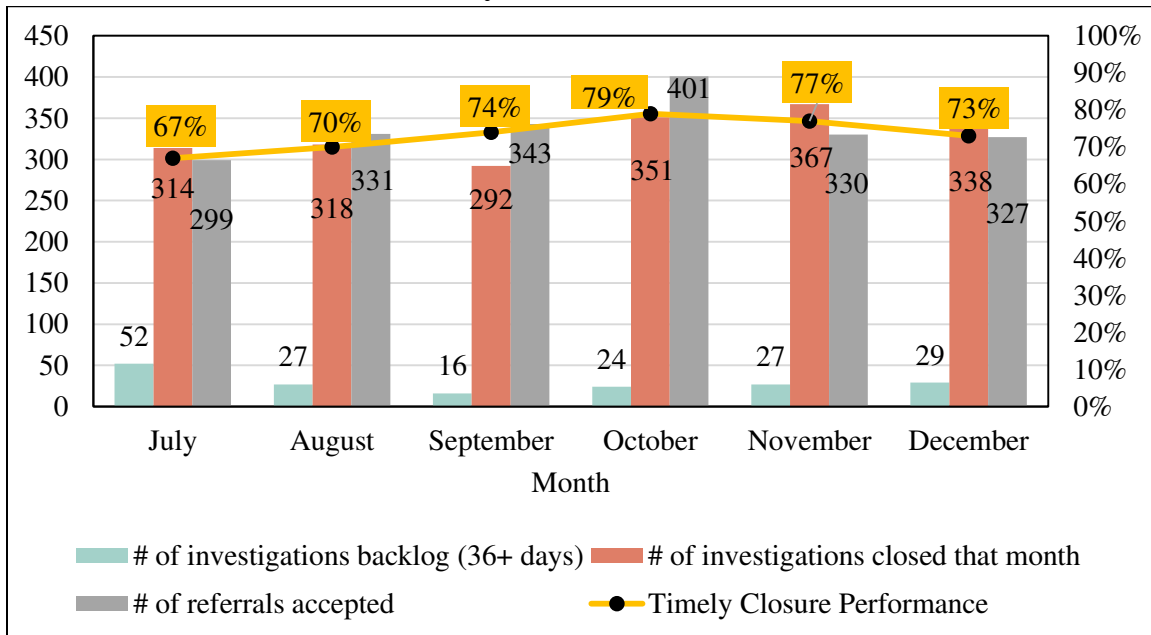


Source: CFSA Administrative Data, FACES.NET report INV004

Figure 4 shows the number of investigations accepted each month, the number of investigations closed each month, the number of investigations in backlog and the percentage of investigations completed within 35 days. Since the prior period, CFSA has reduced the number of investigations in backlog (not complete after 35 days).

¹²⁵ During this monitoring period, CFSA reports the following backlog of investigations each month not completed within 35 days: July, 52; August, 27; September, 16; October, 24; November, 27; December, 29.

**Figure 4: Investigations Accepted, Closed and in Backlog
July – December 2017**



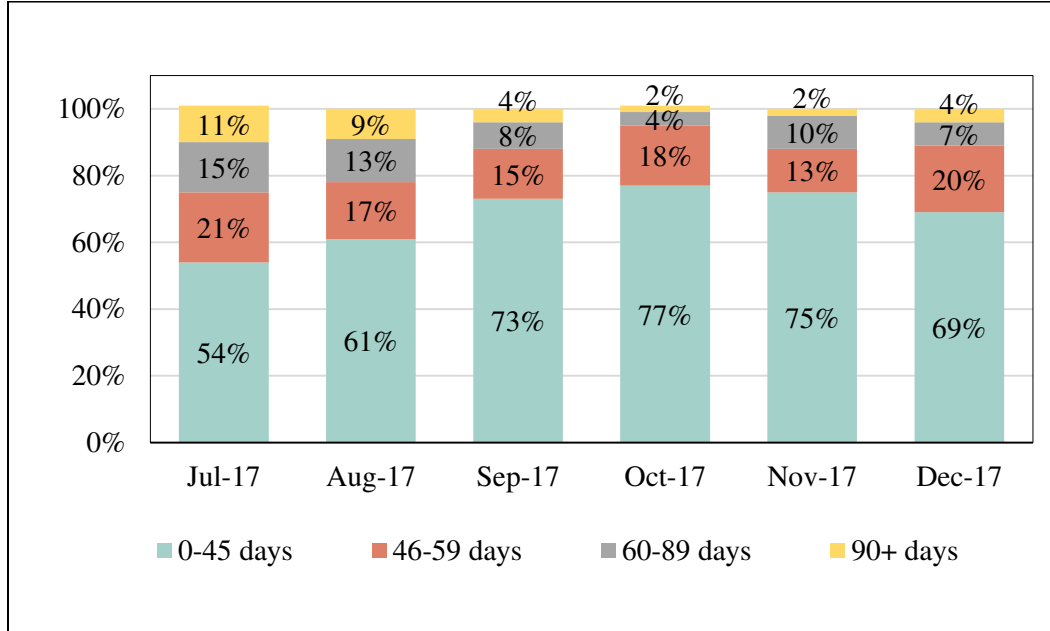
Source: CFSA Administrative Data, FACES.NET reports INT003, INV002 and INV004

Family Assessments

CFSA’s policy and practice guidance provide 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. The goals during that period are to fully assess child and family strengths and needs and link families with appropriate community services. In every FA, a safety assessment is mandatory and part of the initial response. If the safety assessment identifies immediate concerns, 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.

Between July and December 2017, a monthly range of 54 to 77 percent of FAs were completed within 45 days of referral to the Hotline (see Figure 5). Specifically, in December 2017, 330 FAs were completed and 229 (69%) were completed within 45 days of the FA referral. Completion data for the remaining FAs in December 2017 are as follows: 65 (20%) FAs were completed within 46 to 59 days; 24 (7%) FAs were completed within 60 to 89 days; and 12 (4%) FAs were completed in 90 days or longer.

**Figure 5: Timeline for FA Completion
July – December 2017**



Source: CFSA Administrative Data, FACES.NET report INV140

*Percentages may not equal 100% due to rounding

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on timely completion of investigations (IEP I.A.1.b.):

- *Entry Services will continue daily huddles, during which investigative and supportive activities are assigned to social workers and FSWs to help move the investigation toward timely closure (2017 Strategy Plan, strategy, 1.1., p.3).*

Implementation of this strategy is discussed earlier, within the timely initiation of investigation strategies.

- *By April 1, 2017, Entry Services Program Managers and Program Administrators will lead weekly 10-15 day R.E.D. Teams to ensure tasks, documentation and supervision is consistently occurring (2017 Strategy Plan, strategy 1.2, p.3).*

CFSA reports 10-15 day R.E.D. Teams meet twice a week to review progress on FAs and once a week to review investigations. CFSA completes quality assurance reviews of randomly selected R.E.D. Team meetings each month to assess attendance; level of facilitation; discussion of family history, family strengths, complicating factors; identification of specific service interventions or tangible needs the family has; and barriers to safe and timely closure. Data from CFSA's review of 39 FAs and investigations reviewed in Hotline R.E.D. Teams conducted in May and November

2017 indicate that, in most instances, facilitators are able to guide the discussion, ask appropriate questions to cover essential topics (i.e., family history, complicating factors, etc.) and ensure an equal level of participation and professional conduct by team members. The most frequently identified complicating factors in cases reviewed were domestic violence issues in the household and the family's extensive history with CFSA.

- *By April 30, 2017, Entry Services will create Response Team(s) consisting of a CPS Social Worker and Diligent Search staff to respond together to referrals and to assist with locating children and families (2017 Strategy Plan, strategy 2, p.3).*

Implementation of this strategy is discussed earlier, within the timely initiation of investigation strategies.

Quality of Investigations and Family Assessments

IEP Requirement	4. <u>Acceptable Investigations</u> : CFSA shall routinely conduct investigations of alleged child abuse and neglect that are of acceptable quality. ¹²⁶ (IEP citation I.A.2.)
Exit Standard	80% of investigations will be of acceptable quality.

Performance for the period July 1 through December 31, 2017:

Performance for this Exit Standard was not newly assessed this monitoring period. The Monitor and CFSA staff will review a statistically significant sample of investigations closed during March 2018 and performance data will be included in the next report. Plans are also underway to develop an instrument and methodology for assessing quality of FAs. This joint review will occur in 2018; the month for review has not yet been selected.

¹²⁶ 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. When a parent refuses to consent to such an evaluation, the investigative social worker and supervisor shall consult with the Assistant Attorney General to determine whether court intervention is necessary to ensure the health and safety of the child(ren); (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 on Strategy Plan:

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

- *By May 15, 2017, Entry Services in conjunction with the Child Welfare Training Academy (CWTA) will provide social workers with investigative process refresher training (2017 Strategy Plan, strategy 1.1, p.4).*

Implementation of this strategy is discussed later in the report, within the staff training strategies (Section D.2).

- *Entry Services Supervisors will continue to focus on providing clinical supervision to staff emphasizing engagement, critical thinking and collaborative decision-making (2017 Strategy Plan, strategy 1.2, p.4).*

CFSA reports that implementation of this strategy is ongoing.

- *By April 15, 2017, Entry Services Program Managers will begin reviewing at least 10 investigations per month with the Supervisors and will provide additional support and coaching to complete investigations of acceptable quality. When Entry Services is fully staffed, the number of investigations to be reviewed will increase (2017 Strategy Plan, strategy 1.3, p.4).*

CFSA provided data on the number of closed investigations and FAs each month that included documentation of a case consultation by a Program Manager. Of the approximately 8,145 closed investigations and referrals in CY2017, nine percent (764) had documentation reflecting case consultation by a Program Manager. Case consultations were occurring more frequently earlier in the year, but declined significantly in August through December 2017. In focus groups with supervisors, they reported that these reviews do not routinely occur.

- *By June 30, 2017, the Deputy Director for Entry Services will assess the policies and practices from the Family Assessment Administration and develop recommendations for improvements with timelines for implementation (2017 Strategy Plan, strategy 1.4, p.4).*

In July 2017, CFSA completed its assessment of the functioning of the FA pathway, including process and practice. There were several specific problems identified that contributed to a lack in fidelity to the DR model, such as staffing shortages, insufficient use of diligent search, challenges at the Hotline, bifurcation in Entry Services organizational structure and general confusion about FA practice itself. These, and others, have led to poor practice, with incomplete assessments that fail to incorporate a family's prior history, lack of contact with collaterals, safety concerns left unresolved at the time of FA closure and insufficiencies in timely and robust engagement with families. CFSA also found that a focus on delivery of concrete services, such as food vouchers and cribs, had replaced necessary clinical assessment and engagement.

Following this review, CFSA took several actions. The most visible change is the consolidation of investigations and FA into one administration, with one administrator and five program managers. A separate administration was created to include Hotline, Diligent Search and the Educational Neglect Triage Unit. In addition, additional staff were added to Entry Services; management oversight and supervision were increased; and training on engagement, documentation and work process were mandated for all staff.

Despite the multiple actions CFSA took, the need for improvements remain. The FA Procedural Operations Manual (POM), which provides a guide to staff on FA's conceptual framework, processes and core activities, remains in draft form after several years and has not been finalized. Worker and supervisor practice continues to reflect the need for additional coaching, clinical support and supervision. The Director has just recently made additional changes to leadership for Entry Services and the 2018 *LaShawn* Strategy Plan includes strategies to address coaching and practice issues.

- *By April 15, 2017, Entry Services will create monthly learning collaboratives for supervisors to develop both clinical and administrative skills (2017 Strategy Plan, strategy 2.1, p.4).*

CFSA created learning collaboratives, which are designed to improve clinical and administrative skills of supervisors. Collaborative sessions were scheduled for April, June, July and September 2017. The topics include *Supervision is a Distinct Professional Activity*, *Differential Response*, *Clinical Practice* and *Marijuana/THC*. CFSA reports attendance at the monthly collaboratives are mandatory for staff, however due to vacation, sick leave and required court appearances, not all supervisors have participated.

- *By May 30, 2017 Entry Services Supervisors will be required to attend all modules of Mastering the Art of Child Welfare Supervision (MACWS) training (2017 Strategy Plan, strategy 2.2, p.3).*

Implementation of this strategy is discussed later in the report, within the staff training strategies (Section D.2).

- *Beginning March 24, 2017, Agency Performance will provide individualized results of reviews using the Acceptable Investigations tool to social workers and supervisors to enhance practice and improve inter-rater reliability (2017 Strategy Plan, strategy 3, p.3).*

The purpose of this strategy is to clarify expectations for quality practice and provide direct feedback to social workers and supervisors on areas of strength in their practice and areas/skills that need improvement. CFSA reports that results from the quality review of investigations were

shared with Entry Services leadership on February 9th, March 30th and September 13, 2017. As discussed earlier, additional reviews were not conducted during the current monitoring period.

Community-Based Service Referrals for Low & Moderate Risk Families

IEP Requirement	<i>35. <u>Community-Based Service Referrals for Low & Moderate Risk Families:</u></i> (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.

Performance for the period July 1 through December 31, 2017:

The Monitor was unable to assess performance for this monitoring period. CFSA is revising the Collaborative referral data collection process based on changes to the Collaborative contracts which were not in effect the entire monitoring period. Due to data discrepancies, the Monitor cannot validate these data until the next reporting period.

Substantiated Maltreatment within Six and 12 Months following Entry Services Involvement

CFSA provided data on the number of families with closed Entry Services involvement with subsequent substantiations of abuse or neglect within six and 12 months. These data are useful to analyze and assess the effectiveness of CFSA's interaction with families and services offered and provided to prevent future abuse or neglect.

Current repeat maltreatment data for children involved in a CPS investigation is higher than the national standard¹²⁷. Specifically, of the 704 children with a substantiated investigation between January and June 2017, 65 (9%) children had a subsequent substantiated investigation within six months of investigation closure. Additionally, of the 559 children with a substantiated

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. Maltreatment in foster care is one of seven statewide data indicators and assesses of children who were victims of a substantiated maltreatment reports 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%.

investigation between July and December 2016, 87 (16%) children had a substantiated investigation within 12 months of investigation closure.

There were 2,016 children with a completed FA between January 1 and June 30, 2017; 45 (2.0%) children had a subsequent substantiated investigation within six months of FA completion. Repeat maltreatment within six months has declined from three percent the prior period. Additionally, there were 1,535 children with a closed FA between July 1 and December 31, 2016; 95 (6%) children had a substantiated investigation within 12 months of FA closure. This rate has doubled since the previous monitoring period, when the 12 month repeat maltreatment rate was 2.9 percent.

B. GOAL: PERMANENCY

1. Placement

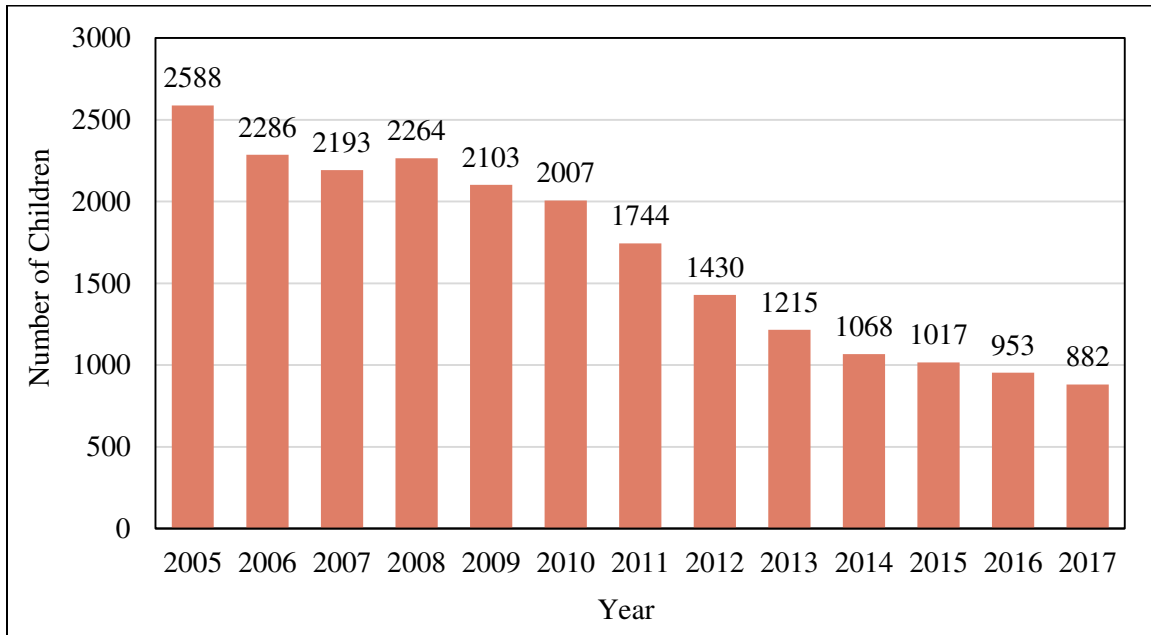
a. Placement of Children

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. The majority of children in CFSA's care are placed in family foster homes, which is a strength of the District's system. CFSA has goals to increase the percentage of these children who are placed with relatives. On the positive side, CFSA continues to meet Exit Standards related to inviting relatives to Family Team Meetings when children are at risk of or have entered foster care, placing children with their siblings, limiting use of congregate care for young children and reducing the number of multiple placements for children in care. However, data over the past several years have highlighted deficiencies in CFSA's placement processes and placement array, including children staying overnight at the CFSA office building and, most recently, an increase in the number of children who remain in emergency placements for longer than 30 days.

The discussion below provides data about children in foster care including demographic data on placement types, use of relative resources, placement with siblings, placement stability and assessments for children experiencing a placement disruption.

On December 31, 2017, the District had 882 children in foster care (see Figure 6) and 1,084 children were served in in-home child protection cases. The number of children in foster care declined dramatically from 2005 to 2014 and has continued to decline since then.

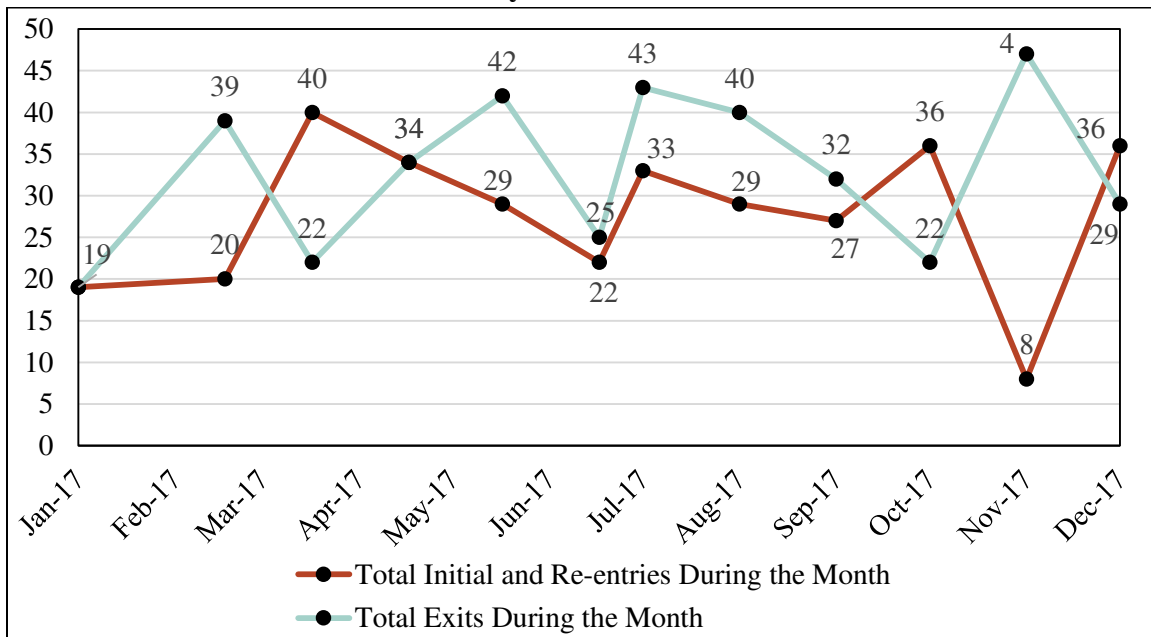
**Figure 6: Children in Out-of-Home Placements on Last Day of the Year
2005 – 2017**



Source: CFSA Administrative Data, FACES.NET report PLC156

Figure 7 shows the number of children entering (initial and re-entry) and exiting foster care each month between January and December 2017.

**Figure 7: Entries and Exits into Foster Care by Month
January – December 2017**



Source: CFSA Administrative Data, FACES.NET report PLC155 as of December 2017

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 December 31, 2017. Of the 882 children in foster care, the majority are African American (at least 90%),¹²⁸ 36 percent 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 December 31, 2017
N=882

Gender	Number	Percent*
Male	455	52%
Female	427	48%
Total	882	100%
Race	Number	Percent
Black or African American	792	90%
White	32	4%
Asian	8	1%
American Indian/Alaskan Native	1	<1%
Unable to Determine/Unknown	1	<1%
No Race Data Reported	48	5%
Total	882	100%
Ethnicity	Number	Percent
Hispanic	93	11%
Non-Hispanic	720	82%
Unable to Determine	6	<1%
Unknown	63	7%
Total	882	100%
Age	Number	Percent
1 year or less	93	11%
2-5 years	169	19%
6-8 years	116	13%
9-11 years	88	10%
12-14 years	97	11%
15-17 years	143	16%
18-21 years	176	20%
Total	882	100%

Source: CFSA Administrative Data, FACES.NET report PLC156

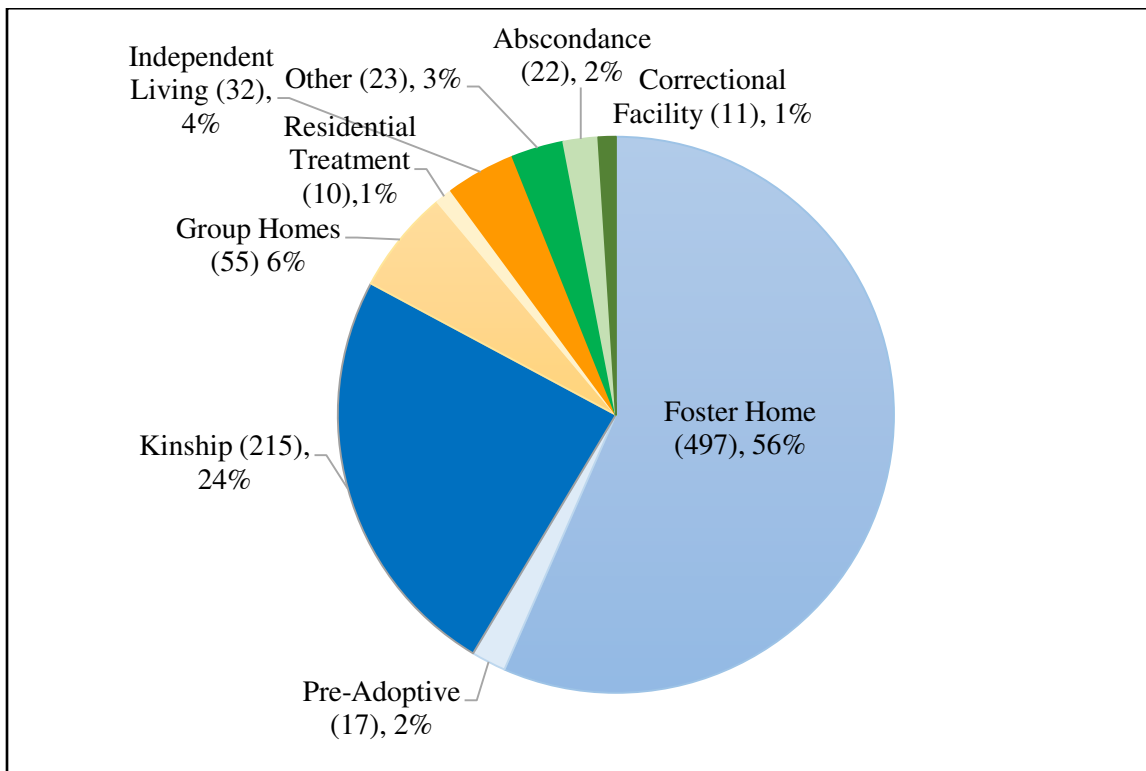
*Percentages may not equal 100% due to rounding.

