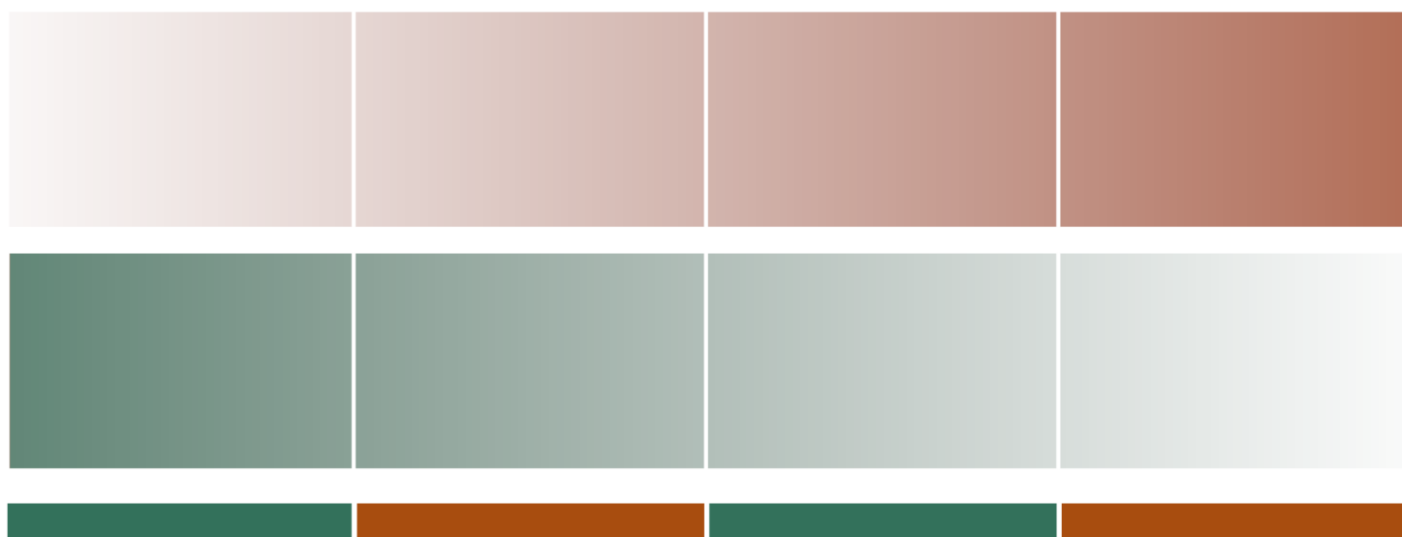




***LASHAWN A. v. BOWSER PROGRESS REPORT
FOR THE PERIOD JANUARY 1 – JUNE 30, 2016***



November 21, 2016

LaShawn A. v. Bowser
Progress Report for the Period January 1 – June 30, 2016

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LaShawn A. v. Bowser
Progress Report for the Period January 1 – June 30, 2016

I. INTRODUCTION

This report on the performance of the District of Columbia's child welfare system for the period of January 1 through June 30, 2016 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 is measured.

The Monitor's last report on *LaShawn* implementation was released on June 7, 2016. With few exceptions, this current report is based on performance data from January 1 through June 30, 2016 to determine progress in meeting the IEP Exit Standards and the objectives of the *LaShawn* 2016 Strategy Plan. Permanency data are measured on a fiscal year cycle so performance as of September 30, 2016 is included in this report. Some information on strategy implementation, continuous quality improvement (CQI) and CSSP monitoring activities is current through October 2016. As discussed later in this report, Child and Family Services Agency (CFSA) Director Raymond Davidson resigned in October 2016 and has been replaced on an interim basis by the Deputy Mayor for Health and Human Services and prior Director of CFSA, Brenda Donald.

A. Methodology

The primary sources of information about performance are data provided by the District's Child and Family Services Agency (CFSA) and verified by the Monitor. The Monitor reviews

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* 2016 Strategy Plan was filed on April 8, 2016 after consultation with the Monitor and Plaintiffs' counsel (*see Appendix B*).

extensive aggregate and back-up data and has access to staff and electronic case records on FACES.NET⁴ to verify performance.

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

➤ **Review of Hotline, Educational Neglect and Hotline R.E.D. Team Screening Decisions**

The Monitor and CFSA staff worked collaboratively to develop structured data collection instruments⁵ and review a statistically significant sample of referrals for allegations of child abuse or neglect from January 2016 that were screened out at the hotline or by the Educational Neglect Triage Unit to determine the appropriateness of these decisions. In April 2016, the Monitor and CFSA staff developed an instrument to review R.E.D. Team fidelity and decision making at the Hotline R.E.D. Team. These reviews were completed in late April, early May 2016 and preliminary data were included in the last monitoring report. This report includes recommendations developed by CFSA in consultation with the Monitor to address the review findings.

➤ **Validation of Good Faith Efforts to Initiate an Investigation**

The Monitor and CFSA staff reviewed FACES.NET data for June 2016 to validate instances where the social worker and supervisor had indicated good faith efforts had been made to timely initiate an investigation when children could not be seen and interviewed during the initial investigation period.

➤ **Assess the Quality of Investigations**

During this monitoring period, CFSA provided the Monitor with data on its findings from a review of the quality of 132 child protective services investigations completed between January and June 2016. Each investigation was reviewed by at least two CFSA staff or one CFSA and one Monitor staff. Monitor staff reviewed 24 (18%) of these investigations.

➤ **Review of Young Children Placed in Congregate Care Settings and Children Placed over 30 Days in Emergency 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

⁴ FACES.NET is CFSA's automated child welfare information system.

⁵ The Children's Research Center (CRC) had previously developed a tool to assess customer service, quality of documentation and decision making at the hotline following implementation of the hotline SDM tool. The CRC instrument was slightly modified for purposes of this review.

of six who were placed in congregate care settings for any length of time during the review period to determine if these placements were appropriate and met an agreed upon placement exception. The Monitor also reviewed records for children and youth placed in an emergency, short-term or shelter facility or foster home for more than 30 days.

➤ **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 January and June 2016 and the final adoption took longer than 12 months from placement in the pre-adoptive home to determine if reasonable efforts had been made to finalize the adoption expeditiously despite the delay.

➤ **Validation of Training Data**

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

➤ **Validation of Caseload Data**

The Monitor validated caseload size and assignment of cases to social workers between January and June 2016 for ongoing permanency cases, in-home cases and supervisory caseloads (for instances in which individual supervisors were assigned to supervise more than five case carrying social workers and one case aide). The Monitor did not validate investigation and Family Assessment (FA) caseloads during the current monitoring period due to previously identified concerns about the accuracy of the entered data.⁶ During this period, however, in collaboration with CFSA, the Monitor has developed methodology for accurately analyzing investigation and FA caseloads going forward. CFSA is using this method to internally track caseloads now and the Monitor will be able to report on investigation and FA caseloads in the next monitoring period (July – December 2016).

➤ **Quality Service Reviews**

Most of the *LaShawn* Exit Standards are assessed using administrative data from FACES.NET, however, qualitative data are manually collected from Quality Service Reviews (QSRs) to assess performance for selected Exit Standards. The QSR is a case-based qualitative review process that

⁶ In March 2016, the Monitor received reports from investigation and FA workers citing concerns with the way in which caseloads are managed and the assignments are documented in FACES.NET. The Monitor's review did not identify how extensive these data irregularities were but determined that investigation and FA caseloads between January and June 2016 could not be reported on by the Monitor. The Monitor shared these concerns with CFSA leaders who have taken steps to address and rectify the issues.

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 month, participates in oral case presentations⁷ and also verifies data from QSRs conducted by CFSA staff.⁸

Between January and June 2016, a total of 64 QSRs were completed to assess case planning and service delivery outcomes. Sixteen of the 64 QSRs were conducted on children receiving in-home services and the remaining 48 QSRs were focused on children placed in out-of-home care. Of those placed in out-of-home care, 21 QSRs were conducted on cases managed by CFSA and 27 QSRs were conducted on cases managed by a private provider.

➤ **Other Monitoring Activities**

The Monitor attends numerous CFSA meetings including monthly management team meetings, policy workgroup meetings, partnership meetings with CFSA and private provider agencies, 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. In March and April 2016, the Monitor held four focus groups with child protective services investigators and FA workers. During this monitoring period, Monitor staff observed several different types of R.E.D. (review, evaluate and direct) Team meetings⁹. Additionally, the Monitor interviewed and collected information from external stakeholders of the District of Columbia's child welfare system, including contracted service providers and advocacy organizations.

B. Report Structure

The monitoring report assesses the District of Columbia child welfare system's performance between January and June 2016 in meeting the IEP Exit Standards, as defined in the December 17, 2010 Court Order. Section II provides a narrative summary of the District's progress in improving outcomes during this six month period. In Section III, the summary tables provide the

⁷ Each case is presented to a panel consisting of CFSA representatives from the QSR unit, Monitor staff and the District's Department of Behavioral Health, as appropriate. The case presentation is used to ensure inter-rater reliability on ratings across reviews.

⁸ CSSP provided reviewers for 8 QSRs between January and May 2016 and CSSP staff participated in almost all oral case presentations during the period. No QSR reviews were conducted in June 2016 due to resources being allocated to support the federal Child and Family Services Review process.

⁹ The R.E.D. Team meetings utilize the consultation and information sharing framework, which is designed to encourage critical thinking, at certain decision points within a case for child welfare workers, and in some cases families, to review relevant information about a family and the risk of child maltreatment, evaluate that information and direct a decision.

Court with a consolidated update of the data on the District's performance as of June 2016 on the IEP outcomes remaining to be achieved and the outcomes previously achieved that need to be maintained.¹⁰ 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 and maintained required performance for select IEP Outcomes to be Maintained. Section IV also includes information on CFSA's implementation of specific strategies included in the *LaShawn* 2016 Strategy Plan.

II. SUMMARY OF PERFORMANCE

There has been little additional progress on meeting the requirements of the IEP during this past monitoring period despite steps being taken by the District's Child and Family Services Agency (CFSA) to address identified problem areas. There are some Exit Standards for which performance increased slightly and others where declines are observed but overall, the picture is not too different from performance documented in the previous monitoring report. In some of the areas in which problems were noted in the last report and in the Interim Status report provided to the Court on September 6, 2016, the Monitor had not anticipated seeing demonstrable improvement in this time period as the corrective strategies were just beginning to be implemented. District officials, concerned about the lack of forward progress, have taken recent action as described later in this report to refocus the work.

Based upon the data provided in this report and the Monitor's current assessment of CFSA's functioning, there remain four areas where a concentrated focus on improvement is needed – 1) the functioning of the “front-end” of the child welfare system, including performance at the hotline and with investigations and Family Assessments¹¹ in response to allegations and referrals of child maltreatment; 2) the appropriate placement and placement supports for children and youth entering out-of-home care or requiring a new placement; 3) the achievement of timely permanency for children and youth; and 4) improving the quality of case planning and service delivery for both in-home and out-of-home cases. In addition, attention must be directed toward resetting a productive relationship with private agency providers, particularly case management

¹⁰ In some instances where June 2016 performance data are not available, the most recent performance data are cited with applicable timeframes.

¹¹ CFSA has stated its view that family assessments (FA), which are now part of the District's response to allegations of child abuse and neglect, are not covered by the provisions of the *LaShawn* MFO and IEP. CFSA has argued that since FAs are not “investigations,” they are not subject to IEP standards and should be reported on differently by the Monitor than other IEP Exit Standards. The Monitor does not agree with this position; the District implemented the FA pathway as part of a new approach to responding to allegations of child abuse and neglect. While it is true that the practice of differential response and the FA pathway were not contemplated or used by CFSA at the time the IEP was established, it is part of the District's CPS response which is covered by the *LaShawn* MFO and IEP. With the inclusion of FA as an appropriate CPS response, many of the referrals that were previously addressed using the CPS investigation pathway are now directed to the FA pathway. CFSA staff report that FA workers follow the same protocols as investigators with respect to safety assessments. The Monitor has taken the position that the caseload standard for FA workers is the same as for investigative workers as the nature of the work with the family and children is comparable. The Monitor has also taken the position that it is within the purview of the *LaShawn* MFO and IEP that the Monitor fully assess and evaluate FA as an integral part of the District's CPS response.

and placement providers, and taking immediate steps to improve the contracting processes and relationships.

The need for and efforts to remedy barriers and improve performance within these areas are not newly identified; the Monitor and CFSA have discussed for some time, for example, improving the quality of investigations, ensuring the District has the right array of family-based placements to meet the specific needs of children and youth, decreasing the length of time that children are in foster care before exit to permanency and identifying and removing the barriers that impact quality case planning and service delivery. In most instances, CFSA leaders share the Monitor's concerns and CFSA has developed strategies in each area not only for purposes of the *LaShawn* 2016 Strategy Plan but also as an essential component of their internal continuous quality improvement activities. Most of these defined strategies are sensible, however, there remains inconsistency in implementation and tracking of results which impacts CFSA's ability to know exactly which strategies and corrective actions work and what needs to be changed. For many strategies discussed in this monitoring report, implementation deadlines have been missed or pushed back and assessment data on implementation are not consistently collected.

In October 2016, Director Raymond Davidson resigned from CFSA and Deputy Mayor for Health and Human Services Brenda Donald stepped in to fill the role of Interim Director. Deputy Mayor Donald is currently assessing the factors that have contributed to stalled progress and is soliciting feedback from a wide range of staff members and community partners in this process. Deputy Mayor Donald plans to complete this assessment, determine what it will take to focus on the issues that are impeding agency performance and quality and, by the end of 2016, develop a realistic and achievable plan with strategies to accelerate positive movement. The Mayor and Deputy Mayor Donald are also proceeding to recruit nationally for a highly qualified CFSA Director and to fill other key leadership vacancies. The Monitor has begun discussions with Deputy Mayor Donald and Plaintiff's counsel to collaborate on next steps moving forward.

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

Table 1: Outcomes to be Achieved					
Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
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.	December 2015 performance, 83%	June 2016 performance, 77% ¹⁵	No	↓

¹² In some instances where June 2016 performance data are not available, the most recent performance data are cited with applicable timeframes. Permanency data are measured on a fiscal year cycle so performance as of September 30, 2016 is included in this report. 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.

¹³ "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.

¹⁴ Where applicable, "↑" indicates that, in the Monitor's judgment based on data and an understanding of case practice, performance is trending upwards generally by at least 3%; "↓" indicates performance is trending downward generally by at least 3%; "↔" 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.

¹⁵ CFSA and Monitor staff conducted a secondary analysis of FACES.NET data 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 were validated for the month of June 2016 and the findings are reflected in this Table and discussed in the *Child Safety* section of this report. Data on "good faith efforts" were not validated for January through May and are therefore not included in this Table. Monthly performance data for timely initiation of investigations **without** taking into consideration efforts made when the victim child cannot be located are as follows: January, 66%; February, 64%; March, 64%; April, 67%; May, 64%. Valid "good faith efforts" made would likely increase performance levels.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
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. (IEP citation I.A.1.b.)	90% of investigations will be completed and a final report of findings shall be entered in FACES.NET within 35 days.	Monthly range of 44 – 58%	Monthly range of 41 – 63% ^{16,17}	No	↔
4. <i>Acceptable Investigations</i> : CFSA shall routinely conduct investigations of alleged child abuse and neglect. ¹⁸ (IEP citation I.A.2.)	80% of investigations will be of acceptable quality.	73% of investigations of acceptable quality.	71% of investigations of acceptable quality. ¹⁹	No	↔

¹⁶ Monthly performance data for timely completion of investigations are as follows: January, 50%; February, 49%; March, 63%; April, 48%; May, 46%; June, 41%.

¹⁷ During this monitoring period, CFSA reports the following number of investigations each month that were not completed within 35 days: January, 111; February, 88; March, 97; April, 134; May, 183; June, 145.

¹⁸ 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.

¹⁹ Performance data were collected through a review of 132 investigations completed between January and June 2016.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<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; and 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>39% of cases were acceptable based on CY2015 QSR data.</p>	<p>45% of cases were acceptable based on January – June 2016 QSR data.²⁰</p>	<p>No</p>	<p>N/A²¹</p>

²⁰ Data collected during QSRs conducted between January and June 2016 determined that 61% of cases (39 of 64) were rated acceptable on the Implementing Supports and Services indicator, 55% of cases (35 of 64) were rated acceptable on the Pathway to Case Closure indicator and 45% of cases (29 of 64) were acceptable on both indicators.

²¹ Direction of change is not assessed due to the difference in sample size between monitoring periods.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>7. <u>Worker Visitation 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.	Monthly range of 48 – 68%	Monthly range of 36 – 63% ^{22,23}	No	N/A ²⁴

²² Monthly performance for assessing and documenting safety during visits for in-home cases are as follows: January, 44%; February, 60%; March, 46%; April, 63%; May, 36%; June, 63%.

²³ Performance data are based upon a non-statistically significant sample of children applicable to this Exit Standard during the monitoring period; CFSA reviewed documentation of between 19 and 25 children each month. The Monitor has not independently validated the manual data provided by CFSA given CFSA's performance on this Exit Standard is not near compliance levels. A case record review of a statistically significant sample will occur during the July through December 2016 monitoring period.

²⁴ Direction of change is not assessed due to small sample sizes.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>9. <u>Worker Visitation to 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.	Monthly range of 20 – 70%	Monthly range of 45 – 68% ^{25,26}	No	N/A ²⁷

²⁵ Monthly performance for assessing and documenting safety during visits for out-of-home cases are as follows: January, 68%; February, 45%; March, 50%; April, 53%; May, 60%; June, 65%.

²⁶ Performance data are based upon a non-statistically significant sample of children applicable to this Exit Standard during the monitoring period; CFSA reviewed the documentation of between 19 and 26 children each month. The Monitor has not validated the manual data provided by CFSA given CFSA's current performance on this Exit Standard is not near compliance levels. A case record review of a statistically significant sample will occur during the July through December 2016 monitoring period.

²⁷ Direction of change is not assessed due to small sample sizes.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<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>	<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>	<p>a.- c. Monthly range of 77 – 88% of applicable children had four visits in first four weeks of new placement or placement change.</p> <p>d. Monthly range of 65 – 100%</p>	<p>a-c. Monthly range of 81 – 88% of applicable children had four visits in first four weeks of new placement or placement change.²⁸</p> <p>d. Monthly range of 57 – 100%^{29,30}</p>	No	↔

²⁸ Monthly performance data for worker visits during first 4 weeks of a new placement or placement change are as follows: January, 84%; February, 86%; March, 81%; April, 84%; May, 88%; June, 88%.

²⁹ Performance data are based upon a record review of a non-statistically significant sample of children applicable to this Exit Standard.

³⁰ Monthly performance for conversation between social worker and resource parent following new placement or placement change are as follows: January, 70%; February, 84%; March, 85%; April, 89%; May, 100%; June, 57%.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>11. <u>Visitation for 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>	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.	Monthly range of 33 – 55%	Monthly range of 20 – 60% ^{31,32}	No	N/A ³³
<p>15. <u>Placement of Children in Most Family-like Setting</u>: No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days.</p> <p>(IEP citation I.B.8.b.)</p>	No child shall remain in an emergency, short-term or shelter facility or foster home for more than 30 days.	Between July – December 2015, 2 children were placed in emergency, short term foster homes for more than 30 days.	Between January – June 2016, 2 children were placed in emergency, short term foster home or shelter for more than 30 days. ³⁴	No	↔

³¹ Monthly performance for assessing and documenting safety during visits to children experiencing a placement change are as follows: January, 60%; February, 45%; March, 40%; April, 20%; May, 42%; June, 57%.

³² Performance data are based upon a non-statistically significant sample of children applicable to this Exit Standard during the monitoring period; CFSA reviewed the documentation of 20 to 24 children each month. The Monitor has not validated the manual data provided by CFSA given CFSA's current performance on this Exit Standard is not near compliance levels. A case record review of a statistically significant sample will occur during the July through December 2016 monitoring period.

³³ Direction of change is not assessed due to small sample sizes.

³⁴ One child was 16 years old and placed in an emergency foster home for 35 days. The second child was 14 years old and was placed in an emergency shelter for 31 days. Both children had significant mental health needs and identification of therapeutic placements was necessary. The Monitor determined that these placements were not appropriate; the children exhibited high needs and the emergency placements were not designed to provide supportive services to meet their needs. Additionally, in the Monitor's judgment, CFSA could have acted more expeditiously in locating appropriate placements for these children.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>18. <i>Visits between Parents and Workers:</i></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>	80% of parents will have twice monthly visitation with workers in the first three months post-placement. ³⁵	Monthly range of 73 – 80%	Monthly range of 55 – 74% ³⁶	No	↓

³⁵ This Exit Standard is also satisfied when there is documentation that the parent(s) is(are) unavailable or refuses to cooperate with the agency.

³⁶ Reported performance includes instances where there was 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: January, 66%; February, 55%; March, 59%; April, 74%; May, 70%; June, 63%.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<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. ³⁷	Monthly range of 78 – 82%	Monthly range of 77 – 86% ³⁸	Partially ³⁹	↑

³⁷ 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.

³⁸ Reported performance includes instances where there was documentation in the record that visits did not occur because it was not in the child’s best interest, was clinically inappropriate or could not occur despite efforts by the agency. Monthly performance data are as follows: January, 77%; February, 81%; March, 86%; April, 84%; May, 85%; June, 85%.

³⁹ CFSA met the required level of performance 4 of 6 months this monitoring period.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
32. <i>Timely Permanency</i> : 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 FY2015 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, 2016.	As of September 30, 2015, 45% of the children in this cohort achieved permanency.	As of September 30, 2016, 37% of children in this cohort achieved permanency.	No	↔
	ii. Of all children who are in foster care for more than 12 but less than 25 months on September 30, 2015, 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2016.	As of September 30, 2015, 40% of the children in this cohort achieved permanency.	As of September 30, 2016, 28% of children in this cohort achieved permanency.		
	iii. Of all children who are in foster care for 25 months or longer on September 30, 2015, 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2016, whichever is earlier.	As of September 30, 2015, 20% of the children in this cohort achieved permanency.	As of September 30, 2016, 31% of children in this cohort achieved permanency.		

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>33. <i>Case Planning Process:</i></p> <p>a. CFSA, with the family, shall develop timely, comprehensive and appropriate case plans in compliance with District law requirements and permanency timeframes, which reflect family and children’s needs, are updated as family circumstances or needs change, and CFSA shall deliver services reflected in the current case plan.</p> <p>b. Every reasonable effort shall be made to locate family members and to develop case plans in partnership with youth and families, the families’ informal support networks, and other formal resources working with or needed by the youth and/or family.</p> <p>c. Case plans shall identify specific services, supports and timetables for providing services needed by children and families to achieve identified goals.</p> <p>(IEP citation I.B.17.)</p>	80% of cases reviewed through the Quality Service Reviews (QSR) will be rated as acceptable.	51% of cases were acceptable based on CY2015 QSR data.	48% of cases were acceptable based on January – June 2016 QSR data. ⁴⁰	No	N/A ⁴¹

⁴⁰ Data collected during QSRs conducted between January and June 2016 determined that 66% (42 of 64) of cases were rated acceptable overall on the Planning Interventions indicator, 55% (35 of 64) of cases were rated acceptable on the Pathway to Case Closure indicator and 48% (31 of 64) of cases were acceptable on both indicators.

⁴¹ Direction of change is not assessed due to the difference in sample size between monitoring periods.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>38. <i>Assessments for Children Experiencing a Placement Disruption</i>: 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 74 – 100%	Monthly range of 85 – 100% of children have CNAs in their case files but the Monitor has identified multiple instances of incomplete and inaccurate CNAs. ⁴²	No ⁴³	↔

⁴² Monthly performance data for assessments for children experiencing a placement disruption are as follows: January, 90%; February, 100%; March, 94%; April, 85%; May, 91%; June, 88%.

⁴³ The Monitor reviewed a sample of CNAs completed during the current monitoring period and found that in many instances, the tools were not completed accurately and included conflicting or outdated information. Additionally, similar to the previous monitoring period, the type of placement the child received did not always match the placement recommendation from the CNA and a justification was not consistently provided. Due to these quality issues, the Monitor continues to consider this Exit Standard unmet.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<p>43. <i>Health and Dental Care</i>: CFSA shall ensure the prompt completion and submission of appropriate health insurance paperwork, and shall keep records of, e.g., Medicaid application dates, HMO severance dates, and enrollment dates. CFSA shall provide caregivers with documentation of Medicaid coverage within 5 days of every placement and Medicaid cards within 45 days of placement.</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 78 – 86% of foster parents received the Medicaid number within five days of the child’s placement.</p> <p>Monthly range of 14 – 71% of foster parents received the Medicaid card within 45 days of the child’s placement.</p>	<p>Monthly range of 82 – 98% of foster parents received the Medicaid number within five days of the child’s placement.⁴⁴</p> <p>Monthly range of 71 – 100% of foster parents received the Medicaid card within 45 days of the child’s placement.^{45,46}</p>	Partially ⁴⁷	↑

⁴⁴ Monthly performance data for receipt of Medicaid number within 5 days of placement are as follows: January, 82%; February, 96%; March, 85%; April, 98%; May, 97%; June, 89%.

⁴⁵ Monthly performance data for receipt of Medicaid card within 45 days of placement are as follows: January, 71%; February, 86%; March, 94%; April, 100%; May, 100%; June, 100%.

⁴⁶ These data report performance on Medicaid card distribution to foster parents when the child initially enters foster care. When a child initially enters foster care, CFSA ensures that the child receives a Medicaid number and card. The card is then given to the foster parent by the social worker. CFSA reports that Medicaid cards for children who experience a placement change are transferred through the placement passport packet and are available through the foster parent mobile application. CFSA does not currently track or confirm receipt of the Medicaid card by new foster parents.

⁴⁷ CFSA met the required level of performance for receipt of Medicaid number during 3 of the 6 months of the monitoring period and for receipt of Medicaid card during 4 of the 6 months of the monitoring period. The Monitor considers this Exit Standard partially achieved.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
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.	The overdue Resource Development Plan was completed in March 2016.	On June 29, 2016, CFSA submitted the Resource Development Plan to the Monitor.	Yes ⁴⁸	↑

⁴⁸ After additional consultation with the Monitor and Plaintiffs’ counsel, CFSA submitted a revised version of the RDP on September 2, 2016 which has been accepted by the Monitor.

Table 1: Outcomes to be Achieved

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance ¹²	Exit Standard Achieved ¹³	Direction of Change ¹⁴
<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 July – December 2015, 4 children stayed overnight at CFSA and 5 children stayed in hotel rooms while awaiting an appropriate licensed placement.	Between January – June 2016, 1 child stayed overnight at CFSA. ^{49,50}	No	↔

⁴⁹ This youth experienced an overnight stay in March 2016 after returning to CFSA from abscondance status. The youth's previous placement was no longer available and a temporary placement in an emergency, short-term group home was identified. The youth declined this placement and was brought back to the CFSA building overnight. Upper level management and administrators were not notified of the situation as it was occurring as is CFSA's protocol. The youth was later placed at her previous group home placement.