¹²⁸ 5% of children had no race data reported in FACES.NET.

Placement of Children in Most Family-Like Setting

Of the 882 children in out-of-home care on December 31, 2017, 729 (83%) were placed in family-based settings, including 215 (24%) children in kinship homes. Eleven percent of children were placed in group settings, including six percent in group homes, four percent in independent living homes or facilities and one percent in residential treatment (see Figure 8).

Figure 8: Placement Type for Children in Out-of-Home Care as of December 31, 2017
N=882



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.

There are three Exit Standards pertaining to a child or youth'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.). A case record review is required to collect performance data for this measure; prior reviews conducted in March 2012, March 2013 and December 2015 all determined that CFSA's performance exceeds the required level and that more than 90 percent of children are in a family-setting or least restrictive setting to meet their needs. This standard was not reassessed this period.

The second Exit Standard, which is designated as an Outcome to be Maintained, requires that no child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days (IEP citation I.B.8.b.).¹²⁹ Between July and December 2017, there were 11 placements of youth in an emergency or short-term placement for more than 30 days.¹³⁰ For one of these placements, CFSA staff made a clinical decision that it was not in the child's best interest to move and to maintain the child in the emergency setting beyond 30 days. The Monitor was notified and agreed with this decision. Six of these placements were in an emergency foster home and the remaining placements were at Sasha Bruce Youthwork Shelter. CFSA reports that efforts were made to place each of these children in an appropriate, long-term placement, however, staff encountered challenges due to the service needs related to the mental health or behavioral status of the youth. Current performance does not meet the Exit Standard, although, CFSA had previously been in compliance with this Exit Standard since the July through the December 2016 monitoring 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 and December 2017, two children experienced overnight stays in the CFSA office building. Both overnight stays occurred in October 2017 and involved older youth with reported mental health and behavioral challenges, underscoring the importance of CFSA's current work to expand specialized placement and treatment resources. This Exit Standard continues to be unmet.

Placement of Young Children

The IEP specifically 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.¹³¹ 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.

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 and December 2017, three children under age 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.

¹²⁹ 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.

¹³⁰ These 11 placements involved 9 youth; 2 youth experienced 2 emergency placements for over 30 days.

¹³¹ 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.

The IEP requires that no child under the age of six be placed in group care, non-foster home settings without appropriate justification (IEP citation I.B.9.b.). During the current monitoring period, one child under the age of six continued long-term placement in a hospital setting. CFSA and Monitor staff reviewed the circumstances of this placement and confirmed that the child has specialized needs that required placement in that setting.

Performance on Strategy Plan:

CFSA has employed the following strategy to increase performance on completion of assessments for children experiencing placement disruptions and decrease the use of CFSA as an overnight placement for children (IEP I.B.8.b. & I.C.21.):

- *CFSA will implement its Temporary Safe Haven Redesign Plan as described in RFP No. DCRL-2017-R-0051 (2017 Strategy Plan, p.9).*

The Temporary Safe Haven Redesign (TSHR) is comprised of four major components – first, transitioning from multiple to a single Maryland child placing agency for children placed in foster care in Maryland; second, improving foster parent support; third, enhancing the placement array; and fourth, improving placement matching. In early 2017, CFSA issued a Request for Proposals to contract with a single provider and used this process to clarify expectations and strengthen and implement a consistent practice model to improve results. Beginning in CY2018, both the MD provider and CFSA will offer financial performance incentives to foster parents for children’s placement stability and permanency.

During this current monitoring period, CFSA’s efforts were focused on selection of NCCF as the single MD provider and transitioning foster parents, children and staff accordingly. The transition process was largely a success, with most foster parents’ licenses and homes transitioned prior to December 31, 2017 and fewer than 20 children and youth out of the more than 400 who were directly impacted experiencing an initial placement disruption as a result of the provider changes. CFSA staff demonstrated focus and exemplary planning and execution during this process. Work remains in 2018 for completion of the other three components of the TSHR and for CFSA to effectively monitor performance by NCCF in meeting the goals, practice expectations and requirements of the contract.

b. Relative Resources

CFSA works to support familial ties for children through early identification of family members, temporary emergency licensure support and striving to make a kinship home the first placement for children upon entering care. As of December 31, 2017, 24 percent of children and youth in out-of-home care were living with relatives; the percentage of children and youth placed with kin has

remained unchanged for the last several monitoring periods.¹³² CFSA's Kinship Support Unit is responsible for many of these efforts and coordinates Family Team Meetings (FTMs) as soon as CFSA is involved with a family where a child is at risk of out-of-home placement. As a matter of policy, CFSA requires a referral to the Diligent Search Unit to locate parents, grandparents and other relatives at the same time a FTM referral is made. It is CFSA's practice, and a requirement of the IEP, to identify family members 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.¹³³

Both Exit Standards applicable to identification and use of relative resources are designated as Outcomes to be Maintained and performance was maintained during this period (IEP citations I.B.7.a.&b.). Specifically, between July and December 2017, of the 78 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 75 (96%) cases. Additionally, of the 91 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate and invite known relatives to the FTM in 90 (99%) cases. 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.

This monitoring period, CFSA engaged in a "FTM revamp", switching from the R.E.D. Team framework back to the original FTM design. The revamp included a re-orientation by the FTM program manager and supervisors to the FTM approach and training staff on group facilitation and coordination. Program managers and supervisors also shadowed and coached frontline staff throughout the fall on facilitating FTMs. Beginning in October 2017, CFSA provided FTM surveys to participants. Agency staff will be reviewing these survey results to identify opportunities to improve their practice. Further, beginning in the next monitoring period, CFSA has decided in addition to pre-removal FTMs, staff will convene FTMs six months after a child's removal to assess case planning and progress toward permanency.

c. Sibling Placements and Visits

Maintaining connections to siblings when children enter foster care mitigates some of the trauma of separation children experience and can help children sustain their critically important lifelong connections and supports. CFSA promotes sibling relationships by placing siblings together and ensuring regular visitation if they are placed apart. CFSA continued to meet the Exit Standards

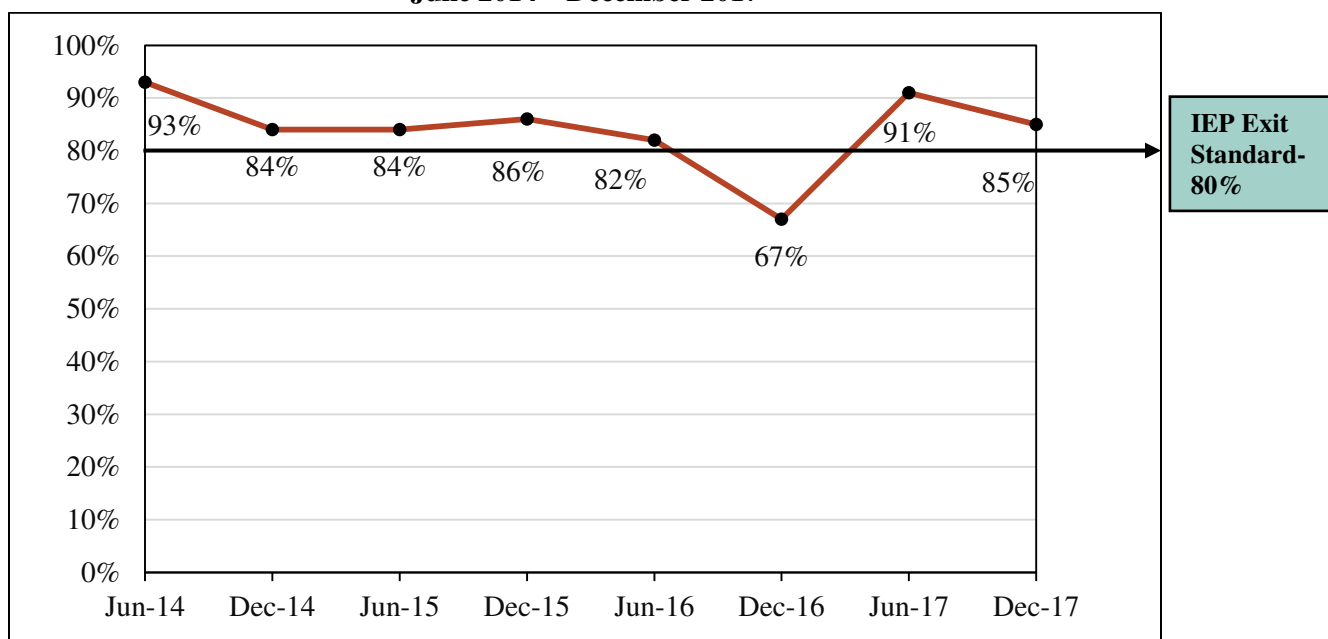
¹³² The percentage of children and youth placed with kin has ranged from 20 to 25% since June 30, 2015.

¹³³ 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.

related to frequency of visitation between siblings if they are placed apart (IEP citation I.C.20.b.) and placement of siblings together (IEP citation I.C.20.a.).

As of December 31, 2017, of the 73 applicable children¹³⁴ who entered foster care between July and December 2017 with their siblings or within 30 days of their siblings, 85 percent (62 children) were placed with some or all of their siblings.¹³⁵ Performance continues to exceed the required Exit Standard (see Figure 9).

**Figure 9: Children Placed with Siblings who Entered Foster Care Together or within 30 Days of Their Siblings
June 2014 – December 2017**



Source: CFSA Administrative Data, FACES.NET report PLC251

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 and December 2017, a monthly range of 83 to 93 percent of siblings had at least monthly sibling visits and a range of 72 to 89 percent of siblings each month had at least twice monthly visits with their brothers and/or sisters. Performance on twice monthly visits fell one percent below the required standard in October 2017 and three percent below in December 2017. The Monitor currently considers these deviations to be insubstantial.

¹³⁴ There were 4 children who were either in runaway status, a correctional facility or hospital who were excluded from the analysis as placement with a sibling was not possible.

¹³⁵ CFSA also provided data for all children in care at a point in time (not limited to those who entered care between July and December 2017) for this Exit Standard. As of December 31, 2017, 74% 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.

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 and performance continued to meet the required levels during this monitoring period.

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 July and December 2017, CFSA's performance ranged monthly from 83 to 87 percent, continuing to meet the required level for this sub-part of the standard.

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 July and December 2017, monthly performance for this sub-part ranged from 59 to 67 percent¹³⁶. Performance declined during the period, dipping slightly below the standard during one month; the Monitor considers this an insubstantial deviation.

The third sub-part focuses on children in care 24 months or longer, and is purposely 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 percent have two or fewer placements in that 12 month period. Performance remained above required levels this monitoring period, ranging monthly from 77 to 81 percent.

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, his/her family, kin, current and former caregiver and GAL (IEP citation I.C.21.). This Exit Standard is designated as an Outcome to be Achieved.

¹³⁶ Monthly performance for children in care 12 to 24 months with 2 or fewer placements are as follows: July, 67%, August, 64%; September, 64%; October, 63%; November, 62%; December, 59%.

In October 2016, CFSA began convening Placement Disruption Staffings when a child was at risk of a placement disruption or required a change in placement. These staffings include the child's social worker, Resource Development Specialist from CFSA's Placement Unit, the placement provider and other members of the child's team. The purpose of the staffing is to determine what supports and services can be put in place to stabilize a child's placement and prevent disruption, or if a disruption occurred, to assess the child's needs and determine the most appropriate placement and supports to meet the child's needs and plan for future stability. Data and information provided to the Monitor this period on this requirement were insufficient to validate completion of appropriate assessments and staffings.¹³⁷ The Monitor is working with CFSA to collect necessary information for the next monitoring period.

Although data for reporting performance on this measure were not available, CFSA provided data on the number of placement disruptions that occurred each month. Between July and December 2017, a monthly range of 10 to 30 children^{138,139} experienced a placement disruption, which is similar to the number of monthly disruptions between January and June 2017 (12 to 27 children's placements).

2. 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 certain permanency planning processes including, for example, timely filing and resolution of a motion to terminate parental rights and making reasonable efforts to finalize adoptions within 12 months of placement in an adoptive home. However, as discussed in more detail in this section, CFSA continues to struggle overall to achieve outcomes of timely exit to permanency for children in out-of-home placement.

b. Timely Adoption and Permanency

There are a number of Exit Standards that track processes designed to facilitate timely achievement of permanency goals 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.)

¹³⁷ The Monitor reviewed documentation for 2 to 4 randomly selected placement disruptions each month to verify assessment and staffing dates and assessment quality. In a number of cases reviewed, either the dates provided were unable to be verified or assessments were inaccurately completed.

¹³⁸ The number of reported disruptions each month are as follows: July, 10; August, 22; September, 21; October, 22; November, 30; December, 19.

¹³⁹ Children may experience more than one disruption a month.

- 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.¹⁴⁰ There is one current applicable Exit Standard to measure this outcome (IEP citation I.B.16.a.i.)¹⁴¹ and although designated as an Outcome to be Maintained, CFSA did not maintain required performance during the previous monitoring period. Performance, however, improved during the current monitoring period.

From July through December 2017, 33 (83%) of the 40 eligible children were placed in an approved adoptive placement by the end of the ninth month from the goal change. This performance is a marked improvement over previous monitoring periods.¹⁴²

In an effort to understand and improve permanency outcomes, CFSA reviewed their business processes for adoption. Based on this review, the Agency noted that there were delays in obtaining information from the courts when a child's goal becomes adoption. CFSA reports working with the courts to have immediate notice of a child's goal change sent directly from court to CFSA's recruitment unit (rather than relying on reviewing a FACES.NET report). Thus, recruitment efforts are able to begin as soon as possible after a goal change. The Monitor considers this Exit Standard to be maintained.

Reasonable Efforts to Finalize Adoptions

CFSA is required to ensure that 90 percent of children are 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 through December 2017, 93 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, CFSA reports that 54 adoptions were finalized during this monitoring period. Of those 54, 29 cases were finalized within 12 months and CFSA, through a case review,

¹⁴⁰ 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.

¹⁴¹ 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.

¹⁴² Performance for the monitoring periods January through June 2016 was 76%, July through December 2016 was 68% and January through June 2017 was 65%.

confirmed that reasonable efforts were made to finalize adoptions within 12 months for an additional 21 children whose adoptions took longer to complete.

Timely Permanency

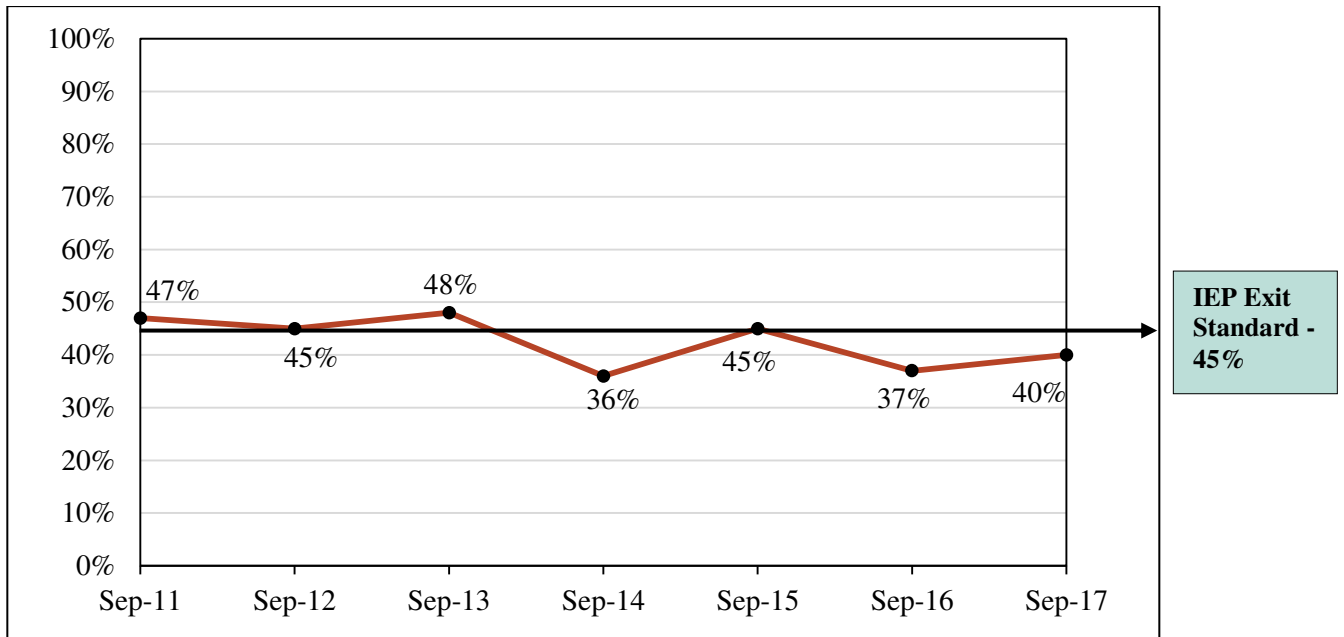
IEP Requirement	32. <u>Timely Adoption</u> : Timely permanency through reunification, adoption or legal guardianship. (IEP citation I.B.16.c.)
Exit Standard	<ul style="list-style-type: none"> i. Of all children who entered foster care for the first time in FY2016 and who remain in foster care for 8 days or longer, 45% will achieve permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2017. ii. Of all children who are in foster care for more than 12 but less than 25 months on September 30, 2016, 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2017. iii. Of all children who are in foster care for 25 months or longer on September 30, 2016, 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2017, whichever is earlier.

Performance for the period September 30, 2016 through September 30, 2017:

The IEP requires timely exits for children to a permanent family through adoption, guardianship or reunification. The Exit Standard, designated as 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 with annual fiscal year data and is reported most recently as of September 30, 2017 (see Figures 10, 11 and 12 below).¹⁴³ Also provided for information purposes are preliminary data through December 2017, the first quarter of the new fiscal year.

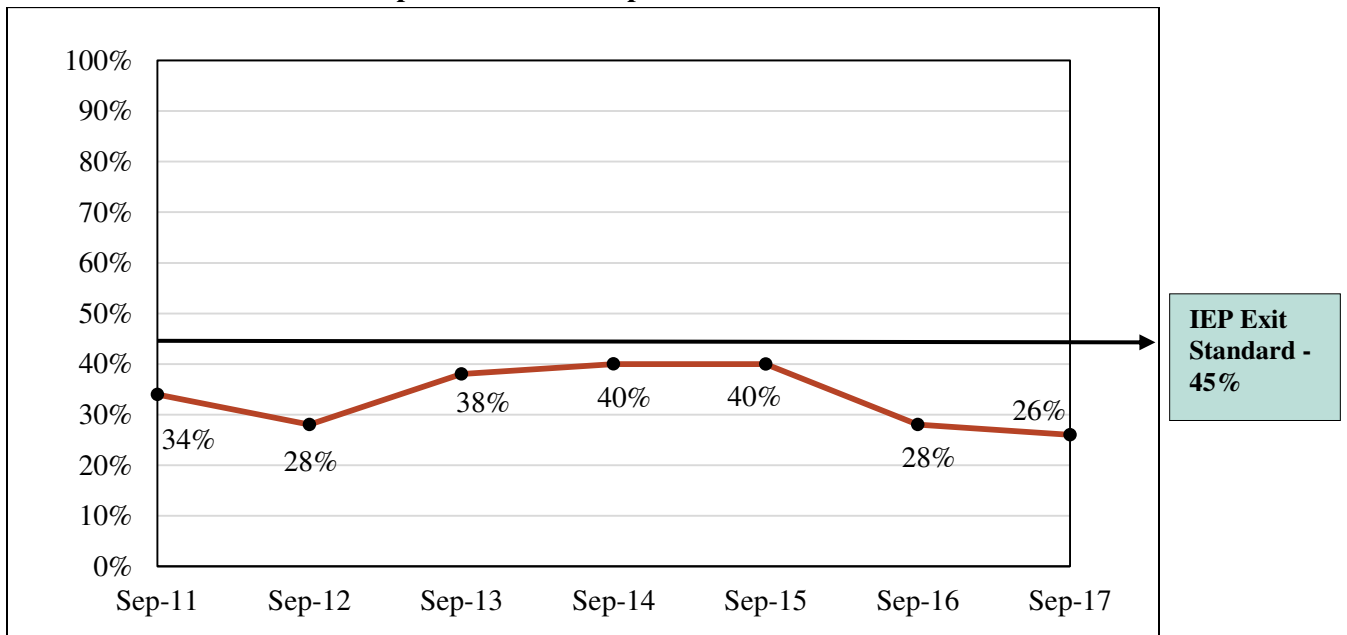
¹⁴³ These data were available and included in the prior monitoring report.

**Figure 10: Timely Permanency for Children in Care between 8 days and less than 12 months
September 2011 – September 2017**



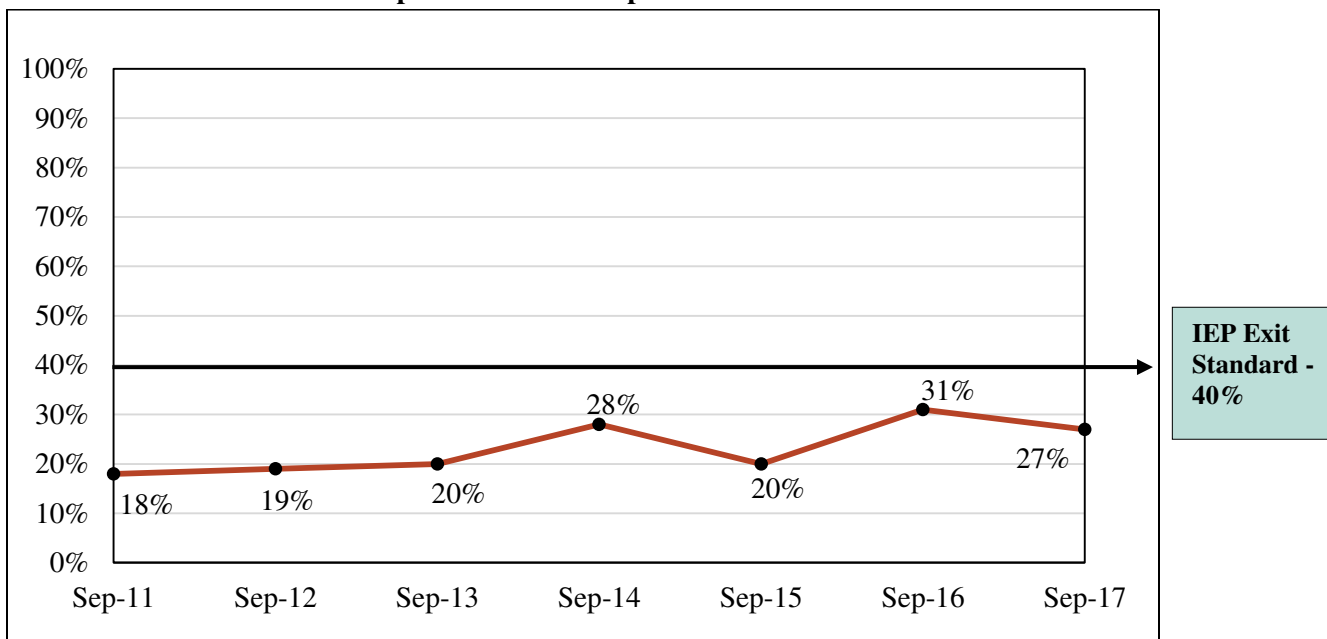
Source: CFSA Administrative Data, FACES.NET report CMT384

**Figure 11: Timely Permanency for Children in Care More Than 12 and less than 25 months
September 2011 – September 2017**



Source: CFSA Administrative Data, FACES.NET report CMT385

**Figure 12: Timely Permanency for Children in Care for 25 months or longer
September 2011 – September 2017**



Source: CFSA Administrative Data, FACES.NET report CMT385

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

Of the 302 children who entered foster care in FY2016 and remained in foster care for eight days or more, 121 (40%) exited to positive permanency by September 30, 2017 (see Figure 10 and Table 7). This performance is a slight improvement (3%) over FY2016 performance but below the Exit Standard requirement of 45 percent.¹⁴⁴ Almost all of these children achieved permanency through reunification.

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

Of the 264 children who were in care more than 12 months and less than 25 months on September 30, 2016, 69 (26%) achieved positive permanency by September 30, 2017 (see Figure 11 and Table 7). Similar to previous monitoring periods, performance for this sub-part remains substantially below 45 percent as required by the IEP.¹⁴⁵

¹⁴⁴ Although partial year data, as of December 31, 2017, FY2018 performance for this cohort was 22%. CFSA had this same level of performance for FY2017 in December 2016 and did not meet the Exit Standard by September 2017. Thus, CFSA will need to increase performance over the next nine months to achieve this sub-part.

¹⁴⁵ As of December 31, 2017, FY2018 performance for this cohort was 10%, a marked improvement as compared to FY2017 performance of 5% in December 2016.

Timely Permanency for Children in Care for 25 months or longer

For the 389 children who had been in care 25 or more months on September 30, 2016, 105 (27%) achieved permanency by September 30, 2017 (see Figure 12 and Table 7). Similar to previous monitoring periods, performance for this sub-part remains substantially below the performance level required by the Exit Standard (40%) and represents a decline in performance from FY2016.¹⁴⁶

Table 7: Children and Youth Exiting to Permanency by Cohort as of September 30, 2017

Length of time in out-of-home care during FY2016	Total number of children/youth in cohort	Exit to Reunification	Exit to Guardianship – Kin	Exit to Guardianship – NonKin	Adoption	Total Exits to Permanency by September 30, 2017
8 days – 12 months	302	114 (38%)	0 (0%)	2 (1%)	5 (2%)	121 (40%)
12 – 24 months	264	35 (13%)	8 (3%)	4 (2%)	22 (8%)	69 (26%)
25 months or more	389	20 (5%)	4 (1%)	14 (4%)	67 (17%)	105 (27%)

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

*Percentages may not equal 100% due to rounding.

CFSA continues to struggle to support children and youth in reaching timely permanency. This monitoring period, CFSA instituted a review process, known as AdoptionSTAT, for all cases with a goal of adoption. Each Monday and Wednesday, 30 minute AdoptionSTAT reviews are now held with social workers, supervisors, lawyers, program managers and other key stakeholders to review adoption cases and provide clinical consultation to determine next steps to expedite permanency. Cases that require additional support are presented to the multidisciplinary team again at a 30 day follow-up.

CFSA has captured trends across cases to better identify systemic barriers and practice concerns and is using this information to inform practice change efforts. During this period, CFSA reviewed 202 cases with the goal of adoption and identified 17 distinct barriers, including delays in finalizing court reports, obtaining background clearances and completing adoption home studies. In

¹⁴⁶ As of December 31, 2017, FY2018 performance for this cohort was 9%; below CFSA's FY2017 performance of 12% for this cohort in December 2016.

December 2017, CFSA reports that the effort has been productive; they have been able to address some barriers and the data show improvement. The average length of time to finalize an adoption decreased from 44 months in FY2016 to 32 months in FY2017. CFSA reports needing more time to understand and address three specific barriers – court delays, recruitment of adoptive homes and issues with adoption subsidy payments. The AdoptionSTAT review will reoccur every six months for cases with the goal of adoption that have not been resolved. CFSA intends to continue using the AdoptionSTAT process as a continuous quality improvement activity.

Beginning in November 2017, CFSA began using a similar review process for cases with the goal of guardianship. The GuardianshipSTAT process will review all 183 children with a goal of guardianship. Data provided by CFSA indicate that as of December 31, 2017, of these 183 children, 109 children had an identified guardian and 74 children did not have an identified guardian although their permanency goal was guardianship.

Both of these review processes have provided CFSA with a business process to organize consistent review of children's progress toward permanency. Further, CFSA appears to have a stronger understanding of the systemic barriers to permanency. The Monitor views this as a significant step in CFSA's efforts to improve permanency outcomes for children and youth.

Performance on Strategy Plan:

CFSA identified the following strategy to support timely permanency efforts (IEP 1.B.16.c):

- *CFSA is working with Casey Family Programs to develop targeted strategies to improve permanency outcomes. By May 31, 2017, CFSA will incorporate the targeted strategies into the Strategy Plan (2017 Strategy Plan, p.8)*

This strategy was not pursued. Instead, as described above, CFSA has identified barriers through its AdoptionSTAT process. Similarly, CFSA will be using a GuardianshipSTAT process to analyze barriers to timely permanency for children and youth with the goal of guardianship.

Further, in October and December 2017, CFSA leadership and staff had initial meetings with consultants from Chapin Hall to understand and analyze its permanency data. The purpose of these initial meetings was to explore designing a measurement system focused on permanency outcomes (not processes) that is meaningful to social workers and supportive of management accountability.

3. 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 any additional 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.)¹⁴⁷ and worker visits to families with in-home services (IEP citation I.A.4.a.&b.).¹⁴⁸ 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 92 to 97 percent of children were visited at least monthly¹⁴⁹ and 89 to 95 percent of children were visited twice during the month by a social worker.¹⁵⁰ Between July and December 2017, 92 to 95 percent of families receiving in-home services were visited monthly by a social worker¹⁵¹ and 89 to 93 percent of families received at least two visits by a social worker during the month.¹⁵²

There are six visitation Exit Standards which remain to be achieved. Three of these measures pertain to workers assessing for safety during visits with children; these measures were not newly assessed this period, performance data will be included in the next monitoring report. Performance on the final three visitation Exit Standards – frequency of visits 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 – each declined this period.

¹⁴⁷ 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.

¹⁴⁸ 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.

¹⁴⁹ Monthly performance data for monthly out-of-home worker visits are as follows: July, 97%; August, 97%; September, 94%; October, 95%; November, 94%; December, 92%.

¹⁵⁰ Monthly performance data for twice monthly out-of-home worker visits are as follows: July, 95%; August, 95%; September, 92%; October, 93%; November, 92%; December, 89%.

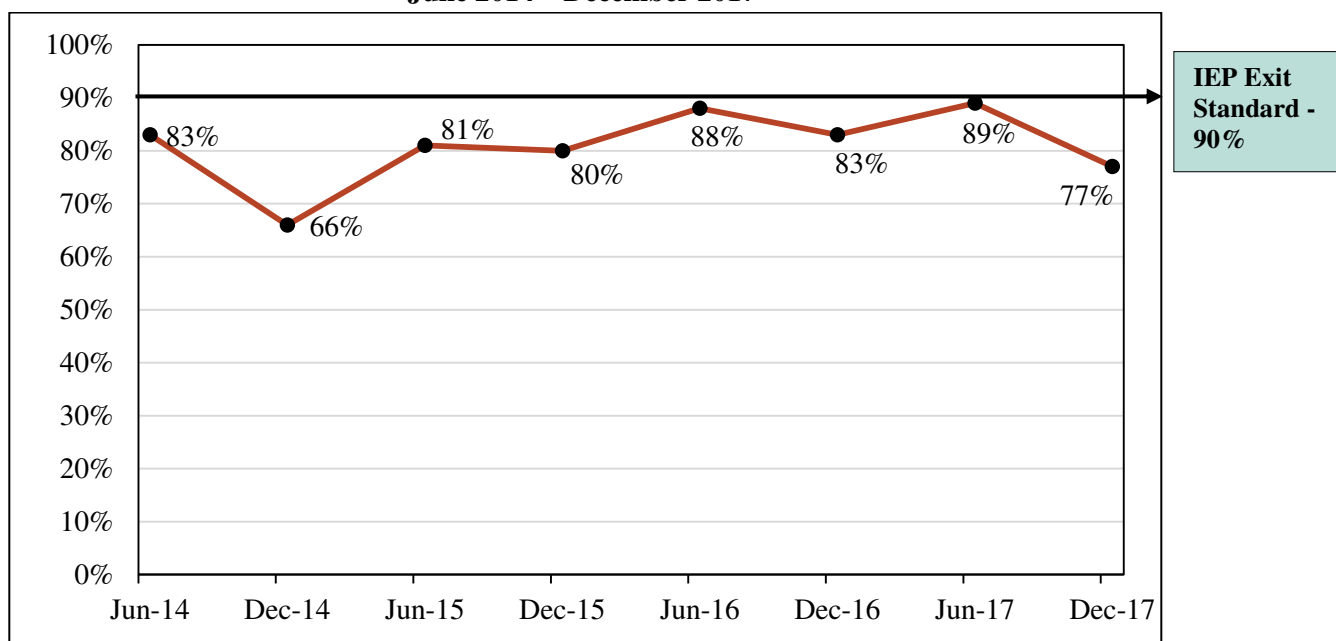
¹⁵¹ Monthly performance data for monthly in-home worker visits are as follows: July, 93%; August, 95%; September, 92%; October, 94%; November, 94%; December, 92%.

¹⁵² Monthly performance data for twice monthly in-home worker visits are as follows: July, 90%; August, 93%; September, 91%; October, 93%; November, 92%; December, 89%.

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 style="text-align: right;">(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 2014 – December 2017**

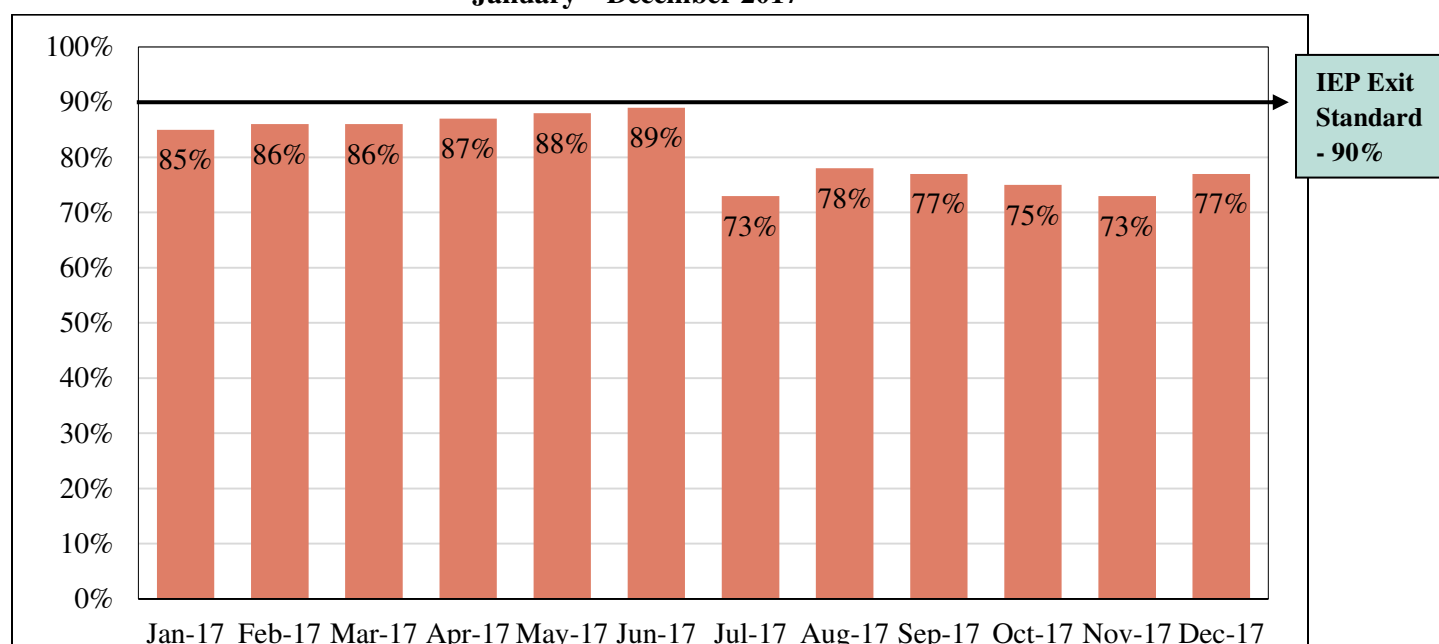


Source: CFSA Administrative Data, FACES.NET report CMT014

Performance for the period July 1 through December 31, 2017:

During the month of December 2017, there were 93 individual child placements applicable to this measure; 72 (77%) 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 (see Figure 13). Between July and December 2017, monthly performance ranged between 73 and 78 percent of children who were newly placed or experienced a placement change had the required number of visits, a significant decline from January through June 2017 when monthly performance ranged from 85 to 89 percent (see Figure 14).

**Figure 14: Required Number of Worker Visits to Children in New Placements
January – December 2017**



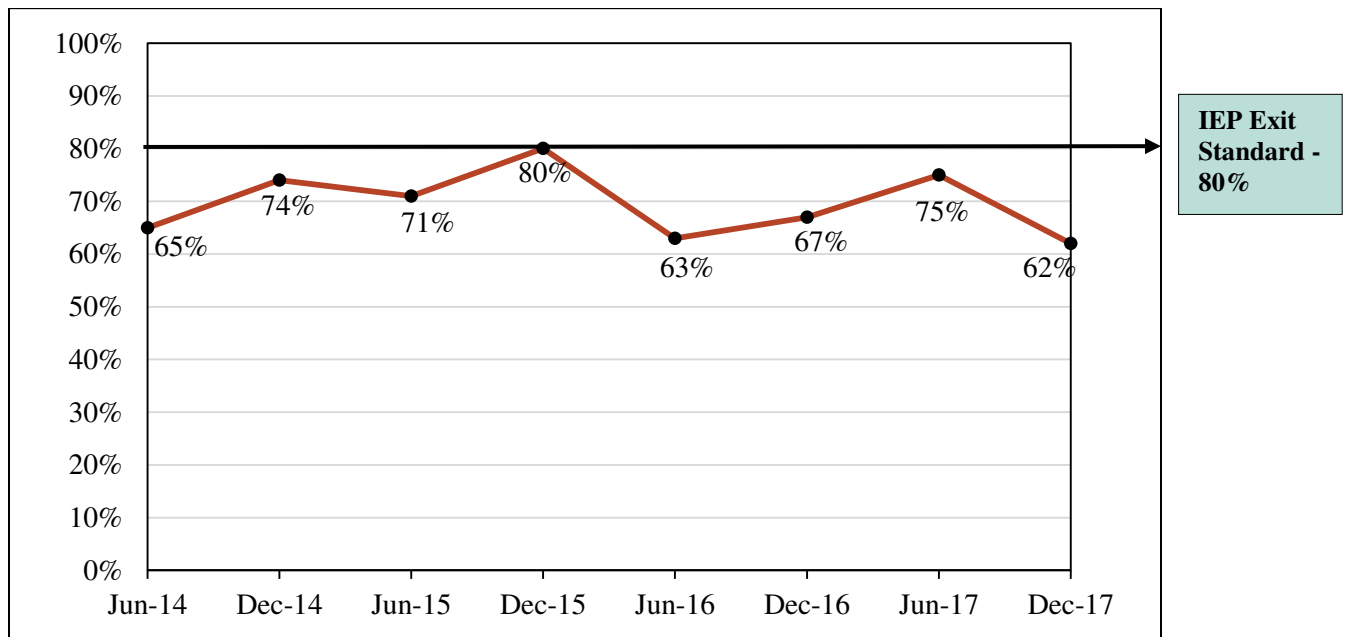
Source: CFSA Administrative Data, FACES.NET report CMT014

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 the social worker and the resource parent to determine what, if any, assistance is needed from the agency. Data for this subpart of the measure were not collected this period. Performance will be assessed and reported in the next monitoring period.

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.¹⁵³</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 style="text-align: right;">(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 2014 – December 2017**



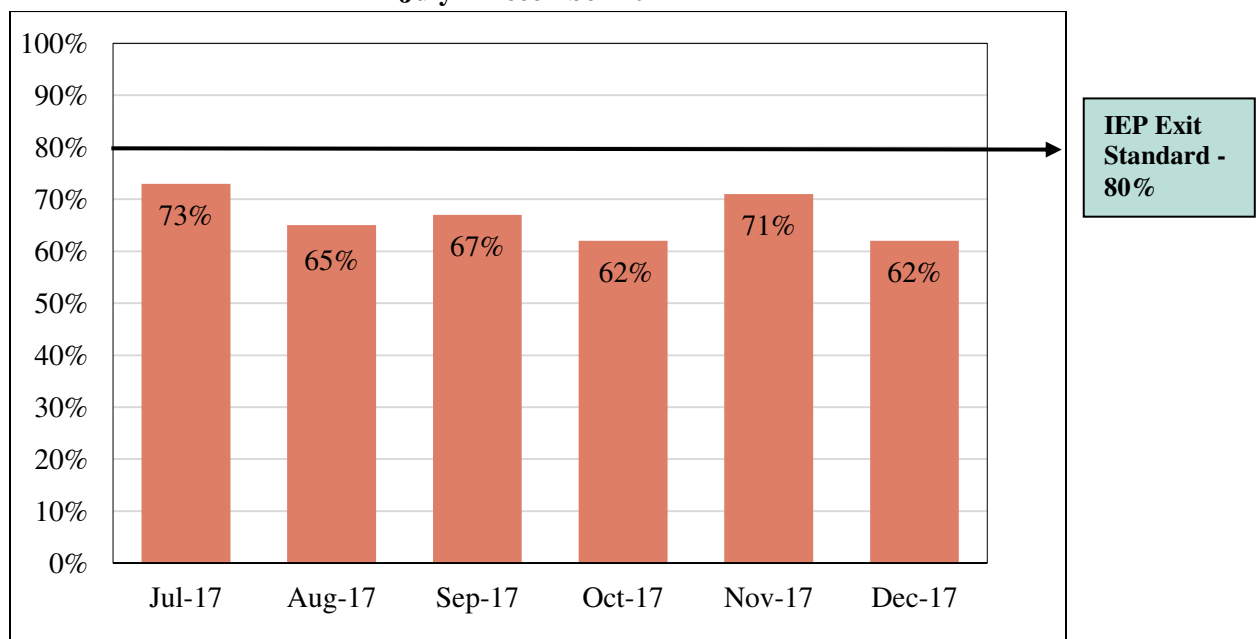
Source: CFSA Administrative Data, FACES.NET report CMT267 and findings from CFSA internal audit of missed visits efforts

¹⁵³ 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 through December 31, 2017:

In December 2017, there were 39 households of children with a goal of reunification applicable to this measure; parents in 19 (49%) households received two worker visits each month and in five (13%) households, there was documentation in the record that the parent was unavailable or refused to cooperate despite agency efforts; total compliance for this measure is 62 percent for the month (see Figure 15). Between July and December 2017, monthly performance on this measure ranged between 62 and 73 percent (see Figure 16). CFSA's performance did not meet the required level any month this period; this Exit Standard remains to be achieved.

**Figure 16: Households with Twice Monthly Visits
between Workers and Parents with Goal of Reunification
July – December 2017**

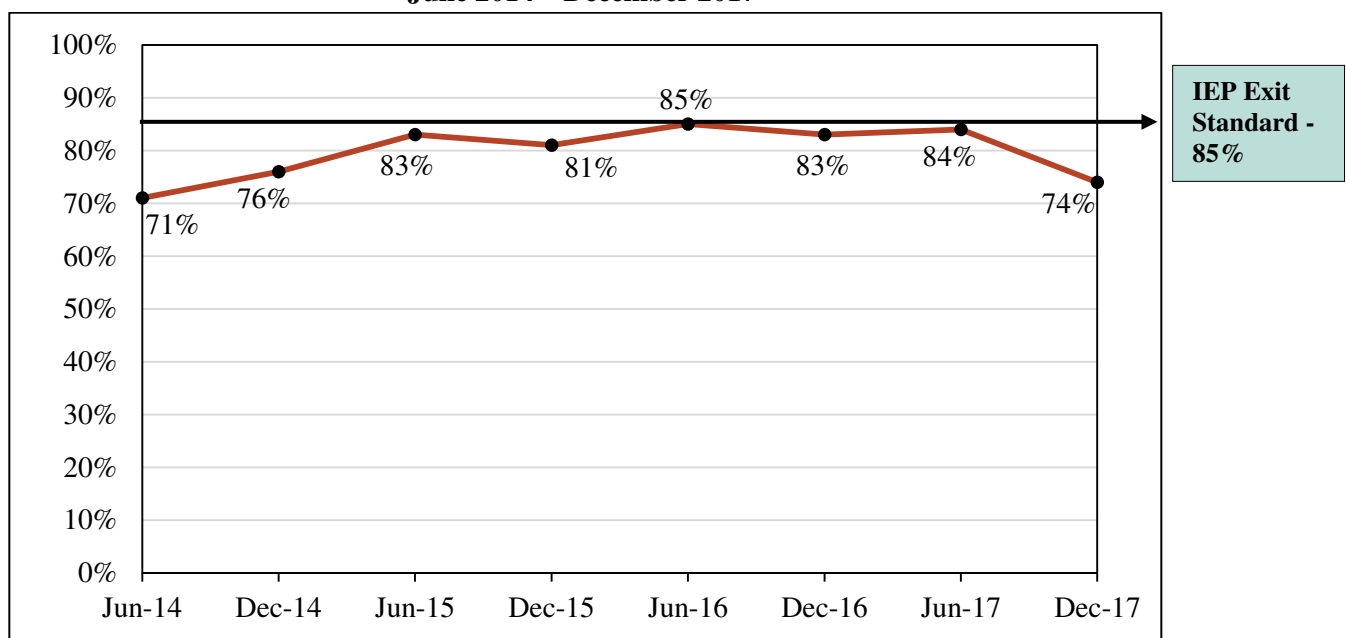


Source: CFSA Administrative Data, FACES.NET report CMT267 and findings from internal audit of missed visits efforts

Visits between Parents and Children

IEP Requirement	<p>19. <u>Visits between Parents and Children</u>: 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.¹⁵⁴</p>

**Figure 17: Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought
June 2014 – December 2017**



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

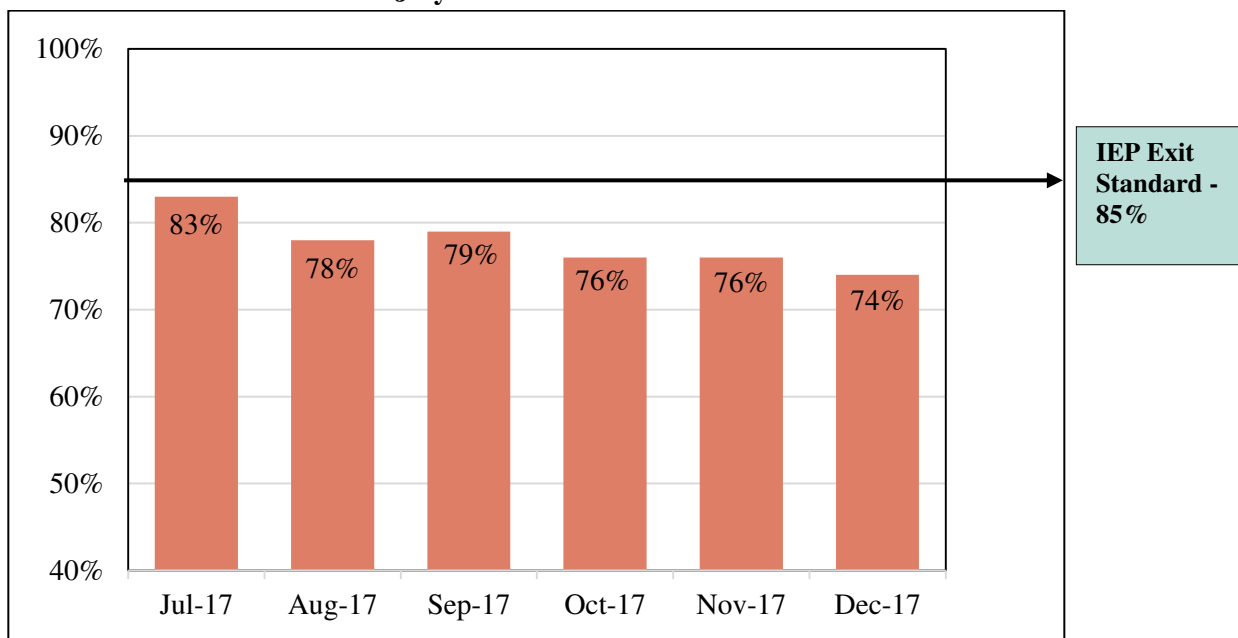
Performance for the period July 1 through December 31, 2017:

In December 2017, 380 children were applicable to this measure; 218 (57%) had weekly visits with the parent with whom reunification is sought and for 63 (17%) children, there was

¹⁵⁴ 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.