⁵⁰ Nine additional children and youth have had overnight stays in the CFSA building between July and October 2016. In July 2016, 2 children (in 1 sibling group) were removed after midnight and were at the CFSA building while awaiting placement. One child was placed around 8AM. The other child was wheelchair-bound and required a specialized medical placement, which made identifying a placement more difficult given CFSA's current capacity. He was placed later that evening after a medical evaluation. In August 2016, a youth arrived at the agency in the afternoon after experiencing a placement disruption and stayed in the CFSA building overnight. An acceptable placement was difficult to secure due to the youth's challenges, his desire to not be in placement and the ability for identified foster parents to meet his needs. CFSA engaged the youth's birth family and the Office of Well-Being to support the transition to a new placement the next day. In September 2016, 3 separate youth experienced overnight stays at the CFSA building – 2 disrupted from a temporary foster home placement around midnight and placements were not secured until that afternoon and the third youth, who is diagnosed with autism and ADHD, spent the night in the CFSA building after being placed with a foster parent who later requested the youth be removed from her home. This youth was placed in a traditional foster home later that day with behavioral and health care services in place. In October 2016, 3 separate children stayed overnight at CFSA – 2 disrupted from an emergency, short term foster home placement and the third child arrived at the agency around midnight and was placed later that morning.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	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 78 – 94%	Monthly range of 90 – 100% ⁵¹	Yes
<p>6. <i>Worker Visitation to Families with In-Home Services</i>:</p> <p>a. A CFSA social worker or private agency social worker shall make at least one visit monthly to families in their home in which there has been a determination that child(ren) can be maintained safely in their home with services.</p> <p>b. A CFSA social worker, family support worker, private agency social worker or a Collaborative family support worker shall make a second monthly visit at the home, school or elsewhere.</p> <p>(IEP citation I.A.4.a-b.)</p>	95% of families will be visited monthly by a CFSA social worker or private agency social worker and 85% of families will be visited a second time monthly by a CFSA social worker, family support worker, private agency social worker or a Collaborative family support worker.	<p>a. Monthly range of 88 – 93% of families were visited monthly</p> <p>b. Monthly range of 84 – 92% of families were visited twice during the month</p>	<p>a. Monthly range of 88 – 94% of families were visited monthly⁵²</p> <p>b. Monthly range of 84 – 90% of families were visited twice during the month⁵³</p>	Partially ⁵⁴

⁵¹ Monthly performance data for comprehensive review of families with 4 or more reports are as follows: January, 94%; February, 94%; March, 100%; April, 92%; May, 90%; June, 92%.

⁵² Monthly performance data for monthly in-home worker visits are as follows: January, 88%; February, 94%; March, 91%; April, 90%; May, 90%; June, 92%.

⁵³ Monthly performance data for twice monthly in-home worker visits are as follows: January, 84%; February, 90%; March, 89%; April, 85%; May, 86%; June, 86%.

⁵⁴ CFSA maintained the required level of performance for 1 sub-part of this Exit Standard (twice monthly visits to families receiving in-home services) but did not maintain the required level of performance for the other sub-part (monthly visits with families) for any month this monitoring period. CFSA has not met the required level of performance for monthly visits since the January through June 2014 monitoring period. As CFSA did meet the required level for 1 sub-part, the Monitor considers this Exit Standard to be partially maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>8. <i>Worker Visitation to Children in Out-of-Home Care:</i></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 94 – 98% had monthly visits</p> <p>b. Monthly range of 92 – 97% had twice monthly visits</p>	<p>a. Monthly range of 96 – 97% had monthly visits</p> <p>b. Monthly range of 94 – 96% had twice monthly visits</p>	Yes
<p>12. <i>Relative Resources:</i> 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 July and December 2015, CFSA took necessary steps to offer/facilitate pre-removal FTMs in 91% of applicable cases.</p>	<p>Between January and June 2016, CFSA took necessary steps to offer/facilitate pre-removal FTMs in 87% of applicable cases.</p>	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	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 125 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate and invite known relatives to the FTM in 94% of cases.	Of the 96 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate and invite known relatives to the FTM in 98% 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.	As of December 31, 2015, 96% of children were in the most family-like setting based on his/her needs. ⁵⁵	Not newly assessed ⁵⁶	N/A

⁵⁵ Performance is based upon data from a case record review of all children placed in non-family-based settings including group homes, residential treatment facilities, hospitals, teen parent programs and independent living facilities. The review found that 59% of the children reviewed were in the most appropriate setting to meet his/her needs. These data combined with the number of children and youth placed in family settings determined 96% of children were placed in the least restrictive, most family-like setting appropriate to his/her needs.

⁵⁶ The method of determining performance on this Exit Standard requires a 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 newly assessed this period.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
16. <u>Placement of Young Children</u> : Children under age 12 shall not be placed in congregate care settings for more than 30 days unless the child has special needs that cannot be met in a home-like setting and unless the setting has a program to meet the child’s specific needs. (IEP citation I.B.9.a.)	No child under 12 will be placed in congregate care settings for more than 30 days without appropriate justification that the child has special treatment needs that cannot be met in a home-like setting and the setting has a program to meet the child’s specific needs.	Between July – December 2015, a total of 2 children under 12 were applicable to this standard and both children met an agreed upon exception.	Between January – June 2016, a total of 2 children under 12 were applicable to this standard and both children met an agreed upon exception.	Yes
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. (IEP citation I.B.9.b.)	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 July – December 2015, 1 child under 6 years of age was placed in a group care non-foster home setting and met an agreed upon exception.	Between January – June 2016, 1 child under 6 years of age was placed in a group care non-foster home setting and met an agreed upon exception.	Yes
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. (IEP citation I.B.12.a.)	95% of children shall have permanency planning goals consistent with ASFA and District law and policy guidelines.	Performance ranged between 95 – 97%	Performance ranged between 91 – 95% ⁵⁷	Yes ⁵⁸

⁵⁷ Monthly performance data are as follows: January, 94%; February, 95%; March, 93%; April, 94; May, 93%; June, 91%.

⁵⁸ CFSA met the required level of performance for 1 month this monitoring period; the Monitor considers this to be an insubstantial deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
21. <i>Appropriate Permanency Goals</i> : 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 24 youth whose goal changed to APPLA between July – December 2015. 9 of the 24 (38%) had LYFE/FTM conference.	There were 19 youth whose goal changed to APPLA between January – June 2016. 11 of the 19 (58%) had LYFE/FTM conference. ⁵⁹	Yes
22. <i>Appropriate Permanency Goals</i> : 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. (IEP citation I.B.12.c.)	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.	Between July – December 2015, 95% of youth ages 18 and older had a timely YTP.	Between January – June 2016, 97% of youth ages 18 and older had a timely YTP. ⁶⁰	Yes

⁵⁹ Of the 8 youth who did not have a LYFE conference, the goal change to APPLA was initiated by their guardian ad litem (GAL) or the judge.

⁶⁰ Of the 240 youth ages 18 and older under CFSA care between January and June 2016, 23 youth were in abscondence, developmentally disabled or declined participation in the development of a YTP and were excluded from analysis. Thus, out of 217 applicable youth, 210 (97%) had a YTP.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>23. <u>Reduction of Multiple Placements for Children in Care:</u></p> <p>(IEP citation I.B.13.)</p>	a. Of all children served in foster care during the previous 12 months who were in care at least 8 days and less than 12 months, 83% shall have had two or fewer placements.	Monthly range of 84 – 88%	Monthly range of 82 – 83%	Yes ⁶¹
	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.	Monthly range of 68 – 74%	Monthly range of 67 – 72%	
	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 71 – 76%	Monthly range of 74 – 78%	
<p>24. <u>Timely Approval of Foster/Adoptive Parents:</u> CFSA shall have in place a process for recruiting, studying and approving families, including relative caregivers, interested in becoming foster or adoptive parents that results in the necessary training, home studies and decisions on approval being completed within 150 days of beginning training.</p> <p>(IEP citation I.B.14.)</p>	70% of homes licensed beginning November 1, 2010, will have been approved, and interested parties will have been notified within 150 days.	72% of foster homes licensed between July – December 2015 received their license within 150 days.	74% of foster homes licensed between January – June 2016 received their license within 150 days. ⁶²	Yes

⁶¹ Although performance was below the required level for the first sub-part of the Exit Standard for 2 of the 6 months in the period (February and March 2016 performance were both 82%) and performance was below the required level for the third sub-part of the Exit Standard for 1 of the 6 months in the period (January 2016 performance was 74%), the Monitor considers this to be an insubstantial deviation and this Exit Standard maintained.

⁶² Of the 67 homes that are considered compliant in the current monitoring period, no home whose licensure took longer than 150 days is considered compliant due to circumstances that were beyond the District's control.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
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.	87%	96% ⁶³	Yes
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%	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.	80%	76% ⁶⁴	Partially ⁶⁵

⁶³ There were a total of 48 applicable children who required legal action to free them for adoption upon goal change and 46 (96%) had legal action to free them within 45 days.

⁶⁴ During the monitoring period, 41 of 54 applicable children were placed in an approved adoptive placement by the end of the ninth month from when their goal changed to adoption.

⁶⁵ Monthly performance was high for 3 months (90-100%) and low for 3 months (50-67%); the Monitor considers this Exit Standard partially maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
28. <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.ii.)	For children whose permanency goal changed to adoption prior to July 1, 2010 who are not currently in an approved adoptive placement, 40% will be placed in an approved adoptive placement by December 31, 2010 and an additional 20% will be placed in an approved adoptive placement by June 30, 2011.	Review period has expired; Monitor is no longer tracking performance.	Review period has expired; Monitor is no longer tracking performance	N/A
29. <i>Timely Adoption</i> : 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.i.)	By September 30, 2010, 40% of the 203 children in pre-adoptive homes as of October 1, 2009 will achieve permanence.	Review period has expired; Monitor is no longer tracking performance.	Review period has expired; Monitor is no longer tracking performance	N/A
30. <i>Timely Adoption</i> : 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.ii.)	By June 30, 2011, 45% of the children in pre-adoptive homes as of July 1, 2010 will achieve permanence.	Review period has expired; Monitor is no longer tracking performance.	Review period has expired; Monitor is no longer tracking performance	N/A

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
31. <i>Timely Adoption</i> : 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 July – December 2015, 92% of adoptions were completed or reasonable efforts were made to complete adoptions within 12 months of child being placed in a pre-adoptive home.	From January – June 2016, 91% of adoptions were completed or reasonable efforts were made to complete adoptions within 12 months of child being placed in a pre-adoptive home. ⁶⁶	Yes
34. <i>Placement Licensing</i> : 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 – 96%	Monthly range of 93 – 95% ⁶⁷	Yes ⁶⁸

⁶⁶ CFSA reports that 43 adoptions were finalized during this monitoring period. Of those 43, 19 adoptions were finalized within 12 months and reasonable efforts were made to finalize adoptions within 12 months for an additional 20 children.

⁶⁷ Monthly performance data for placement licensing are as follows: January, 93%; February, 93%; March, 95%; April, 94%; May, 95%; June, 95%.

⁶⁸ Although performance was below the required level for 3 out of the 6 months of the period, the Monitor considers this to be an insubstantial deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	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>Monthly range of 90 – 100% of applicable closed investigations were referred to a Collaborative or community agency.</p>	<p>Monthly range of 92 – 100% of applicable closed investigations were referred to a Collaborative or community agency.⁶⁹</p>	<p>Yes</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>86% of children placed between July – December 2015 with their siblings or within 30 days of their siblings were placed with some of their siblings.</p>	<p>82% of children placed between January – June 2016 with their siblings or within 30 days of their siblings were placed with some of their siblings.⁷⁰</p>	<p>Yes</p>

⁶⁹ Monthly performance for community-based referrals for low and moderate risk families are as follows: January, 100%; February, 92%; March, 100%; April, 94%; May, 100%; June, 96%.

⁷⁰ CFSA also provided data for all children in care at a point in time (not limited to those who entered care between January and June 2016) for this Exit Standard. As of June 30, 2016, 69% 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	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>37. <i>Sibling Placement and Visits</i>: Children placed apart from their siblings should have at least twice monthly visitation with some or all of their siblings unless documented that the visitation is not in the best interest of the child(ren).</p> <p>(IEP citation I.C.20.b.)</p>	<p>80% of children shall have monthly visits with their separated siblings and 75% of children shall have twice monthly visits with their separated siblings.</p>	<p>Monthly range of 82 – 90% with at least monthly visits</p> <p>Monthly range of 76 – 83% with at least twice monthly visits</p>	<p>Monthly range of 86 – 94% with at least monthly visits⁷¹</p> <p>Monthly range of 80 – 89% with at least twice monthly visits⁷²</p>	Yes
<p>39. <i>Health and Dental Care</i>: Children in foster care shall have a health screening prior to placement.</p> <p>(IEP citation I.C.22.a.)</p>	<p>95% of children in foster care shall have a health screening prior to an initial placement or re-entry into care.</p> <p>90% of children in foster care who experience a placement change shall have a replacement health screening.</p>	<p>Initial and re-entries: monthly range of 90 – 100%</p> <p>Replacements: monthly range of 88 – 94%</p>	<p>Initial and re-entries: monthly range of 92 – 100%⁷³</p> <p>Replacements: monthly range of 83 – 93%⁷⁴</p>	Yes ⁷⁵

⁷¹ Monthly performance data for at least monthly sibling visits are as follows: January, 86%; February, 91%; March, 94%; April, 94%; May, 94%; June, 90%.

⁷² Monthly performance data for twice monthly sibling visits are as follows: January, 80%; February, 85%; March, 85%; April, 89%; May, 87%; June, 85%.

⁷³ Monthly performance data for initial and re-entry health screenings are as follows: January, 93%; February, 100%; March, 94%; April, 100%; May, 100%; June, 92%.

⁷⁴ Monthly performance data for replacement health screenings are as follows: January, 86%; February, 90%; March, 90%; April, 85%; May, 93%; June, 83%.

⁷⁵ Performance fell below the required level of 95% for health screenings prior to an initial placement for 3 months of the monitoring period and below the required level of 90% for health screenings required prior to a placement change in January, April and June 2016. The Monitor currently considers this deviation temporary and will continue to closely assess performance in this area.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
40. <i>Health and Dental Care</i> : Children in foster care shall receive a full medical evaluation within 30 days of placement. (IEP citation I.C.22.b.i.)	85% of children in foster care shall receive a full medical evaluation within 30 days of placement. 95% of children in foster care shall receive a full medical evaluation within 60 days of placement.	Within 30 days: monthly range of 79 – 90% Within 60 days: monthly range of 92 – 98%	Within 30 days: monthly range of 79 – 92% ⁷⁶ Within 60 days: monthly range of 94 – 96%	Yes ⁷⁷
41. <i>Health and Dental Care</i> : Children in foster care shall receive a full dental evaluation within 30 days of placement. (IEP citation I.C.22.b.ii.)	25% of children shall receive a full dental evaluation within 30 days of placement. 50% of children shall receive a full dental evaluation within 60 days of placement. 85% of children shall receive a full dental evaluation within 90 days of placement.	Within 30 days: monthly range of 32 – 65% Within 60 days: monthly range of 57 – 78% Within 90 days: monthly range of 60 – 87%	Within 30 days: monthly range of 30 – 61% Within 60 days: monthly range of 54 – 96% Within 90 days: monthly range of 70 – 98% ⁷⁸	Partially ⁷⁹

⁷⁶ Monthly performance data for children having medical evaluations completed within 30 days of placement are as follows: January, 79%; February, 80%; March, 83%; April, 86%; May, 92%; June, 91%.

⁷⁷ CFSA maintained the required level of performance for 1 sub-part of this Exit Standard (medical evaluations within 60 days of placement) but did not maintain the required level of performance for the other sub-part (medical evaluations within 30 days of placement) for 3 out of the 6 months. This is an improvement in performance from the previous monitoring period and the Monitor considers this Exit Standard maintained.

⁷⁸ Monthly performance data for children having dental evaluations completed within 90 days of placement are as follows: January, 70%; February, 75%; March, 77%; April, 71%; May, 92%; June, 98%.

⁷⁹ CFSA maintained the required level of performance for 2 sub-parts of this Exit Standard (dental evaluations within 30 days of placement and dental evaluations within 60 days of placement) but did not maintain the required level of performance for the third sub-part (dental evaluations within 90 days of placement) for 4 out of the 6 months. The Monitor considers this Exit Standard partially maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
42. <u>Health and Dental Care</u> : 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 CY 2015 QSR data.	92% of cases were acceptable based on January – June 2016 QSR data. ⁸⁰	Yes
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. (IEP citation I.D.24.)	The District shall provide evidence each year of financial support for community- and neighborhood-based services to protect children and support families.	In FY2016, CFSA allocated \$24.03 million for community-based services.	In FY2016, CFSA allocated \$24.03 million for community-based services.	Yes
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. b. The caseload of each worker providing services to children and families in which the child or children in the family are living in their home shall not exceed 1:15 families. c. The caseload of each worker providing services to children in placement, including children in	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.	a. Unable to determine b. & c. Monthly range of 98 – 100% of ongoing workers met the caseload requirements. No social worker had a	a. Unable to determine ⁸¹ b. & c. Monthly range of 98 – 100% of ongoing workers met the caseload requirements. No social worker had a caseload of more than 18.	Partially

⁸⁰ Of the 48 cases reviewed through QSR between January and June 2016 where the child or youth was placed in foster care at the time of the review, 44 (92%) were rated as acceptable on both of the Health Status indicators.

⁸¹ During the caseload validation process for investigation and FA caseloads, the Monitor received reports from investigation and FA workers citing concerns with the way in which caseloads were managed and the assignments were documented in FACES.NET. Thus, the Monitor determined that investigation and FA caseloads between January and June 2016 could not be reported. The Monitor, in collaboration with CFSA, has engaged in additional validation activities for the July through December 2016 monitoring period and it appears caseload assignments are now accurately being documented in FACES.NET. The Monitor will be able to validate and report accurate data in the next monitoring period.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>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>caseload of more than 18.</p> <p>d.100% of workers conducting home studies met required performance of no greater than 30 cases.</p> <p>e. Monthly range of 10 – 38 (1 – 2% of total open cases) cases were unassigned to a social worker for more than 5 business days.</p>	<p>d.100% of workers conducting home studies met required performance of no greater than 30 cases.</p> <p>e. Monthly range of 21 – 43 (1 – 3% of total open cases) were unassigned to a social worker for more than 5 business days.⁸²</p>	

⁸² Between January and June 2016, in addition to these unassigned cases, a monthly range of 27 to 67 ongoing cases were assigned to investigative social workers. CFSA indicates that these investigations have closed and are awaiting transfer to an ongoing unit.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<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 83 – 93% of supervisors met the required standard.	Monthly range of 94 – 97% of supervisors met the required standard.	Yes
<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 92 – 97% of cases assigned to social workers.	Monthly range of 90 – 95% 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.	93%	93%	Yes

⁸³ Monthly performance data are as follows: January, 90%; February, 94%; March, 93%; April, 94%; May, 95%; June, 94%.

⁸⁴ Performance was below the required level for 5 of the 6 months of the monitoring period. The Monitor considers these deviations insubstantial and this Exit Standard maintained.

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

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
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. (IEP citation I.D.27.b.)	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%	93%	Yes
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.	Not yet due ⁸⁷	94%	Yes
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.	Not yet due ⁸⁸	97%	Yes
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.	100%	98%	Yes

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 1 and ends June 30 each year.

⁸⁸ Ibid.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
54. <i>Training for Foster Parents</i> : 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.	91%	94%	Yes ⁸⁹

⁸⁹ The Monitor considers current performance an insubstantial deviation and this Exit Standard maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	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>b. CFSA shall conduct a child-specific case review by the Director or Director's designee(s) for each child identified and implement a child-specific corrective action plan, as appropriate.</p> <p>(IEP citation I.D.30.)</p>	<p>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 the cases of these children/ families that have been flagged for discussion during applicable reviews.</p> <p>b. 100% of required special corrective action plan(s) were developed.</p>	<p>a. CFSA produces a monthly report that identifies the cases of these children/ families that have been flagged for discussion during applicable reviews.</p> <p>b. 100% of required special corrective action plan(s) were developed.</p>	<p>Yes</p>

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	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>Infrastructure for performance based contracting remains in place. CFSA issued Program Improvement Plans (PIPs) for 2 Collaboratives, 1 congregate care provider and 7 private family based providers this monitoring period. No contracts were terminated and future PIPs in 2016 were put on hold while CFSA revises contract monitoring tools and processes.</p>	<p>Family-based contracts expected to be executed by the end of FY2016 were delayed and are now expected to be complete by November 2016. CFSA revised its contract monitoring tool and processes this period. CFSA trained providers on the new tool which assesses their performance on the quality of their practice and efforts to ensure safety, permanency and well-being for children and youth.</p>	<p>Yes⁹⁰</p>

⁹⁰ To date, the Monitor has assessed the delays in issuing contracts in a timely manner as a temporary deviation from maintenance of this Exit Standard.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
		Further, in an effort to improve overall quality of services provided by private providers, CFSA is in the process of rebidding for contracted services and revising the performance based contracting indicators and processes to hold providers accountable for ensuring positive permanency and well-being outcomes for children.		
<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.	There are no children placed without ICPC approval.	There are no children placed without ICPC approval.	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
58. <i>Licensing Regulations</i> : CFSA shall have necessary resources to enforce regulations effectively for original and renewal licensing of foster homes, group homes, and independent living facilities. (IEP citation I.D.33.)	CFSA shall have necessary resources to enforce regulations effectively for original and renewal licensing of foster homes, group homes, and independent living facilities.	As of December 2015, 18 of 19 FTE positions for Family-Based Contracts Monitoring were filled. 23 of 23 FTE positions were filled for Family Licensing Division.	As of June 2016, 16 of 19 FTE positions for Family-Based Contracts Monitoring were filled. 24 of 24 FTE positions were filled for Family Licensing Division.	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>59. <i>Budget and Staffing Adequacy:</i> 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 FY2016 budget is \$244.8 million and CFSA believes it provides adequate funding for required staffing, services and supports.</p>	<p>The approved FY2016 budget is \$244.8 million and CFSA believes it provides adequate funding for required staffing, services and supports.</p> <p>The approved FY2017 budget is \$232.6 million.⁹¹</p>	<p>Yes</p>

⁹¹ A \$10 million reduction in the proposed budget reflects the elimination of an Intra-District swap between CFSA and the Department of Human Services (DHS) related to federal TANF dollars. Previously, CFSA was able to support the District’s efforts in drawing down federal TANF dollars by using these dollars to fund prevention services in the community through the Collaboratives and then creating a line-item for the same amount of local dollars to allocate to DHS. Due to the Title IV-E waiver, CFSA is now able to fund these services through waiver dollars. CFSA leadership has indicated that there will be no impact on community-based services solely as a result of the elimination of this Intra-District swap.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>60. <i>Federal Revenue Maximization</i>: CFSA shall demonstrate compliance with Sections A and B of Chapter XVIII of the Modified Final Order concerning federal revenue maximization and financial development.</p> <p>(IEP citation I.D.35.)</p>	Evidence of consistent and appropriate claiming of all appropriate and available federal revenue.	CFSA continues to receive Title IV-E capped payments on a quarterly basis as part of the federal 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. <i>Entering Reports Into Computerized System</i>: 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	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
62. <u>Maintaining 24 Hour Response System</u> : CFSA shall staff and maintain a 24-hour system for receiving and responding to reports of child abuse and neglect, which conforms to reasonable professional standards. (IEP citation II.A.2.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
63. <u>Checking for Prior Reports</u> : Child abuse and/or neglect reports shall show evidence that the investigator checked for prior reports of abuse and/or neglect. (IEP citation II.A.3.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance	Yes
64. <u>Reviewing Child Fatalities</u> : 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. (IEP citation II.A.4.)	Ongoing Compliance	Internal: The 2014 Annual Report has not yet been produced and is expected to be combined with the 2015 Annual report that will be released this year. City-wide: Ongoing compliance	Internal: The 2014/2015 Annual Report has not yet been finalized. City-wide: Ongoing compliance	Partially ⁹²

⁹² A draft of the 2014/2015 Internal Child Fatality Review Committee report was provided to committee members in September 2016 and was discussed during the October 2016 committee meeting. Due to the continued delays in the completion of annual reports (2014 and 2015 data), the Monitor considers this Exit Standard to be partially maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>65. <i>Investigations of Abuse and Neglect in Foster Homes and Institutions</i>: 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%	Monthly range of 85 – 100% ⁹³	Yes ⁹⁴
<p>66. <i>Policies for General Assistance Payments</i>: 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. <i>Use of General Assistance Payments</i>: 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

⁹³ Reported performance includes combined compliance for both foster homes and congregate care settings. Monthly performance on timely completion of investigations of reported abuse and neglect in foster homes and in institutions are as follows: January, 100%; February, 85%; March, 90%; April, 100%; May, 100%; June, 100%.

⁹⁴ Although performance is slightly below the required Exit Standard during 1 month this period, the number of applicable investigations is small (13) and only 1 investigation accounts for non-compliance; thus, in the Monitor's judgement this deviation is insubstantial and the standard continues to be maintained.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>69. <i>Timely Approval of Foster/Adoptive Parents</i>: CFSA should ensure training opportunities are available so that interested families may begin training within 30 days of inquiry.</p> <p>(IEP citation II.B.9.)</p>	Ongoing Compliance	Training opportunities were offered monthly during the monitoring period.	Training opportunities were offered monthly during the monitoring period.	Yes
<p>70. <i>Placement within 100 Miles of the District</i>: No more than 82 children shall be placed more than 100 miles from the District of Columbia. (Children placed in college, vocational programs, correctional facilities, or kinship or pre-adoptive family-based settings under the ICPC shall be exempt from this requirement.)</p> <p>(IEP citation II.B.10.)</p>	Ongoing Compliance for no more than 82 children.	Monthly range of 12 – 18 children	Monthly range of 18 – 20 children	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>71. <u>Licensing and Placement Standards:</u></p> <p>a. Children shall be placed in foster homes and other placements that meet licensing and other MFO placement standards.</p> <p>b. Children in foster home placements shall be in homes that (a) have no more than three foster children or (b) have six total children including the family's natural children; (c) have no more than two children under two years of age or (d) have more than three children under six years of age. The sole exception shall be those instances in which the placement of a sibling group, with no other children in the home, shall exceed these limits.</p> <p>c. No child shall be placed in a group-care setting with a capacity in excess of eight (8) children without express written approval by the Director or designee based on written documentation that the child's needs can only be met in that specific facility, including a description of the services available in the facility to address the individual child's needs.</p> <p>d. Children shall not be placed in a foster care home or facility in excess of its licensed capacity. The sole exception shall be those instances in which the placement of a sibling group, with no other children in the home, shall exceed the limits.</p> <p>(IEP citation II.B.11.)</p>	Ongoing compliance for 95% of children.	<p>a. Monthly range of foster and group home: 94 – 96%</p> <p>b. Monthly range of children over placed in foster homes: 3 – 4%</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>a. Monthly range of foster and group homes: 93 – 95%</p> <p>b. Monthly range of children over placed in foster homes: 2 – 3%</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.⁹⁵</p>	Yes

⁹⁵ CFSA has previously provided information to the Monitor 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	July – December 2015 Performance	January – June 2016 Performance	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>	90% of case plans shall be developed within 30 days of the child entering care and shall be reviewed and modified as necessary at least every six months thereafter.	Monthly range of 88 – 90%	Monthly range of 85 – 94% ⁹⁶	Partially ⁹⁷
<p>73. <u>Appropriate Permanency Goals</u>: No child under the age of 12 shall have a permanency goal of legal custody with permanent caretakers unless he or she is placed with a relative who is willing to assume long-term responsibility for the child and who has legitimate reasons for not adopting the child and it is in the child's best interest to remain in the home of the relative rather than be considered for adoption by another person. No child under the age of 12 shall have a permanency goal of continued foster care unless CFSA has made every reasonable effort, documented in the record, to return the child home, to place the child with an appropriate family member, and to place the child for adoption, and CFSA has considered and rejected the possibility of the child's foster parents assuming legal custody as permanent caretakers of the child.</p> <p>(IEP citation II.B.13.)</p>	Ongoing Compliance	Ongoing Compliance	Ongoing Compliance ⁹⁸	Yes

⁹⁶ Monthly performance for completion of case plans are as follows: January, 87%; February, 88%; March, 85%; April, 88%; May, 90%; June, 94%.

⁹⁷ This is the second monitoring period where performance fell below the required level 4 of the 6 months during the period. The Monitor currently considers this to be an insubstantial deviation and for this Exit Standard to be partially maintained.

⁹⁸ As of June 30, 2016, CFSA reports that 2 refugee minor children had the goal of APPLA as well as a child with significant medical complications who has had the goal of APPLA as reported in previous monitoring periods.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
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. (IEP citation II.B.14.)	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.	92%	97% ⁹⁹	Yes
75. <i>Post-Adoption Services Notification</i> : Adoptive families shall receive notification at the time that the adoption becomes final of the availability of post-adoption services. (IEP citation II.B.15.)	Ongoing compliance for 90% of cases.	CFSA continues to report all adoptive families receive notification in a variety of ways.	CFSA continues to report all adoptive families receive notification in a variety of ways.	Yes
76. <i>Family Court Reviews</i> : A case review hearing will be conducted in Family Court at least every six months for every child as long as the child remains in out-of-home placement, unless the child has received a permanency hearing within the past six months. (IEP citation II.D.16.)	Ongoing Compliance for 90% of cases.	As of December 31, 2015, 96% of applicable children had required judicial review.	As of June 2016, 97% of applicable children had required judicial review.	Yes

⁹⁹ Data are reported by the fiscal year. Thus, performance represents data from October 1, 2015 to June 30, 2016. 68 children had their goal change to adoption. 66 (97%) of the 68 children had a staffing or were not eligible to have a staffing. Specifically, 24 children no longer needed a staffing because a letter of intent to adopt was signed, the goal changed again, or another reason. 16 children were still within the 95 day compliance timeframe and 26 had a staffing. The remaining 2 eligible children did not have a needed staffing.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
77. <u>Permanency Hearings</u> : CFSA shall make every reasonable effort to ensure that children in foster care have a permanency hearing in Family Court no later than 14 months after their initial placement. (IEP citation II.D.17.)	Ongoing compliance for 90% of cases.	Monthly range of 96 – 99%	Monthly range of 95 – 97%	Yes
78. <u>Use of MSWs and BSWs</u> : Unless otherwise agreed, all social worker hires at CFSA shall have an MSW or BSW before being employed as trainees. (IEP citation II.E.18.)	Ongoing compliance for all social work hires.	Ongoing compliance	Ongoing compliance	Yes
79. <u>Social Work Licensure</u> : 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. <u>Training for Adoptive Parents</u> : 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.	99%	98%	Yes
81. <u>Needs Assessment and Resource Development Plan</u> : 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	Ongoing Compliance	CFSA completed the Needs Assessment in January 2016. The annual Resource Development Plan was overdue but	CFSA completed the Needs Assessment in January 2016 and submitted the Resource Development Plan	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>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 adoptive families based on the annual assessment. The Plan shall specify the quantity of each category of resources and services, the time period within which they shall be developed, and the specific steps that shall be taken to ensure that they are developed. CFSA shall then take necessary steps to implement this plan.</p> <p>(IEP citation II.G.21.)</p>		<p>was completed in March 2016.</p> <p>The Resource Development Plan includes a data analysis of CFSA's population, a vision for its placement continuum, projections on number of placements and placement types for FY2016 and strategies to meet these projections.</p> <p>Strategies are currently being implemented.</p>	<p>on June 29, 2016.¹⁰⁰</p>	

¹⁰⁰ After additional consultation with the Monitor and Plaintiffs' counsel, CFSA submitted a revised version of the RDP on September 2, 2016 which has been accepted by the Monitor.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
82. <i>Foster Parent Licensure</i> : 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

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
<p>83. <i>Quality Assurance</i>: CFSA shall have a Quality Assurance system with sufficient staff and resources to assess case practice, analyze outcomes and provide feedback to managers and stakeholders. The Quality Assurance system must annually review a sufficient number of cases to assess compliance with the provisions of the MFO and good social work practice, to identify systemic issues, and to produce results allowing the identification of specific skills and additional training needed by workers and supervisors.</p> <p>(IEP citation II.G.23.)</p>	Ongoing Compliance	<p>Ongoing compliance.</p> <p>CFSA reorganized staff and units during the current monitoring period. The QA unit is now integrated into Agency Performance in order to align all CQI activities and strategies.</p> <p>Throughout the reporting period the QA unit had 4 full-time QSR reviewers, a supervisory QSR specialist and an additional FTE who is a lead QSR reviewer.</p>	<p>Ongoing compliance.</p> <p>Throughout the reporting period, the QA unit had 5 full-time QSR reviewers and 1 supervisory QSR specialist. There are 6 staff specialists assigned to the QA unit (3 of whom are primarily assigned to CFSA's Internal Child Fatality Review Committee).¹⁰¹</p>	Yes

¹⁰¹ The supervisory QA Specialist position remains vacant and is currently posted.

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
		<p>There are 6 full-time specialists assigned to the QA unit, 3 of whom are primarily assigned to CFSA's Internal Child Fatality Review Committee.</p> <p>The specialists are supported by 3 administrative assistants who assist with scheduling reviews, arranging conference rooms, gathering FACES.NET information and other functions.</p> <p>Currently the only vacancy in the unit is the QA Supervisor position.</p>		

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	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.	Monthly range of 85 – 98%	Monthly range of 91 – 97%	Yes

Table 2: Outcomes to be Maintained

Implementation and Exit Plan Requirement	Exit Standard	July – December 2015 Performance	January – June 2016 Performance	Exit Standard Maintained
87. <i>Foster Parent Board Rates</i> : 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. (IEP citation II.H.27.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance ¹⁰²	Yes
88. <i>Post-Adoption Services</i> : CFSA shall make available post-adoption services necessary to preserve families who have adopted a child committed to CFSA. (IEP citation II.H.28.)	Ongoing Compliance	Ongoing compliance	Ongoing compliance ¹⁰³	Yes

¹⁰² CFSA uses the Expenditures for Children and Families report issued by the USDA to adjust Foster Parent Board rates. The USDA has changed the schedule for issuing the report; CFSA will adjust the rates as soon as the latest report is issued.

¹⁰³ CFSA reports for FY16 the adoption subsidy budget amount is \$20,476,868 and the guardianship subsidy budget amount is \$13,832,329.

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

A. GOAL: CHILD SAFETY

CFSA maintains a 24-hour, seven day a week hotline to accept reports of alleged child abuse and neglect in the District of Columbia. CFSA utilizes a Differential Response (DR) system to determine the appropriate agency response to referrals which include one of the following pathways: 1) screened 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; 2) initiate a child protective services (CPS) investigation; 3) initiate a Family Assessment (FA)¹⁰⁴; or 4) Information and Referral (I&R).¹⁰⁵ These determinations are made either by hotline staff at the time of referral with use of the hotline SDM tool or after consultation in the Hotline R.E.D. Team which includes participation from multidisciplinary staff within the agency. Beginning in June 2016, the Hotline R.E.D. Team reduced the number of meetings from three to one per day and thus reduced the number of referrals reviewed by the Hotline R.E.D. Team. Referrals forwarded to and reviewed by the Hotline R.E.D. Team now include those with one or more of the following criteria: families with four or more referrals with the most recent referral occurring in the last 12 months; families with three or more referrals within a year; families with existing open in-home or out-of-home cases; referrals with other complicating matters or grey areas impeding the decision making process; and families with chronic neglect. Data are not available to indicate if all referrals that meet these criteria are reviewed by the Hotline R.E.D. Team. CFSA also operates an Educational Neglect Triage Unit that screens referrals of educational neglect based on school absences. These referrals are sent by schools to CFSA via an email portal utilizing an automated form which captures data regarding the number of school days missed, the student's current grades and information regarding any interventions attempted by the school prior to submitting the referral.

In this section of the report, the Monitor examines CFSA's performance in hotline, investigations and FA, all critical areas of practice for a child welfare system.

¹⁰⁴ 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. After the initial safety assessment, participation in FA is voluntary. Investigations are required for reports involving child fatality, suspected sex abuse or allegations that a child is in imminent risk of or has experienced abuse or neglect that is severe.

¹⁰⁵ Information and Referral is the pathway for requests from other jurisdictions and information or reports outside the parameters of CFSA involvement. Some examples include requests for courtesy interviews, notice of child or youth abscondence or return from abscondence, non-CPS assaults or child or youth curfew violations.

1. **Hotline**

Table 3 below shows the number of calls the hotline received between January and June 2016 and specifies the DR pathway selected for each referral. The volume of calls to the hotline this monitoring period ranged between 1,297 and 1,994 a month, with a total of 10,408 calls this monitoring period; this represents an increase from the July through December 2015 monitoring period but similar to the number of referrals received between January and June 2015. An average of 22 percent of hotline calls received each month were accepted for an investigation or linked to a current investigation and an average of 19 percent of hotline calls each month were accepted for a FA or linked to a current FA. As indicated in Table 3, a monthly range of five to eight percent of calls were designated as I&R and a monthly range of 49 to 56 percent of calls were screened out.

**Table 3: Calls to the Child Abuse and Neglect Hotline by Differential Response (DR) Pathway
January – June 2016**

Month	Total	Information and Referral (I&R)	Investigation		Family Assessment (FA)		Screened Out by Hotline or Hotline R.E.D. Team**
		Accepted	Accepted	Linked*	Accepted	Linked*	
Jan 2016	1,297	103 (8%)	281 (22%)	26 (2%)	244 (19%)	8 (1%)	635 (49%)
Feb 2016	1,638	84 (5%)	322 (20%)	38 (2%)	322 (20%)	16 (1%)	856 (52%)
Mar 2016 ¹⁰⁶	1,994	98 (5%)	398 (20%)	58 (3%)	367 (18%)	15 (1%)	1,058 (53%)
Apr 2016 ¹⁰⁷	1,743	123 (7%)	389 (22%)	53 (3%)	298 (17%)	14 (1%)	866 (50%)
May 2016 ¹⁰⁸	1,802	123 (7%)	366 (20%)	50 (3%)	328 (18%)	23 (1%)	912 (51%)
Jun 2016 ¹⁰⁹	1,934	132 (7%)	301 (16%)	57 (3%)	341 (18%)	16 (1%)	1,087 (56%)
Total	10,408	663 (6%)	2,057 (20%)	282 (3%)	1,900 (18%)	92 (1%)	5,414 (52%)

Source: CFSA Administrative Data, FACES.NET report INT003

Percentages may not equal 100% due to rounding.

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

**A referral may be screened out when the information provided by the reporter does not indicate allegations of abuse or neglect in the District of Columbia.

Earlier this year, the Monitor and CFSA worked collaboratively to review referrals to the hotline to better understand decision-making processes and the appropriateness of decisions. This review was a three part assessment to evaluate the different points within the system where referral screen out decisions are made including: 1) hotline calls, 2) educational neglect referral emails and faxes or walk-ins to the CFSA building and 3) Hotline R.E.D. Team.

Hotline calls and educational neglect referral emails were reviewed in a similar manner and the overall sample was statistically significant of all referrals screened out during January 2016.¹¹⁰

¹⁰⁶ At the time the data were run for March 2016, 3 hotline calls were awaiting approval. These calls are not included in the total denominator.

¹⁰⁷ At the time the data were run for April 2016, 6 hotline calls were awaiting approval. These calls are not included in the total denominator.

¹⁰⁸ At the time the data were run for May 2016, 3 hotline calls were awaiting approval. These calls are not included in the total denominator.

¹⁰⁹ At the time the data were run for June 2016, 6 hotline calls were awaiting approval. These calls are not included in the total denominator.

¹¹⁰ In January 2016, 632 referrals were screened out (these data differ slightly from the data presented in Table 3 due to the dates they were pulled); 342 of these were screened out by the hotline, through the educational neglect triage process or as a walk-in. The review assessed 195 screened out hotline calls, educational neglect referrals and walk-ins. This sampling represents a $\pm 5\%$ margin of error with 95% confidence in the results.

The Hotline R.E.D. Team portion of the review assessed 96 referrals, including not only screen-outs but any pathway decision made for referrals presented including directing a referral as a CPS investigation with a 24 hour response time, FA with a three day response time or FA with a five day response time.

Data from the review determined that of the total 291 referrals reviewed, reviewers agreed with the decision made to either screen out the referral or agreed with the pathway decision made at the Hotline R.E.D. Team in 77 percent (N=225) of the referrals and disagreed with 23 percent of decisions. Data analysis was also conducted on only screen out decisions – overall, of the 223 referrals screened out at the hotline, or by the Educational Neglect Triage Unit or the Hotline R.E.D. Team, reviewers agreed with the decision in 73 percent (N=163).

A full report with complete data analysis and identification of strengths and areas needing improvement was finalized on September 6, 2016 and filed with the court prior to the interim hearing on September 9, 2016.¹¹¹ CFSA and the Monitor worked to jointly develop recommendations which were finalized in October 2016. These recommendations are listed in Figure 1 below.

Figure 1: 2016 Hotline and Intake CQI Review Recommendations

Part A: Recorded Calls

- The Agency Performance (AP) team will review the CQI findings with Management and hotline staff by November 19, 2016. The Deputy Director for Entry Services (ES) will develop a plan to focus on those areas which have been identified as problematic – including supervisory decision making regarding the “screen out” process. The Management team will meet on a weekly basis, led by the Deputy or Administrator, for group supervision using examples of both accepted and screened out referrals to develop supervisory skills and increase consistency in decision making. The emphasis will be on conducting an in-depth review, therefore the review will be limited to no less than six reviews per session. AP will develop a tracking mechanism to collect this data.
- Hotline supervisors will complete a daily review of “no-maltreatment” type hotline screen out referrals and provide feedback to staff.
- Program Managers will review on a weekly basis “no-maltreatment” type hotline screen out referrals and provide feedback to staff.
- Program Administrators will review on a monthly basis “no-maltreatment” type hotline screen out referrals and provide feedback to staff.

¹¹¹ The full report, *An Assessment of the District of Columbia’s Child and Family Services Agency Child Abuse and Neglect Hotline and Intake Practices and Decision Making*, can be found at: <http://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>

- ES management is reviewing the policy of numbers as identification of hotline staff. Pending final approval by the Director, names or pseudo names will be used at the hotline starting in the first quarter of FY17.
- Hotline staff received training on motivational interviewing in August and September 2016. Supervisors will reinforce concepts taught in training through supervision and real time coaching with live calls.
- In the first quarter of FY17, AP will conduct further data analysis from the Intake CQI review and management feedback will be utilized to identify supports necessary to strengthen supervisory practice.
- Hotline supervisors will listen to 20 to 25 live calls monthly and provide individual feedback to staff during supervision. This will include a review of FACES.NET documentation of the call to verify that the information collected was appropriately documented. AP will develop a tracking and feedback tool.
- Hotline supervisors will develop individual training plans for staff focused on customer service, engagement, information gathering and documentation.
- In the second quarter of FY17, ES managers will identify specific areas of training necessary to support staff with engagement and documentation skills. Training will be facilitated by an ES training supervisor in conjunction with CWTA.
- In the first quarter of FY17, ES and AP staff will conduct quarterly reviews on specified benchmarks, including screen outs and consistency in the documentation based upon the recorded call.
- AP will review 10 referrals monthly, both accepted and screen outs, using the CQI review instrument. CQI feedback from AP will be used by ES managers to identify strategies to improve specific staff skills in engagement and gathering information from callers. This review will begin in the first quarter of FY17, and repeated quarterly thereafter.
- In the third quarter of FY17, AP and OPPPS will develop and conduct a survey of mandated reporters to assess their experiences, feedback, concerns and plaudits.

Part B: Emails, Faxes and Unrecorded Calls

- Reports will be triaged within two business days. The process includes: screening, assignments to FSWs, contacting schools to verify reporting information, data entry and supervisory approval. In the second quarter of FY17, the ES Deputy Director will review this process and implement additional recommendations to update the process and timeframes.
- Where there is a currently open referral or case, the ES supervisor will notify the receiving supervisor by email of the education neglect referral and document this notification in FACES.NET.
- On a monthly basis, ES and CPS managers will review the educational neglect referrals connected to open cases for additional supervisory support. This information will be collected by AP for secondary review.
- In the first quarter of FY17, the FA Administrator and Educational Neglect Triage supervisor will review existing policy and provide recommendations for training and policy updates to the ES Deputy Director and Principal Deputy Director.

- ES managers will determine where the majority of educational neglect referrals are originating and will develop additional recommendations for training and/or connection to Collaborative resources.
- In the second quarter of FY17, ES and AP will resume the qualitative review of a random sample of 125 educational neglect referrals per quarter using the revised CQI tool. This review will be conducted quarterly. The report will identify trends in screen out decisions, families' identified needs, services, barriers and underlying reasons that prevent school attendance.
- ES and AP will review quarterly the screen outs of new referrals on open cases.

Part C: Hotline R.E.D. Team Review

- Beginning in the first quarter of FY17, a FTM facilitator will conduct the Hotline R.E.D. Team meetings.
- Beginning in the first and second quarters of FY17, Sue Lohrbach¹¹² will review and provide recommendations on training and support for re-integration of R.E.D. Teams as an integral part of the ES hotline process, which will include reformatting the meeting, time, roles and tools.
- After the collaboration with Sue Lohrbach, beginning in the third quarter of FY17, ES and AP will conduct a random sample of the Hotline R.E.D. Team meeting documentation quarterly. Themes and trends from the review will be provided to the Practice Improvement Committee for review and feedback.
- Beginning in the fourth quarter of FY17, CISF (consultation and information sharing framework) and critical thinking will remain a focus of training, supervision and CQI reviews throughout ES practice.

2. Investigations

Referrals that allege serious safety concerns for children, including child fatality, suspected sex abuse or allegations that a child is in 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;
- complete the investigation and enter the final report of findings into FACES.NET within 35 days of the referral to the hotline;
- 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;
- conduct investigations of acceptable quality; and

¹¹² Sue Lohrbach is a national expert and developer of the consultation and information sharing framework and R.E.D. Team process.

- 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.

As discussed more fully below, there are three IEP Exit Standards related to investigative practice designated as Outcomes to be Achieved that CFSA did not meet the required levels of performance for this monitoring period. These standards include timely initiation of investigations, timely closure of investigations within 35 days of a referral to the hotline and the quality of investigations.

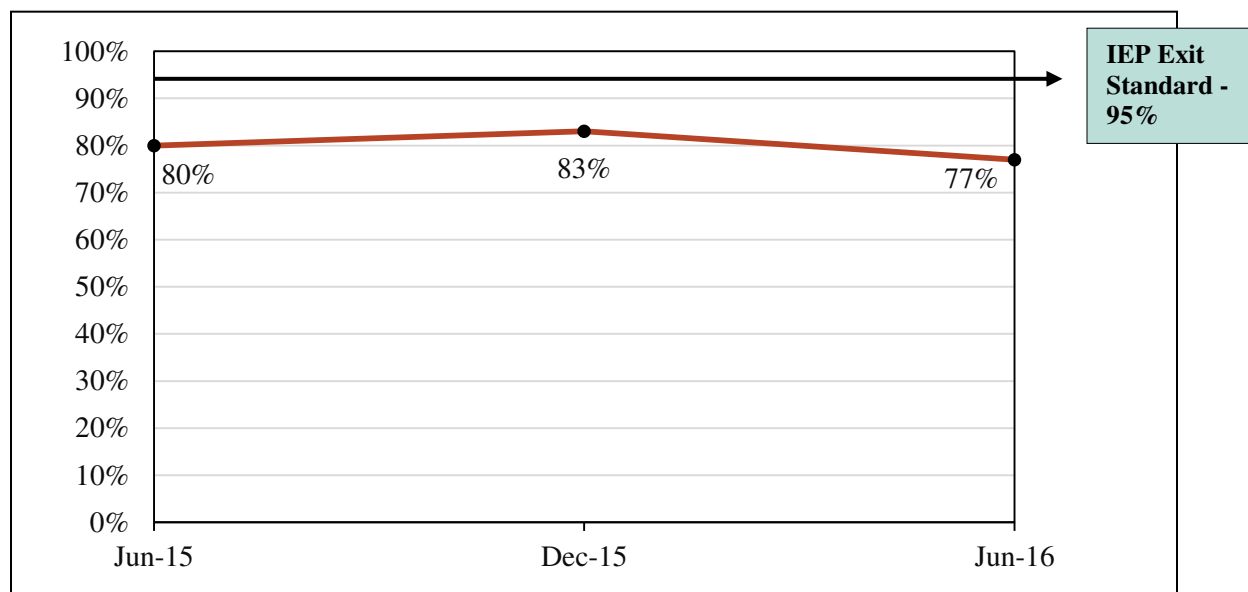
CFSA maintained required performance for two investigation related Outcomes to be Maintained – 1) comprehensive review of families subject to a new investigation for whom the current report is the fourth or greater with the most recent occurring within the last 12 months and 2) referrals for families with low or moderate risk of abuse who are in need of and agree to additional supports to an appropriate Collaborative or community-based agency for follow-up.

Initiating Investigations

IEP Requirement	1. <u>Investigations</u> : Investigations of alleged child abuse and neglect shall be initiated or documented good faith efforts shall be made to initiate investigations within 48 hours after receipt of a report to the hotline of child maltreatment. (IEP citation I.A.1.a.)
Exit Standard	95% of all investigations will be initiated within 48 hours or there will be documented good faith efforts to initiate investigations whenever the alleged victim child(ren) cannot be immediately located. ¹¹³

¹¹³ 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.

**Figure 2: Timely Initiation of Investigations
June 2015 – June 2016¹¹⁴**



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

Performance for the period January 1 through June 30, 2016:

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 all alleged victim children within the 48-hour timeframe.¹¹⁵ The Monitor and CFSA conducted a review of a statistically significant sample¹¹⁶ of closed investigations in June 2016 where the alleged victim child(ren) had not been seen in 48 hours to determine if good faith efforts¹¹⁷ to locate and interview the child(ren) had been made. The review found that in five of the 107 investigations reviewed, the alleged victim child(ren) was seen within 48 hours, bringing the total number of children seen within 48 hours to 283 (66%). Of the 82 investigations where the supervisor documented that good faith efforts were made to see the alleged victim child(ren) within 48 hours, the review assessed that documentation supported this finding in 40 (49%) investigations. Taken together with the number of children who were seen within 48 hours, these data estimate that 77 percent of investigations were initiated timely.¹¹⁸

¹¹⁴ In order to report comparable performance on this Exit Standard over time, data on timely initiation of investigations are only reported for the months for which a secondary review was conducted to validate completion of good faith efforts.

¹¹⁵ For younger and non-verbal children, observation is acceptable.

¹¹⁶ Of the 154 applicable investigations, 107 were reviewed. Sampling represents 95% confidence level with $\pm 5.25\%$ margin of error.

¹¹⁷ See FN 107.

¹¹⁸ To estimate the total number of good faith efforts made, 49% of 105 (the number of good faith efforts indicated in FACES prior to the review) was calculated.

Data on good faith efforts were not validated for January through May 2016; monthly performance data for January through May for timely initiation of investigations *without* taking into consideration efforts made when the victim child cannot be located ranged from 64 to 67 percent. Valid good faith efforts made would likely increase performance levels. CFSA did not meet the 95 percent Exit Standard and the Monitor considers this Exit Standard unmet.

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on timely initiation of investigations:

- *Beginning May 1, 2016, Entry Services and Agency Performance will conduct an assessment of the Child Protection Services (CPS) shift-to-shift reports to identify gaps that occur when tasks to initiate the investigation are not completed timely. The assessment will examine administrative, clinical, and caseload factors affecting performance and will include front-line staff. The final report will be issued by June 30, 2016 and will contain recommendations and a work plan with timeframes to improve performance on initiation of investigations. CFSA will implement recommendations in accordance with the work plan. (2016 Strategy Plan, #1)*

As included in the interim update to the Court for the September 9, 2016 hearing, CFSA Entry Services managers and staff from AP completed an assessment of CPS data, conducted a focus group with staff and outlined a business mapping process to identify gaps or delays in tasks which may result in investigations not being initiated in a timely manner. CFSA developed an action plan to address the barriers identified; most strategies were completed in August 2016, thus, the impact of these strategies on performance data is not expected to be seen in the data until the last quarter of 2016. The strategies include adding three CPS investigation units by converting and permanently moving one day time FA unit into a day time CPS investigation unit and in the fall of 2016, two day time CPS investigation units were established; amending the weekend coverage schedule to ensure staffing on the weekend includes two full units with both CPS investigation and FA staff; modifying the referral assignment process; modifying the Hotline R.E.D. Team process so that fewer reports go through the Hotline R.E.D. Team to allow those that are less complicated to be immediately assigned to workers for action; and in September 2016, adding four vehicles to CFSA's fleet.

- *In an effort to increase performance and implement targeted management accountability, CPS supervisors will review data at daily huddles to improve performance on (1) timely initiation of investigations, (2) caseloads, and (3) timely closure of investigation. Daily huddles occur three times each day at shift changes. The data review will identify investigations that have not yet been*

assigned and will review efforts to locate children/families and ensure that those efforts are properly documented. (2016 Strategy Plan, #2)

CFSA reports that daily huddles are occurring consistently and there is daily monitoring of activities necessary to close investigations. CFSA also reports that social workers and their supervisors have regular discussions around timely initiation, next steps needed in an investigation and barriers to closure and work plans are developed as needed. CFSA has identified that ongoing individual and group coaching is needed to improve consistency in practice, particularly around the required activities for good faith efforts to locate children.

- *Program managers will conduct reviews with supervisors weekly to assess workloads, status of timely initiation of investigations, and timely closures. As a follow up, program administrators will track completion of program manager/worker reviews and outcomes to develop corrective actions each month, as needed. (2016 Strategy Plan, #3)*

CFSA reports that program managers utilize BIRST¹¹⁹ and FACES.NET on a weekly basis to monitor timely initiation and closures. Program managers, through weekly supervision or by email, follow up with supervisory social workers on strategies to meet required timeframes and will develop corrective action plans if needed.

- *By May 31, 2016¹²⁰, CPS managers and supervisors will participate in a mandatory refresher “Managing with Data” training utilizing CFSA’s data visualization system (BIRST). The purpose of the refresher training is to strengthen the managers’ skills to review data and train staff to use data to make informed decisions to effectively manage caseloads and improve performance outcomes. (2016 Strategy Plan, #4)*

CFSA reports that all applicable managers and supervisors were trained by July 2016. The training emphasized utilizing BIRST for daily performance monitoring and creating reports to assist supervisors and staff with managing tasks. BIRST training classes are offered monthly for newly hired or already employed CFSA and private agency supervisors and managers.

For the majority of strategies discussed above, supervisors and managers may individually monitor implementation. However, the Monitor has not seen that data needed for accountability purposes are routinely aggregated to monitor systemic implementation.