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; total compliance for this measure was 74 percent. During this monitoring period, performance declined most months from 83 percent in July 2017 to 74 percent December 2017 (see Figure 18). CFSA's performance remains below the required target.

**Figure 18: Children with Goal of Reunification who Visit Weekly with the Parent with whom Reunification is Sought
July – December 2017**



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

Performance on Strategy Plan:

CFSA developed four strategies to increase performance on visitation requirements that had not been achieved (IEP I.A.4.c., I.A.5.d., I.A.6.a-e., I.A.10&11.). These strategies include:

- *Based on its ongoing reviews, Agency Performance will continue to provide feedback and guidance to CFSA and Provider staff on appropriate and acceptable actions and documentation for assessing safety that includes health, educational and environmental factors. In addition, the template designed by Agency Performance to provide a standardized documentation format on safety assessments is being reviewed by the Deputy Directors and will be implemented by May 1, 2017 (2017 Strategy Plan, strategy 1.1, p.7).*

The Monitor reviewed a copy of CFSA's Safety Assessment Tip Sheet, which includes a template with domains that should be assessed by workers during visits between social workers and children including physical environment, health and education. Documentation reviewed during the case record review in June 2017 reflected that the template is widely used by workers, however,

information entered into the template is not consistently updated to reflect that all necessary topics were discussed or assessed during the current worker visit. Some cases showed language that was “cut and pasted” from prior visits. Additional planned ongoing reviews were not completed between July and December 2017. CFSA is currently exploring alternative processes and methodologies to document and review workers assessment of safety during visits with children.

- *Beginning May 8, 2017, Program Operations, Private Agencies and Community Partnership Program Managers will focus on coaching and mentoring supervisors to improve frontline practice of social workers by providing a structured set of core elements, including safety plans and assessments, to be implemented during individual and group supervision (2017 Strategy Plan, strategy 1.2, p.7).*
- *By April 17, 2017, Program Operations and Community Partnerships will develop a weekly visitation accountability process to track and enhance performance and identify individual workers and/or supervisory units who need additional support. At the end of every month, a “missed visit efforts” report will be submitted to Agency Performance for audit (2017 Strategy Plan, strategy 1, p.8).*
- *Beginning May 15, 2017, Entry Services and Community Partnerships will implement a new case transfer process that allows In-Home Social Workers to engage more rapidly with families and ensure a joint home visit occurs within the first 20 days of the Family Assessment being initiated or within 30 days of the Investigation being initiated (2017 Strategy Plan, strategy 2, p.8)*

Two of the three strategies listed above focus on increased supervision and accountability mechanisms to strengthen case practice and identify workers who need additional support. The third concerns the timely transfer of families from Entry Services to in-home services, with a goal of improving visitation frequency and quality of social work interventions. Implementation of these strategies began in April and May 2017 and the Monitor anticipated performance data for July through December 2017 would reflect improvement. However, as discussed earlier in this section, performance for these Exit Standards (still not yet achieved) declined during the current monitoring period. The Monitor cannot determine whether the lack of progress reflects inconsistent implementation of these strategies or if the strategies themselves were inadequate. CFSA believes and reports positive advances will occur as a result of continued implementation of these strategies.

4. 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 practice in real-time, which is key to understanding and improving system performance. In order to achieve acceptable case practice in areas of planning and service provision that will lead to behavior change, reduced risk, improved safety and increased parental capacity, CFSA must consistently engage families, have accurate functional assessments¹⁵⁵ and team 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 implementation of appropriate supports to ensure 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 – case planning and provision of services (IEP citations I.A.3. & I.B.17.) – are measured through QSRs. Data have consistently highlighted inconsistencies in practice across CFSA administrations (Permanency and Community Partnerships) and in private agencies under CFSA contract. Over the past year, data show improvements in practice within Community Partnerships and a decline within the private agencies. The TSHR strategy was in part designed to improve case practice and standardize expectations for performance and quality outcomes across CFSA and with a single private partner in Maryland.

¹⁵⁵ 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.

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

IEP Requirement	<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> <ol style="list-style-type: none">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;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;Services to avoid disruption of an adoptive placement that has not been finalized and avoid the need for replacement; andServices to prevent the disruption of a beneficial foster care placement and avoid the need for replacement. <p>(IEP citation I.A.3.)</p>
Exit Standard	<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. The Monitor will determine performance-based on the QSR <i>Implementing Supports and Services</i> and <i>Pathway to Case Closure</i> indicators.</p>

Figure 19: QSR *Implementing Supports and Services* Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹⁵⁶

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.

¹⁵⁶ *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.

Figure 20: QSR Pathway to Case Closure Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹⁵⁷

Pathway to Case Closure Indicator

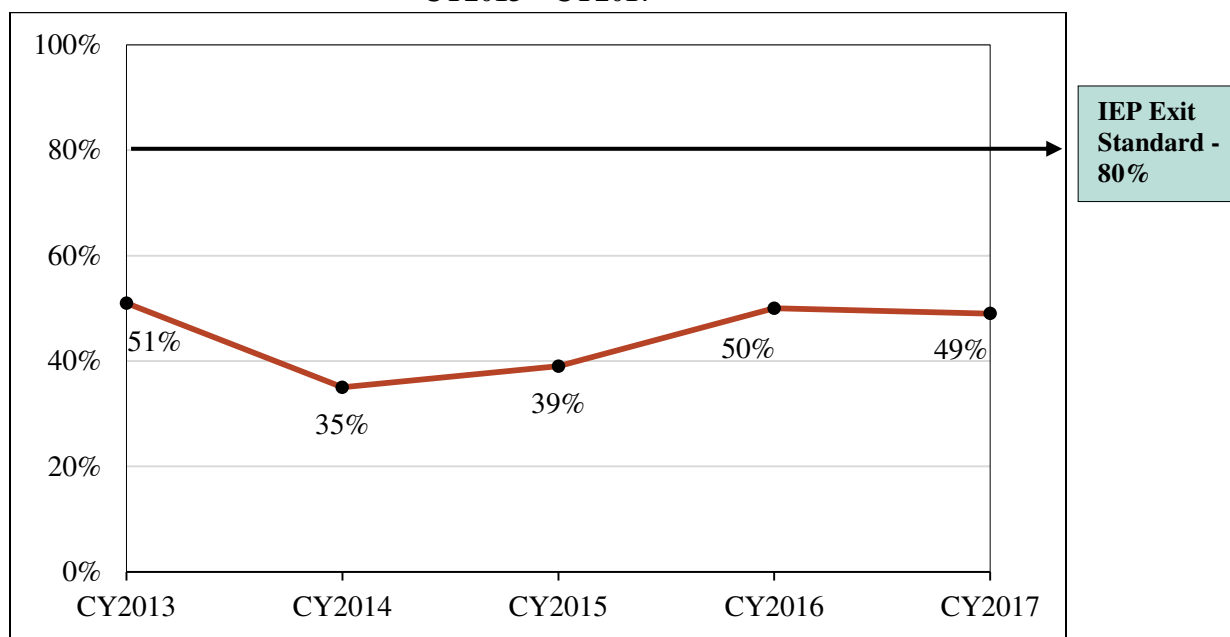
- *Parameters Reviewers Consider:* To what degree: (1) Is there a clear, achievable case goal including concurrent and alternative plans? (2) Does everyone involved, including family members, know and agree on what specific steps need to be achieved in order to achieve the case goal and close the case 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.

¹⁵⁷ *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 – CY2017**



Source: QSR Data CY2013 – 2017

Performance for the period January 1 through December 31, 2017:

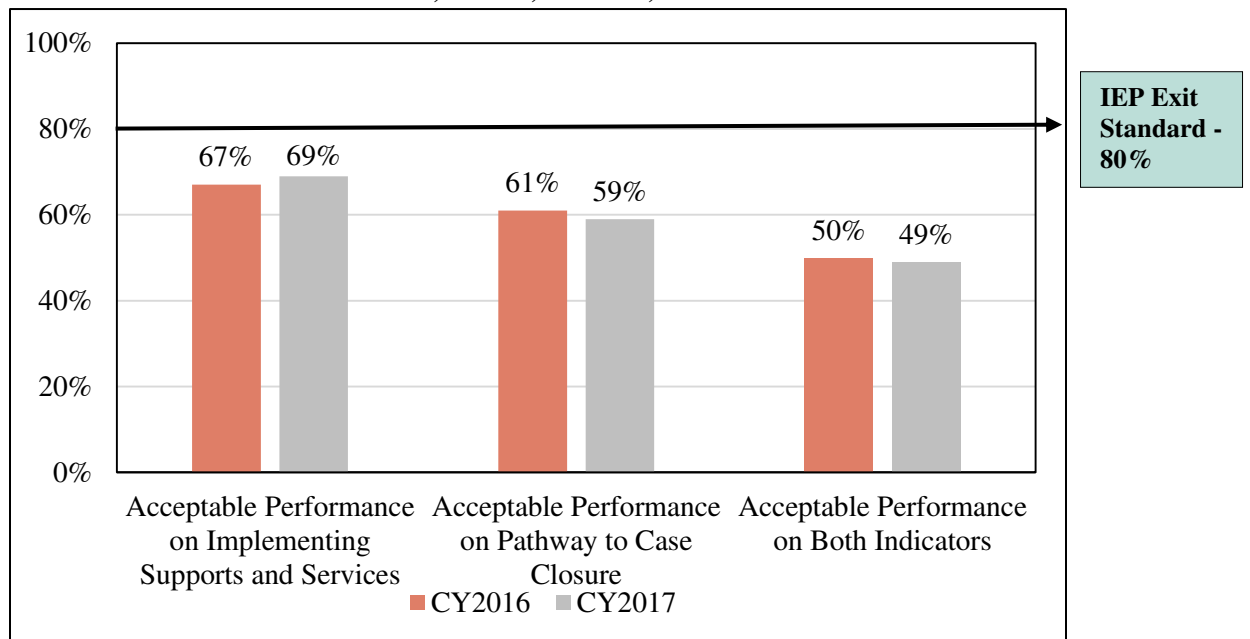
During CY2017, CFSA reviewed a total of 128 cases using the QSR methodology. Forty of these cases involved a child receiving in-home services and the remaining 88 cases were of a child placed in out-of-home care. Of the children reviewed who were in out-of-home care, 46 were case managed by one of the seven private agencies¹⁵⁸ with whom CFSA had contracted for case management and placement services.

As Figure 21 shows, half of cases reviewed (49%; 63 of 128) were rated acceptable on *both* the *Implementing Supports and Services*¹⁵⁹ and *Pathway to Case Closure* indicators, still significantly below the required achievement level of 80 percent. Ratings for each individual indicator varied with performance on *Implementing Supports and Services* rated acceptable in 69 percent of cases (88 of 128) and *Pathway to Case Closure* rated acceptable in 59 percent (75 of 128) of cases (see Figure 22).

¹⁵⁸ In CY2018, CFSA transitioned from 7 to 3 contracted agencies. NCCF is now the sole provider for children placed in Maryland, LAYC will serve a sub-set of Hispanic youth and families in the District and LSS will continue to serve Unaccompanied Refugee Minor youth who are placed through the Office of Refugee Resettlement.

¹⁵⁹ 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.

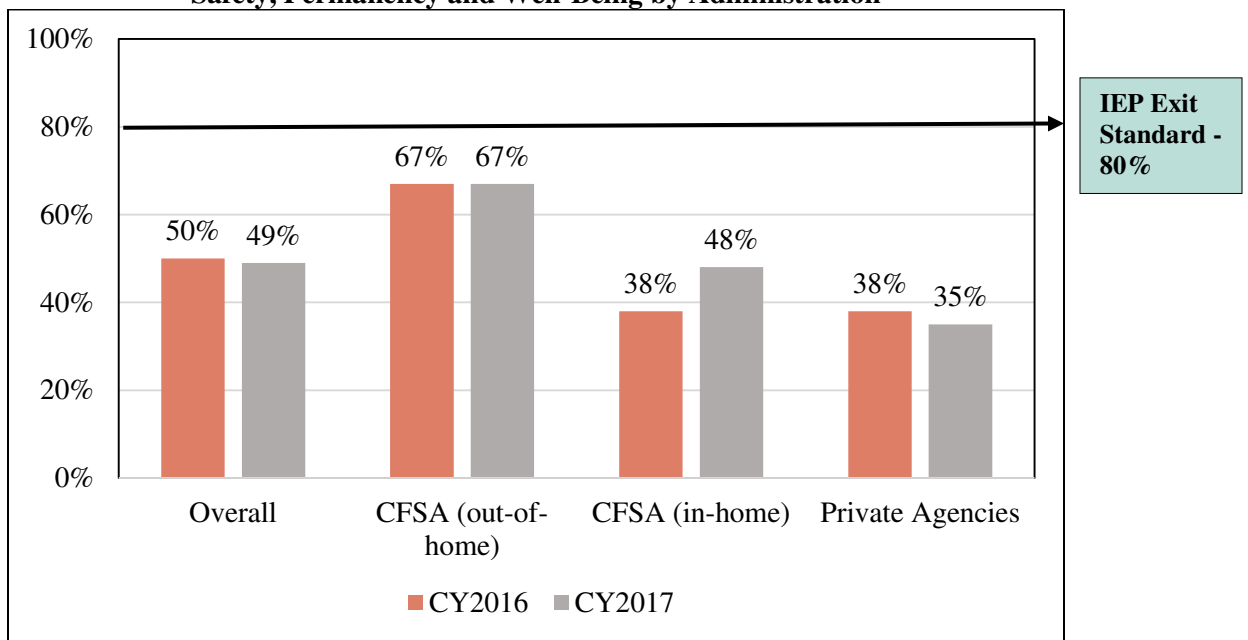
**Figure 22: QSR Findings by Indicator on Services to Children and Families to Promote Safety, Permanency and Well-Being
CY2016, N=125; CY2017, N=128**



Source: QSR Data

While overall the performance levels have remained consistent, by disaggregating the results by agency (CFSA versus private agencies) and case type (in-home versus out-of-home), there have been notable changes in performance within specific areas. During the past year, CFSA's performance has improved for children receiving in-home services (increased 10%), remained the same for children in out-of-home care placed through CFSA and decreased slightly for children case managed by the private agencies (decreased 3%) (see Figure 23). Additionally, and disappointingly, there has been no improvement over the past two years in performance for children placed in out-of-home care who are case managed by CFSA.

Figure 23: QSR Findings on Services to Children and Families to Promote Safety, Permanency and Well-Being by Administration



Source: QSR Data

In order to better understand the barriers to improving performance on this Exit Standard, the Monitor analyzes data by the specific indicators used to assess performance – *Implementing Supports and Services* and *Pathway to Case Closure* (see Table 8). Specifically, CFSA needs to ensure a child and family are connected to the right supports and services that promote their well-being and are supportive of the case plan permanency goal (whether it is reunification, guardianship, adoption or APPLA). If the family does not understand the pathway to permanency and is not connected to the supports that can help get them there successfully, it becomes less likely that the child and family will achieve successful and sustainable case closure. Based on a review of CY2017 data, regardless of where the child was living or who was responsible for case management, there continues to be a gap between acceptable performance on the *Implementing Supports and Services* and *Pathway to Case Closure* indicators, with more cases rated acceptable on the first indicator. This highlights a need for workers and supervisors to focus on ensuring the case plan includes alternatives that are understood by all members of the team, including the family, and that are supported by the appropriate and necessary services.

Table 8: Performance on QSR Indicators by Administration (CY2017)

CFSA (in-home) N=40	CFSA (out-of-home) N=42	Private Agencies N=46
<i>Implementing Supports and Services</i>		
68% (27)	88% (37)	52% (24)
<i>Pathway to Case Closure</i>		
60% (24)	71% (30)	46% (21)
<i>Both Indicators</i>		
48% (19)	67% (28)	35% (16)

Source: QSR Data

When a QSR is done, there is a rating sheet with scores on indicators and a written case narrative. The Monitor reviewed case narratives completed by reviewers and analyzed QSR data by permanency goal, child's age and administration to identify strengths in practice and areas needing improvement. A few of the key findings of this review include:

- Area of Strength: Good use of available supports and services provided through CFSA's Office of Youth Empowerment (OYE) including education and employment specialists.
- Area of Strength: Strong transition planning for youth with a goal of APPLA. As CFSA and NCCF move forward with full implementation of TSHR, ensuring these same supports and services are available and effectively implemented for all older youth with a goal of APPLA, regardless of which agency is responsible for case management, will be important.
- Area in Need of Improvement: Lack of effective engagement of older youth with a goal of reunification, adoption or guardianship and their families in planning for case closure.
- Area in Need of Improvement: Poor implementation of supports and services to support adoption planning, including concurrent planning for youth. These data and case narratives can help inform the themes being collected through AdoptionSTAT meetings to develop and implement strategies to address barriers to quality adoption practice.

b. Case Planning Process

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

There are two Exit Standards related to case plans that require CFSA to work with families to: (1) develop timely, comprehensive and appropriate case plans in compliance with District law requirements and permanency timeframes which reflect the family's and child(ren)'s needs and

are updated as family circumstances or needs change (IEP citation II.B.12.) – currently an Outcome to be Maintained – and (2) deliver services identified in the case plan (IEP citation I.B.17.) – currently an Outcome to be Achieved.

During the current monitoring period, CFSA’s performance on timely development of case plans ranged between 79 and 90 percent a month,¹⁶⁰ below the IEP requirement of 90 percent of case plans being developed within 30 days of a child entering foster care for four months during the monitoring period. CFSA’s performance on this Exit Standard has fluctuated over the past several monitoring periods. As discussed later in this section, CFSA staff now use the Child and Adolescent Functional Assessment Scale (CAFAS) and Preschool and Early Childhood Functional Assessment Scale (PECFAS) tools¹⁶¹ in the case planning process to assess a child’s needs and identify services. CFSA has struggled with ensuring social workers complete the CAFAS/PECFAS assessment within 30 days, which in turn impacts the completion of case plans. Specifically, between July and December 2017, the CAFAS/PECFAS were timely completed by workers for 69 to 77 percent for children in out-of-home care. Strategies to improve performance on this Exit Standard must integrate timely completion of assessments into the timely development of case plans. Due to the continued decline in performance this period, the Monitor considers this Exit Standard to be partially maintained.

The remainder of this section focuses on the case planning Exit Standard which utilizes the QSR methodology to measure performance.

¹⁶⁰ Monthly performance for completion of case plans are as follows: July, 90%; August, 90%; September, 84%; October, 84%; November, 79%; December, 84%.

¹⁶¹ CAFAS and PECFAS are functional assessment tools for understanding the behaviors of children in different domains – including home, school and the community.

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 on both the Pathway to Case Closure and Plan Implementation indicators.</p>

As required by the IEP, two indicators from the QSR protocol are used to measure CFSA’s performance on the Exit Standard pertaining to appropriateness and quality of case planning. These indicators, *Planning Interventions* and *Pathway to Case Closure*, are described in further detail in Figures 24 and 25, which summarize the parameters reviewers consider in rating performance for *Planning Interventions* and *Pathway to Case Closure*, 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 Performance¹⁶²

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) 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.

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. 66-69.

Figure 25: QSR Pathway to Case Closure Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹⁶³

Pathway to Case Closure

- *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?

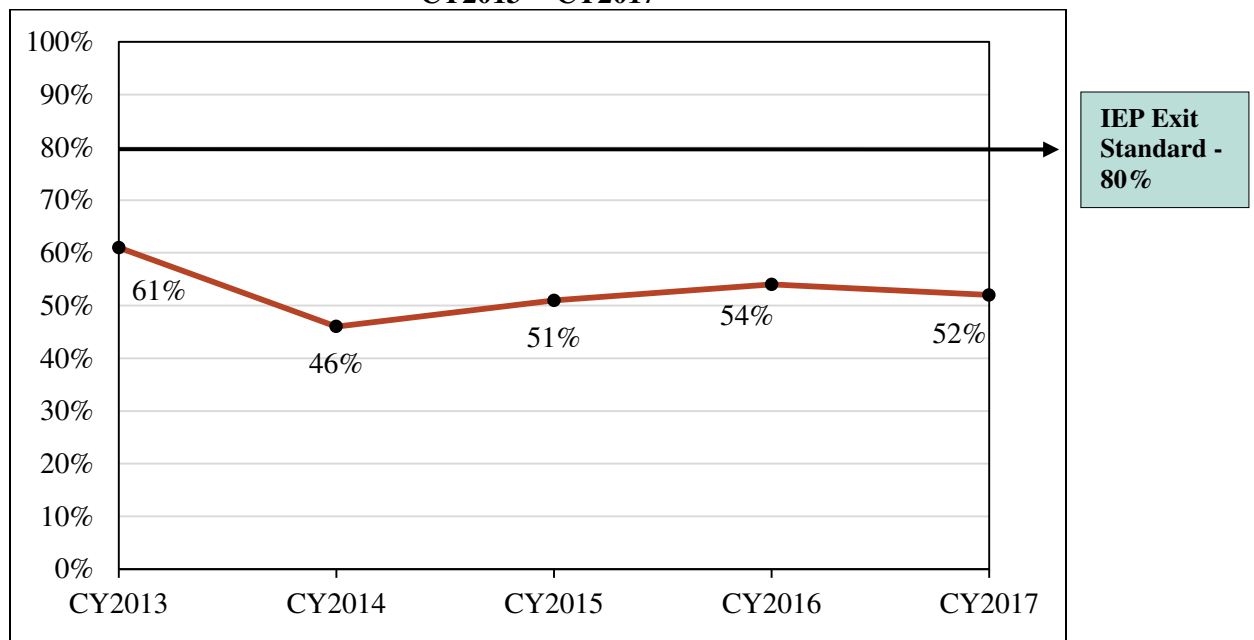
- *Description of Acceptable/Unacceptable Performance:*

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.