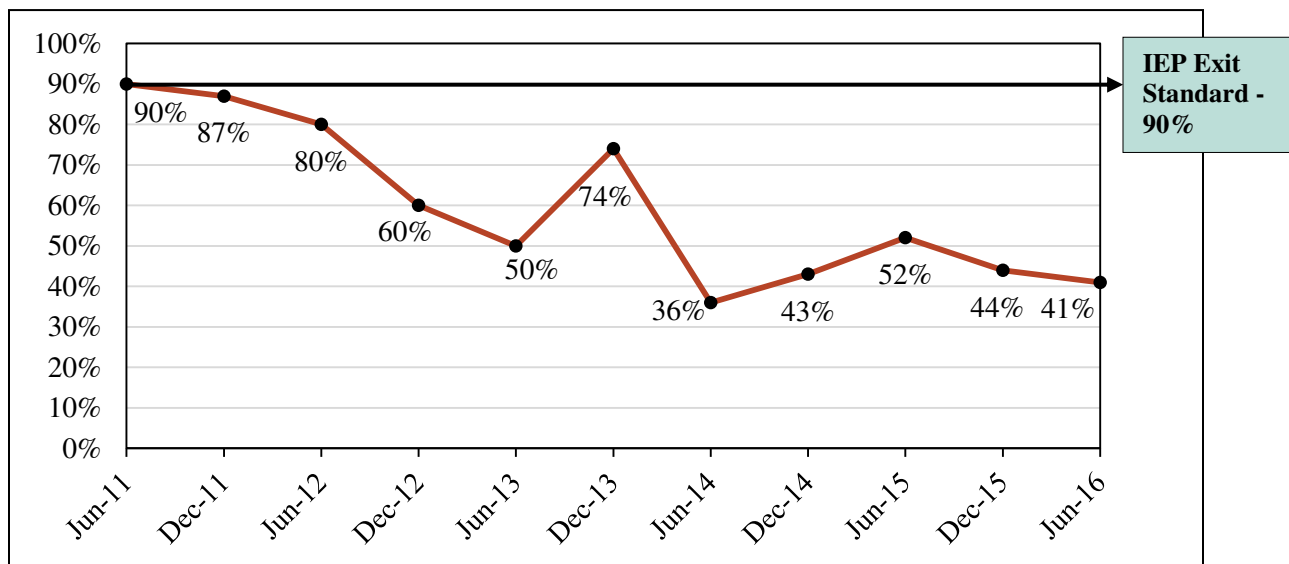
¹¹⁹ BIRST is a data visualization system that displays real time performance on select practice indicators.

¹²⁰ On June 22, 2016, CFSA submitted modification to this strategy, extending the deadline to mid-July 2016.

Timely Completion of Investigations

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

**Figure 3: Timely Completion of Investigations
June 2011 – June 2016**



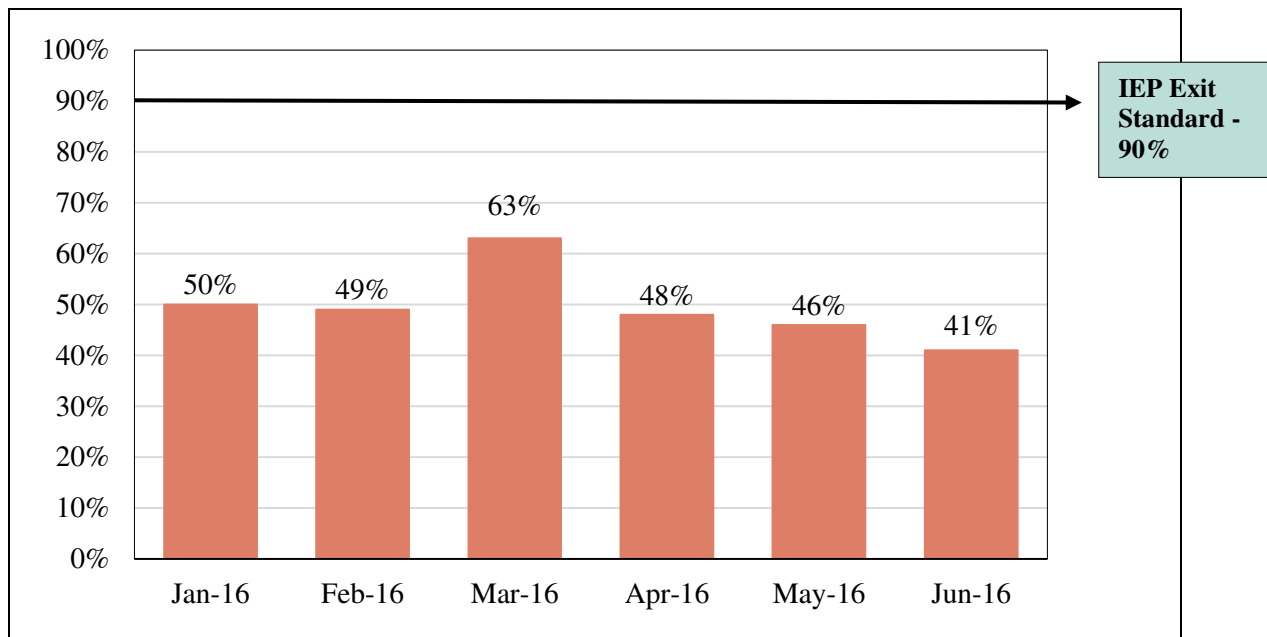
Source: CFSA Administrative Data, FACES.NET report INV004

Performance for the period January 1 through June 30, 2016:

In June 2016, there were 415 non-institutional abuse investigations completed; 171 (41%) were completed and had findings entered in FACES.NET within 35 days after receipt of the report. As indicated in Figure 4 below, performance this monitoring period ranged monthly between 41 and 63 percent of investigations completed timely.¹²¹ Performance does not meet the required level.

¹²¹ During this monitoring period, CFSA reports the following backlog of investigations each month not completed within 35 days: January, 111; February, 88; March, 97; April, 134; May, 183; June, 145.

**Figure 4: Timely Completion of Investigations
January – June 2016**

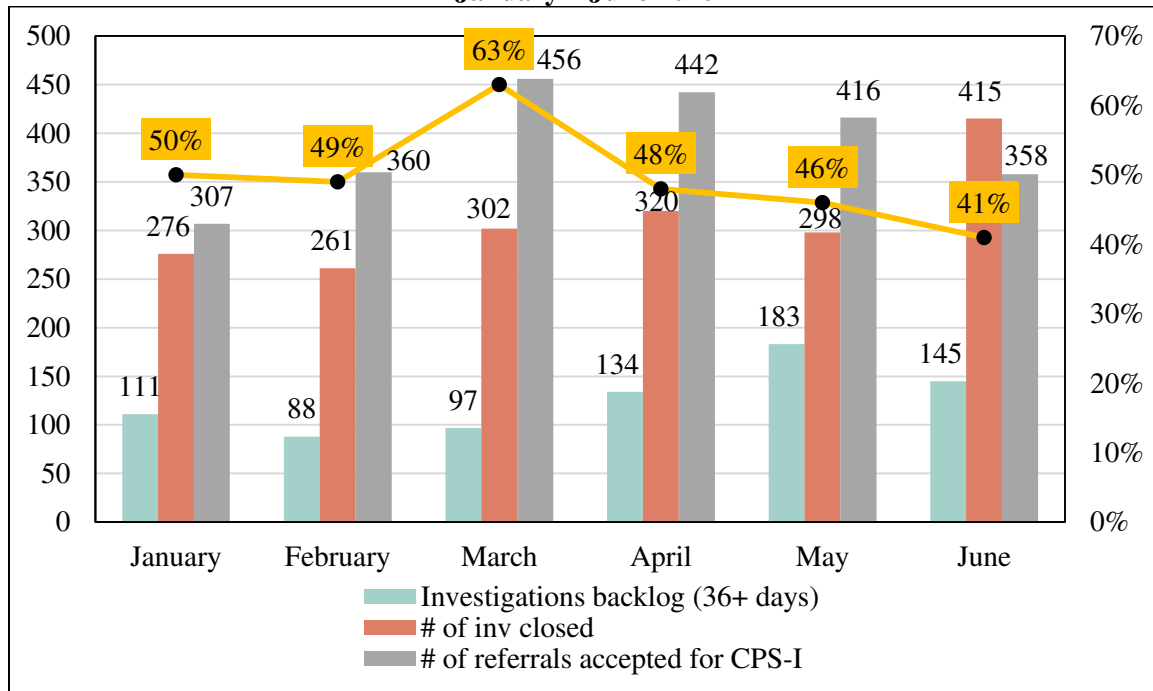


Source: CFSA Administrative Data, FACES.NET report INV004

CFSA reports that reduced performance this period partially reflects their intensive work to complete investigations that were previously backlogged. To further illustrate this work and the moving components, Figure 5 below 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 closed within 35 days.¹²²

¹²² Although beyond this monitoring period, more current performance data were available at the time of writing this report which indicate that performance has improved to 50% in July and 63% in August 2016.

**Figure 5: Investigations Accepted, Closed and in Backlog
January – June 2016**



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

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on timely completion of investigations:

- *Each Monday through Thursday at the 10/15 Day R.E.D. team meetings, team members will review five investigations/assessments and identify the action steps necessary to progress toward timely closure. After supervisory consult with social workers, investigations identified for review at the meetings will include those with: (1) familial complicating factors, (2) a need for enhanced services, and (3) significant barriers to safe closure, which include joint investigations with law enforcement. Supervisors will coach staff at these meetings on improved CPS practice. Beginning April 2016 and at each quarter, Agency Performance will conduct an analysis of the data and share findings with CPS managers. (2016 Strategy Plan, #5)*

AP staff observed 10/15 Day R.E.D. Team meetings that reviewed 14 investigations or FAs held between April and July 2016 and collected data on what was discussed, the barriers to safe case closure that were identified as well as other observations. Observers noted that three of the 10/15 Day R.E.D. Team meetings they attempted to attend were cancelled due to lack of staff availability. Five of the 14 investigations or FAs observed were reviewed within 15 days of the

referral being assigned and nine were reviewed over 15 days. Below are findings from these observations:

- For 11 of the investigations or FAs observed, the family had prior child welfare history and observers determined that the history was adequately explored in nine cases.
- The most common familial complicating factors included parental resistance in engaging in services or cooperating with authorities (4 cases); case participant speaking a language other than English (3 cases); criminal court/police involvement (4 cases); parent has a stay-away order from the child (2 cases); parent with expectations of child that are not age or developmentally appropriate (3 cases); child with developmental disability (2 cases); and parents with serious mental health concerns (2 cases).
- Barriers to safe case closure were only discussed in one case (parental refusal to participate), however, observers felt that several of the complicating factors could also present as barriers, for example, language difficulties impacts the time necessary to communicate with families in order to ensure clarity and understanding.
- Follow up on medical and educational information for alleged victim children was recommended in 12 of the 14 referrals discussed.
- Observers noted that two referrals were later closed without the next steps identified in the 10/15 Day R.E.D. Team meeting being completed.

On September 30, 2016, CFSA submitted a modification to this strategy to maintain the Case Transfer R.E.D. Team meetings (from investigation or FA to in-home) and use the 10/15 Day R.E.D. Team meetings as well as use of the CISF, as a part of ongoing supervision. CFSA's plans to utilize R.E.D. Teams, from the Monitor's perspective, remain in flux; it is not clear at this time which will continue.

- *CFSA will continue to have bi weekly group coaching support through Program Management observation to assess supervisory skills and offer strategies in work plan development for CPS frontline workers. Supervisors will develop action plans with investigative workers for investigations that have been opened for 35 days or longer. The action plans will include specific steps and timelines to be completed for safe closure. Program managers will review the action plans with supervisors on a weekly basis. The Administrator will review the plans twice each month. (2016 Strategy Plan, #7)*

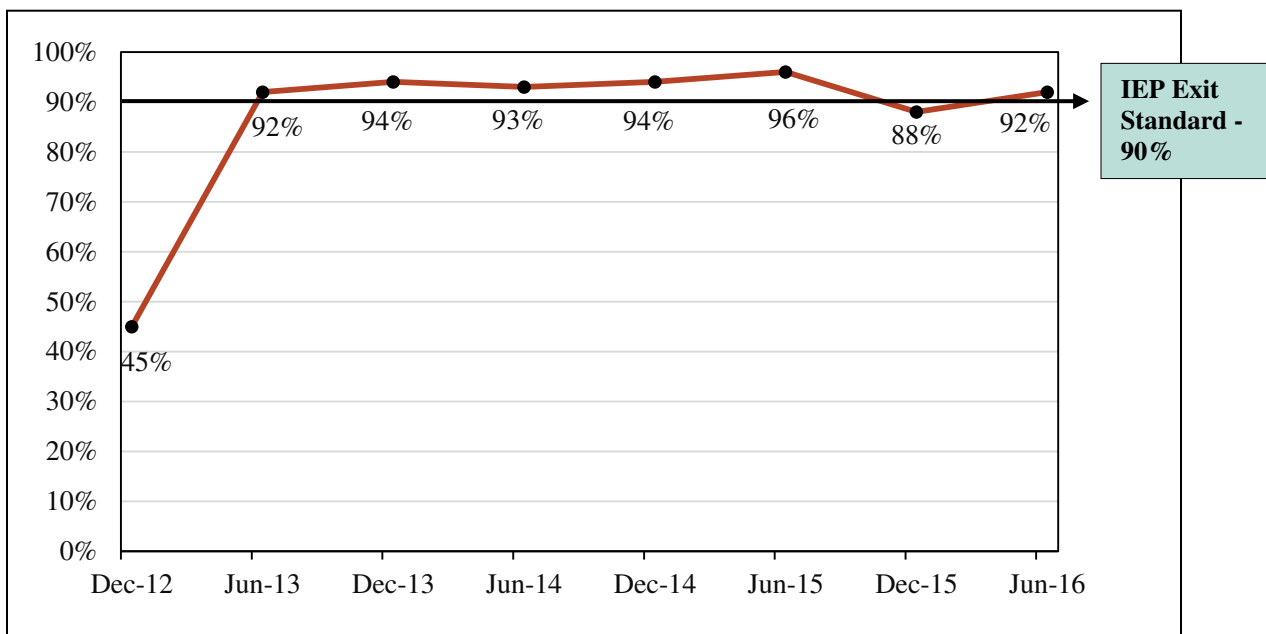
CFSA reports that program managers meet with supervisors and social workers during routine supervision to provide coaching and offer strategies in developing work plans which include follow up activities needed for investigation and FA closure. CFSA reports that program managers receive social worker's work plans via email throughout the month and conduct bi-weekly reviews with supervisors to address inconsistencies in completion of work plans and to

inform best practice. CFSA has determined that a dominant theme identified from these processes is an ongoing need for close supervision by program managers. The Monitor does not believe data needed for accountability purposes are routinely aggregated to monitor systemic implementation.

Reviews of Repeat Reports

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

**Figure 6: Completion of Reviews for Families Subject to a New Investigation for Whom the Current Report is the Fourth or Greater Report Within the Last 12 Months
December 2012 – June 2016**

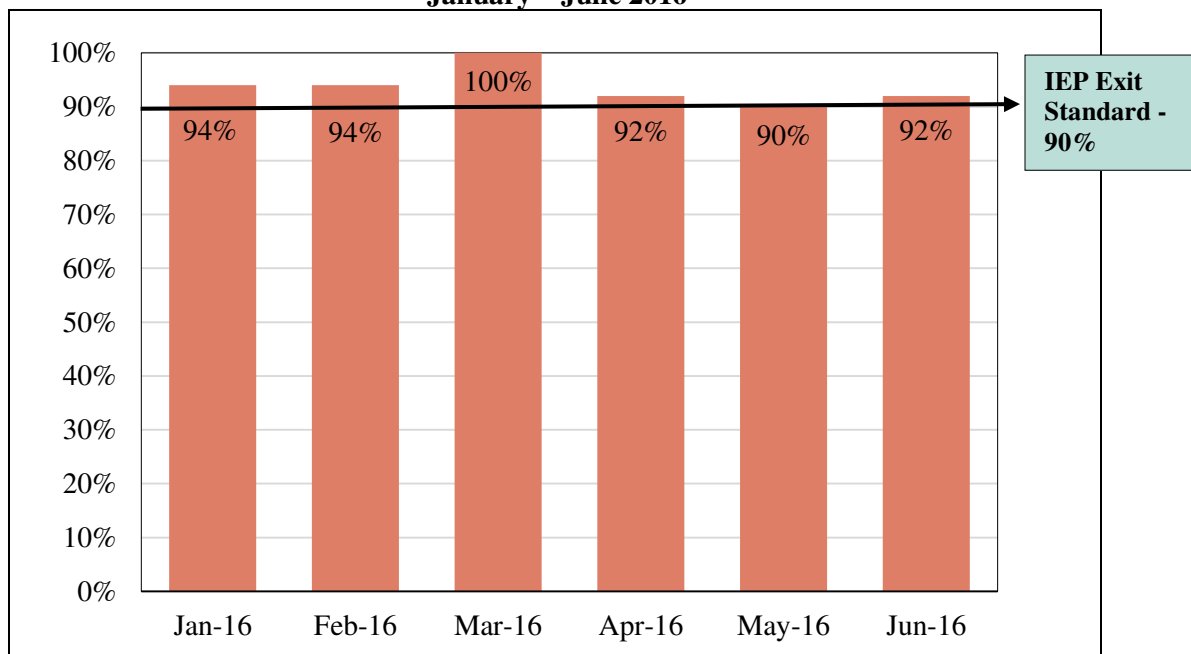


Source: CFSA Manual Data and Administrative Data, FACES.NET Report INV133

Performance for the period January 1 through June 30, 2016:

The purpose of this requirement is to ensure a more intensive upfront review of a family's history and current case circumstances when a family has had multiple reports alleging abuse or neglect. In June 2016, there were 108 families eligible for a review as the current report of child maltreatment was the fourth or greater report of child maltreatment with the most recent report occurring within the last 12 months; 99 (92%) of these investigations had documentation in FACES.NET indicating that a comprehensive review of the case history and current circumstances that brought the family to CFSA's attention had occurred. Between January and June 2016, monthly performance for this Exit Standard ranged from 90 to 100 percent, meeting or exceeding the required standard each month (see Figure 7). This is an improvement over the previous monitoring period when performance ranged between 78 and 94 percent.

**Figure 7: Completion of Reviews for Families Subject to a New Investigation for Whom the Current Report is the Fourth or Greater Report Within the Last 12 Months
January – June 2016**

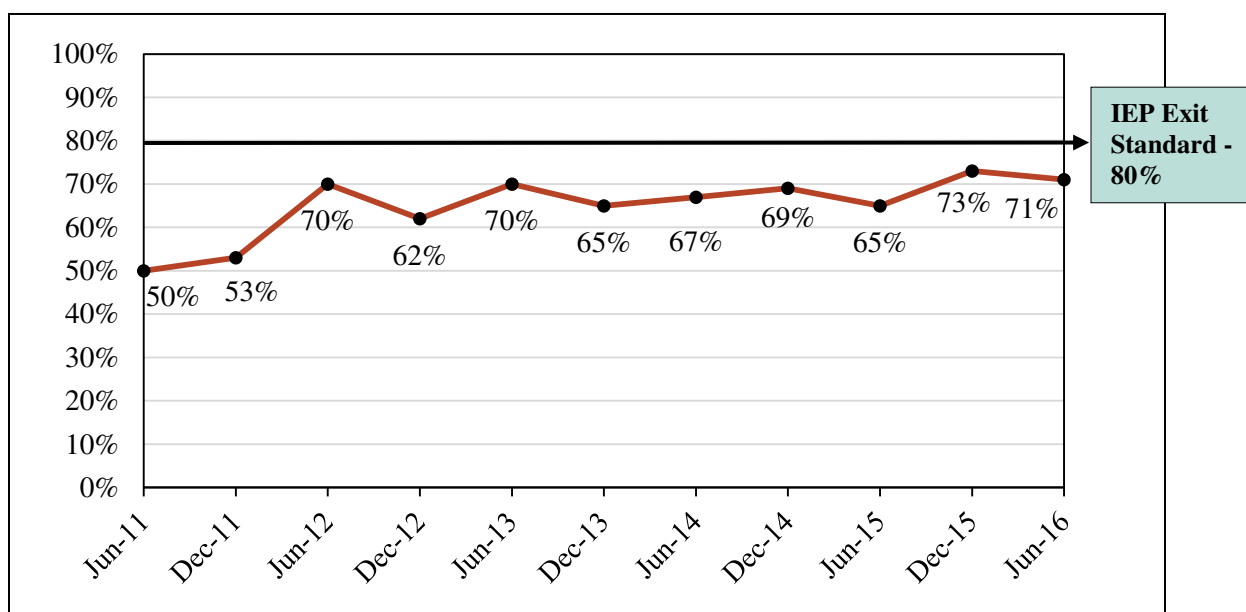


Source: CFSA Manual Data and Administrative Data, FACES.NET Report INV133

Quality of Investigations

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

**Figure 8: Investigations Determined to be of Acceptable Quality
June 2011 – June 2016**



Source: Data for December 2012 were collected during a case record review of a statistically significant sample of investigations closed in October 2012. Data presented for June 2011, December 2011, June 2012, June 2013 and December 2013 are based upon a review of 20 investigations closed during the six month monitoring period ending in the referenced month. Data for June 2014, December 2014, December 2015 and June 2016 are based upon a review of 131 or 132 investigations closed during the six month monitoring period ending in the referenced month. Data for June 2015 are based upon a review of 99 investigations closed between January and June 2015.

¹²³ Evidence of acceptable investigations includes: (a) Use of CFSA's screening tool in prioritizing response times for initiating investigations; (b) Interviews with and information obtained from the five 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 for the period January 1 through June 30, 2016:

Data were collected for this Exit Standard using a structured review instrument developed jointly by CFSA and the Monitor. One-hundred and thirty-two investigations that closed between January and June 2016 were reviewed by at least two CFSA staff or one CFSA and one Monitor staff; Monitor staff reviewed 18 percent of these investigations. Of the 132 investigations reviewed, 94 (71%) were assessed to be of acceptable quality. Performance continues to be below the level required by the IEP.

Performance on Strategy Plan:

CFSA has employed the following strategies to improve the quality of investigations:

- *CFSA will continue to use the “acceptable investigation tool” to review investigation practice. CPS supervisors, managers, and agency performance staff will review 66 investigations per quarter. Based on the results of the reviews, CPS managers and supervisors will standardize the way coaching and support is provided to social workers by developing a supervision template to be completed by supervisors that will track the themes discussed during supervision and will include individualized corrective action plans. CPS managers will meet consistently with supervisors and workers to provide supervisory and worker supports. (2016 Strategy Plan, #8)*

In October 2016, CFSA and Monitor staff conducted a refresher training for supervisors and program managers who complete the acceptable investigation tool to reinforce interrater reliability.

CFSA has developed a supervision form template for use by supervisors or managers and staff members to structure coaching and support and track individual performance and practice improvement actions on a weekly basis. The template includes sections regarding the staff member’s well-being, accomplishments, performance issues (strengths and concerns), status of open investigations, actions to be taken by the staff and actions to be taken by the supervisor. CFSA reports there is a strong emphasis on integrating critical thinking to produce quality investigations during these sessions. CFSA reports that information gathered from the supervisory sessions as well as from data collected during the acceptable investigation reviews indicate that practice improvements are needed in documentation of collateral contacts, “four plus” review completion earlier in the investigation to inform practice and accurate completion of risk assessments.

- *Supervisors will use the “four plus reviews” at the start of an investigation to review themes or trends identified in the families’ history and determine if additional actions are needed to address the history within the current*

investigation or closure recommendations. CPS managers and supervisors will coach and support social workers to include the development of individualized plans for families based on history and will collect trends to be used in future planning (e.g., service development) and trainings. (2016 Strategy Plan, #9)

CFSA reports that, as the data indicate, “four plus” reviews are routinely occurring, however, they do not always occur at the beginning phase of an investigation. These reviews are meant to provide information regarding how workers and supervisors should approach families based on historical information and are most useful if conducted earlier in an investigation.

- *By April 30, 2016¹²⁴, CFSA will reissue the Administrative Issuance on Community Papering to provide guidance to program areas and workers and provide training so that workers and supervisors fully understand the criteria to community paper cases and their roles in the process. (2016 Strategy Plan, #10)*

Community papering is a legal strategy where a petition is filed in Family Court as an intervention to gain legal oversight for a family where there is no imminent risk of harm and the agency is not requesting the removal of the child(ren) from their parent(s) but there remain important concerns. Through community papering, the Family Court can order the parent to engage in services to ensure the child(ren) can remain safely in the home.

CFSA finalized and reissued the Administrative Issuance (AI) on Community Papering on June 17, 2016 and anticipated developing a training plan by September 30, 2016. CFSA recently reported training began in October 2016 and will continue throughout the first quarter of FY2017.

- *Each month beginning April 2016¹²⁵, the Deputy Director for Entry Services, the Deputy Director for Community Partnerships, and the Deputy for the Office of the Attorney General will review all cases presented for community papering, strategize regarding problematic cases, and identify themes and concerns for resolution. (2016 Strategy Plan, #11)*

On June 22, 2016, CFSA notified the Monitor that due to the delays in reissuing the AI on Community Papering, monthly reviews of cases presented for community papering did not begin in April as previously planned but would begin in July 2016. The meetings include the Deputy Director for Entry Services, the Principal Deputy and the Deputy for the Office of the Attorney

¹²⁴ On June 22, 2016, CFSA notified the Monitor that CFSA was unable to comply with the April 30, 2016 deadline due to a need for a procedural redesign of the AI; the AI was finalized on June 17, 2016 and was reissued at that time.

¹²⁵ On June 22, 2016, CFSA notified the Monitor that due to the delays in reissuing the AI, monthly reviews of cases presented for community papering would begin in July 2016.

General and discussion includes identification of themes and concerns for resolution. Case reviews from July and August identified the following recommendations for practice:

- Additional supervisory support through pre-meeting preparation with social workers and for more complex cases, include the program managers when meeting with attorneys to discuss a case;
- Consider using community papering at planned removals and request shelter care at the hearing;
- Additional revisions to the AI and purpose statement to clarify for staff when community papering would be utilized; and
- Development of FACES.NET monthly management report that will include number of cases filed for community papering by program area, number of children involved, hearing dates, number of removals and outcome of petitions.

Between January and June 2016, 47 cases involving 106 children were presented to the AAG with a request for community papering. Of these 47 cases, 17 cases involving 33 children were accepted by the AAG and determined that a petition could be filed in court (see Table 4).

Table 4: Cases Presented for Community Papering
January – June 2016
N=47

Outcome	Number of Families	Number of Children
Petition filed: Conditional Release ¹²⁶ Granted	12	25
Petition filed: Children Placed in Foster Care	3	6
Initial Hearing Pending	2	2
Not Accepted	30	73
Total	47	106

Source: CFSA Manual Data

For 30 cases involving 73 children, the AAG determined a petition would not be filed in court at that time (see Table 5). In 17 cases, the AAG requested additional information from the worker or supervisor in order to make a decision.

¹²⁶ Conditional Release is a pre-adjudication legal status where the child is permitted to return home to the parent/guardian under the supervision of the Family Court. The parent/guardian must comply with services and other conditions in order to maintain the child in his/her care.

Table 5: Reasons Cases Not Accepted for Community Papering
January – June 2016
N=30

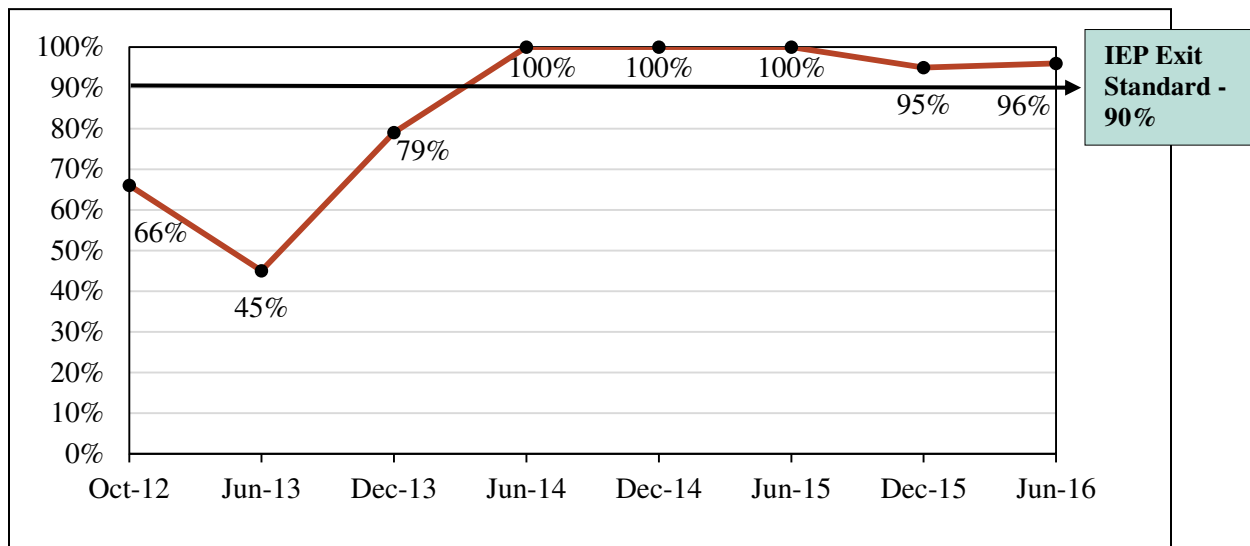
Outcome	Number of Families	Number of Children
AAG Requested Additional Information	17	41
No Petition Filed and No Follow-Up Requested	13	32
Total	30	73

Source: CFSA Manual Data

Community-Based Service Referrals for Low & Moderate Risk Families

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

**Figure 9: Community-Based Services Referrals for Low and Moderate Risk Families
October 2012 – June 2016**



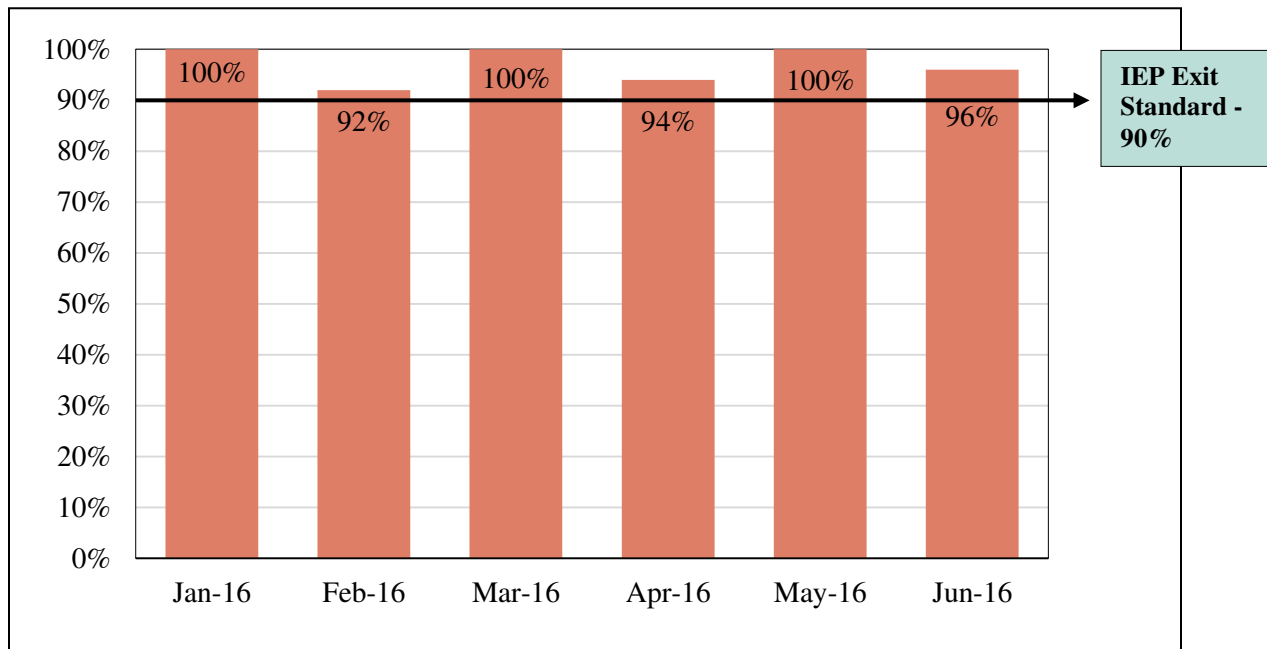
Source: October 2012 performance data collected during case record review of a statistically significant sample of investigations closed in October 2012. Sampling represents a $\pm 5\%$ margin of error with 95% confidence in the results. Data presented after October 2012 from FACES.NET report INV089.

Performance for the period January 1 through June 30, 2016:

During June 2016, there were 183 completed investigations with a risk rating of low or moderate. Of these, six were opened as an ongoing case for services, three were already receiving needed services and 12 did not require a referral for additional supports or services. In 138 investigations, the family demonstrated service needs but declined a referral. Of the remaining 24 investigations, 23 (96%) families received a referral to a Collaborative or community agency for follow-up. The Monitor continues to encourage CFSA to more closely examine those cases where the family demonstrates a service need and declines a referral for services or supports; CFSA has an opportunity during its interaction with the family to try and prevent future contact with the child welfare system and improve the well-being of children and families. CFSA has responded that the agency can offer, but not force the family to engage in and accept ongoing services and this is encouraged through supervision, coaching and training. For the month of June 2016, three-quarters of the families with closed investigations demonstrated a need but declined a referral; nine of these investigations resulted in substantiated findings of abuse and/or neglect against a caretaker and five of the investigations had inconclusive findings.

Between January and June 2016, monthly performance for this Exit Standard ranged between 92 and 100 percent (see Figure 10). CFSA continues to meet this Exit Standard.

**Figure 10: Community-Based Services Referrals for Low and Moderate Risk Families
January – June 2016**



Source: CFSA Administrative Data, FACES.NET report INV089

3. Family Assessment

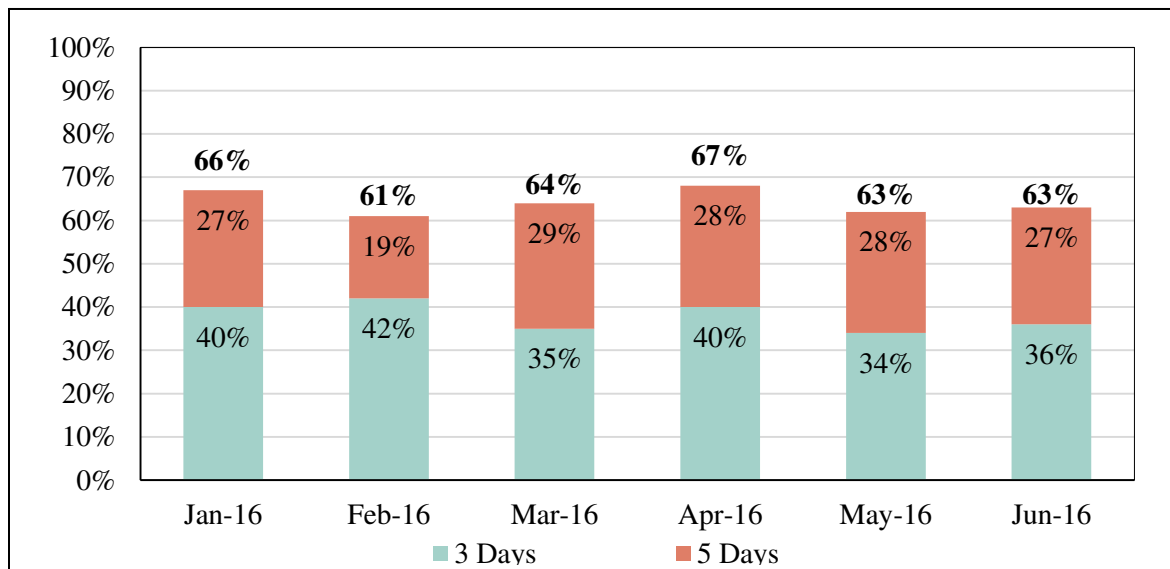
The Family Assessment (FA) pathway is designed for families for whom a hotline report has been made but there are no identified immediate safety concerns. For these families, instead of a CPS investigation, CFSA has adopted a differential response approach based on a strength-based, family-centered assessment process to support families in identifying needs and engaging with and accessing services.

Initiation of FA

CFSA policy sets different response times for initiation of FA depending upon the information contained in the hotline referral – either within three or five days from the hotline referral. Between January and June 2016, performance on the measure of timeliness of FA initiation within five days ranged between 61 and 66 percent, an improvement from the previous monitoring period. Over the six month period, a monthly range of 34 to 42 percent of families whose FA closed that month had all alleged child victims contacted within 72 hours of the receipt of referral; and an additional 19 to 29 percent each month were contacted within five days (see Figure 11).¹²⁷

¹²⁷ Due to data validation issues with the use of the “good faith efforts” provision related to the timely initiation of investigations discussed earlier in this section, reported data for timely initiation of FAs are not inclusive of instances where good faith efforts

**Figure 11: Initiation of FA within 3 and 5 Days of Referral
January – June 2016**



Source: CFSA Administrative Data, FACES.NET report INT055
Percentages may not equal 100% due to rounding.

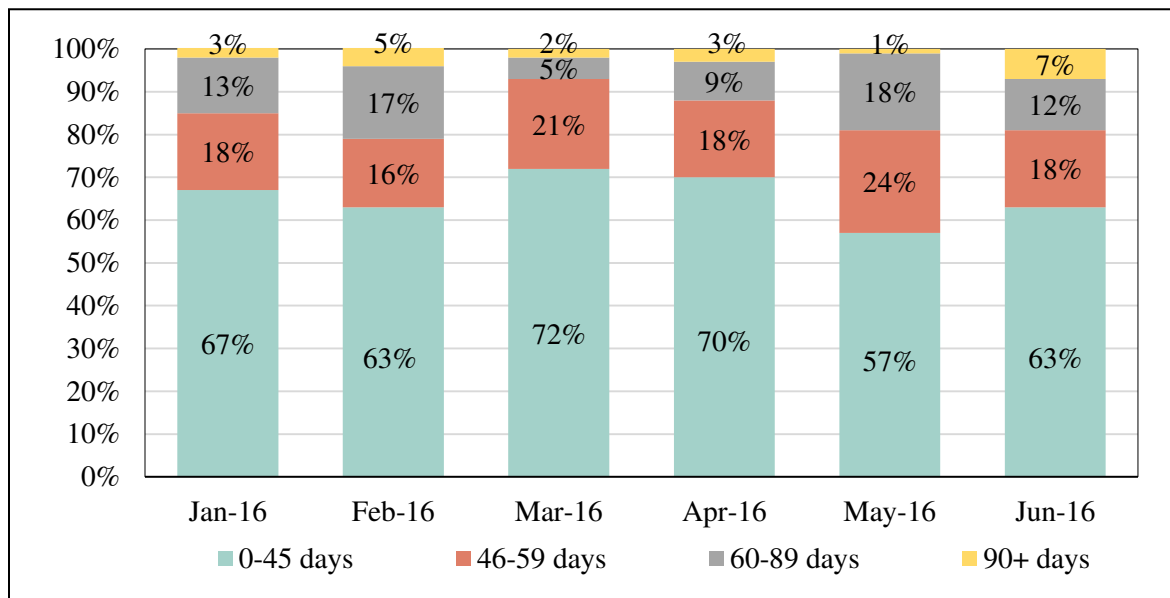
Completion of FA

CFSA’s policy and practice guidance provides that a FA case should remain open for 45 days. The goal during that period is 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. Following the safety assessment, unless there is an identified safety concern which warrants converting the referral to a CPS investigation, a family’s participation in FA services is voluntary and based on family agreement.

Between January and June 2016, a monthly range of 57 to 72 percent of FAs were completed within 45 days of referral to the hotline (see Figure 12). Specifically, in June 2016, 340 FAs were completed and 215 (63%) were completed within 45 days of the FA referral. Completion data for the remaining FAs in June 2016 are as follows: 62 (18%) were completed within 46 to 59 days; 40 (12%) were completed within 60 to 89 days; and the 23 (7%) were completed in 90 days or longer. Unlike in an investigation, where practice and policy necessitate a fixed time period in order to determine a legal finding on the allegations and to initiate appropriate next steps related to safety, the FA process and timelines are more flexible and expected to be guided by the family’s needs and considerations for engagement, thorough assessment and service provision and linkage.

were made to locate the alleged victim child(ren). Therefore, actual performance is likely higher than reported. Data will be validated for September 2016 and included in the next monitoring report.

**Figure 12: Timeline for FA Completion
January – June 2016**

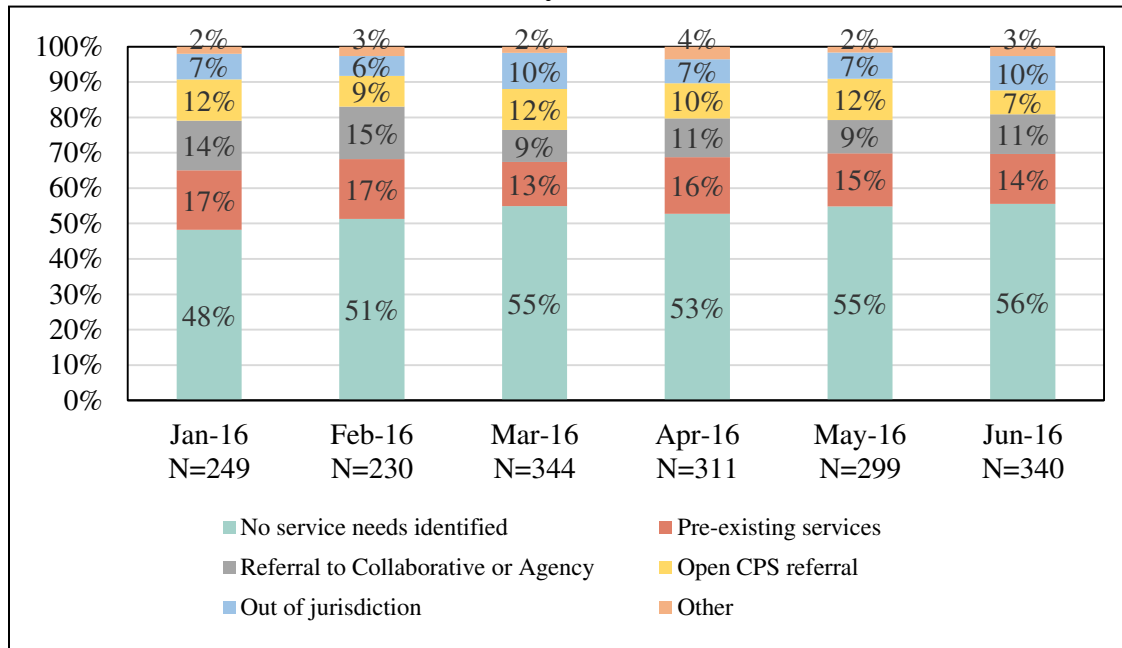


Source: CFSA Administrative Data, FACES.NET report INV140

Monthly data on the reason for FA completion are included in Figure 13 below – the top cited reasons in June 2016 are no service needs identified (189 families/56%); pre-existing services already in place (48 families/14%); family was referred to a Collaborative or other community-based agency (38 families/11%); family was out of jurisdiction (33 families/10%); and referral was converted to a CPS investigation (23 families/7%). Beginning in October or November 2016, CFSA will be adding back into this report the closure reason of “family declined services” in order to fully track and understand trends in cases that close for this reason.¹²⁸

¹²⁸ In October 2015, CFSA modified the list of reasons for closure and removed the categories of “family declined participation” and “unable to engage family” and added the categories of “no service needs identified” and “pre-existing services.”

Figure 13: Reasons for FA Completion
January – June 2016



Source: CFSA Administrative Data, FACES.NET report INV140

Other includes: link to open FA, connect to an open case, did not meet standards, open a new case and connect to a closed case and re-open

Community-Based Service Referrals

Providing families with referrals to community-based agencies and service providers that can assist families with needs identified through the assessment process is a key element of CFSA's FA response. Between January and June 2016, a monthly range of nine to 15 percent of families with a closed FA were referred to a Collaborative or other community agency or service provider.¹²⁹ Table 6 below details the Collaboratives to which families were referred.

¹²⁹ The monthly number and percentage of closed FAs referred to a Collaborative or community-based agency or service provider are as follows: January, 35 referrals/14%; February, 34 referrals/15%; March, 31 referrals/9%; April, 34/referrals/11%; May, 28 referrals/9%; June, 38 referrals/11%.

**Table 6: Service Referrals to Collaborative or Community-Based Agency for Family Assessments
January – June 2016**

Collaborative or Community-Based Agency	Total Referrals
Collaborative Solutions for Communities	12
East River Collaborative	39
Edgewood/Brookland Collaborative	25
Far Southeast Collaborative	50
Georgia Avenue Collaborative	17
Other Community-Based Agency	36
Total	179

Source: CFSA Administrative Data, FACES.NET report INV140

CFSA does not collect data on the outcomes of these referrals, including if the family engages in the services following a referral and the results of the service provision.

Repeat Maltreatment

As part of its assessment of the effectiveness of the FA intervention, CFSA collects data on the number of families with closed FAs who have a subsequent investigation which was substantiated for child abuse or neglect within six months of FA completion. There were 961 children with a completed FA between July 1 and December 31, 2015; 13 children (1.3%) had a substantiated investigation within six months of FA completion. This represents a decrease from the previous monitoring period, when the substantiated maltreatment rate within six months was 2.1 percent. Additionally, there were 1,312 children with a closed FA between January 1 and June, 30, 2015; 50 (3.8%) had a substantiated investigation within 12 months of FA closure. This rate has increased slightly since the previous monitoring period (maltreatment rate within 12 months in prior monitoring period was 3%).

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

IEP Requirement	<p>5. <u>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; andd. Services to prevent the disruption of a beneficial foster care placement and avoid the need for replacement. <p style="text-align: right;">(IEP citation I.A.3.)</p>
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>

As required by the IEP, two indicators from the Quality Service Review (QSR) protocol are used to measure CFSA's performance on the Exit Standard pertaining to appropriate service provision to families and children to promote safety, permanency and well-being. These indicators, *Implementing Supports and Services* and *Pathway to Case Closure*, are described in further detail in Figures 14 and 15, which include the parameters reviewers consider in rating performance in the selected areas, as well as descriptions of minimally acceptable performance and unacceptable performance as described in the QSR protocol.

Figure 14: QSR *Implementing Supports and Services* Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹³⁰

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.

¹³⁰ *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 15: QSR *Pathway to Case Closure* Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹³¹

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?

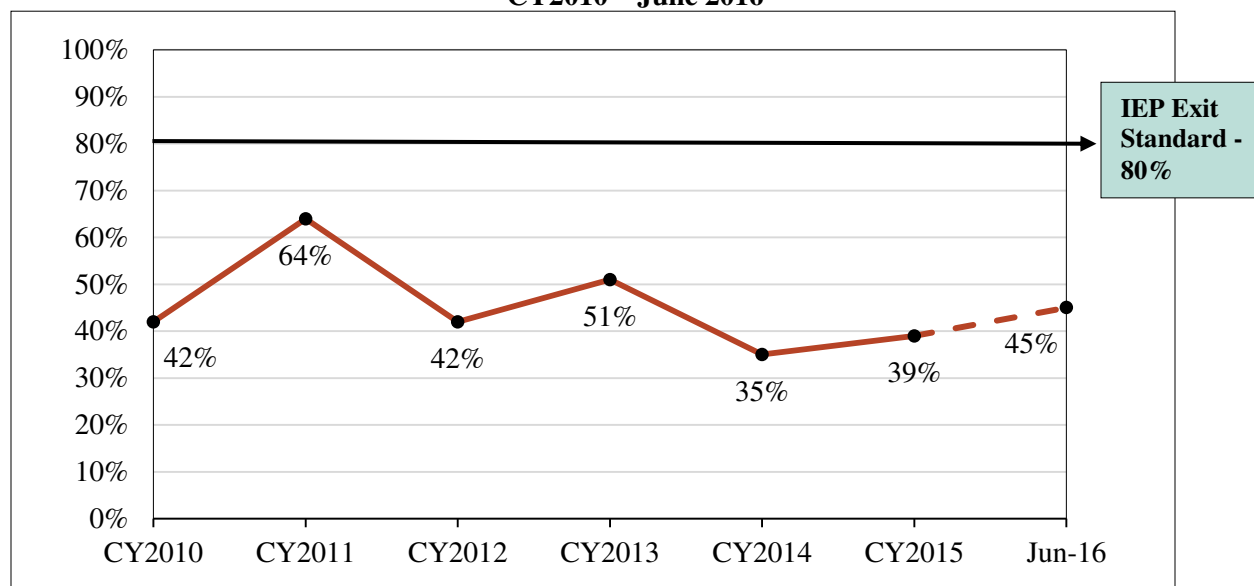
- *Description of Acceptable/Unacceptable Performance:*

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.

¹³¹ *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 16: QSR Findings on Services to Children and Families
to Promote Safety, Permanency and Well-Being
CY2010 – June 2016**



Source: QSR Data CY2010 – CY2015; June 2016 performance includes data from QSRs conducted January – June 2016.

Performance for the period January 1 through June 30, 2016:

A total of 64 cases were reviewed using the QSR methodology between January and June 2016 – 16 cases involved a child receiving in-home services and 48 cases where the child is placed in out-of-home care. Of those who were placed in out-of-home care, 21 children were case managed by CFSA and 27 children were case managed by one of the seven private agencies^{132, 133} with whom CFSA contracts with for case management and placement services.

As Figure 17 indicates, almost half of the cases reviewed (45%; 29 of 64) were rated acceptable on *both* the *Implementing Supports and Services*¹³⁴ and *Pathway to Case Closure* indicators. Just under two-thirds (61%; 39 of 64) of the cases reviewed were rated acceptable on the *Implementing Supports and Services* indicator and slightly more than half of the cases reviewed (55%; 35 of 64) were rated acceptable on the *Pathway to Case Closure* indicator. While data for January through June 2016 show a slight improvement in performance from CY2015 and for the

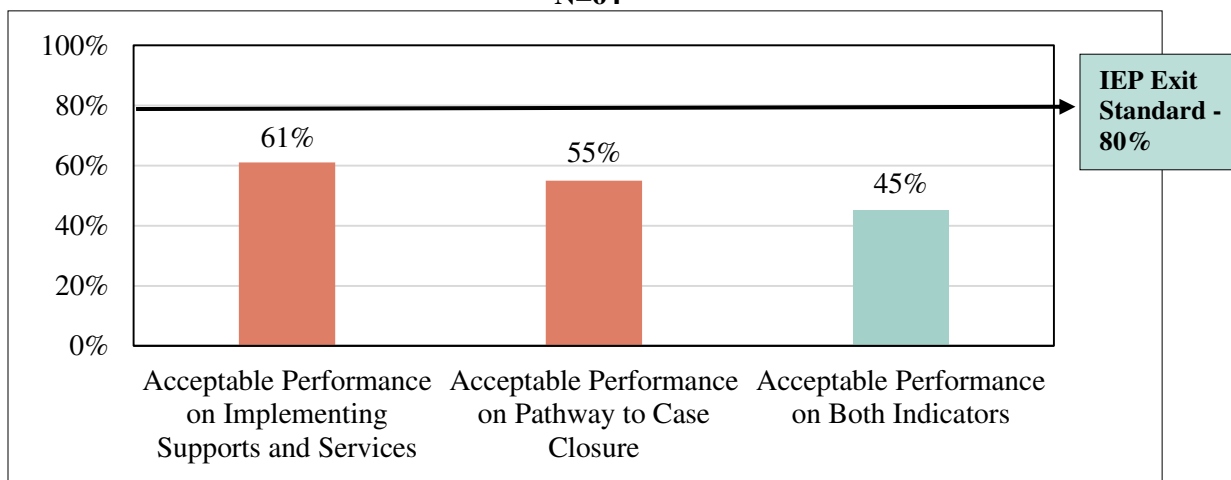
¹³² 5 different private agencies were responsible for providing case management services in the cases reviewed through the QSR between January and June 2016.

¹³³ In addition to providing out-of-home kinship and non-kinship placements in Maryland, the private agencies are responsible for providing therapeutic placements for children in out-of-home placement who require such placement whereas CFSA provides traditional placements and support District area kinship resource parents. However, both CFSA and the private agencies provide case management services for children who receive therapeutic supports either from the Department of Behavioral Health or a private provider.

¹³⁴ 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 by the reviewer, that sub-part is not considered in determining the overall rating for the indicator.

same time period in 2015 (January through June), the fact that performance remains far below the 80 percent required for this Exit Standard is a significant concern.

**Figure 17: QSR Findings on Services to Children and Families
to Promote Safety, Permanency and Well-Being
January – June 2016
N=64**



Source: QSR Data, January – June 2016

Of the 64 cases reviewed through the QSR process between January and June 2016, 58 percent (37 of 64) were case managed by CFSA¹³⁵ and 42 percent (27 of 64) were case managed by one of the private agencies. Compared to the distribution of case management responsibility for all permanency cases, the QSR sample for the current monitoring period includes a slightly higher representation of cases managed by private agencies.¹³⁶ During the current monitoring period, performance on both QSR indicators used to assess services to children and families in the private agencies improved (26% for CY2015 to 44% for January through June 2016) and performance as measured through the QSR is now equal to performance for cases managed by CFSA (see Table 7). This improvement may suggest that the intentional engagement of private agency staff in CFSA practice improvement efforts is producing results. Moving forward, it is critical that this partnership is not only maintained but also strengthened to ensure that new initiatives in CFSA are shared with the private agencies and that innovative practices within the private agencies are used to inform CFSA's work with children and families.

¹³⁵ Of the 37 cases managed by CFSA, 16 of the children reviewed were living in the home of their parent/guardian and 21 of the children were placed in out-of-home care.

¹³⁶ In June 2016, there were 1,456 ongoing cases assigned, not including ICPC cases; 515 (35%) cases were assigned to 1 of the private agencies.