¹⁶³ *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 26: QSR Findings on Case Planning Process
CY2013 -- CY2017**



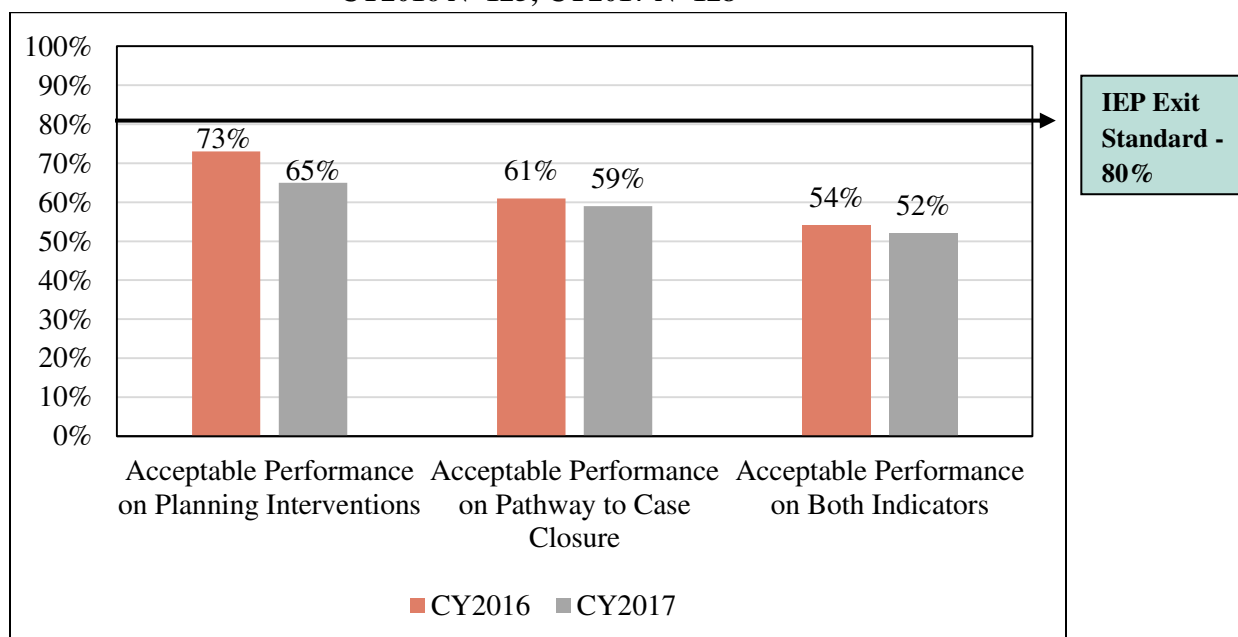
Source: QSR Data CY2013 – 2017

Performance for January 1 through December 31, 2017:

Of the 128 cases reviewed using the QSR methodology in CY2017, 52 percent (67 of 128) of cases were rated as acceptable on *both* the overall *Planning Interventions*¹⁶⁴ 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, 65 percent of cases (83 of 128) were rated acceptable on the *Planning Interventions* indicator and 59 percent of cases (75 of 128) were rated acceptable on the *Pathway to Case Closure* indicator. As seen in Figure 27 below, CY2017 performance on *Planning Interventions* has declined eight percent since CY2016 and remains far below acceptable levels.

¹⁶⁴ 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 rated as acceptable.

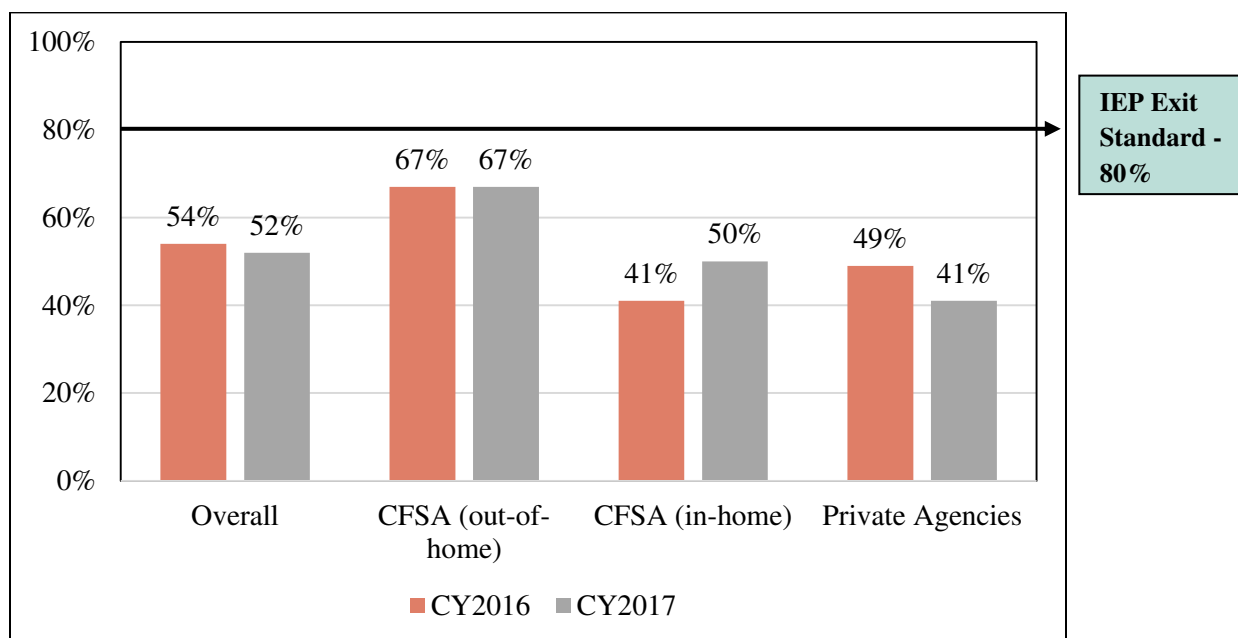
Figure 27: QSR Findings by Indicator on Case Planning Process
CY2016 N=125; CY2017 N=128



Source: QSR Data

Similar to performance measuring *Services to Families and Children to Promote Safety, Permanency and Well-being*, overall performance was consistent compared to CY2016 with a noted improvement in performance on this Exit Standard for children and families receiving in-home services (increased 9%) and a decline in performance for children in out-of-home placement who were case managed by a private agency (declined 8%) (see Figure 28 and Table 9).

Figure 28: QSR Findings on Case Planning by Administration



Source: QSR Data

Table 9: Performance on QSR Indicators by Administration (CY2017)

CFSA (in-home) N=40	CFSA (out-of-home) N=42	Private Agencies N=46
<i>Planning Intervention</i>		
63% (25)	81% (34)	52% (24)
<i>Pathway to Case Closure</i>		
60% (24)	71% (30)	46% (21)
<i>Both Indicators</i>		
50% (20)	67% (28)	41% (19)

Source: QSR Data

To identify additional trends in practice related to case planning, the Monitor reviewed case narratives and analyzed data about children's involvement with therapeutic services through the Department of Behavioral Health (DBH). The focus child in 50 cases (40%) reviewed was identified as also having an open case with a DBH provider. Two key findings from additional analyses include:

- Area in Need of Improvement: In cases with DBH involvement there is inconsistent teaming between CFSA social workers and therapeutic providers, which results in an incomplete assessment of the child and parents and lack of a coordinated and comprehensive treatment plan to address behavioral needs.
- Area in Need of Improvement: DBH services did not consistently address the presenting issue(s) or support the child in achieving optimal well-being. In order to meet the needs of

children with behavioral health needs, CFSA needs to work with DBH to improve the capacity and quality of behavioral health services available and provided to children.

CFSA recognizes these issues and has developed specific strategies in the 2018 *LaShawn* Strategy Plan to address these challenges.

Community Papering

To provide for the safety of children in families receiving in-home services, one strategy that can be used is Community Papering.¹⁶⁵ Social workers, in consultation with their supervisor and program manager, recommend Community Papering¹⁶⁶ when there are concerns about a child's ability to remain safely in their home without an 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. During the current monitoring period, 41 cases that included 84 children were presented to the Office of the Attorney General (OAG) for Community Papering. Outcomes from these requests are outlined in Table 10 below. In the past, the Monitor and some community advocates expressed concern that this tool was not being used in all cases where it was appropriate. CFSA has been working to improve communication between social workers and OAG lawyers to address this concerns.

¹⁶⁵ Community Papering is a legal process where CFSA files a petition in Family Court in order to get court oversight over a family and their case plan.

¹⁶⁶ 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 10: Community Papering Outcomes
July – December 2017
N=84 Children; 41 Cases

Petition was Accepted by OAG	61 Children; 29 Cases¹⁶⁷
Outcomes:	
Conditional Release Granted	13 Children; 9 Cases
Shelter Care Granted	24 Children; 10 Cases
Emergency Removal Occurred Prior to Initial Hearing	8 Children; 3 Cases
Agency Did Not File in Court ¹⁶⁸	16 Children; 8 Cases
Petition was Not Accepted by OAG	23 Children; 12 Cases
Outcomes:	
No Legal Basis for Filing	3 Children; 2 Cases
Additional Efforts Needed to be Explored	4 Children; 1 Case
Additional Information Requested by Attorney	4 Children; 4 Cases
Other ¹⁶⁹	12 Children; 6 Cases

Source: CFSA Manual Data

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):

- *Beginning April 3, 2017, Program Operations will partner with the Office of Well Being and CWTA to provide additional training and information to Social Workers and Supervisors on the connection between accurate assessments, provision of clinical services and improved outcomes for children and families (2017 Strategy Plan, strategy 1.1, p.5).*

¹⁶⁷ In one case, 2 different outcomes occurred for children in the family.

¹⁶⁸ This includes 6 children in 3 cases where the arrangements were made for the child to live with relatives without CFSA's involvement.

¹⁶⁹ In 2 cases CFSA did not move forward because the parents began to participate in services; in 1 case CFSA chose not to move forward following an FTM; in 1 case the child was arrested and placed in the custody of the Department of Youth Rehabilitation Services; and in 2 cases the location of the child and family was unknown. In the 2 cases where the location of the child and family was unknown, in 1 case the child was located and an emergency removal occurred and in the other case the family was located and the investigation was completed without a need to move forward in court.

- *Beginning April 3, 2017, the Office of Well Being will provide Child and Adolescent Functional Assessment Scale (CAFAS)/Pre-school Aged Assessment Scale (PECFAS) and Caregiver Strengths and Barriers Assessment (CSBA) completion data monthly to the Deputy Directors of Program and Community Partnership. These data will also be reviewed at the monthly learning collaborative meetings to encourage sharing of specific strategies that are successful in achieving timely completion of assessments (2017 Strategy Plan, strategy 1.2, p.5).*
- *By June 30, 2017, Supervisors will train and coach workers on the use of the Well Being Profile and will use the Well Being Profile during group supervision, R.E.D. Team meetings, placement disruption meetings, permanency meetings, youth transition plan meetings and the learning collaboratives to inform case planning (2017 Strategy Plan, strategy 1.3, p.5).*

CFSA implemented the above strategies to address gaps and practice issues in social worker and supervisor assessments of children and families. Through development of the *Well Being Profile*¹⁷⁰ in FACES.NET and additional trainings¹⁷¹, CFSA is hoping to give workers and supervisors the tools needed to use clinical assessments to drive practice. CFSA performance on timely completion of the CAFAS/PECFAS¹⁷² ranged from 69 to 77 percent for children in out-of-home care between July and December 2017. While this performance demonstrates an improvement from February 2017, timely completion of assessments needs to continue to improve. There also remains an outstanding concern about the quality of these assessments and how workers use them for case planning.

In July and August 2017, the completion rate for the CAFAS/PECFAS for children served in their homes was 65 percent and 68 percent, respectively. Beginning September 2017, in-home workers were no longer required to complete the CAFAS/PECFAS. CFSA reports that in-home workers are now only using the Caregiver Strengths and Barriers Assessment (CSBA) in their work with families. This decision was made to support workers on focusing on the needs of the parent when addressing risk and safety concerns. While the Monitor supports the use of the CSBA to drive case planning with the family, the Monitor is unclear and concerned as to why the use of functional assessment tools related to the child's needs have been dropped for in-home cases.

¹⁷⁰ The *Well Being Profile* allows workers to track and review a child's CAFAS/PECFAS scores and findings from assessments of parent's strengths and barriers over time.

¹⁷¹ Between July and December 2017, 51 staff were trained on the *Well Being Profile*, which is now part of the FACES.NET pre-service training.

¹⁷² CFSA uses the Caregiver Strength and Barriers Assessment, a functional assessment tool that focuses on parents' capacity, strengths and needs, and the CAFAS/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.

- *Beginning April 3, 2017, the Office of Well Being will provide Program Operations, the private agencies and Community Partnerships with a weekly report on the status of all new referrals recently enrolled at the Department of Behavioral Health. The report will be reviewed at a weekly huddle to resolve the barriers to scheduling or starting the identified service (2017 Strategy Plan, strategy 2.1, p.5).*
- *Beginning April 3, 2017, Office of Well Being staff will follow up on all comprehensive behavioral health recommendations for status of scheduling and completion of those recommendations within seven days (2017 Strategy Plan, strategy 2.2, p.5).*

Co-located DBH staff currently track referral and enrollment data for children who are screened and referred for an intake with a mental health service provider. Between July and December 2017, 148 children were screened and enrolled in one of DBH's Core Service Agencies for behavioral health treatment. Of these 148 children, 115 children completed an intake during the monitoring period and were referred for services (see Table 11).

**Table 11: Children Connected to a DBH Core Services Agency
July – December 2017**

	Number of Children	Received Intake or Services within 14 days of Referral	Received Intake or Services 30+ days after Referral
Referred for Intake	148	27 (18%)	37 (25%)
Referred for Services	115	11 (10%)	87 (76%)

Source: CFSA Manual Data

Of note, after the initial intake, many children waited weeks if not months before being assigned a therapist and receiving services. These extensive delays are extremely detrimental to a child's well-being. CFSA has included strategies in the 2018 *LaShawn* Strategy Plan (see Appendix C) to address barriers in the timely receipt of therapeutic services for children in CFSA's care.

- *By June 1, 2017, the Safe and Stable Families Redesign will require better tracking and accountability of referrals to the Collaboratives and engagement with families (2017 Strategy Plan, strategy 2.3, p.5).*

Through the Safe and Stable Family Redesign, CFSA reassessed the continuum of community-based services available, many of which are provided and contracted through the Healthy Families/Thriving Communities Collaboratives. These services include:

- Parenting Education and Support Services, which includes parenting classes and support groups;
- Parent Adolescent and Support Services (PASS), which are designed for families of youth who have committed a status offense including running away, truancy or curfew violation;
- Project Connect, which is an evidence-based program designed for families with substance abuse issues, and provides services for up to a year;
- Mobile Crisis Stabilization for birth families; and
- Family Peer Coaching for families receiving in-home services.

Table 12 and Table 13 illustrate the referral and service activity between July and December 2017 for these community-based programs contracted through CFSA.

**Table 12: Family Referrals for Community-Based Services
July – December 2017**

Program	# of Referrals Received	# of Approved Referrals	# of Denied Referrals
Project Connect	38	23	15
Parenting Education and Support Services (provider Collaborative Solutions for Communities)	15	15	0
Parenting Education and Support Services (provider East River Family Strengthening Collaborative)	39	39	0
Parent Adolescent and Support Services (PASS)	31	31	0
Family Peer Coaching	16	16	0
Mobile Crisis Stabilization for birth families	27	27	0
Grand Total:	204	189 (93%)	15 (7%)

Source: CFSA Manual Data

**Table 13: Family Participation in Community-Based Services¹⁷³
July – December 2017¹⁷⁴**

Program	Enrolled/ Receiving Services	Pending Enrollment/ Class Commencement	Withdrew from Services	Discharged from Program (Served)	Successfully Completed Families (Children)
Project Connect ¹⁷⁵	55	0	3	1	1 (1)
Parenting Education and Support Services (provider Collaborative Solutions for Communities)	1	1	12	3	1 (3)
Parenting Education and Support Services (provider East River Family Strengthening Collaborative)	6	5	21	11	8 (17)
Parent Adolescent and Support Services (PASS)	25	11	5	20	29
Family Peer Coaching	14	0	1	10	10 (26)
Mobile Crisis Stabilization for birth families	11	1	11	5	5 (8)
Total:	112	18	53	50	25 (84)

Source: CFSA Manual Data

As seen in Table 13 above, the number of families who withdrew from referred services is consistently high and the number who successfully complete services is low. CFSA and the Collaboratives must implement an effective feedback loop to understand the circumstances in which families withdraw from services to understand the implications and address the reasons for non-participation.

In addition to tracking referrals to community-based services, CFSA developed a data tracking process to regularly monitor referrals of families to one of the Healthy Families/Thriving Communities Collaboratives for case management services. The data collected include:

¹⁷³ All data above represent number of families with the exception of Parent Adolescent and Support Services, which represents the number of children. The number of children in families that successfully completed each program are represented within parentheses.

¹⁷⁴ Data includes referrals that occurred prior to July 1, 2017 and were engaged in services on July 1, 2017.

¹⁷⁵ As of September 30, 2017, CFSA ended their contract with the Collaboratives to provide Project Connect services and have not received updated data since that point in time.

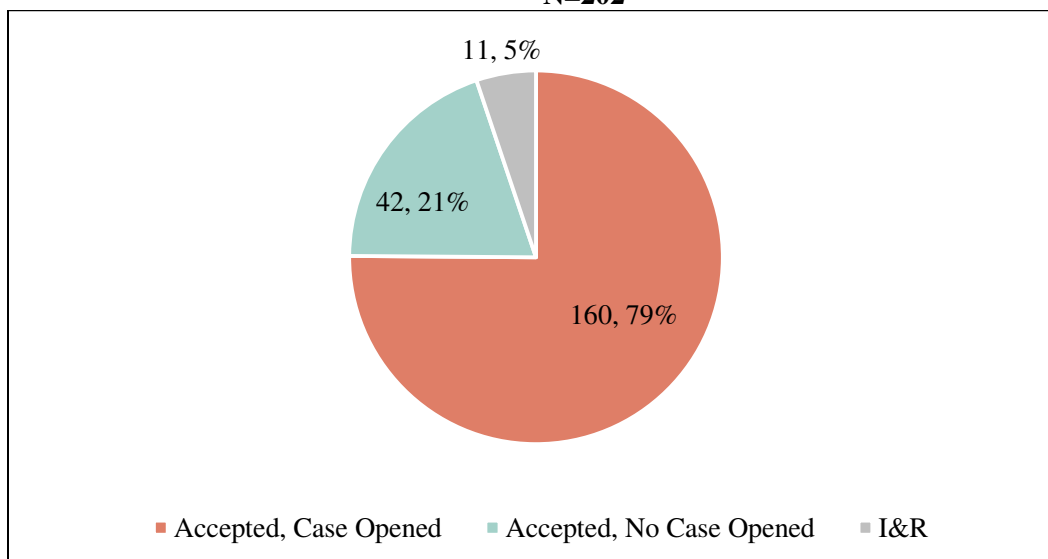
- Case type and characteristics (Front Yard, Front Porch, Front Door)¹⁷⁶
- Referral origin within CFSA (Entry Services, Community Partnerships, Office of Youth Empowerment)
- Ward where family resides
- Referral outcome (Accepted and case opened, Accepted but no case opened, Declined by the Collaborative and Information and Referral)
- Time from referral to assignment to Collaborative worker; time from case assignment to staff transfer conference; and time from staff transfer conference to Partnering Together Conference (PTC) with the family

Between October 1 and December 31, 2017, CFSA referred 202 families to the Collaboratives. The Collaboratives accepted and opened 160 (79%) cases and no cases were denied. Cases were not opened for the remaining 42 cases for the following reasons: the family declined to participate (17 cases); family moved out of jurisdiction (1 case); the Collaborative was not able to make contact with the family (7 cases); the Collaborative was not able to make contact with the referring worker (6 cases); and the Collaborative referred the family to other community resources for services (11 cases) (see Figure 29). The majority of the cases were referred to Collaboratives from Entry Services – CPS investigations (72, 36%) and CPS-FA (92, 46%) (see Figure 30).

¹⁷⁶ 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 where CFSA is closing the case and transitioning case management to the Collaborative, including community diverted cases from CPS investigations and Family Assessment and cases stepping down from in-home and permanency. Front Door cases are those where CFSA has an open, active case and is teaming with the Collaborative to support the family.

Figure 29: Outcome Referrals to Collaboratives
October – December 2017

N=202

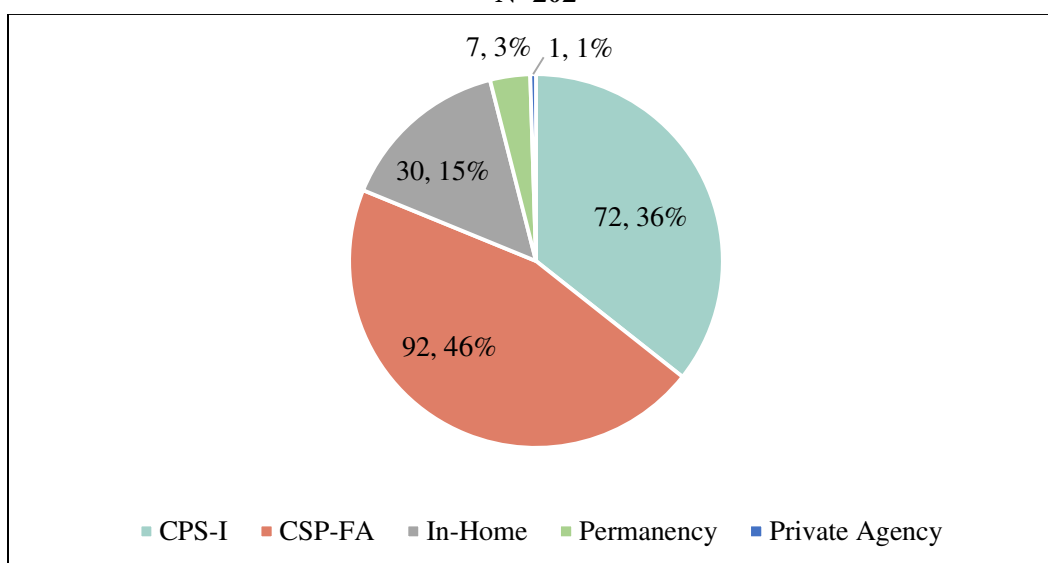


Source: CFSA Manual Data

* I&R refers to cases in which the Collaborative referred the family to other community resources for services including Parent Education Support Program (PESP), a specific Collaborative service or CFSA ongoing for case management.