**Table 7: Performance on QSR Indicators by Case Management Provider
January – June 2016**

CFSA N=37	Private Agencies N=27
<i>Implementing Supports and Services</i>	
62% (23)	59% (16)
<i>Pathway to Case Closure</i>	
54% (20)	56% (15)
<i>Both Indicators</i>	
46% (17)	44% (12)

Source: QSR Data, January – June 2016

There is still a notable discrepancy in performance between out-of-home placement cases and in-home cases (where the focus child is able to remain safely in their own home while the family receives services to mitigate risk and safety concerns). Overall, 25 percent (16 of 64) of cases reviewed were in-home cases and the remaining majority (75%; 48 of 64) of cases reviewed focused on a child or youth in out-of-home placement.¹³⁷ Half (50%; 24 of 48) of cases where the focus child was in out-of-home placement were rated acceptable on both indicators compared to 31 percent (5 of 16) of cases where the focus child was receiving in-home services. Critical to this difference was performance on the *Pathway to Case Closure* indicator where 60 percent (29 of 48) of cases where the focus child was in out-of-home placement were rated acceptable compared to 38 percent (6 of 16) of cases where the focus child was receiving in-home services. This large discrepancy between performance for cases where the focus child was in out-of-home placement compared to receiving in-home services, while not statistically significant, raises a red flag about practice in in-home cases and reinforces the importance of directing additional resources and coaching to workers and supervisors to ensure that case planning is behaviorally-based and takes a holistic approach to working with families.

¹³⁷ Analyses indicate this difference is not statistically significant at a level of $p < .05$.

Table 8: Performance on QSR Indicators by Case Type
January – June 2016

Out-of-Home Placement N=48	In-Home Services N=16
<i>Implementing Supports and Services</i>	
65% (31)	50% (8)
<i>Pathway to Case Closure</i>	
60% (29)	38% (6)
<i>Both Indicators</i>	
50% (24)	31% (5)

Source: QSR Data, January – June 2016

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on the services provided to children and families to promote safety, permanency and well-being:

- *By June 30, 2016, CFSA will refine the referral process for Project Connect (a family preservation service that works with high-risk families involved with the child welfare system that are affected by parental substance abuse) and HOMEBUILDERS (a family intensive preservation service that provides in-home crisis intervention, counseling, and life skills education for applicable families) by expanding eligibility to include in-home families that experience substance abuse and/or chronic neglect. CFSA will train staff on new practices by August 31, 2016. CFSA will continue to Project Connect staff on-site access each week and will continue to track referrals, utilization, and modify protocols as needed to improve utilization (2016 Strategy Plan, #17).*

CFSA, in partnership with the title IV-E Waiver Evaluation Team, assessed the need for the expansion of Project Connect and HOMEBUILDERS services through surveys of CFSA and private agency social workers. These surveys revealed not only a need for the expansion of eligibility criteria for these services but also additional guidance and support for workers to ensure the referrals are not only made but that services are then implemented and utilized. As a result, in April 2016, CFSA expanded eligibility criteria for Project Connect services to in-home families impacted by substance abuse and/or who meet the criteria for chronic neglect¹³⁸ and have tried to improve the referral process for HOMEBUILDERS. Project Connect and HOMEBUILDERS staff also now have dedicated office space at CFSA to promote in-person connection and teaming with social workers. However, referrals for both of these services remain below capacity and desired levels. With respect to HOMEBUILDERS, the Monitor believes that

¹³⁸ In-home cases that meet the definition of “chronic neglect” are opened for 12 to 18 months and experiencing intense needs in addition to poverty, warranting additional case management and support.

clarifying the referral process and making the services available to families at risk of child placement from both intake and ongoing in-home caseloads, including the chronic neglect unit, is essential. The Monitor would be concerned about scaling back this service before looking closely at outcome data for families served and ensuring that steps to improve referrals have been fully implemented. CFSA reports that they would not make any changes to waiver services without first analyzing data and engage in discussions with key stakeholders.

- *CFSA will assemble a team by May 2016 to assess the effectiveness of the new case planning process to include implementation of the CAFAS/PECFAS, danger and safety assessment, caregiver strength and barriers assessment, and behaviorally-based case planning. CFSA will analyze available data, determine the barriers to workers completing the new case plan (including private agency and CFSA line worker feedback), and develop corresponding solutions and strategies for full implementation. A QA/QI process will be used to provide feedback on use of the tool and training will be provided to private agency and CFSA workers identified as needing additional support by December 31, 2016. (2016 Strategy Plan, #18).*

As part of earlier efforts to integrate a trauma-informed perspective into its practice, CFSA has focused on implementation of functional assessment tools for children and families – specifically the CAFAS/PECFAS¹³⁹ and caregiver strength and barriers assessment. The CAFAS/PECFAS is a functional assessment tool for understanding the behaviors of children in different domains – including home, school and the community. The caregiver strength and barriers assessment is a functional assessment tool that focuses on parents’ capacity, strengths and needs. These functional assessments allow workers to assess behaviors and behavior changes over time in response to interventions – for example, therapy – and changing conditions.

CFSA convened a workgroup in April 2016, co-chaired by the Deputy Director of Operations and Deputy Director of Well-Being, to assess the implementation process and effectiveness of the CAFAS/PECFAS assessment tool. The first step taken by the workgroup was to review the data on completion of assessments and discuss barriers to completing assessments every 90 days and creating behaviorally-based service plans based on the CAFAS/PECFAS assessment. Between January 1 and July 8, 2016, CFSA reports that of the 858 children became involved with CFSA either through an in-home case or placement in foster care. Of these 858 children, all of whom were expected to have a CAFAS/PECFAS completed, the tool was completed on time for 512 children (60%). This performance highlights the importance of developing concrete strategies to ensure timely and accurate completion of the tool.

¹³⁹ Child and Adolescent Functional Assessment Scale (CAFAS) and Preschool and Early Childhood Functional Assessment Scale (PECFAS) are functional assessment scales used to assess, track outcomes and inform case planning decisions.

In response to findings from initial reviews of data and implementation barriers, CFSA charged a team of administrators across the agency to meet monthly, beginning June 1, 2016, to address challenges and develop recommendations for management. The initial recommendations provided to management include:

- Set-up a learning collaborative for ongoing learning after refresher trainings are completed
- Support supervisors and workers to utilize clinical knowledge and training during assessment process
- Implement process for supervisors to participate in reviewing the assessment prior to submission
- Utilize data moving forward to inform effectiveness of services
- Review CAFAS/PECFAS and caregiver strength and barrier assessment data on a monthly basis
- Support integration of clinical thinking into all trainings and elements of practice

As of the beginning of November 2016, CFSA had scheduled additional trainings and established a “Learning Collaborative” for all supervisors as a refresher and ongoing learning forum for Trauma Systems Therapy. In addition, CWTA has organized booster trainings for completing the CAFAS/PECFAS and integrating these assessments into behaviorally-based case plans.

- *By August 31, 2016, Community Partnerships will designate two in-home units staffed by trained workers to provide supports and services for families identified as experiencing chronic neglect (2016 Strategy Plan, #19).*

As of April 2016, two in-home units were designated to manage in-home services cases that met the definition of “chronic neglect” – were opened for 12 to 18 months and were experiencing intense needs in addition to poverty and warranted additional case management and support. The chronic neglect unit is characterized as:

- Strengths based and solution focused
- Adheres to the fidelity of the models
- Reduced caseload of six to eight families whose cases have been opened for 12 to 18 months
- Staffed with social workers who meet with the family at least once per week and contact the primary caretaker at least twice per week
- Involves nurse care managers, co-located DBH staff, family peer coaches and the Collaboratives as appropriate.

CFSA is providing additional training for these workers and is in the process of finalizing the case practice model and in-home services policy and business operation of the policy. As of

November 10, 2016, the chronic neglect unit is currently serving 24 families. CFSA is tracking outcome measures but reports that it is too early to report any outcome data or thematic trends.

5. Visitation

Visits for children with their caseworkers and parents can ensure children's safety, maintain and strengthen family connections and increase opportunities to achieve permanency. 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. They also allow social workers opportunities to assess safety, progress on case plans and link children and families to needed services as appropriate.

Two visitation Exit Standards are designated as Outcomes to be Maintained – frequency of worker visits to children in out-of-home care and worker visits to families with in-home services. As in the last few monitoring periods, CFSA maintained the required level of performance for frequency of worker visits to children in placement¹⁴⁰ and partially maintained the Exit Standard requirement for visits with families receiving in-home services¹⁴¹. Of the six visitation Exit Standards that have not been achieved, slight improvements are noted in frequency of visits for children experiencing a new placement or a placement change and visits between parents and children. For the other standards that remain to be achieved, performance remains similar to the previous monitoring period and does not meet the levels required by the IEP.

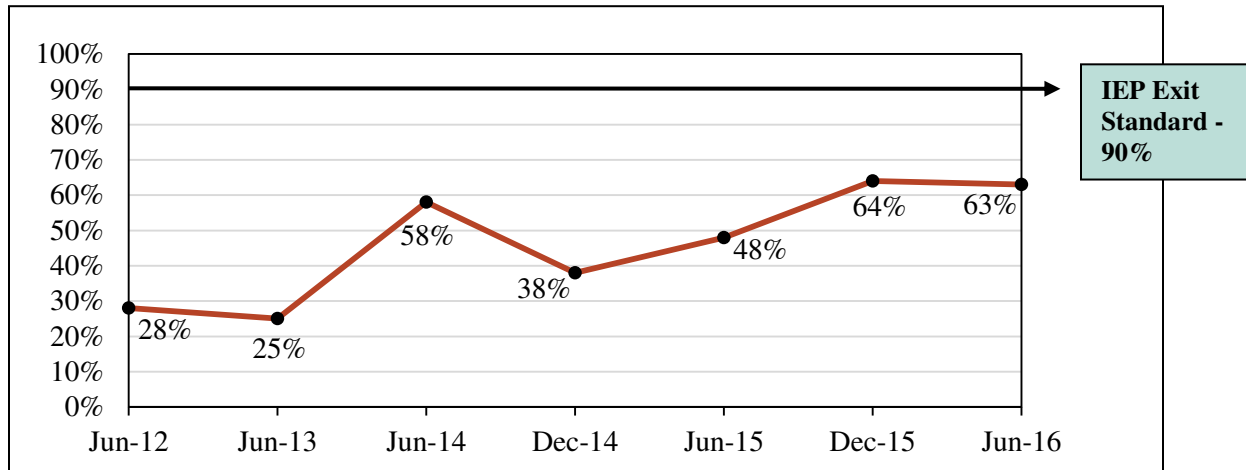
Social Workers Assessment of Safety during Visits – Families with In-Home Services

IEP Requirement	<i>7. Worker Visitation to Families with In-Home Services:</i> 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. (IEP citation I.A.4.c.)
Exit Standard	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.

¹⁴⁰ Monthly performance data for monthly visits are as follows: January, 97%; February, 97%; March, 96%; April, 97%; May, 96%; June, 97%. Monthly performance data for twice monthly visits are as follows: January, 95%; February, 96%; March, 95%; April, 96%; May, 94%; June, 96%.

¹⁴¹ Monthly performance data for monthly in-home worker visits are as follows: January, 88%; February, 94%; March, 91%; April, 90%; May, 90%; June, 92%. Monthly performance data for twice monthly in-home worker visits are as follows: January, 84%; February, 90%; March, 89%; April, 85%; May, 86%; June, 86%.

**Figure 18: Children Receiving In-Home Services:
Safety Fully Assessed at Two or More Visits
June 2012 – June 2016**



Source: Case Record Review Data (June 2012 and June 2013) and CFSA Manual Data (June 2014 through June 2016)

Performance for the period January 1 through June 30, 2016:

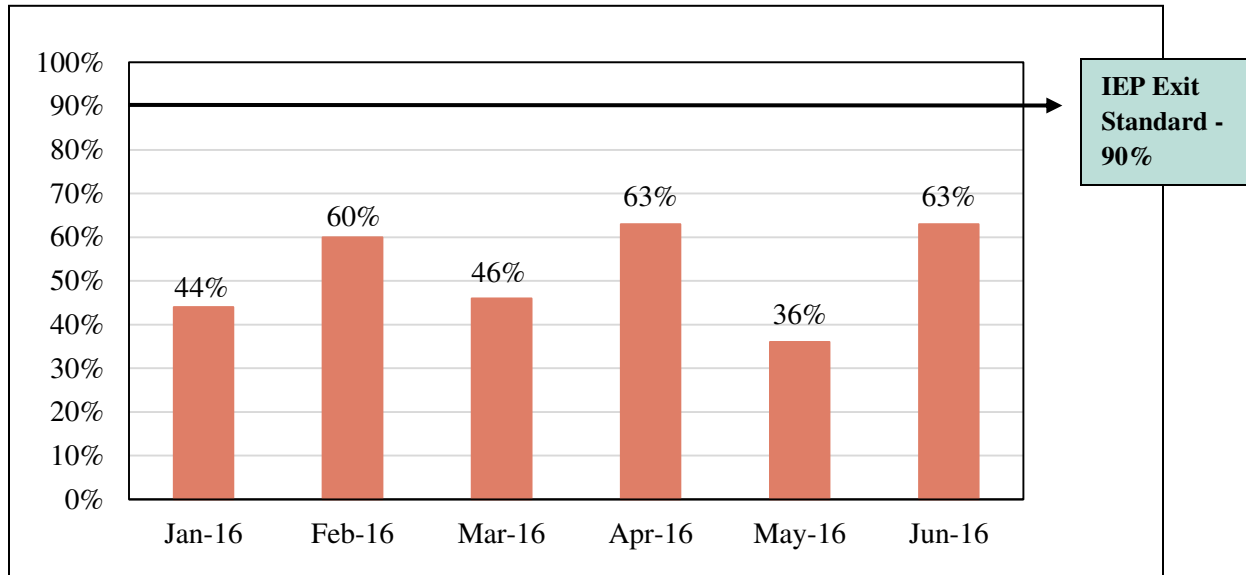
During the current monitoring period, CFSA reviewed documentation of 19 to 25 children each month who were receiving in-home services.^{142,143,144} In June 2016, of the 19 cases reviewed, 12 (63%) cases had documentation that safety was fully assessed at two or more visits during the month. Of the remaining cases, reviewers determined that safety was partially assessed in five (26%) cases. Between January and June 2016, data indicate that safety was fully assessed at two or more visits in 36 to 63 percent of the cases reviewed each month (see Figure 19). CFSA continues to be below the required level of 90 percent for this Exit Standard.

¹⁴² These data do not represent a statistically significant sample of the universe of in-home cases; a review of a statistically significant sample will occur in the next monitoring period.

¹⁴³ The Monitor has not validated the manual data provided by CFSA given CFSA's performance on this Exit Standard is not near compliance levels.

¹⁴⁴ The number of children reviewed each month is as follows: January, 25; February, 20; March, 24; April, 24; May, 25; June, 19.

**Figure 19: Children Receiving In-Home Services:
Safety Fully Assessed at Two or More Visits
January – June 2016**

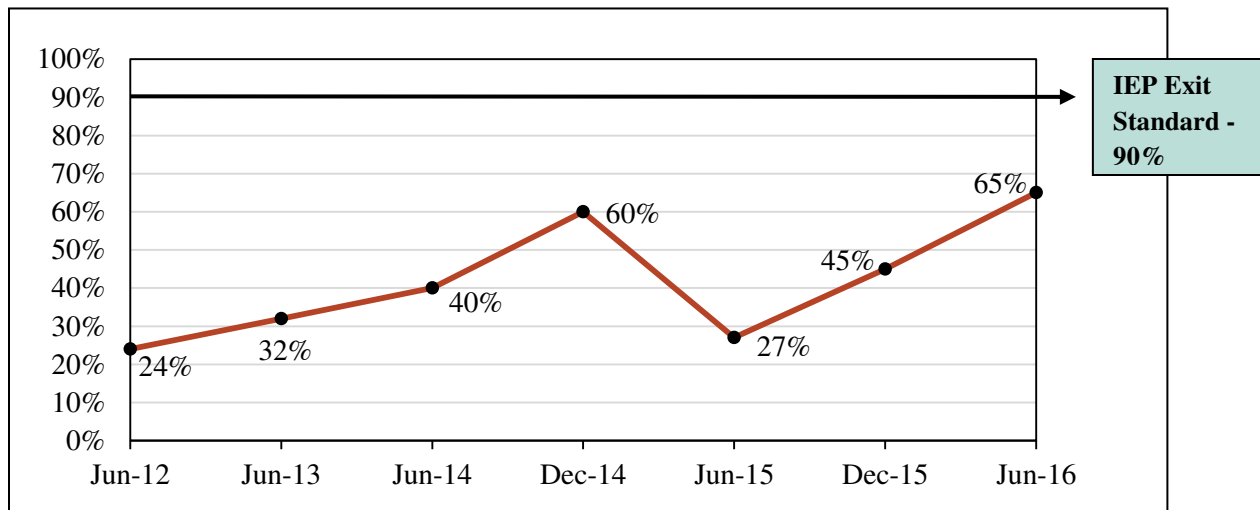


Source: CFSA Manual Data

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

IEP Requirement	<p>9. <u>Worker Visitation to 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 align="right">(IEP citation I.A.5.d.)</p>
Exit Standard	<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.</p>

**Figure 20: Children in Out-Of-Home Care:
Safety Fully Assessed at Two or More Visits
June 2012 – June 2016**



Source: Case Record Review Data (June 2012 and June 2013) and CFSA Manual Data (June 2014 through June 2016)

Performance for the period January 1 through June 30, 2016:

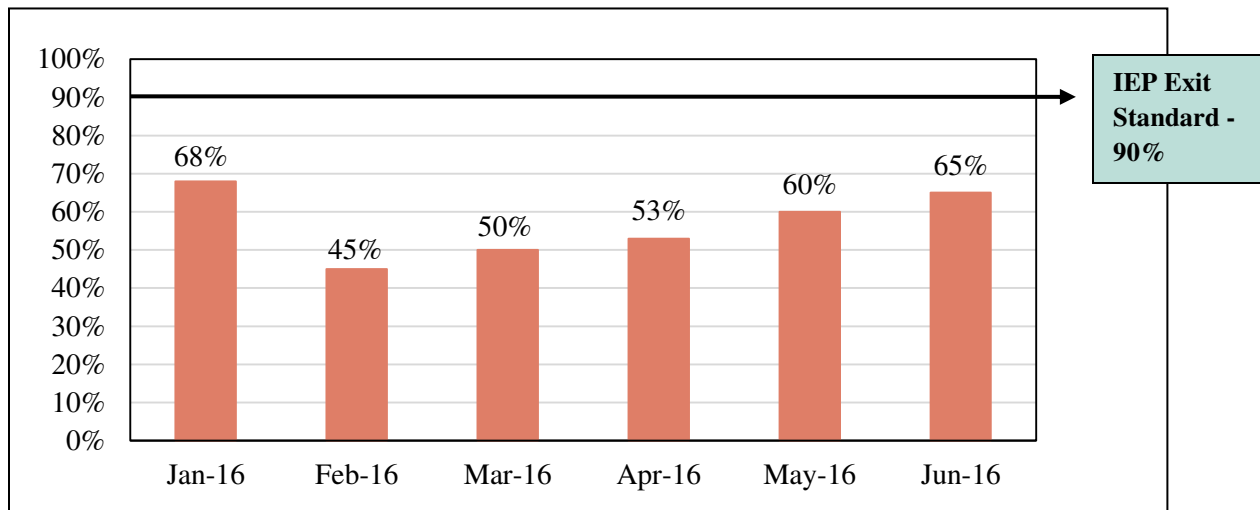
CFSA reviewed documentation of a monthly range of 19 to 26 children each month who were placed in out-of-home care during this monitoring period.^{145,146,147} In June 2016, data indicate that safety was fully assessed at two or more visits during the month in 17 (65%) cases. Between January and June 2016, reviewers determined that safety was fully assessed at two or more visits in 45 to 68 percent of the cases reviewed (see Figure 21). CFSA's performance remains below the required performance level of 90 percent.

¹⁴⁵ These data do not represent a statistically significant sample of the universe of out-of-home cases; a review of a statistically significant sample will occur in the next monitoring period.

¹⁴⁶ The Monitor has not validated the manual data provided by CFSA given CFSA's performance on this Exit Standard is not near compliance levels.

¹⁴⁷ The number of children reviewed each month is as follows: January, 19; February, 20; March, 20; April, 19; May, 20; June, 26.

**Figure 21: Children in Out-of-Home Care:
Safety Fully Assessed at Two or More Visits
January – June 2016**

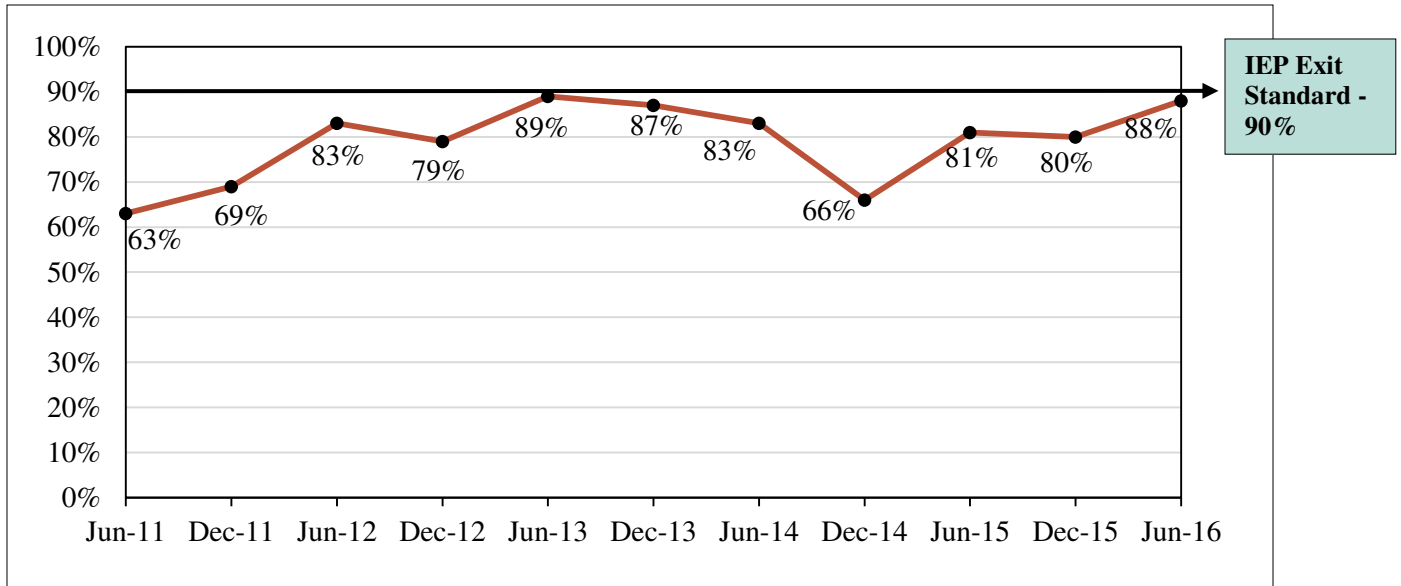


Source: CFSA Manual Data

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

IEP Requirement	<p><u>10. 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 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 22: Required Number of Worker Visits to Children in New Placements
June 2011 – June 2016



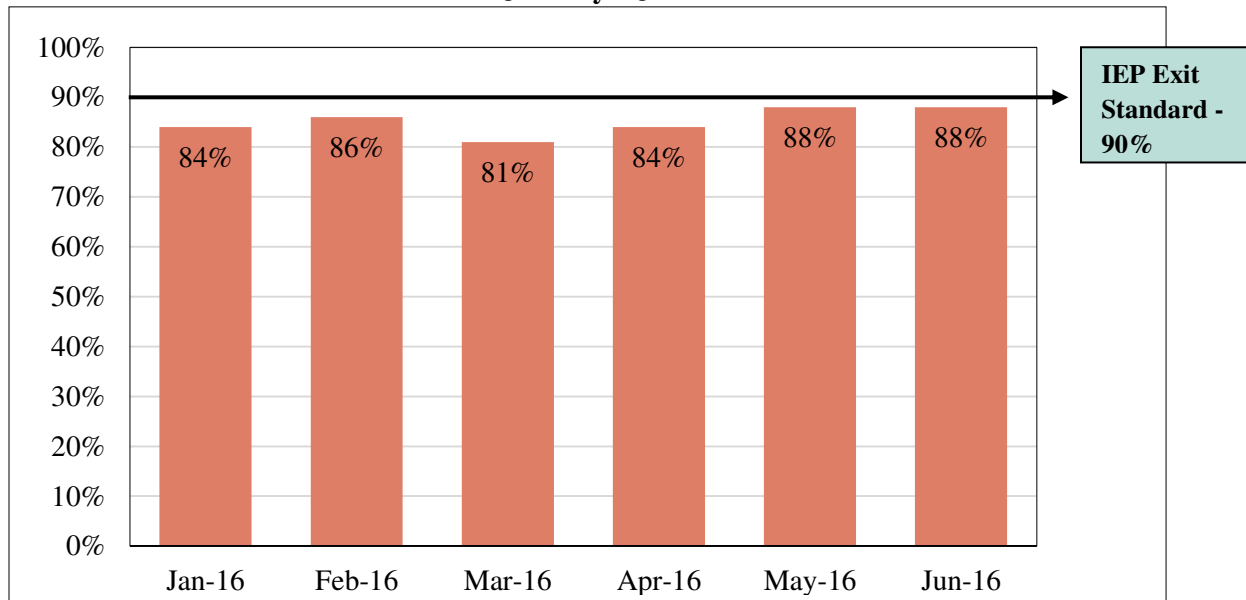
Source: CFSA Administrative Data, FACES.NET report CMT014

Performance for the period January 1 through June 30, 2016:

It is important for workers to visit children more frequently after they are newly placed to ensure they are adjusting appropriately, that their safety and well-being are attended to and to determine any additional needs of the child or the placement provider.

During the month of June 2016, there were 120 individual child placements applicable to this measure; 105 (88%) had the required number of 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. Between January and June 2016, monthly performance ranged between 81 and 88 percent of children who were newly placed or experienced a placement change had the required number of visits (see Figure 23). CFSA's performance over the monitoring period reflects a slight improvement since the previous monitoring period (monthly range of performance was 77 to 88%) and is close to meeting the required standard of 90 percent.

**Figure 23: Required Number of Worker Visits to Children in New Placements
January – June 2016**



Source: CFSA Administrative Data, FACES.NET report CMT014

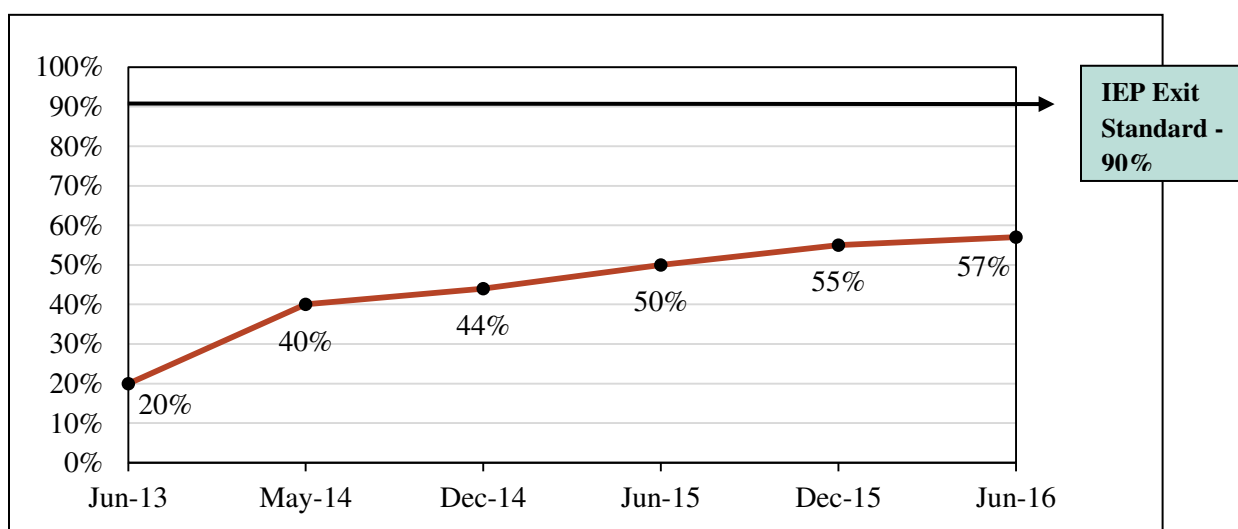
The Exit Standard also requires that at least one of the visits during the first four weeks of a new placement or a placement change include a conversation between the social worker and the resource parent to determine what, if any, assistance is needed from the agency. CFSA collected data for this sub-part of the standard when reviewing case records to determine if safety was assessed during visits.¹⁴⁸ Between January and June 2016, 57 to 100 percent of new placements or placement changes each month included a documented conversation between agency staff and the resource parent to determine what assistance was needed from the agency.¹⁴⁹

¹⁴⁸ These data do not represent a statistically significant sample of the universe of visits during the first 4 weeks of a new placement or placement change; a review of a statistically significant sample will occur in the next monitoring period.

¹⁴⁹ Monthly performance data for documented conversations between the social worker and resource parents are as follows: January, 70%; February, 84%; March, 85%; April, 89%; May, 100%; June, 57%.

IEP Requirement	<p>11. <i>Visitation for Children Experiencing a New Placement or a Placement Change:</i> 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>
Exit Standard	<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>

**Figure 24: Children Experiencing a Placement Change:
Safety Fully Assessed during All Required Visits in the Month
June 2013 – June 2016**



Source: Case Record Review Data (June 2013) and CFSA Manual Data (May 2014 through June 2016)

Performance for the period January 1 through June 30, 2016:

CFSA reviewed the documentation of 20 to 24 children who experienced a new placement or placement change each month between January and June 2016.^{150,151} In June 2016, reviewers determined that safety was fully assessed during all visits that month in 12 (57%) of the 21 cases reviewed.¹⁵² Between January and June 2016, reviewers determined that documentation

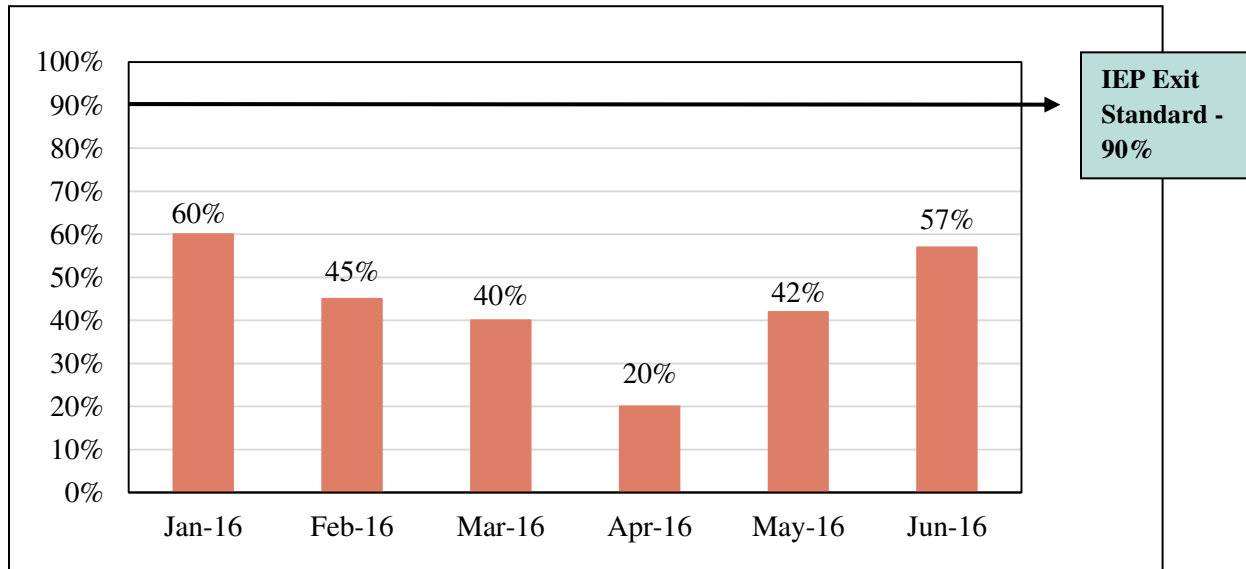
¹⁵⁰ These data do not represent a statistically significant sample of the universe of children experiencing a new placement or placement change; a review of a statistically significant sample will occur in the next monitoring period.

¹⁵¹ The Monitor has not validated the manual data provided by CFSA given CFSA's current performance on this Exit Standard is not near compliance levels.

¹⁵² All visits refers to at least 4 visits as required by IEP citation I.A.6.a-d. which outlines the frequency of visitation required to children experiencing a new placement or placement change.

indicated safety was fully assessed at all visits during the month in 20 to 60 percent of the cases reviewed. Performance does not meet the level required by the IEP.

**Figure 25: Children Experiencing a Placement Change:
Safety Fully Assessed during All Required Visits in the Month
January – June 2016**



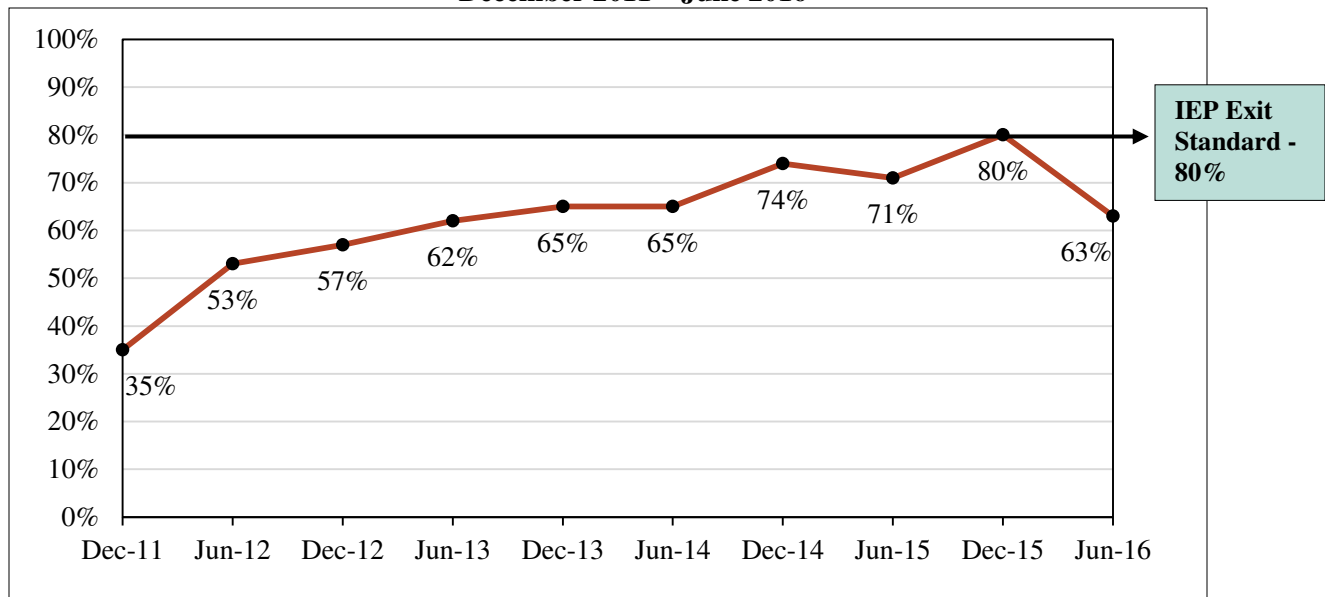
Source: CFSA Manual Data

Visits between Parents and Workers

IEP Requirement	<p>18. <u>Visits between Parents and Workers:</u></p> <ul style="list-style-type: none"> 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 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 style="text-align: right;">(IEP citation I.B.10.)</p>
Exit Standard	<p>80% of parents will have twice monthly visitation with workers in the first three months post-placement.</p>

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.

**Figure 26: Households with Twice Monthly Visits
between Workers and Parents with Goal of Reunification
December 2011 – June 2016**



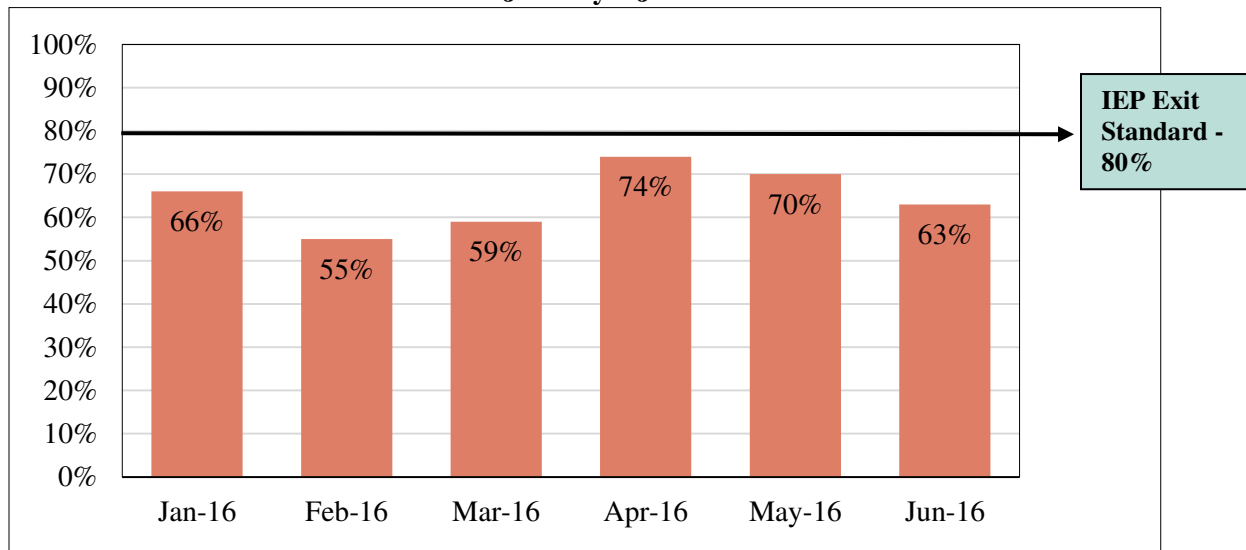
Source: CFSA Administrative Data, FACES.NET report CMT267; performance data from June 2014 through June 2016 include instances where there was documentation in the record that the parent was unavailable or refused to cooperate despite agency efforts.

Performance for the period January 1 through June 30, 2016:

In June 2016, there were 48 households of children with a goal of reunification applicable to this measure; parents in 30 households (63%) received two worker visits. Between January and June 2016, monthly performance on this measure ranged between 55 and 74 percent (see Figure 27).¹⁵⁴ CFSA performance declined for some months during this period (performance during the prior monitoring period range monthly between 73 and 80%) and does not meet the Exit Standard requirement.

¹⁵⁴ Reported performance includes instances where there was documentation in the record that the parent was unavailable or refused to cooperate despite agency efforts.

**Figure 27: Households with Twice Monthly Visits
between Workers and Parents with Goal of Reunification
January – June 2016**



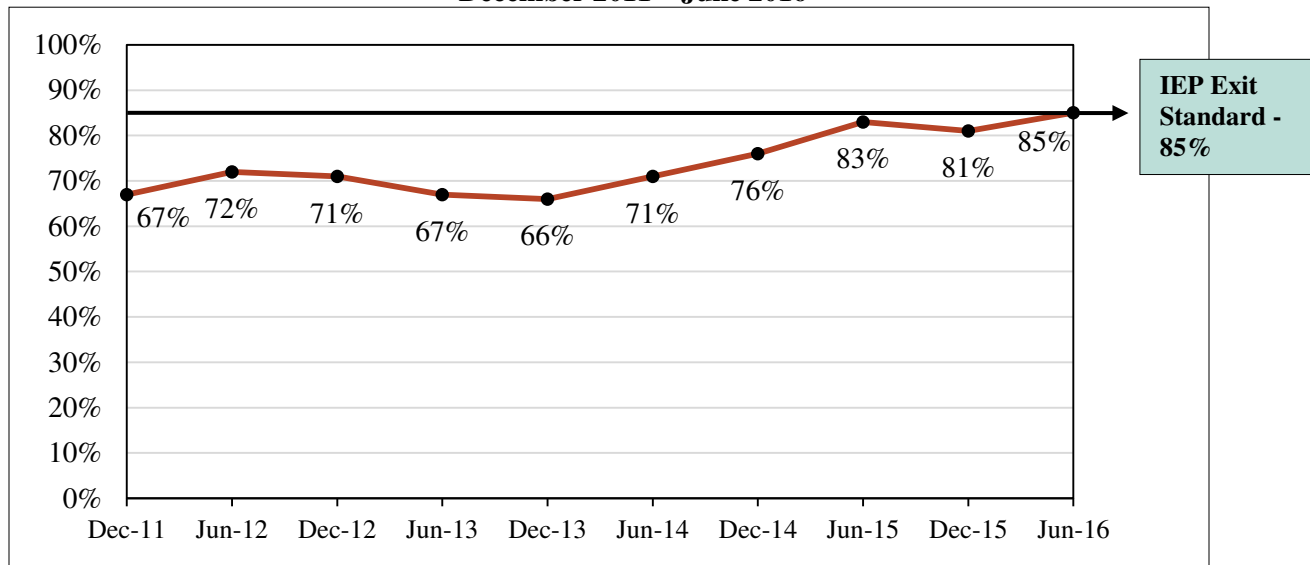
Source: CFSA Administrative Data, FACES.NET report CMT267 and findings from internal audit of missed visits efforts

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 align="right">(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.¹⁵⁵</p>

¹⁵⁵ 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.

**Figure 28: Children with Goal of Reunification who
Visit Weekly with the Parent with whom Reunification is Sought
December 2011 – June 2016**



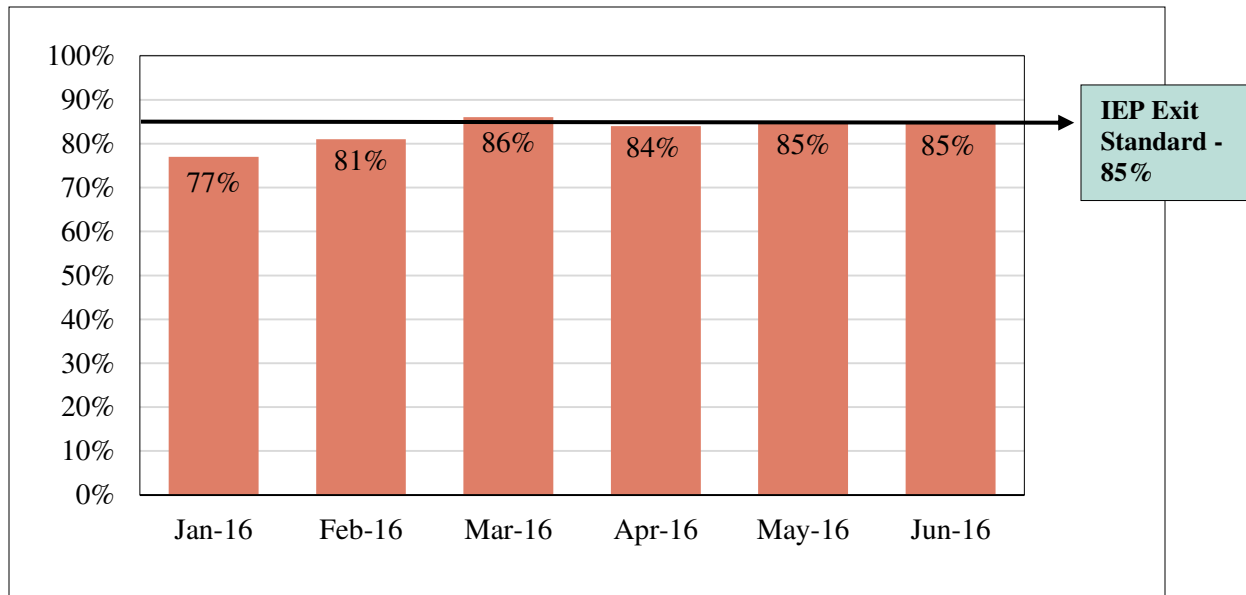
Source: CFSA Administrative Data, FACES.NET report CMT012; performance data from June 2014 through June 2016 include instances where there was documentation in the record that visits could not occur despite agency efforts.

Performance for the period January 1 through June 30, 2016:

In June 2016, 425 children were applicable to this measure; 330 had weekly visits with the parent with whom reunification is sought and for an additional 33 children, there was documentation in the record that visits did not occur because the visit was not in the child’s best interest, was clinically inappropriate or did not occur despite efforts made by the agency, for a total of 85 percent of cases in compliance with this Exit Standard during the month.¹⁵⁶ Between January and June 2016, monthly performance on this measure ranged between 77 and 86 percent (see Figure 29). CFSA met the required level of performance for three of the six months this period. The Monitor considers this Exit Standard partially met.

¹⁵⁶ Of the total children who may have been included in this measure, 14 were excluded due to suspended visits by court order; 5 were excluded due to being classified as in abscondence for the whole month; and 19 were excluded due to “other suspended visits,” which includes when a parent or child is incarcerated more than 100 miles away or when a child is placed outside of DC, Maryland, Virginia or placed in a residential treatment facility greater than 100 miles away.

**Figure 29: Children with Goal of Reunification who
Visit Weekly with the Parent with whom Reunification is Sought
January – June 2016**



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

Performance on Strategy Plan:

CFSA has employed the following strategy to increase performance on visitation:

- *Agency Performance will continue to share findings from the safety assessment case review process with management on a quarterly basis. Beginning in April 2016, and on a quarterly basis, Agency Performance and CWTA will schedule targeted peer-to-peer supervisor sessions based on performance. High performing supervisors will share successful strategies to enhance performance and the quality of the documentation for the assessment of safety during worker visits to children. (2016 Strategy Plan, #23).*

CFSA conducted peer-to-peer supervisor sessions to discuss successful strategies for and barriers to improved documentation of safety assessments during visits. Barriers identified during these sessions include the perception of safety assessments as “tasks” rather than a clinical tool and the lack of focus on quality documentation during other trainings such as CAFAS/PECFAS. These sessions also yielded a number of recommendations, including using the danger language indicator from the Danger & Safety Tool in contact notes, discussing strategies for improving documentation during supervisor meetings and reviewing contact notes monthly to ensure that safety assessments are well-documented.

B. GOAL: PERMANENCY

1. Relative Resources

CFSA continues to emphasize the importance of placing children with their kin whenever possible.¹⁵⁷ CFSA works to support kinship ties for children through early identification of family members, temporary licensure support and striving to make a kinship home the first placement for children upon entering care. CFSA's Kinship Support Unit is responsible for many of these efforts as well as for coordinating 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.¹⁵⁸

CFSA has previously met both Exit Standards applicable to identification and use of relative resources and performance was maintained during this monitoring period (IEP citations I.B.7.a. & b.). Specifically, of the 87 families at-risk of having their children removed between January and June 2016, CFSA took necessary steps to offer or facilitate pre-removal FTMs in 76 cases (87%). Additionally, of the 96 families who had children removed during this monitoring period, CFSA made reasonable efforts to identify, locate and invite known relatives to the FTM in 94 cases (98%). 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.

2. Placement of Children

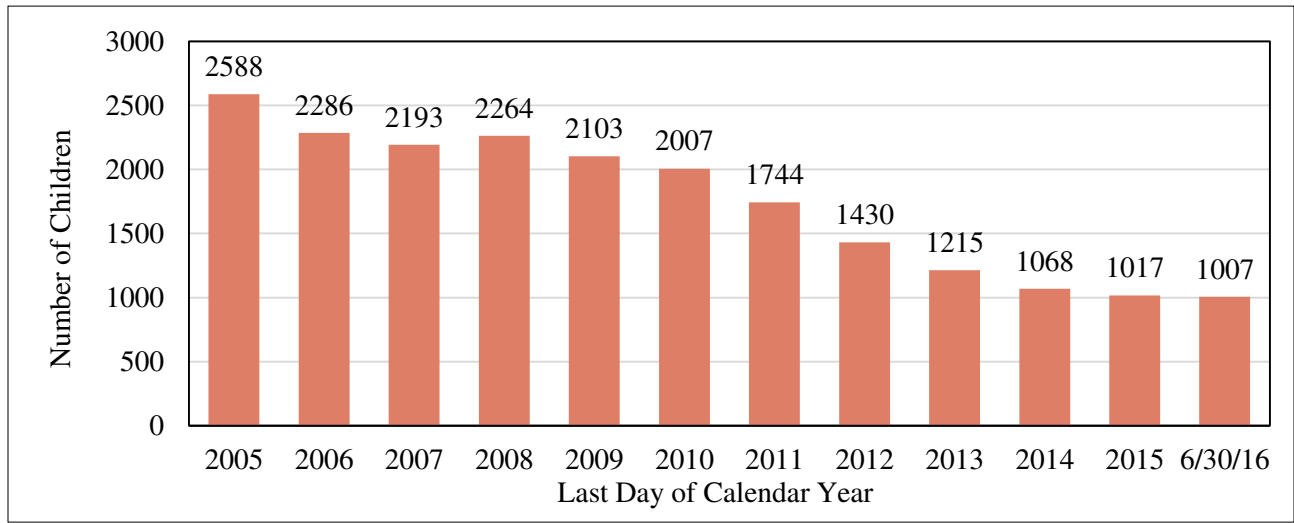
Children enter foster care when they cannot be kept safely in their own homes. The *LaShawn* IEP has multiple requirements regarding the placement of children in out-of-home care to ensure their safety, permanency and well-being.

Figure 30 below shows the number of children in out-of-home placement in the District of Columbia between December 31, 2005 and June 30, 2016.

¹⁵⁷ As of June 30, 2016, 22% of children and youth in out-of-home care were living with relatives.

¹⁵⁸ 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.

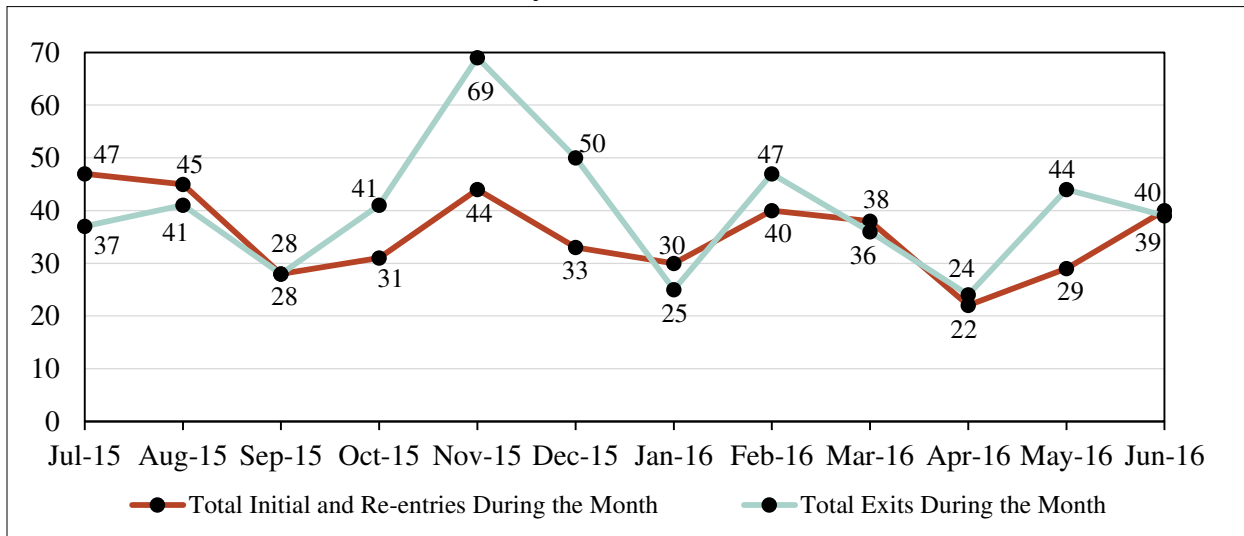
**Figure 30: Children in Out-of-Home Placements on Last Day of the Year
2005 – June 30, 2016**



Source: CFSA Administrative Data, FACES.NET report PLC156

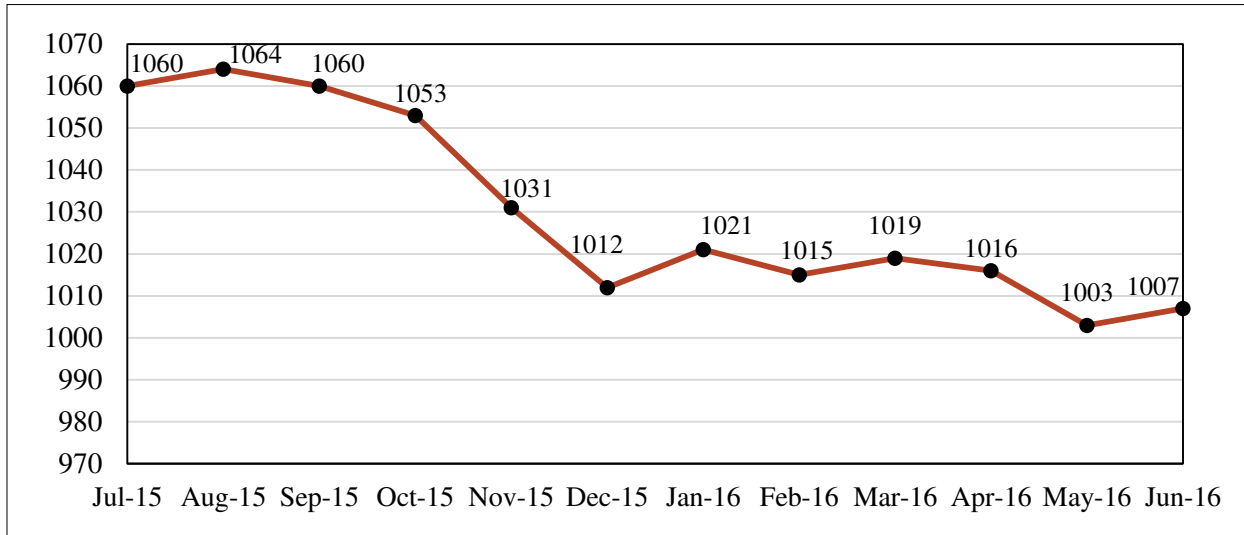
Figures 31 and 32 below show for July 2015 through June 2016, the number of children entering (initial and re-entry) and exiting foster care each month and the total number of children in care at the end of each month.

**Figure 31: Entries and Exits into Foster Care by Month
July 2015 – June 2016**



Source: CFSA Administrative Data, FACES.NET report PLC155

**Figure 32: Total Number of Children in Foster Care at the End of Each Month
July 2015 – June 2016**



Source: CFSA Administrative Data, FACES.NET report PLC155

Demographics of Children in Out-of-Home Care

Table 9 below shows basic demographic information of the children in out-of-home placement as of June 30, 2016. There were 1,007 children between the ages of birth and 21 years; the majority are African American (90%) and slightly over half (58%) are either between the ages of two and five (203 children/20%) or 15 to 20 years old (381 children/38%).