Figure 30: Source of Referrals to Collaboratives
October – December 2017

N=202



Source: CFSA Manual Data

CFSA's weekly monitoring of referrals to Collaboratives has also created a process for holding both itself and the Collaboratives accountable for engaging with families timely. Between October 1 and December 31, 2017, for the 160 cases that were opened for services with the Collaboratives,

it took an average of 1.8 days between referral and case assignment; 3.4 days between case assignment and staff transfer conference; and 4.9 days between staff transfer conference and the Partnering Together Conference with the families.

CFSA is currently working to expand data collected from the Collaboratives to include outcomes from their engagement and work with families.

- *By April 15, 2017, CFSA will review and incorporate action steps from the Child and Family Services Review Program Improvement Plan (CFSR PIP) regarding parent engagement into this plan (2017 Strategy Plan, strategy 2, p.6).*

As a result of the federal Child and Family Services Review (CFSR) of CFSA outcomes, the Agency is required to develop a Program Improvement Plan acceptable to the Administration for Children and Families Children's Bureau. CFSA submitted a revised draft CFSR Program Improvement Plan (PIP) and on March 6, 2018, had a follow-up meeting with the federal Children's Bureau to discuss new federal guidance on the development of the PIP. CFSA's next submission to the Children's Bureau was due March 31, 2018. Many of the CFSR findings and subsequent PIP strategies are expected to be aligned with *LaShawn* IEP outcomes and the Strategy Plan.

For example, beginning in CY2018 and as included in the 2018 *LaShawn* Strategy Plan, CFSA has taken steps to support better parent engagement through the development of a PEER¹⁷⁷ Support Unit within CFSA. This unit, consisting of one supervisor and five PEER support workers,¹⁷⁸ 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. The PEER support workers will also assist workers to more effectively reach out to and engage with parents. Implementation of this unit began March 2018 and will officially begin working with families and workers in mid-May 2018 after the PEER support workers complete pre-service training.

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 and youth in foster care. Youth 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

¹⁷⁷ PEER is an acronym for Parent Engagement, Education and Resource.

¹⁷⁸ PEER workers are parent advocates who have experienced involvement themselves with the child welfare system as a parent and successfully reunified with their children. As of the writing of this report, all five PEER support workers have been hired and are in the process of completing pre-service training.

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. Through the District's Medicaid State Plan, all children and youth 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. The Monitor is unable to report on the distribution of Medicaid cards for the July through December 2017 monitoring period due to data discrepancies.

For older youth, planning for their well-being occurs through regular youth transition planning (YTP) meetings and through connections to services provided through the Office of Youth Empowerment (OYE). As discussed later in this section, these meetings provide an opportunity for youth to lead their team and identify goals including those related to health, education, employment and permanency. For older youth who are likely to exit care without achieving positive permanency through reunification, guardianship or adoption, these meetings are critical to laying the groundwork for their success after foster care. OYE continues to reflect on its practices with older youth and how to promote youth well-being. OYE staff are working to better engage older youth, support youth in identifying their goals for their future and ensure that youth have supportive teams to help them transition out of foster care and take on the responsibilities of being an independent adult.

The *LaShawn* IEP requires Special Corrective Action planning through which CFSA reviews cases of children and youth who experience particular challenges with placement and/or permanency. This Special Corrective Action planning is also discussed in this section of the report. For example, Special Corrective Action is needed for children who have an adoption goal for more than 12 months and are not placed in an adoptive home or children who are placed in facilities more than 100 miles from the District of Columbia. For these children and youth, CFSA must create a child specific corrective action plan in order to address the placement and/or permanency issue of concern.

The discussion below provides additional details on CFSA's activities to support and promote the well-being of children and youth in care.

1. Health and Dental Care

The IEP has multiple Exit Standards to ensure that children and youth in foster care receive appropriate and routine medical and dental services and timely access to appropriate health care. With the exception of the IEP requirement to provide Medicaid numbers and cards to foster parents in a timely manner, all of these health care Exit Standards are designated as Outcomes to be Maintained.

Health Screenings, Full Medical Evaluations and Full Dental Evaluations

CFSA is expected to conduct health screenings of children and youth upon entry into foster care or a change in placement and make sure that children receive comprehensive medical and dental evaluations. During the current monitoring period, CFSA's performance on health screenings prior to an initial placement or re-entry into foster care or placement change remained consistent with the previous monitoring period.¹⁷⁹ Specifically, CFSA's performance for health screenings prior to initial placement or re-entry into care ranged monthly from 88 to 100 percent,¹⁸⁰ meeting the required level of performance (95%) in four of six months this period. Monthly performance for health screenings prior to a placement change ranged from 82 to 91 percent¹⁸¹ this period, only meeting the required level of 90 percent in two of six months. The Monitor considers this Exit Standard to be partially maintained.

CFSA maintained required performance on the Exit Standard requiring comprehensive medical evaluations for children in foster care.¹⁸² Performance on the completion of full medical evaluations for children ranged monthly from 80 to 93 percent within 30 days of placement¹⁸³ and performance ranged monthly from 90 to 97 percent for evaluations completed within 60 days of placement.¹⁸⁴ The Monitor considers this deviation to be insubstantial and this Exit Standard to be maintained.

CFSA met performance for full dental evaluations within 30 days of placement (monthly range of 44 to 71%) and within 60 days of placement (monthly range of 68 to 89%).¹⁸⁵ The only sub-part of this Exit Standard where CFSA has experienced inconsistent performance is the completion of dental evaluations for 85 percent of children within 90 days of placement. Performance ranged monthly from 70 to 89 percent on this sub-part during the current monitoring period.¹⁸⁶ The

¹⁷⁹ 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.).

¹⁸⁰ Monthly performance data for initial and re-entry health screenings are as follows: July, 97%; August, 90%; September, 96%; October, 97%; November, 93%; December, 97%.

¹⁸¹ Monthly performance data for replacement health screenings are as follows: July, 87%; August, 87%; September, 85%; October, 82%; November, 91%; December, 91%.

¹⁸² 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.).

¹⁸³ Monthly performance data for evaluations completed within 30 days of placement are as follows: July, 92%; August, 84%; September, 90%; October, 93%; November, 80%; December, 80%.

¹⁸⁴ Monthly performance data for evaluations completed within 60 days of placement are as follows: July, 97%; August, 90%; September, 96%; October, 97%; November, 93%; December, 97%.

¹⁸⁵ 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.).

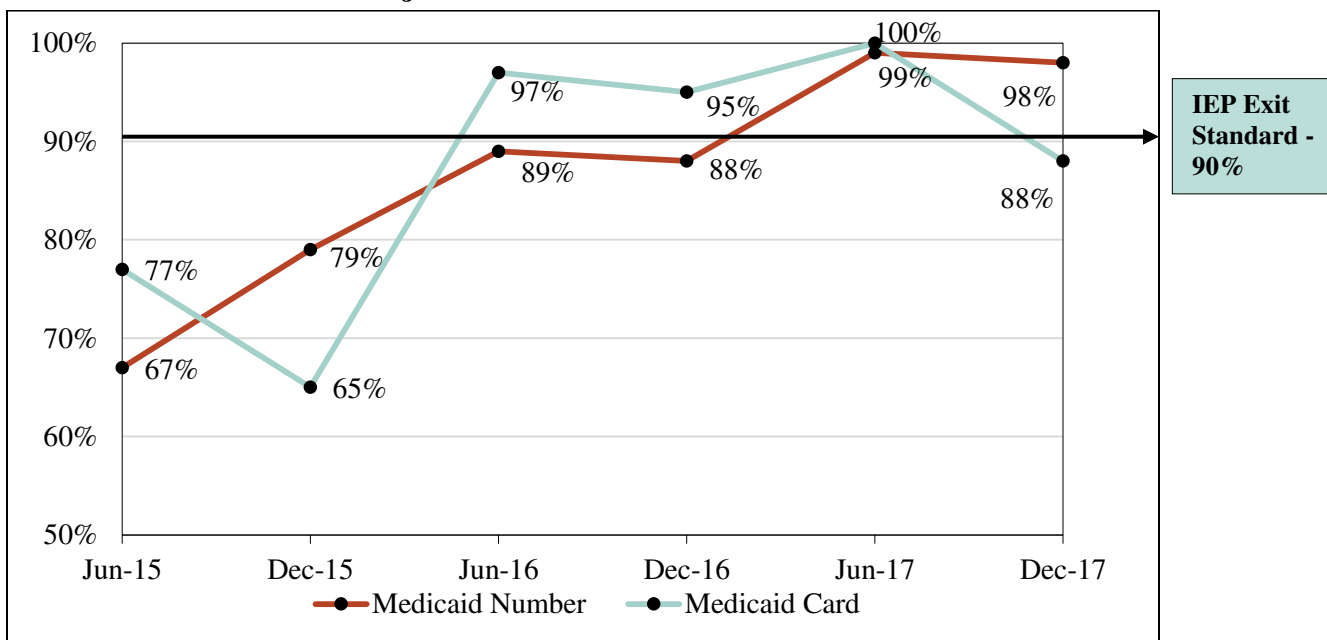
¹⁸⁶ Monthly performance data for children with completed dental evaluations within 90 days of placement are as follows: July, 89%; August, 74%; September, 79%; October, 88%; November, 70%; December, 72%.

Monitor considers this performance to be an insubstantial deviation and this Exit Standard to be maintained.

Medicaid Coverage

IEP Requirement	<p>43. <u>Health and Dental Care</u>: 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.</p> <p>(IEP citation I.C.22.d.)</p>
Exit Standard	<p>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.</p>

**Figure 31: Distribution of Medicaid Number and Medicaid Card to Foster Parents
June 2015 – December 2017***



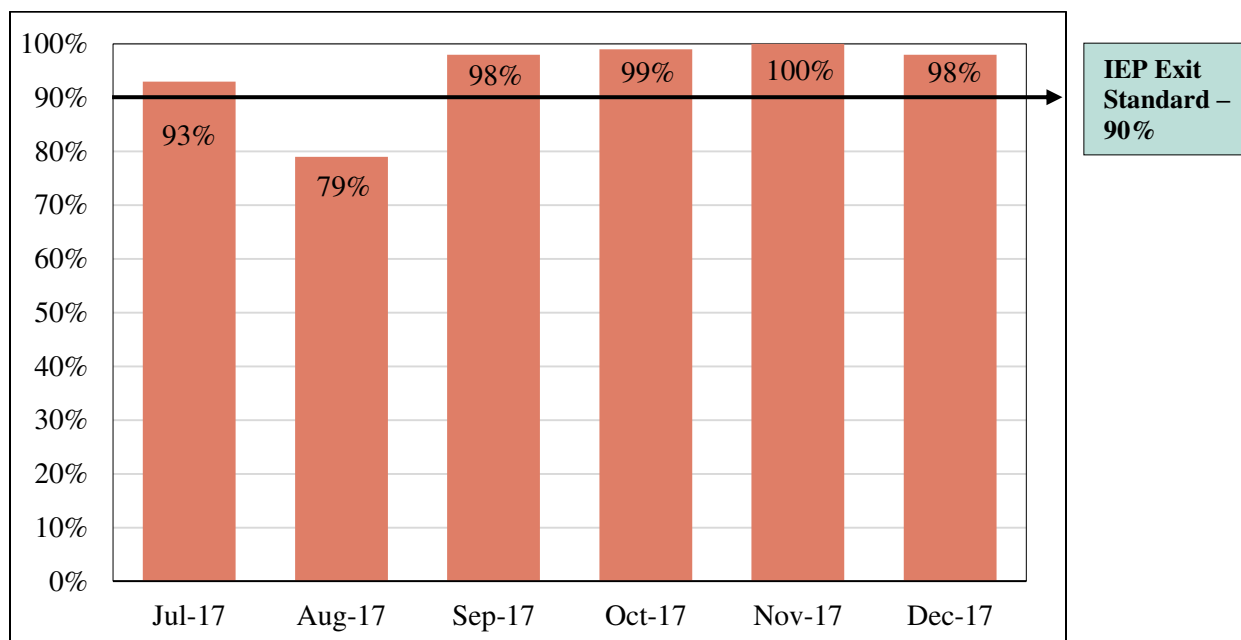
Source: CFSA Manual Data

*The Monitor is unable to report data for Medicaid Card distribution for December 2017

Performance for the period July 1 through December 31, 2017:

Children in foster care are Medicaid eligible and foster parents are expected to be provided with a valid Medicaid number and insurance card for use in accessing services. CFSA manually tracks the distribution of Medicaid numbers to foster parents when a child is initially placed in foster care or experiences a placement change while in foster care. In December 2017, 42 children experienced a placement activity and remained in that placement for at least five days. Of these 42 children, CFSA was able to verify that 41 foster parents (98%) received the child's Medicaid number within five days of the placement (see Figure 31). Between July and December 2017, performance ranged from 79 to 100 percent each month (see Figure 32). Performance fell below the required level of 90 percent only in August 2017 when CFSA confirmed that the foster parents of 34 of 43 (79%) children received the Medicaid number for that child within five days of placement.

**Figure 32: Foster Parents who Received Child's Medicaid Number
within Five Days of the Child's Placement
July – December 2017**



Source: CFSA Manual Data

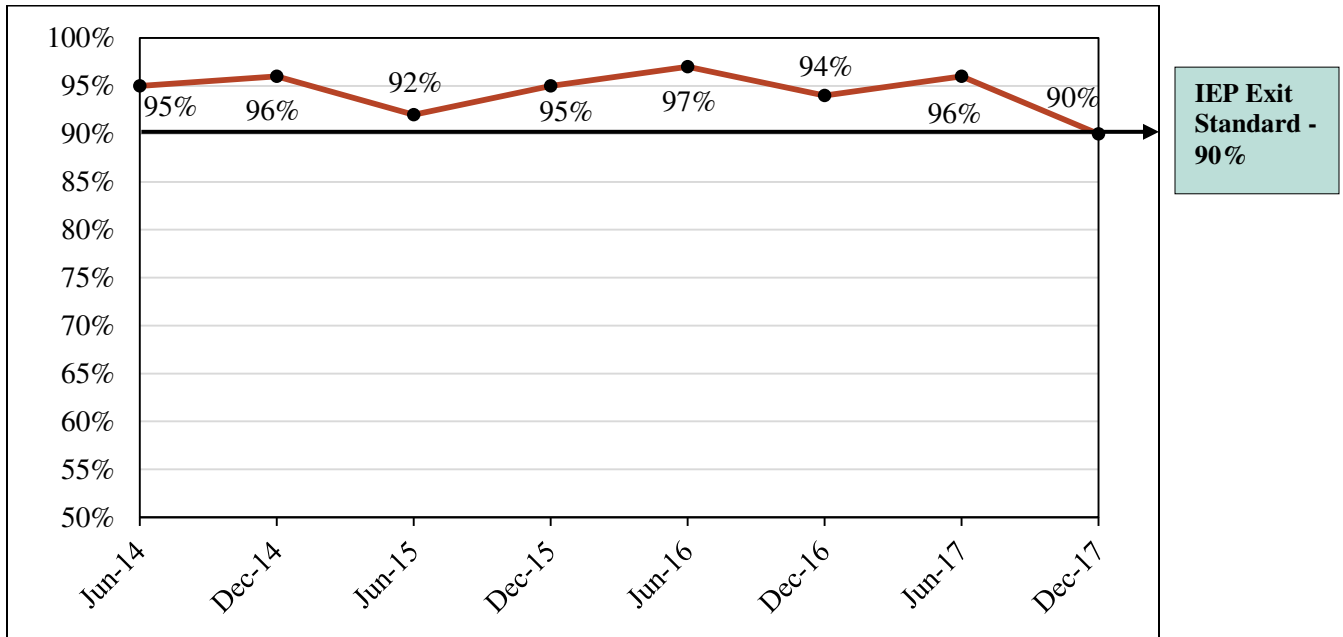
Due to data discrepancies during the current monitoring period, the Monitor is unable to report on performance for the distribution of Medicaid cards. The Monitor continues to consider this outcome to be partially achieved.

2. Adolescent Practice

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 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 options for housing, health insurance, education and linkages to continuing adult support services agencies. Since June 2013, CFSA has met this IEP Exit Standard which requires at least 90 percent of youth age 18 and older have a current YTP.

CFSA continues efforts to support earlier and ongoing engagement and planning with older youth around their transition from foster care. The YTP is one method used to support youth in planning for adulthood and is specifically intended to provide an individualized roadmap to ensure a youth has adequate supports and connections to meet their goals and needs as identified by the youth and their support team. For several years, CFSA co-designed, tested and hoped to use an online version of the Foster Club toolkit as CFSA's YTP tool. However, after extensive challenges working with the contractor, CFSA changed course and has developed an online platform to assist in completing a youth's transition plan.

**Figure 33: Youth Ages 18 and Older with a Youth Transition Plan
June 2014 – December 2017**



Source: CFSA Manual Data and FACES.NET report CMT391

Data represent performance for each 6 month monitoring period (January – June and July – December)

Performance for the period July 1 through December 31, 2017:

Of the 221 youth ages 18 and older under CFSA care between July and December 2017, 17 youth were on runaway status, developmentally disabled, incarcerated or declined to participate in the development of a YTP and were excluded from analysis. Out of 204 applicable youth, 183 (90%) had a YTP. 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.¹⁸⁷ Thirty-eight youth were applicable during this monitoring period and all of those youth's plans were reviewed; five cases were excluded from the universe because the youth was in runaway status, incarcerated and unavailable, or developmentally unable to participate during the review period. Of the 33 remaining cases, CFSA found that all (100%) had up-to-date YTPs that addressed appropriate connections to specific services and options.¹⁸⁸

In addition to the YTPs, CFSA uses 21JumpStart meetings as another means to review plans for youth on the verge of aging out of care to ensure that the youth is attached to supports and services and has lifelong connections, support and resources. The Monitor has observed several of these

¹⁸⁷ The Monitor has previously participated in this review and validated findings.

¹⁸⁸ The Monitor reviewed a small sample (6) of these cases, 1 each month of the monitoring period.

meetings and found them to generally include useful planning discussions. However, they do not consistently include youth participation.

3. Special Corrective Action

Some children and families experience challenges in the areas of placement and permanency. Special corrective action categories are meant to highlight markers of unacceptable practice – such as placement instability or inadequate permanency goals and efforts – and provide special focus on efforts to alleviate the issue. 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 corrective action plans as appropriate (IEP citation I.D.30.). CFSA reports that these plans are completed during weekly Special Corrective Action R.E.D. Team meetings for children newly identified in a corrective action category.

Data on the number of children in special corrective action categories during the monitoring period are presented in Table 14 below. Data for permanency categories are mixed – while there are fewer children with a goal of adoption for more than 12 months not in an approved adoptive home, the number of children with a goal of reunification for more than 18 months increased this period.

Corrective action data reflect a steady increase in the number of children placed in homes without valid licenses and children placed in foster homes that exceed their license capacity (7% as of December 2017). CFSA reports that the primary causes identified for children placed in homes without valid licenses are different contract timelines with Maryland kinship and pre-adopt homes, delays with a placement provider during the licensing process or lag in data entry on foster parent training or clearances. In the majority of case identified (87 children this period), by the time the case was scheduled for a corrective action review, the home was appropriately licensed.

The rise in child placements in homes that exceed licensed capacity, which only occurred within homes managed by private agencies, is likely due to two factors. First, CFSA reports that there continues to be misunderstanding by staff on licensing capacity requirements. The *LaShawn* standards only allow for placement of three foster children, even though a Maryland home may receive a license for four children. There is an exception to the limitation of three foster children for large sibling groups. However, placing two separate sibling groups of two children in a home does not meet this exception – the large sibling group must be from a single family. Second, CFSA reports that delay in entry of placement data into the database may cause placement staff to utilize inaccurate information when making placement decisions. A third reason may be an insufficient number of available appropriate placements.

Between July and December 2017, a total of 349 children were newly identified in one of the special corrective action categories; of these, CFSA determined that 214 corrective action plans

were required.¹⁸⁹ CFSA completed 157 (73%) of the required plans. This Exit Standard is currently designated as an Outcome to be Maintained, however, performance has fallen below the required standard for the past three periods. The Monitor will recommend redesignating this as an Outcome to be Achieved.

**Table 14: Children in Special Corrective Action Categories by Month
July – December 2017***

Special Corrective Action Category	July 2017	Aug 2017	Sept 2017	Oct 2017	Nov 2017	Dec 2017
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	222	222	211	207	199	199
Children Placed in Emergency Facilities Over 90 Days	0	0	0	0	0	0
Children Placed in Foster Homes without Valid Permits/Licenses	21	31	33	33	33	40
Children Placed in Foster Homes that Exceed their Licensed Capacity	26	27	26	43	38	48
Children in Facilities More than 100 Miles from DC	13	12	12	11	10	10
Permanency Categories						
Children with the Goal of Adoption for More than 12 Months who are not in an Approved Adoptive Home	44	41	36	40	30	35
Children in Care who Returned Home twice and Still have the Goal of Reunification	0	0	0	0	0	0
Children under 14 with a Goal of APPLA	3	3	3	3	3	3
Children with the Goal of Reunification for More than 18 Months	66	57	70	80	80	82

Source: CFSA Administrative Data, FACES.NET report COR013

*Individual children may be included and counted in more than 1 category.

The notion behind special corrective action is that once identified, plans would address the issues and children would move from the category. In fact, children do enter and exit special corrective action categories each month. But some children remain and CFSA has now recognized the need

¹⁸⁹ A plan may not be required if the issue has been resolved by the time of review or if data were entered erroneously.

to review and reassess plans developed for children and youth who remain in categories for subsequent months. In CY2018, depending upon the category, CFSA reports that plans will be reviewed on a monthly, bi-monthly or quarterly basis to reassess and determine if plan modifications are necessary.

D. RESOURCE DEVELOPMENT AND SYSTEM ACCOUNTABILITY

A solid infrastructure and accountable measurement systems are essential to CFSA's ability to support children, youth and families and maintain and improve good practice. This includes ensuring a stable workforce that is able to meet the needs of children, youth and families; foster parents who are ready and available to care for children and youth; continuous quality improvement processes to assess and inform practice; and sufficient financial resources to support a healthy, well-functioning system.

Caseloads must be of manageable size and workers must be supported by sufficient, relevant training and skilled supervision. CFSA has continued to support ongoing in-home and permanency workers by maintaining caseloads at or below the level required by the IEP and by ensuring that workers receive pre-service training. CFSA has implemented three mandatory in-service trainings to improve worker skills – *Back to Basics* (designed for all Entry Services Staff), *Mastering the Art of Child Welfare Supervision (MACWS)* and a webinar series on key case practice elements. While attendance has improved for staff from some of the CFSA administrations, including Entry Services and Community Partnerships, it has been inconsistent across the agency.

Foster parents are critical partners in any child welfare system. On a daily basis, they are responsible for the meeting the needs of children in their care and supporting their well-being. While CFSA has consistently ensured foster parents receive appropriate pre-service training prior to licensure, CFSA performance on in-service training has been declining. Since December 2014, performance has been between one and four percent below the required level. In the current monitoring period, performance fell to 90 percent, five percent below the level required in the IEP; this needs to be an area of focus for CFSA and NCCF moving forward. The Monitor considers this Exit Standard to be partially maintained.

The IEP also requires that CFSA develop a Resource Development Plan (RDP) (IEP I.C.23.) and Needs Assessment (IEP II.F.21.) on an annual and bi-annual basis respectively. The purposes of the Needs Assessment and RDP are to assess the quantity and array of placement resources and services available to meet the needs of children and families served by the agency and to create a plan to develop additional resources and services where needed. Beginning in the current monitoring period, CFSA engaged consultants from Public Financial Management and ChildFocus to help improve the development and use of its Needs Assessment and RDP.

In prior years, a challenge with integrating this work into regular agency functioning and meeting the IEP timelines has been the misalignment with the District's budget cycle. The Monitor, Plaintiffs and CFSA agreed to amended timeframes that will allow CFSA to utilize the RDP and Needs Assessment in developing their budget for the next fiscal year. Additionally, instead of completing the Needs Assessment every two years, CFSA will complete the assessment annually. For each year, the new timeframes will allow CFSA to collect quantitative and qualitative – including focus groups and stakeholder interviews – data between January and April, analyze data and draft the Needs Assessment report between May and June, receive and incorporate feedback from the Monitor and Plaintiffs in June and July and identify gaps and develop strategies for the Needs Assessment between August and October 1st, when the final Needs Assessment would be complete. The Monitor will assess and report on compliance in the next monitoring report.

1. Ongoing Caseloads and Supervisory Responsibilities

a. Ongoing Caseloads

Exit Standards pertaining to ongoing, CPS and home study worker caseloads and supervisory responsibilities are designated as Outcomes to be Maintained (IEP citations I.D.25.&26.). The IEP requires that 90 percent of workers have caseloads that meet the required ratios. For ongoing in-home and permanency social workers, the standard is 15 cases per worker and no individual worker with a caseload greater than 18. During this monitoring period, caseloads for permanency and in-home social workers continued to meet the levels required by the IEP.

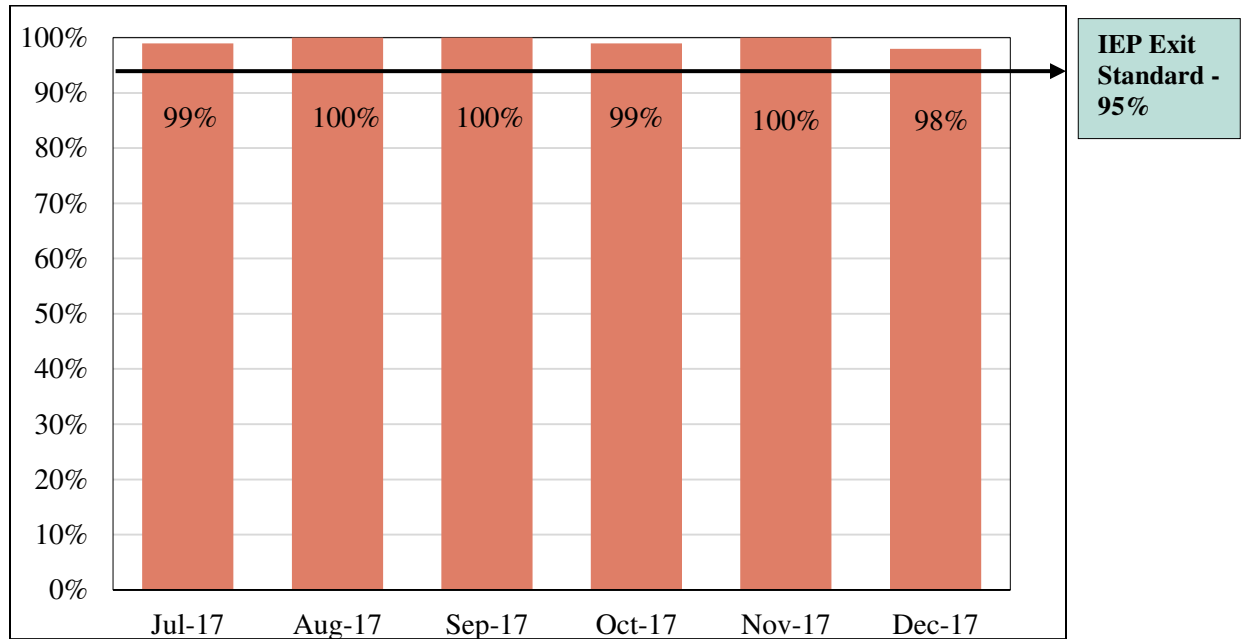
For workers conducting home studies, the standard is 30 cases per worker and no individual worker with a caseload greater than 35. Monthly performance data for workers conducting homes studies ranged from 40 to 100 percent during the current monitoring period, with performance falling below the required level during five of six months.¹⁹⁰ CFSA reports this wide fluctuation in performance was due to an increase in demand for home studies during the monitoring period and a change in staffing. CFSA filled vacancies in this unit in November 2017 and anticipates being able to meet the caseload standards for home study workers moving forward. The Monitor considers the caseload Exit Standard partially maintained.

Performance for the period July 1 through December 31, 2017:

CFSA maintained the required level of performance for in-home and permanency workers with monthly performance ranging from 98 to 100 percent (see Figure 34).

¹⁹⁰ Monthly performance data for workers conducting homes are as follows: July, 100%; August, 75%; September, 75%; October, 40%; November, 40%; December, 80%.

**Figure 34: Caseloads for Permanency and In-home Social Workers
July – December 2017**



Source: CFSA Administrative Data, FACES.NET report CMT328

The number of in-home and permanency cases unassigned for more than five days ranged each month from a low of 14 cases in November 2017 to a high of 31 cases in July 2017 (1 to 2% of total permanency and in-home cases), which is consistent with performance during the previous monitoring period.¹⁹¹

b. Supervisory Responsibilities

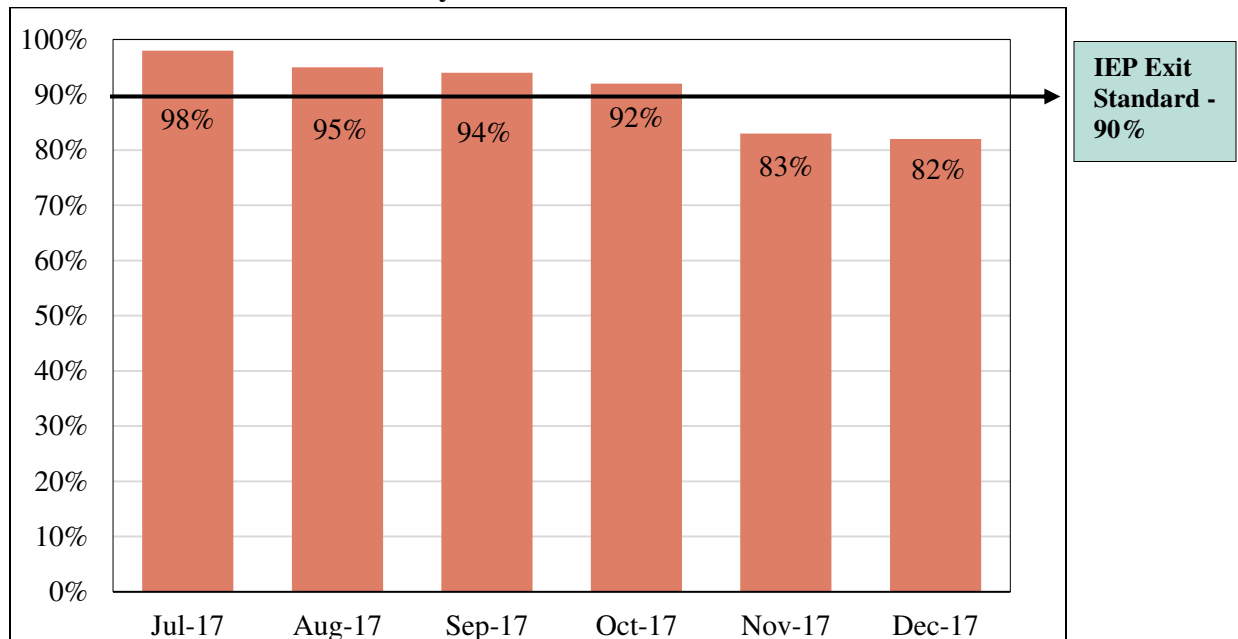
There are two Exit Standards related to supervisory caseloads and expectations for supervisors of case-carrying social workers, each of which is designated as an Outcome to be Maintained. The first Exit Standard requires that supervisors are responsible for supervising no more than five case-carrying social workers and one case aide or family support worker (IEP citation I.D.26.a.i.). 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.).

Performance for the period July 1 through December 31, 2017:

Monthly performance ranged from 82 to 98 percent of supervisors meeting the required standard (see Figure 35). CFSA reports that when supervisors are out on family and medical leave, workers are temporarily assigned to other supervisors.

¹⁹¹ In addition to these unassigned cases, some ongoing cases remained assigned to investigative social workers, supervisors and program managers even after an ongoing case is 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 during this transition time. It is unclear from the data how long these cases have been in the transfer process.

**Figure 35: Supervisors Responsible for No More Than Five Case-Carrying Workers and a Case Aide/FSW
July – December 2017**



Source: CFSA Administrative Data, FACES.NET report CMT387

Between July and December 2017, the percentage of ongoing cases carried by social workers ranged from 93 to 97 percent monthly this period¹⁹² and met the required level of performance four out of the six months during the monitoring period. This is an improvement from the previous two monitoring periods, during which performance only met the required level for one out of the previous 12 months. The Monitor considers both of these Exit Standards to be maintained.

2. 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. The IEP requires that 90 percent of newly hired CFSA and private agency frontline staff receive 80 hours of pre-service training prior to carrying cases (IEP citation I.D.27.a.) and 90 percent of newly hired CFSA and private agency supervisors complete 40 hours of pre-service training on supervision within eight months of assuming supervisory responsibility (IEP citation I.D.27.b.). During the current monitoring period, CFSA maintained required performance on pre-service training for frontline staff (96%)¹⁹³ and pre-service training for supervisors (100%).

¹⁹² 3 to 7% of cases each month were carried by supervisors, program managers, or workers in Entry Services.

¹⁹³ 3 direct service staff received waivers due to previously having completed the training.

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.) and 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, on June 30 every year, and will therefore be reported in the next monitoring report.

Over the past year, CFSA's key strategies for improving case practice have included mandatory training and coaching. As has been reported in the past, participation in trainings developed to enhance worker and supervisors skills and promote high quality case practice has been inconsistent even though attendance is theoretically mandatory.

Consistent with the 2017 *LaShawn* Strategy Plan, CFSA has employed the following training strategies to improve the quality of investigations (IEP I.A.2.) and increase consistency of quality performance in its case planning process (IEP I.B.17.):

- *By May 30, 2017 Entry Services Supervisors will be required to attend the relevant Mastering the Art of Child Welfare Supervision MACWS 2.0 trainings (2017 Strategy Plan, strategy 2.2, p.4).*

The MACWS training for supervisors includes three tiers consisting of eight modules some of which include *Revisiting Your Potential*, *Critical Thinking and the Paradigm Shift*, *The Clinical Supervision Toolbox*, *Consultation and Information Sharing Framework* and *Clinical Supervisor and Engagement*.

Entry Services supervisors are only required to complete six of the eight modules and ongoing permanency and in-home supervisors are required to complete all eight modules. As noted in previous reports, participation in these trainings remains far below a level that could be expected to produce systemic practice improvement. For over a year now, to the agency's detriment, attendance and participation in these trainings has been poor.

As of December 31, 2017, CFSA reports that of the 41 ongoing permanency and in-home supervisors, required to complete the three tiers of the MACWS training, 6 (15%) completed Tier 1, 7 (17%) completed Tier 2, four (10%) completed Tier 3 and 1 (2%) had completed all three tiers of the training. Additionally, only (10%) of 28 required supervisors in Entry Services have completed all three tiers of the training.

- *By May 15, 2017, Entry Services in conjunction with the Child Welfare Training Academy (CWTA) will provide social workers with investigative process refresher training (2017 Strategy Plan, strategy 1.1, p.4).*

CFSA reports that as of August 15, 2017, 163 of 164 (99%) required Entry Services staff had completed the *Back to Basics* refresher training. The Monitor attended multiple *Back to Basics* trainings and observed these trainings to focus on core elements of case practice and expectations related to quality Entry Service practice.

- *Beginning May 1, 2017, the Deputy Directors of Community Partnership and Program Operations will develop and implement mandatory every other week webinars to be led by Program Managers on topics designed to improve case planning and documentation. Private agency social workers and supervisors will be invited and encouraged to participate (2017 Strategy Plan, strategy 1.1, p.6).*
- *Beginning May 1, 2017, Supervisors will follow up the webinars by re-enforcing during supervision and providing examples of good case planning and documentation (2017 Strategy Plan, strategy 1.2, p.6).*

Between May and November 2017, CFSA hosted 13 webinars on key elements of practice. These webinars were mandatory for social workers and supervisors and optional for program managers. Webinar topics included family engagement, assessing and planning for safety, teaming in the workplace and working with substance abuse. As of March 2018, data indicate that only six (25%) of 24 supervisors attended all of the webinars; an additional 10 (42%) supervisors attended at least 10 webinars; and three supervisors, all from OYE, did not attend any. CFSA also reports that four of seven (57%) program managers attended all of the webinars and one has not attended any. Social worker and family support worker attendance also has been inconsistent, ranging from 47 to 96 workers at each session.¹⁹⁴

Lack of accountability for attendance by supervisors and frontline staff at required trainings has likely impacted effectiveness of these strategies. In addition, it is unclear if staff from NCCF, CFSA's Maryland private provider partner, are participating in these trainings, which is critical to ensuring consistency in practice moving forward.

3. Training for Foster and Adoptive Parents

The IEP requires that 95 percent of foster parents complete a required 15 hours of pre-service training hours (IEP citation I.D.29.a.) and that 90 percent of adoptive parents complete a required 30 hours of pre-service training (IEP citation II.F.20.).¹⁹⁵ During the current monitoring period,

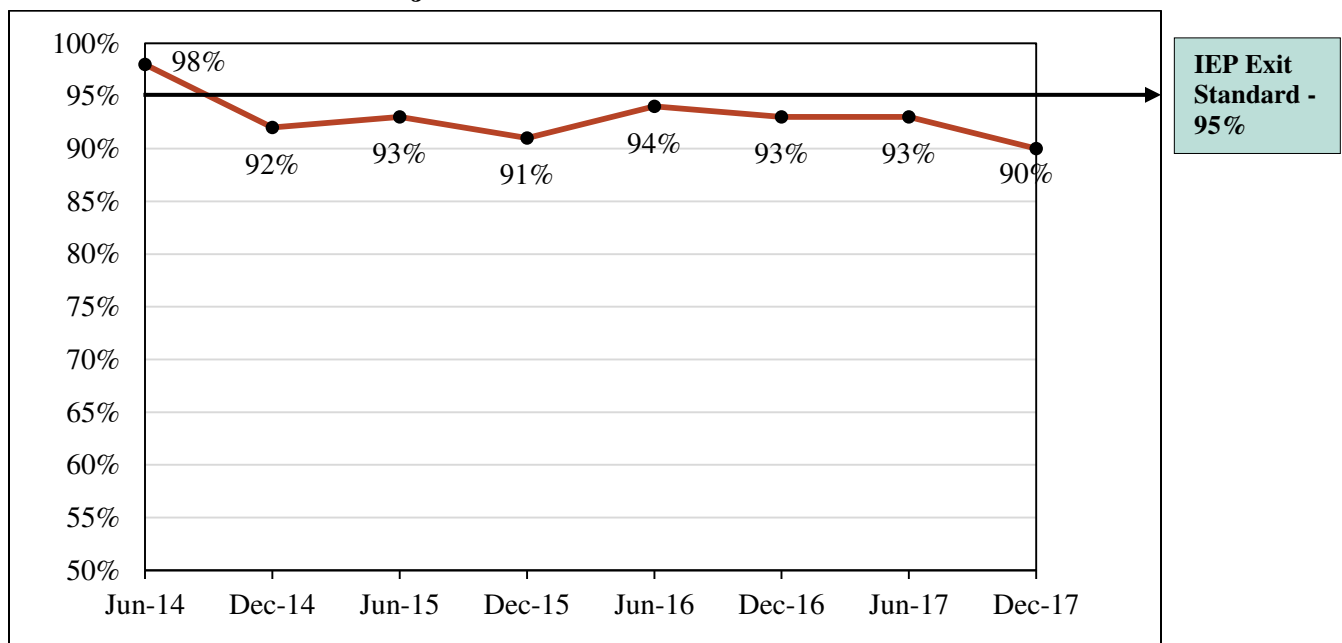
¹⁹⁴ As of November 30, 2017, there were 131 social workers and family support workers in the Community Partnership and Permanency Administrations.

¹⁹⁵ 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.

CFSA maintained performance on pre-service training for foster and adoptive parents¹⁹⁶ with 99 percent (80 of 81) of foster parents having completed the required number of pre-service training hours.

The IEP requires that 95 percent of foster parents receive 15 hours of in-service training annually (IEP citation I.D.29.b.).¹⁹⁷ Of foster parents relicensed during this monitoring period, 90 percent (164 of 182) completed the required number of in-service training hours. The Monitor is concerned that performance has remained below the required level of performance since December 2014 and considers this Exit Standard to be partially maintained.

**Figure 36: Foster/Adoption Parents with 30 hours of In-Service Training
June 2014 – December 2017**



Source: CFSA Administrative Data, FACES.NET report TRN009

Data represent performance for each 6 month monitoring period (January – June and July – December)

4. Timely Approval of Foster Parents

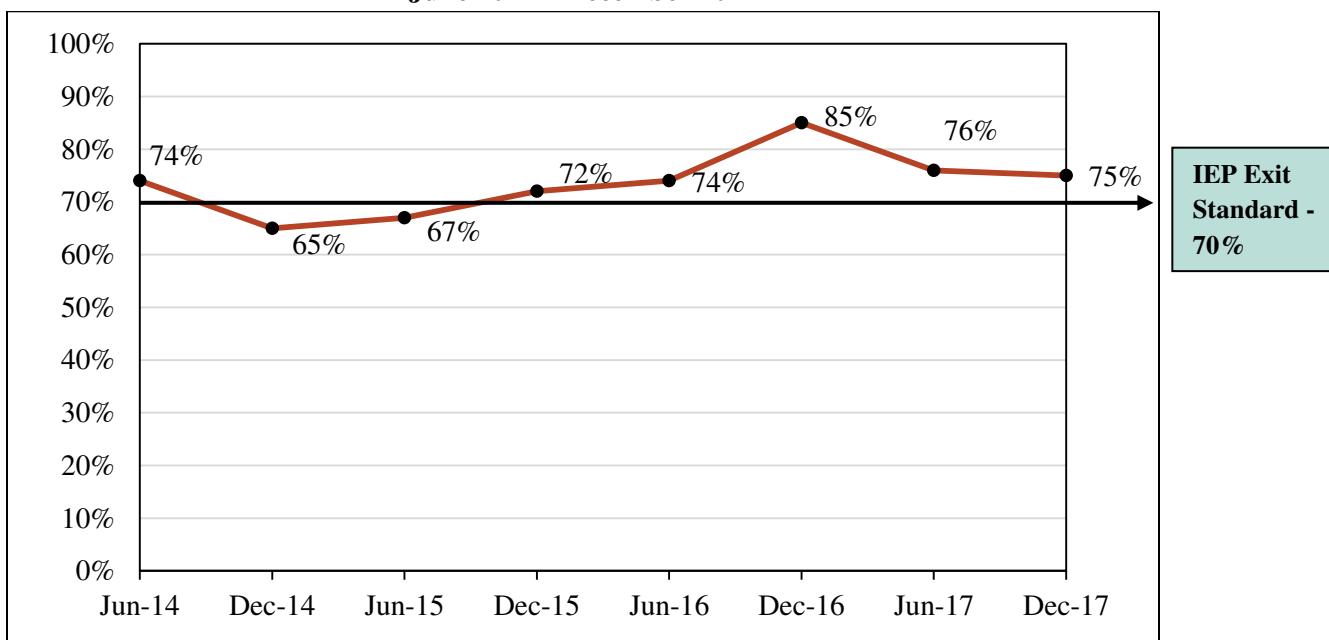
CFSA is responsible for licensing and monitoring foster homes and placement facilities in the District of Columbia. During the current monitoring period, CFSA transitioned from contracting with seven private provider agencies to a single provider in Maryland with responsibility to license Maryland homes. This Exit Standard requires that 70 percent of homes licensed will have been

¹⁹⁶ 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.

¹⁹⁷ 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.

approved within 150 days of the foster parent beginning training (IEP citation I.B.14.). This Exit Standard is designated as an Outcome to be Maintained and required performance has been maintained during this period.

**Figure 37: Approval of Foster Parents within 150 Days of Beginning Training
June 2014 – December 2017**



Source: CFSA Administrative Data, FACES.NET report PRD202

Data represent performance for each 6 month monitoring period (January – June and July – December)

Performance for the period July 1 through December 31, 2017:

Between July and December 2017, CFSA and the private agencies licensed 53 foster homes; 40 (75%) of these homes were licensed with the required number of pre-service training hours and within the 150 day timeframe.¹⁹⁸ Performance on this Exit Standard remains above the level required by the Exit Standard.

5. 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.¹⁹⁹ 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

¹⁹⁸ Of the 40 homes that are considered compliant during the current monitoring period, 8 homes whose licensure took longer than 150 days are considered compliant due to circumstances that were beyond the District's control.

¹⁹⁹ D.C. Code §4-1371

from various District agencies^{200,201} and community members. As of the writing of this report, six community member positions are vacant. The Monitor and staff are members of the City-wide Child Fatality Committee. The Committee is organizationally located and staffed within the Office of the Chief Medical Examiner (OCME) and cases are reviewed when all requested documents are 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 within four years prior to their 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, Training, Health Services, Clinical Practice, Program Operations, General Counsel and other related departments. The Monitor participates in these reviews. The Internal Committee procedures require review of cases within 60 days²⁰² of notification of the child's death.

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

Performance for the period July 1 through December 31, 2017:

City-wide Child Fatality Review Committee:

In December 2017, the Mayor's Office of Talent and Appointments swore-in five new community members to the Committee, filling vacancies that have existed for some time. The new members have background experience in medicine, child welfare and community engagement.

Between July and December 2017, the Committee reviewed a total of 105 cases, with most fatalities reviewed through a cluster case design²⁰³. All fatalities reviewed occurred in CY2015 and 2016 and the majority of deaths involved infants. The Committee's goal is to ensure that as of June 2018, reviews of all fatalities occurring prior to CY2017 will be complete.

²⁰⁰ These agencies include Department of Human Services (DHS), Department of Health (DOH), Office of the Chief Medical Examiner (OCME), CFSA, Metropolitan Police Department (MPD), Fire and Emergency Medical Services Department (Fire and EMS), Office of the State Superintendent of Education (OSSE), District of Columbia Public Schools (DCPS), District of Columbia Housing Authority (DCHA), Office of the Attorney General (OAG), Superior Court of DC, Office of the US Attorney, Department of Behavioral Health (DBH), Department of Health Care Finance (DHCF), Department of Youth Rehabilitation Services (DYRS), 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.

²⁰¹ 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.

²⁰² In March 2016, CFSA changed their procedural timeline for review from 45 to 60 days. This change has not yet been made within policy.

²⁰³ There are two 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 special category or characteristic.

During this six month period, eight recommendations were adopted by the Committee. The recommendations pertain to addressing the safety and well-being of families, navigating services and coordinating medical treatment for mothers and their newborn infants. All recommendations made in 2017, as well as Agency responses to those recommendations, will be included in the 2017 Annual Report, due September 30, 2018.

The 2016 Annual Report was completed on September 30, 2017 and is available for public access on the Office of the Chief Medical Examiner's website.²⁰⁴

Internal Child Fatality Review Committee:

In CY2017, CFSA reviewed a total of 26 fatalities in families who had active or prior involvement with CFSA; 13 fatalities of these fatalities were reviewed between July and December 2017. As referenced above, the Internal Child Fatality Review Committee is required to review fatality cases within 60 days of notification of the death. CFSA reports that six fatalities were reviewed outside of the 60 day timeframe – four fatalities were reviewed within 90 days and two fatalities were reviewed over 90 days after notification. CFSA reports nine recommendations were made by the Committee during fatality reviews in CY2017. The recommendations fall within five categories – services; training; supervision and consultation; policy and research; and systemic activities.

In March 2018, CFSA provided a draft of its 2017 Annual Child Fatality Report, which includes analysis of data and findings from the 26 fatalities reviewed during the year. General demographic findings are bulleted below:

- Twenty (77%) of the 26 fatalities involved infants. These data reflect a rise in the percentage of infant fatalities since CY2016, when less than half (45%) of fatalities involved infants. The Medical Examiner confirmed that one of the infant fatalities was due to parent abuse homicide. Many involved unsafe sleeping arrangements.
- Four (15%) fatalities involved youth ages 17 and older and the manner of death as homicide in all cases, three were gunshot victims and one was a stabbing victim.
- The majority of fatalities (62%) involved families who did not have current involvement with CFSA; eight (30%) families were actively involved with CFSA.

Additional analysis, recommendations and implementation status of the recommendations are discussed in the full report which is not yet complete. The Monitor will include additional information in the next monitoring report.

²⁰⁴ The 2016 City-wide Child Fatality Committee Annual Report may be accessed here:
<https://ocme.dc.gov/sites/default/files/dc/sites/ocme/publication/attachments/CFRC2016AR%20FINAL%20REPORT.pdf>

6. Quality Assurance

Quality Assurance

A strong culture of accountability and the ability to integrate continuous quality improvement (CQI) activities across the agency are critical to CFSA's ability to identify practice and policy strengths as well as to quickly identify and correct barriers to quality services for children and families.

During the current monitoring period, CFSA continued to build on and refine its CQI processes. These include a reorganization of Contract Monitoring staff and responsibilities to monitor policy and practices changes made through the Safe and Stable Families Redesign and better integration and dissemination in real-time of lessons learned through existing CQI practices such as QSRs, AdoptionSTAT and GuardianshipSTAT. As discussed earlier, CFSA also continued review efforts to assess Hotline decision-making and practice related to referrals of abuse and neglect.

CFSA and the Monitor are currently planning to conduct case record reviews to both assess performance on identified Exit Standards and inform practice in the areas of acceptable investigations and FAs. The 2018 *LaShawn* Strategy Plan includes strategies that require development and implementation of recommendations to address any practice or policy deficiencies identified during these reviews.

Data and Technology

CFSA uses data for management purposes and to assess the quality of its practice. As was discussed in the previous monitoring report, CFSA submitted a response to the federal Administration for Children and Families 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's current timeline includes beginning the planning process in FY2018 and building-out the system in FY2019 and FY2020, with a goal of having the new system fully operational in FY2021.²⁰⁵

CFSA continues to struggle to use data to promote appropriate, enduring placements for children who enter foster care by matching a child's needs with a resource parent's strengths. The lack of a functioning placement matching system contributes to placement disruptions and the need for

²⁰⁵ 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%. In order to ensure there are sufficient funds available to pay for the transformation, CFSA postponed drawing down fourth quarter FY2017 Title IV-E waiver dollars until FY2018. This will help provide additional funding to cover this important investment. CFSA will also need to request additional local dollars as this was not included in CFSA's approved FY2018 budget.

replacement of children on an almost daily basis. For example, during the month of November 2017, 49 children required a placement. Only eight of these 49 children needed a placement due to initial or re-entry into foster care while the vast majority (84%) were replacements. While not all of these replacements were disruptions, for example when children move to a kinship foster home or other planned placement change to promote permanency, many of these replacements may have been circumvented had a placement matching system been utilized from the beginning. After reviewing several external databases which utilize tested algorithms to match child characteristics with appropriate providers, CFSA has decided to create this functionality within FACES.NET. This work is expected to be complete in the next couple of months.

7. Financing

Federal Revenue

CFSA continues to demonstrate its ability to maximize federal Title IV-E revenue through quarterly claims for Title IV-E²⁰⁶ as well as providing documentation to support its claiming under the Title IV-E waiver²⁰⁷. Through the Title IV-E waiver, CFSA has 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.

Table 13 presents the actual, approved or proposed Title IV-E federal resources used to support services to children and families involved with CFSA. For January through March 2017, CFSA reports its Title IV-E penetration rate of 61 percent for foster care cases and 71 percent for adoption cases. For April through June 2017, CFSA reports its Title IV-E penetration rate of 63 percent for foster care cases and 73 percent for adoption cases.

²⁰⁶ The District of Columbia continues to claim federal Title IV-E dollars for adoption, guardianship and training outside of their Title IV-E waiver.

²⁰⁷ 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. The waiver is set to expire March 31, 2019. CFSA's Allocation Cap for FY2017 was \$39.5 million.

**Table 15: Actual and Budgeted Gross Title IV-E Federal Funds Operating Budget
FY2009 – FY2018**

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 (approved)	\$62.8	\$226.5

Source: CFSA FY2010 – 2017 Actual Budget, FY2018 Approved Budget and Financial Plan and District’s Financial System (SOAR)

Budget

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

CFSA’s approved FY2018 overall budget is \$226,495,842, of which \$159,633,000 (70%) is local funding.²⁰⁸ This represents a decrease of 2.6 percent from the approved FY2017 budget. CFSA’s approved FY2018 budget includes 820 FTEs, a decrease of five FTEs from FY2017. Overall, the majority of funding is allocated to four areas:

- Agency Programs, \$80.9 million,²⁰⁹ which includes permanency and kinship support;
- Entry Services, \$23.6 million, which includes CPS and the Healthy Horizon’s Assessment Clinic;
- Office of Well-Being, \$11.2 million; and
- Community Partnerships, \$30.8 million, which includes in-home and community-based services.

²⁰⁸ Includes both local funds and Special Purpose Revenue funds.

²⁰⁹ CFSA’s FY2018 budget is based on a projection of 1,000 children in foster care at any time. CFSA continues to have fewer than 1,000 children in foster care.

In the Monitor's assessment, CFSA's approved FY2018 budget provides sufficient resources to continue moving forward with the Temporary Safe Haven Redesign, Safe and Stable Families Redesign and other initiatives. CFSA has continued to have budget surpluses in the past few years²¹⁰ primarily due to the reduction in the foster care population. CFSA leadership believes the current budget provides the agency with the flexibility to react to any unexpected changes including increased calls to the Hotline and entries into foster care. CFSA has already exercised this flexibility to increase staffing within Entry Services, which is formally captured in the FY2019 budget discussed below.

Proposed FY2019: October 1, 2018 – September 30, 2019:

CFSA's proposed FY2019 overall budget is \$224,240,986, of which \$162,201,210 (72%) is local funding²¹¹. This represents a decrease of one percent from the approved FY2018 budget. Additionally, CFSA's approved FY2019 budget includes 821 FTEs, an increase of one FTE from FY2018. Overall, the majority of funding is allocated to four areas:

- Agency Programs, \$75.8 million,²¹² which includes permanency and kinship support;
- Entry Services, \$28.8 million, which includes CPS and the Health Horizon's Assessment Clinic;
- Office of Well-Being, \$8.3 million; and
- Community Partnerships, \$28.1 million, which includes in-home and community-based services.

Agency Programs: Permanency and Placement

As a result of the continued decrease of the foster care population, CFSA was able to responsibly reduce the FY2019 placement budget as well as generate some cost savings in contract monitoring, child placement and prevention services.²¹³ CFSA reports that these savings are associated with streamlined administrative processes and right-sizing services and will not result in a reduction of available services for children and families. CFSA reports that the reduction in the permanency budget does not compromise key components of TSHR including permanency and placement incentives and, when needed, difficulty of care rate increases for foster care payments.

While the agency is charged with promoting positive outcomes for older youth, and there has been an increase of \$640,000 in Teen Services, the budget eliminates a FY2018 add-on appropriation to support rapid housing vouchers for youth aging out of foster care. CFSA reports this line item has been underspent and thus not needed. However, given the critical importance of housing for

²¹⁰ CFSA attributes this surplus to fewer costs associated with children coming into foster care.

²¹¹ Includes both local funds and Special Purpose Revenue funds.

²¹² 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.

²¹³ CFSA has consistently run a surplus in the placement budget. In FY2017, the approved budget (\$46 million) was \$3 million higher than the actual (\$43 million). The approved placement budget for FY2018 was \$47.8 million, which CFSA reports currently underspending, and the proposed FY2019 budget is \$42 million.

youth leaving foster care and the high cost of housing in the District, the Monitor is concerned that this reduction could have a negative impact on young people aging out of care.

Entry Services:

The FY2019 budget shifts resources to Entry Services including an increase of \$2.7 million and 17 FTEs to CPS investigations and FA. This increase reflects a change in staffing that was made during FY2018 and will be sustained through the FY2019 proposed budget. The Monitor supports this increase. Further as discussed, additional resources may still be needed to support Entry Service work to meet the performance required by multiple Exit Standards pertaining to CPS practice.

Community Partnerships:

CFSA's federal title IV-E waiver is set to expire at the end of March 2019, which accounts for a \$2.8 million decrease in the FY2019 Community Partnership budget. Through the waiver, CFSA has been able to redirect cost savings in foster care to fund community-based programs including Project Connect, Mobile Stabilization Services and Parenting Education Support Programs (PESP). CFSA continues to report underutilization of Project Connect services and is planning to phase this program out at the end of the waiver period. CFSA also reports they will redirect local funds to continue to fund Mobile Stabilization Services and PESP. As has been reported in previous monitoring reports, the Monitor is concerned that there is a gap in services available to families requiring in-home and child protective services, specifically for those high need families who require intensive family preservation services. For families in need of intensive family support, the Monitor believes that CFSA needs to provide or purchase a program with a model offering more intensive in-home supports.

Office of Well-Being:

The budget includes an investment in specialized therapeutic services for children and youth in foster care including developmental psychotherapy, dialectical behavior therapy and other behavior modification services that are currently not readily available through the Department of Behavioral Health. This budget increase is intended to improve the early assessment and connection of children and youth to appropriate behavioral health interventions.

Data and Technology:

The FY2019 budget includes a critical one-time enhancement of \$2 million in local funds to support the transition from the current and soon to be antiquated FACES.NET to a better functioning CCWIS data system.

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
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
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

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
OAG: Office of the Attorney General
OCME: Office of the Chief Medical Examiner
OYE: Office of Youth Empowerment
PECFAS: Preschool and Early Childhood Functional Assessment Scale
PEER: Parent Engagement, Education and Resource
PESP: Parent Education Support Program
PIP: Performance Improvement Plan
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
USDA: United States Department of Agriculture
YTP: Youth Transition Plan

APPENDIX B
LaShawn 2017 Strategy Plan

Preamble:

Under CFSA's Four Pillars framework, Temporary Safe Haven embodies our values about placement—the shortest stay possible in care and quickest safe exit to a permanent home. With our Temporary Safe Haven Redesign, CFSA is using our normal five-year contract cycle as an opportunity to seek competitive bids to serve our children placed in Maryland. After extensive planning and expert consultation, we have released a Request for Proposals (RFP) that will take our public-private partnership to a new level by contracting with a single provider for case management and recruitment, retention and support of foster parents for family-based homes in Maryland. As a result of this newly designed partnership, we expect to have a placement array in the District of Columbia and Maryland that has a sufficient number of foster parents trained and supported to provide services to the range of children and youth we serve. Placement stability will increase; length of stay in foster care will decrease; and exits to reunification, guardianship and adoption will increase. This overarching strategy affects all aspects of our work and is designed to improve quality and outcomes, including those addressed by *LaShawn*, for our children and families.

Additionally, CFSA is committed to serving children and families in their own homes with services and supports to help them stay together safely. The number of children served by our Health Families/Thriving Community Collaborative partners and through CFSA In-Home has increased, and the number of children coming into foster care has decreased. In addition, we are at the mid-point of our Title IV-E Waiver, which ends in 2019. As a result, we have a unique opportunity to further shift our efforts to prevention and leverage these resources to deepen how we provide prevention services. With our Safe and Stable Families Redesign, we hope to work with the Collaboratives and other community-based organizations to build an expanded and higher quality system of community-based supports and services for families.

While not specifically delineated in the CY2017 *LaShawn* Strategy Plan, our actions to successfully implement the Temporary Safe Haven Redesign (as described in RFP No. DCRL-2017-R-0051) affecting placements of children in Maryland and the simultaneous changes to improve the placement array and resources available to children placed in the District of Columbia are strategies to meet *LaShawn* outcomes. These strategies as well as the strategies related to the Safe and Stable Families Redesign are incorporated by reference into the CY2017 *LaShawn* Strategy Plan. The Court Monitor and her staff have been and will continue to be essential partners in both redesign processes, allowing for feedback on these efforts. CFSA submits this Strategy Plan after consultation with the Court Monitor and Counsel for Plaintiffs.

IEP Requirement	LaShawn Performance Metric	Barriers	Strategy to Achieve
Timely Initiation of Investigations [IEP I.A.1.a.]	<u>95%</u> 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.	<ol style="list-style-type: none"> 1. Hotline Workers and Supervisors do not appropriately screen and triage reports—specifically as they relate to educational neglect. 2. Difficulties confirming location of caregivers, entering locked buildings and neighborhood safety. 3. Assignments and safe case closures are impacted by staff out of rotation for extended periods. 4. Access to cars throughout the month. 	<p>In addition to implementing the recommendations from the September 2016 Assessment of the District of Columbia's Child and Family Services Agency Child Abuse and Neglect Hotline and Intake Practices, CFSA will do the following:</p> <ol style="list-style-type: none"> 1.1 Starting April 1, 2017, Entry Service Supervisors and Program Managers will listen daily to incoming calls in real time and use instant messaging to prompt additional questions to be asked during reports. 1.2 With the Truancy Task Force, the Deputy Director for Entry Services will review Educational Neglect policy, process and data to make and implement recommendations for changes by September 2017. 2.1 By May 15, 2017, the Diligent Search Unit will organizationally move to Entry Services Administration. 2.2 By April 30, 2017, Entry Services will create Response Team(s) consisting of a CPS Social Worker and Diligent Search staff to respond together to referrals and to assist with locating children and families. 2.3 Entry Services will continue "huddles," during which investigative and supportive activities are assigned to social workers to move toward timely contact. The Diligent Search supervisor will be included in the huddles to support this effort. 3. By April 15, 2017, the Deputy Director for Entry Services will complete a staffing analysis of social workers and Family Support Workers (FSWs) to include number of staff, shifts, impact of extended leave and assignment process and will provide recommendations to be implemented in the next quarter.

IEP Requirement	LaShawn Performance Metric	Barriers	Strategy to Achieve
Timely Closure of Investigations [IEP I.A.1.b.]	<u>90%</u> of investigations will be completed and a final report of findings shall be entered in FACES.NET within 35 days.	<ol style="list-style-type: none"> 1. Ineffective time management and support of investigative activities and documentation to ensure investigations are closed within 35 days with complete documentation. 2. Unable to locate families to complete investigation. 	<ol style="list-style-type: none"> 1.1 Entry Services will continue daily huddles, during which investigative and supportive activities are assigned to social workers and FSWs to help move the investigation toward timely closure. 1.2 By April 1, 2017, Entry Services Program Managers and Program Administrators will lead weekly 10-15 day R.E.D. Teams to ensure tasks, documentation, and supervision is consistently occurring. 2. By April 30, 2017, Entry Services will create Response Team(s) consisting of a CPS Social Worker and Diligent Search staff to respond together to referrals and to assist with locating children and families. <p><i>See also</i> Strategy 3 on staffing analysis in Timely Initiation of Investigations.</p>

IEP Requirement	<i>LaShawn</i> Performance Metric	Barriers	Strategy to Achieve
Acceptable Investigations [IEP I.A.2.]	<p>CFSA shall routinely conduct investigations of alleged child abuse and neglect.</p> <p><u>80%</u> of investigations will be of acceptable quality.</p>	<p>Social workers have inconsistent understanding of the requirements to complete an investigation of acceptable quality.</p> <p>2. Inexperienced supervisors</p> <p>Reviews using the Acceptable Investigation tool lack inter-rater reliability.</p>	<p>1.1 By May 15, 2017, Entry Services in conjunction with the Child Welfare Training Academy (CWTA) will provide social workers with investigative process refresher training.</p> <p>1.2. Entry Services Supervisors will continue to focus on providing clinical supervision to staff emphasizing engagement, critical thinking and collaborative decision-making.</p> <p>1.3 By April 15, 2017, Entry Services Program Managers will begin reviewing at least 10 investigations per month with the Supervisors and will provide additional support and coaching to complete investigations of acceptable quality. When Entry Services is fully staffed, the number of investigations to be reviewed will increase.</p> <p>1.4 By June 30, 2017, the Deputy Director for Entry Services will assess the policies and practices from the Family Assessment Administration and develop recommendations for improvements with timelines for implementation.</p>

IEP Requirement	<i>LaShawn</i> Performance Metric	Barriers	Strategy to Achieve
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.	<p>Assessments:</p> <ol style="list-style-type: none"> 1. Social workers and Supervisors are completing assessments as a compliance exercise rather than a clinical practice which will inform case practice and improve outcomes for children and families. <p>Service Provision:</p> <ol style="list-style-type: none"> 2. Lack of follow through by Social Worker/Supervisory Social Worker on referrals for services for both children and families. 	<ol style="list-style-type: none"> 1.1 Beginning April 3, 2017, Program Operations will partner with the Office of Well Being and CWTA to provide additional training and information to Social Workers and Supervisors on the connection between accurate assessments, provision of clinical services and improved outcomes for children and families. 1.2 Beginning April 3, 2017, the Office of Well Being will provide Child and Adolescent Functional Assessment Scale (CAFAS)/Pre-school Aged Assessment Scale (PECFAS) and Caregiver Strengths and Barriers Assessment (CSBA) completion data monthly to the Deputy Directors of Program and Community Partnership. These data will also be reviewed at the monthly learning collaborative meetings to encourage sharing of specific strategies that are successful in achieving timely completion of assessments. 1.3 By June 30, 2017, Supervisors will train and coach workers on the use of the <i>Well Being Profile</i> and will use the <i>Well Being Profile</i> during group supervision, R.E.D. Team meetings, placement disruption meetings, permanency meetings, youth transition plan meetings and the learning collaboratives to inform case planning. 2.1 Beginning April 3, 2017, the Office of Well Being will provide Program Operations, the private agencies and Community Partnerships with a weekly report on the status of all new referrals recently enrolled at the Department of Behavioral Health. The report will be reviewed at a weekly huddle to resolve the barriers to scheduling or starting the identified service.

IEP Requirement	<i>LaShawn</i> Performance Metric	Barriers	Strategy to Achieve
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. Evidence of quality case planning activity and specific services is not reflected within the case plan in contact notes. 2. Parents cannot articulate what are the case plan goals and what the social worker has done to assist them with safe case closure. 	<ol style="list-style-type: none"> 1.1 Beginning May 1, 2017, the Deputy Directors of Community Partnership and Program Operations will develop and implement mandatory every other week webinars to be led by Program Managers on topics designed to improve case planning and documentation. Private agency social workers and supervisors will be invited and encouraged to participate. 1.2 Beginning May 1, 2017, Supervisors will follow up the webinars by re-enforcing during supervision and providing examples of good case planning and documentation. 2. By April 15, 2017, CFSA will review and incorporate action steps from the Child and Family Services Review Program Improvement Plan (CFSR PIP) regarding parent engagement into this plan.

IEP Requirement	<i>LaShawn</i> Performance Metric	Barriers	Strategy to Achieve
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</p>	1. Workers have inconsistent understanding about how to effectively create a safety plan and document safety assessments.	<p>1.1 Based on its ongoing reviews, Agency Performance will continue to provide feedback and guidance to CFSA and Provider staff on appropriate and acceptable actions and documentation for assessing safety that includes health, educational and environmental factors. In addition, the template designed by Agency Performance to provide a standardized documentation format on safety assessments is being reviewed by the Deputy Directors and will be implemented by May 1, 2017.</p> <p>1.2 Beginning May 8, 2017, Program Operations, Private Agencies and Community Partnership Program Managers will focus on coaching and mentoring supervisors to improve front line practice of social workers by providing a structured set of core elements, including safety plans and assessments, to be implemented during individual and group supervision.</p>

IEP Requirement	LaShawn Performance Metric	Barriers	Strategy to Achieve
Visitation: First 4 weeks of a new placement or placement change Visitation [IEP I.A.6.a.-d., 10, 11]	<p>a. 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> <p>b. 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>1. Social Workers are not able to gain access to apartment buildings outside of normal business working hours and do not engage families to schedule visits timely or consistently document efforts and contacts in FACES.NET.</p> <p>2. Transfer of cases does not always involve a warm handoff from CPS to In- Home.</p>	<p>1. By April 17, 2017, Program Operations and Community Partnerships will develop a weekly visitation accountability process to track and enhance performance and identify individual workers and/or supervisory units who need additional support. At the end of every month, a “missed visit efforts” report will be submitted to Agency Performance for audit.</p> <p>2. Beginning May 15, 2017, Entry Services and Community Partnerships will implement a new case transfer process that allows In-Home Social Workers to engage more rapidly with families and ensure a joint home visit occurs within the first 20 days of the Family Assessment being initiated or within 30 days of the Investigation being initiated.</p>
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 - 12 mos): 45%</p>		<p>CFSA is working with Casey Family Programs to develop targeted strategies to improve permanency outcomes. By May 31, 2017, CFSA will incorporate the targeted strategies into the Strategy Plan.</p>

IEP Requirement	<i>LaShawn</i> Performance Metric	Barriers	Strategy to Achieve
Placement-related Requirements [IEP I.B.8.b.; 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		CFSA will implement its Temporary Safe Haven Redesign Plan as described in RFP No. DCRL-2017-R-0051.

APPENDIX C
LaShawn 2018 Strategy Plan

IEP Requirement	<i>LaShawn</i> 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><u>80%</u> of investigations will be of acceptable quality.</p>	<p>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.</p>
Services to families and children to promote safety, permanency and well-being [IEP I.A.3.]	<p>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.</p>	<p>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.</p> <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. <p>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.</p>

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</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.]	<p>No child shall stay overnight in the CFSA Intake Center or office building.</p>	<ol style="list-style-type: none"> 1. In addition to strategies identified as part of overall Temporary Save 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.