Table 9: Demographics of Children in Out-of-Home Placement as of June 30, 2016
N=1,007

Gender	Number	Percent*
Male	515	51%
Female	492	49%
Total	1,007	100%
Race	Number	Percent
Black or African American	907	90%
White	34	3%
Asian	7	1%
Unable to Determine/Unknown	3	<1%
No Race Data Reported	56	6%
Total	1,007	100%
Ethnicity	Number	Percent
Hispanic	97	10%
Non-Hispanic	843	84%
Unable to Determine	5	<1%
Unknown	62	6%
Total	1,007	100%
Age	Number	Percent
1 year or less	72	7%
2-5 years	203	20%
6-8 years	135	13%
9-11 years	99	10%
12-14 years	117	12%
15-17 years	177	18%
18-20 years	204	20%
Total	1,007	100%

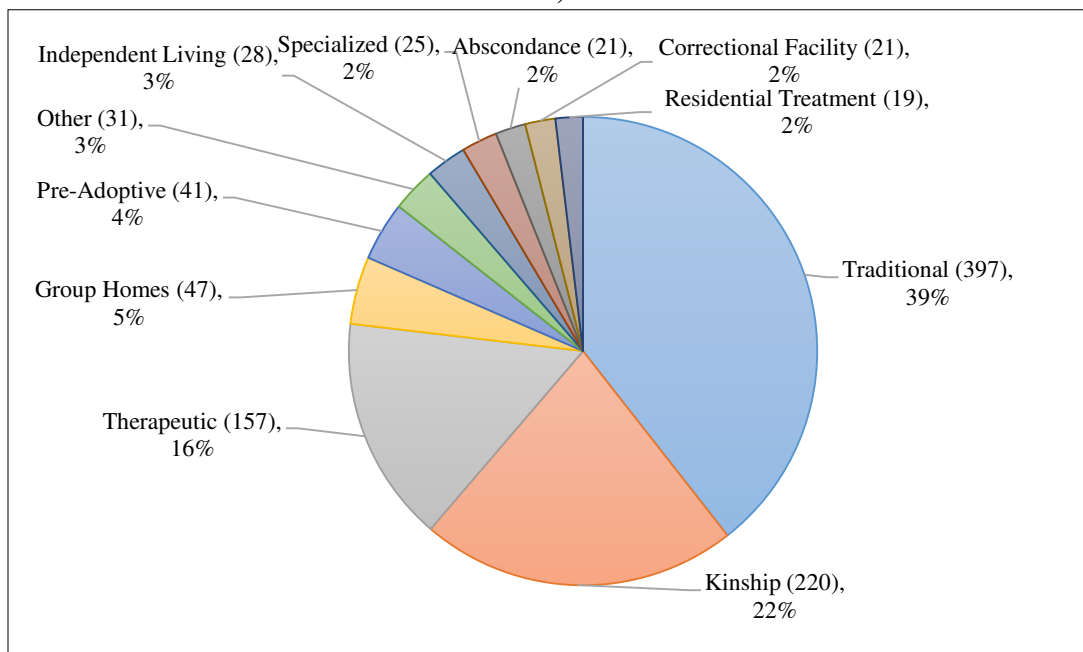
Source: CFSA Administrative Data, FACES.NET report PLC156

Percentages may not equal 100% due to rounding.

Placement of Children in Most Family-Like Setting

Research and practice clearly support that outcomes for children are best when children and youth are living with families. Of the 1,007 children in out-of-home care on June 30, 2016, 842 (84%) were placed in family-based settings, including 220 (22%) in kinship homes. Figure 33 below displays the placement types for children in out-of-home care as of June 30, 2016.

Figure 33: Placement Type for Children in Out-of-Home Care as of June 30, 2016
N=1,007



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

Other includes college/vocational, hospitals, not in legal placement, STAR home, developmentally disabled services placement, hospital, substance abuse services placement and diagnostic and emergency care.

There are three Exit Standards pertaining to a child or youth's placement in the most family-like setting and each is discussed below.

The first Exit Standard, 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 was conducted during the previous monitoring period to assess performance on this measure as of December 31, 2015. The review found that 60 (59%) of the 102 children in group homes, residential treatment facilities, hospitals, teen parent programs and independent living facilities¹⁵⁹ were placed in the least restrictive, most family-like

¹⁵⁹ The review excluded those children in abscondance, at college or in a vocational program, in a correctional facility or other placement required by the juvenile justice system and acute psychiatric hospital stays. Additionally, there were 7 children categorized as "not in legal placement"; review of these records determined 1 of these children was in abscondance as of December 31, 2015 and the other 6 were either living with a relative or friend in an unlicensed home.

setting appropriate to his or her needs; taken together with the number of children who were placed with families on December 31, 2015, a total of 96 percent of children were judged to be in the most family-like setting appropriate to their needs. As CFSA continues to exceed the required performance level for this standard, performance was not newly assessed this period.

The second Exit Standard, which was recategorized after performance last monitoring period as an Outcome to be Achieved, 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.). Between January and June 2016, two children remained in an emergency foster home or shelter for more than 30 days (one child for 31 days and the other child for 35 days). Both children have significant mental health needs and identification of therapeutic placements was necessary. The Monitor reviewed documentation regarding these children and CFSA's activities during the relevant time period and concluded that the extended use of the emergency placements was not appropriate. The children exhibited high needs and the emergency placements were not designed to provide supportive services to meet their needs. Additionally, in the Monitor's judgement, CFSA could have acted more expeditiously in locating appropriate placements for these children. This Exit Standard has not been achieved.

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 January and June 2016, one youth stayed overnight at the CFSA office building.¹⁶⁰ Although this reflects fewer office placements than the previous monitoring period (4 children stayed overnight between July and December 2015), current data provided by CFSA indicate that nine children have stayed overnight in the CFSA office building between July and October 2016.¹⁶¹ Performance on this Exit Standard is not in compliance with the IEP requirement and will continue to be an Outcome to be Achieved.

¹⁶⁰ This youth experienced an overnight stay in March after returning to CFSA from abscondance status. The youth's previous placement was no longer available and a temporary placement in an emergency, short-term group home was identified. The youth declined this placement and was brought back to the agency overnight. Upper level management and administrators were not notified of the situation as it was occurring as is CFSA's protocol. The youth was later placed at her previous group home placement.

¹⁶¹ In July 2016, 2 children (in one sibling group) were removed after midnight and were at the CFSA building while awaiting placement – 1 child was placed around 8AM and the other child was wheelchair-bound and required a specialized medical placement, which made identifying a placement more difficult given CFSA's current capacity. He was placed later that evening after a medical evaluation. In August 2016, a youth arrived at the agency in the afternoon after experiencing a placement disruption and stayed in the building overnight. An acceptable placement was difficult to secure due to the youth's challenges, his desire to not be in placement and the ability for identified foster parents to meet his needs. CFSA engaged the youth's birth family and Office of Well-Being to support the transition to a new placement the next day. In September 2016, 3 separate youth experienced overnight stays at the CFSA building – 2 disrupted from a temporary foster home placement around midnight and placements were not secured until that afternoon and the third youth, who is diagnosed with autism and ADHD, spent the night in the building after being placed with a foster parent who later requested the youth be removed from her home. She was placed in a traditional foster home later that day with behavioral and health care services in place. In October 2016, 3 separate children stayed overnight at CFSA – 2 disrupted from an emergency, short term foster home placement and the third child arrived at the agency around midnight and was placed later that morning.

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on placement:

- *By September 30, 2016¹⁶², CFSA will identify evidence-based, trauma informed foster care models that provide sufficient support to both foster children and foster parents. CFSA will issue a Request for Proposals to implement the identified models in the first quarter of FY 2017 (2016 Strategy Plan, #24).*

In September 2015, CFSA began a process to identify evidence-based foster care models that have positive outcomes around increasing placement stability and reducing length of time in care. A stakeholder group consisting of internal and external members was identified to assist in selecting a model(s) and Chapin Hall was engaged to provide technical assistance. Over the course of the past 12 months, four potential models were identified and interviews were conducted with the developers to learn more about the programs. In July and August 2016, CFSA conducted interviews with four jurisdictions that have implemented one of the evidence-based foster care models being considered in order to better understand their experience with implementation and lessons learned. On October 13, 2016, CFSA discussed the models with private agency partners to solicit feedback. CFSA had planned to select a model(s) by October 31, 2016, develop an implementation plan by November 30, 2016 and issue a Request for Proposals by the fourth quarter of FY2017 with implementation to begin in FY2018. Decisions about how to proceed are now pending given the search for a permanent Director.

- *By April 30, 2016, CFSA will enhance the current placement matching database to allow provider agencies to update the status of bed availability on a daily basis. Additionally, by May 31, 2016, the database will be in use to support matching and placing children in the most appropriate setting. The Placement Administration in consultation with Agency Performance will continue to monitor the database and its implementation (2016 Strategy Plan, #25).*

CFSA had planned to have the Placement Matching system in FACES.NET operational by May 31, 2016, however, this was delayed by several months because of the need for review and data cleanup of information in the data system on existing CFSA and private agency foster homes. The placement matching system became operational in September 2016. Due to continued issues with keeping the data current and accurate in FACES.NET in real time, CFSA currently maintains a supplemental spreadsheet that includes CFSA and private agency vacancies each week. Private providers continue to report that there is minimal placement matching when they are contacted to provide a placement as the principal criteria seems to be securing a “safe” bed.

¹⁶² On September 30, 2016, CFSA submitted modification to this strategy, extending the timeline for implementation of this strategy.

The Monitor will continue to assess utilization of these processes and the utility of the automated placement matching system.

- *CFSA will continue to use social media, advertising, community outreach, and one-on-one informational sessions to recruit resource parents. On a quarterly basis, CFSA will evaluate the effectiveness of the recruiting, marketing, and outreach strategies and will share this information with the private providers to strengthen collaboration and development of a robust placement continuum (2016 Strategy Plan, #26).*

CFSA has continued to engage in outreach and recruitment efforts to increase the supply of available foster parents. Between January and June 2016, CFSA reports partnering with 170 organizations including faith-based, government providers, schools, hospitals, the police department, youth organizations, DC cable and TV and homeowners associations to recruit foster parents. CFSA has also utilized social media platforms and partnered with the CFSA Youth Ombudsman and DC Foster and Adoptive Parent Association to organize and host a recruitment event in April 2016 with over 20 youth, foster care alumni and current or potential resource parents. CFSA has found that the recruitment efforts with the best yield are social media, including website and other media platforms, and recruitment staff activities.

As a result of CFSA's recruitment strategies, 27 foster homes, with a capacity to accommodate 43 children, were opened between January and June 2016; ten of these homes were for adoption placements only and the remaining 17 were for traditional foster care. During the same six month period, 31 homes were closed, including 12 adoptive homes and 19 traditional foster care homes. CFSA reports that eight of these homes have since been reopened. Thus, there was a net loss of capacity in CFSA recruited and licensed homes during the monitoring period.

- *Beginning April 2016¹⁶³, the Principal Deputy Director and Deputy for Program Operations will establish a foster parent buddy system where each prospective foster parent will be assigned a resource worker as a buddy to participate in pre-service training and assist through the process of training and placement. The worker will be their point of contact for all issues regarding CFSA. This should facilitate better communication and problem solving (2016 Strategy Plan, #27).*

On September 30, 2016, CFSA submitted an additional modification to this strategy, moving the date of implementation to January 3, 2017. CFSA reports that organization and alignment of staff was completed by August 31, 2016 and that training for staff will occur between October and

¹⁶³ On June 22, 2016, CFSA submitted modification to this strategy; extending the timeline for organization and alignment of staff to be completed by July 31, 2016 and for the system to be implemented by August 31, 2016.

December 2016. As this strategy was delayed in implementation, it will not impact performance as intended this year.

- *The Principal Deputy Director and the Contract Administrator will revise the scope of work by April 30, 2016 and negotiate contract modifications with current family-based providers for children/youth in need of traditional, therapeutic, and specialized placement, including homes for pregnant youth, medically fragile, developmentally disabled, and older youth to enhance flexibility to:*
 - a. *Develop process for child specific recruitment, with funding and planning initiated and monitored for 60 days;*
 - b. *Fund bed hold stays to allow youth on abscondance to return to same placement; and,*
 - c. *By May 2016, CFSA will review incentive plans and per diem rates and their impact on recruitment, retention, and stability to inform policy and FY2017 contract changes (2016 Strategy Plan, #28).*

CFSA's management team met internally earlier this year to review family-based contracts and consider feedback received from private agency providers regarding issues and challenges created by current Human Care Agreements. CFSA then drafted a Scope of Work for new family-based contracts and held a pre-bidders meeting with private agency providers to solicit feedback in early spring 2016. Additional clarification was requested pertaining to family case management responsibility; performance indicators; caseloads for staff; placement responsibility; expenditures around transportation services, bed hold rates and funding for additional staff; and monitoring. CFSA provided responses to these questions and issued the final Human Care Agreement in April 2016. Proposals were received and accepted from eight providers and negotiations on final contract terms were not concluded by September 30, 2016, the original end of current contracts, and extended through November 2016 although a new contract year began on October 1, 2016. Upon entering into role of Interim Director, Deputy Mayor Donald reviewed the status of negotiations and decided not to move forward with the new family-based contracting proposals this year. Instead, CFSA will extend the terms of the FY2016 contracts into FY2017 with a few modifications, including cost of living adjustments for staff salaries and caseload ratios of 1:10 for social worker staff. One aspect of Interim Director Donald's review of the current status of agency performance will focus on future efforts to develop a scope of work and procurement practices for foster care services to be in place by the beginning of FY2018.

- *By May 31, 2016,¹⁶⁴ under the guidance and direction of the Principal Deputy Director and Placement Administrator, CFSA will seek to increase kinship care resources as an initial and ongoing placement options by completing the following action steps:*

¹⁶⁴ On June 22, 2016, CFSA submitted modification to this strategy by changing the completion date to August 31, 2016.

- a. *Develop protocols to ensure that staff has exhausted possible avenues to identify, locate, and engage extended family options for children before they are placed in non-relative foster care.*
- b. *Implement a policy of “full disclosure” to ensure that all prospective kinship caregivers are educated about the full range of options available to them for care and support of children.*
- c. *Ensure that we have the full range of tools needed to assess and approve relative homes in a timely manner. The Deputy for Program Operations will review the current kinship process and develop additional training materials as needed.*
- d. *Provide foster parent training that is relevant to the needs of prospective kinship foster parents. CFSA will continue to use the kinship specific training model that will be augmented with additional information about child development and access to mental health support services.*
- e. *Ensure that kinship parents have access to the full range of services and supports to stabilize the placement(s) and ensure child safety and well-being (2016 Strategy Plan, #29).*

Protocol development: CFSA reports the Kinship Licensing Unit is currently developing protocols to ensure staff have exhausted avenues to identify and engage relatives before placement in non-relative foster care. CFSA currently utilizes the Family Team Meeting (FTM) process to identify, locate and invite relatives to discuss case planning and consider placement options. CFSA also reports there is a 90 day follow up after the initial FTM where placement is discussed.

Policy of “full disclosure”: CFSA reports the Office of Planning, Policy and Program Support is developing the referenced policy and anticipate completing it by December 31, 2016. CFSA also reports that the FTM unit is developing a pamphlet for relatives to ensure that current and prospective caregivers are informed of the full range of options available for care and support; the pamphlet is anticipated to be completed by November 30, 2016.

Range of tools: CFSA completed an assessment of data on the length of time to home licensure to identify barriers and determined that no additional tools were needed to assist kinship providers as the most common barriers (i.e., lack of urgency once temporary license is issued to place child, kinship parent overwhelmed by additional responsibility of caring for child, etc.) cannot be addressed by tools. CFSA reports kinship homes are monitored throughout the licensure process to identify and resolve barriers. Each home is assigned a Resource Development Specialist who meets regularly with the prospective foster parent and supports them through the process.

Foster parent training: CFSA reviewed the curriculum being utilized for training kinship parents, titled *Caring for Our Own*, and determined that it is adequate to address the unique needs of kinship providers. The training provides information related to child development, trauma, working with birth parents and how to build on strengths. After completion of training, CFSA creates an individualized development plan for each foster parent specific to their needs and outlines trainings for future attendance to continue their knowledge and growth.

Access to services: CFSA reports that foster and kinship parents are assigned a Foster Parent Support Worker (FPSW) after completion of training. The FPSW's role is to support, advocate and address challenges the foster parent may experience while providing care for children placed in their homes. Additional supports available to the foster parent include a stabilization support phone line, mobile crisis stabilization, CFSA's clothing closet and the foster parent app for smart phones. The Foster Parent Support Unit offers programs such as Mockingbird and Family Connections that offer respite, peer support and monthly meetings and social activities. CFSA is also providing peer-to-peer mentoring services to a select number of kinship parents. This program connects a seasoned resource parent with a newly licensed resource parent for additional support and guidance. CFSA is exploring expanding this program to all kinship foster homes in the future.

- *When all other placement options have been explored, CFSA will utilize emergency beds contracted through Sasha Bruce Youthwork where a youth may stay for up to 30 days until a more suitable placement is secured. All placements in this facility will require approval by the Placement Administrator or the Deputy Director for Program Operations and be monitored on a weekly basis to assure that an appropriate alternative is being developed (2016 Strategy Plan, #30).*

Between January and June 2016, 11 children and youth were placed in a Sasha Bruce emergency bed. These placements lasted anywhere between two to 30 days. The individual circumstances of these placements varied, either because another placement option could not be found or a placement was located for the youth but was not readily available to accept him/her. CFSA reports that all youth placed in emergency placements are reviewed by the Placement Administrator on the eighth day of placement and by the Deputy Director on the fifteenth day.

- *By June 30, 2016, CFSA will complete the 2016 Resource Development Plan that addresses the agency's placement and support services required for the population served. The plan will include a comprehensive analysis of placement requirements and support services for foster and kinship parents (2016 Strategy Plan, #31).*

The Resource Development Plan (RDP) is intended to project the number of placements required during the upcoming year and identify strategies to assure that CFSA has a sufficient number of appropriate placements available. CFSA submitted the FY2017 RDP to the Monitor on June 29, 2016 and both the Monitor and Plaintiffs' counsel reviewed and provided feedback and questions. On August 11, 2016, a joint discussion was held with the Monitor, Plaintiffs' counsel and CFSA to discuss the feedback. CFSA submitted a revised version of the RDP on September 2, 2016 which has been accepted by the Monitor.

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.¹⁶⁵ 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 during the current monitoring period.

IEP citation I.B.9.a. requires that no child under the age of 12 be placed in a congregate care setting for more than 30 days without appropriate justification. Between January and June 2016, two children under the age of 12 were placed in congregate care settings for more than 30 days. CFSA and Monitor staff reviewed these placements and determined that these children had specialized needs that required placement within those settings.

IEP citation I.B.9.b. requires that no child under the age of six be placed in group care, non-foster home settings without appropriate justification. 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.

3. Reduction of Multiple Placements for Children in Care

The Exit Standards that focus on placement stability have 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. The overall goal is to minimize placement moves for all children to the greatest extent possible recognizing the substantial evidence that exists that demonstrates how children's well-

¹⁶⁵ 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.

being is harmed by multiple foster care placements. The relevant Exit Standard has three sub-parts (IEP citation I.B.13.a.-c.); CFSA has met the required level of performance for all sub-parts since June 2014. 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 served 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 January and June 2016, CFSA's performance ranged monthly from 82 to 83 percent.¹⁶⁶ Performance was one percent below the required level for two of the six months in the period and the Monitor considers this to be an insubstantial deviation.

The second sub-part of the Exit Standard requires that 60 percent of children served 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 January and June 2016, monthly performance for this sub-part ranged from 67 to 72 percent.

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 is focused on 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. During this monitoring period, performance ranged from 74 to 78 percent.¹⁶⁷ Performance was one percent below the required level during one of the six months in the period; the Monitor considers this to be an insubstantial deviation and this Exit Standard maintained.

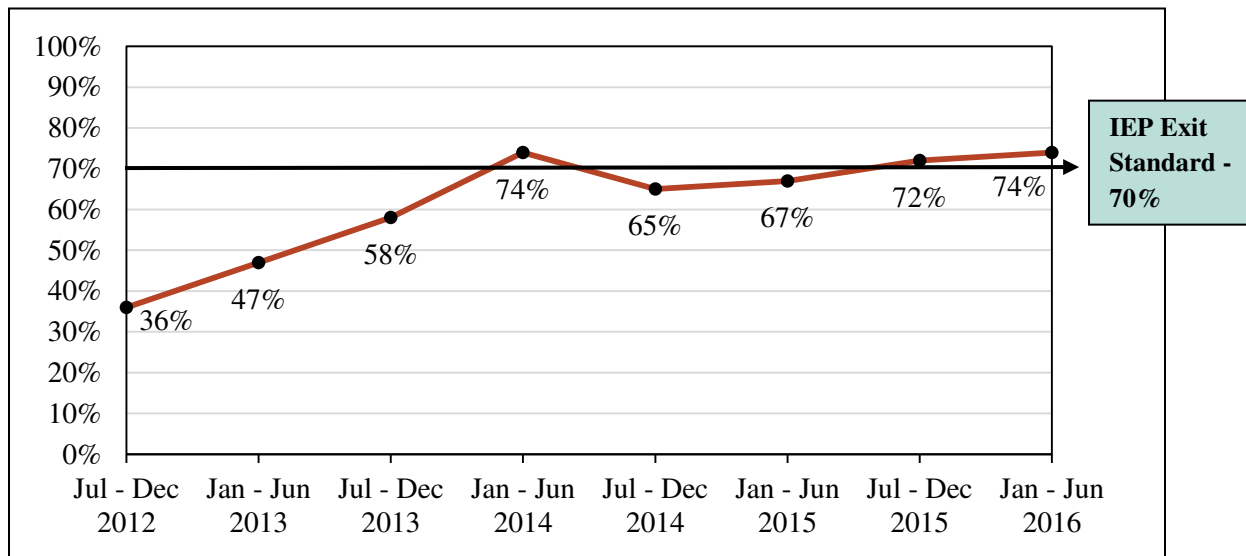
4. Timely Approval of Foster Parents

CFSA is responsible for licensing and monitoring foster homes and placement facilities in the District of Columbia and contracts with private provider agencies in the states of Maryland and Virginia to license homes and facilities in those states. This Exit Standard (IEP citation I.B.14.) requires that 70 percent of homes licensed will have been approved within 150 days of the foster parent beginning training. This Exit Standard is designated as an Outcome to be Maintained and CFSA maintained required performance during this period.

¹⁶⁶ Monthly performance data for reduction of multiple placements for children in care at least 8 days and less than 12 months are as follows: January, 83%; February, 82%; March, 82%; April, 83%; May, 83%; June, 83%.

¹⁶⁷ Monthly performance data for reduction of multiple placements for children in care 24 months or longer are as follows: January, 74%; February, 75%; March, 77%; April, 78%; May, 78%; June, 78%.

**Figure 34: Approval of Foster Parents within 150 Days of Beginning Training
July 2012 – June 2016**



Source: CFSA Administrative Data, FACES.NET report PRD202

Performance for the period January 1 through June 30, 2016:

Between January and June 2016, CFSA and private agencies licensed 91 foster homes; 67 (74%) of these homes were licensed with the required number of pre-service training hours and within the 150 day timeframe.¹⁶⁸ Performance on this Exit Standard remained above the level required by the Exit Standard.

5. Appropriate Permanency Goals

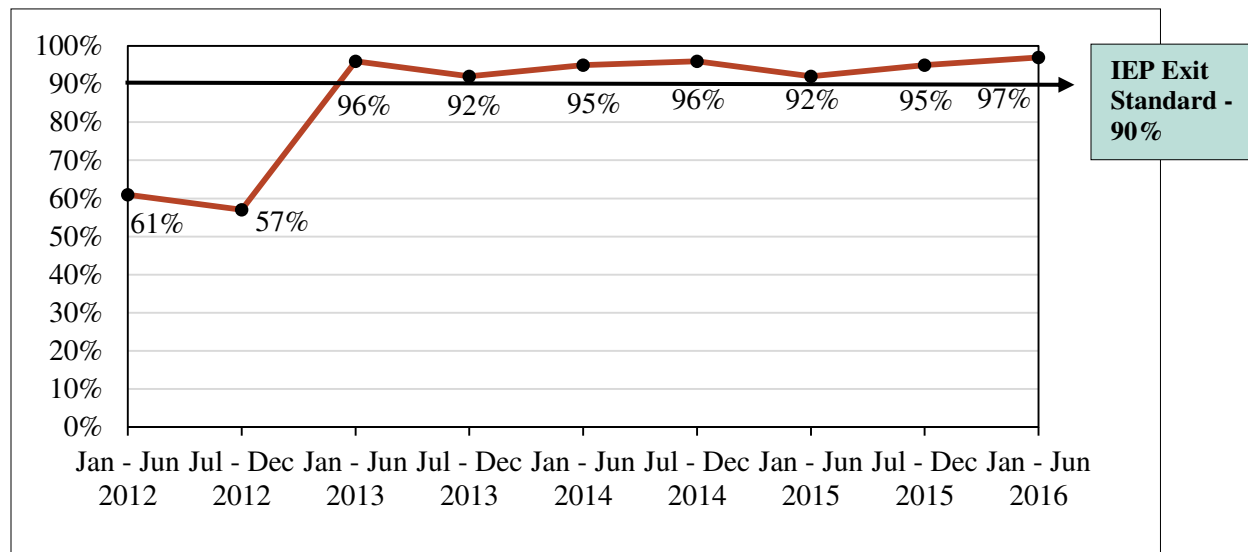
The IEP requires that children have permanency planning goals consistent with the federal Adoption and Safe Families Act (ASFA) and District law and policy guidelines. Exit Standards in this and the following section focus specifically on older youth in foster care and timely permanency.

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.). These plans must be individualized and developed with the youth and his/her identified supportive team. Further, plans should provide the youth with appropriate connections to specific options on housing, health insurance, education and linkages to continuing adult support services agencies. Since

¹⁶⁸ Of the 67 homes that are considered compliant during the current monitoring period, no home whose licensure took longer than 150 days is considered compliant due to circumstances that were beyond the District's control.

June 2013, CFSA has met this IEP Exit Standard which requires at least 90 percent of youth age 18 and older have a current youth transition plan (YTP).

**Figure 35: Youth Ages 18 and Older with a Youth Transition Plan
January 2012 – June 2016**



Source: CFSA Manual Data and FACES.NET report CMT391

Performance for the period January 1 through June 30, 2016:

CFSA continues efforts to support earlier and ongoing engagement and planning with older youth around their transition from foster care. Toward that end, all youth age 18 and older are required to have a current YTP developed with their involvement, their social worker and others whom the youth identifies to participate as a member of their team. The YTP is intended to provide a roadmap to ensure the youth is sufficiently prepared and supported to transition out of CFSA care. CFSA continues to report that the online version of the Foster Club toolkit, CFSA's YTP tool, remains unavailable online due to capacity issues with the contractor. An electronic paper (PDF) version of the tool is reportedly being used by workers and youth until it is available online. Both the Monitor and OYE are frustrated by this extensive delay. CFSA continues to report the tool should be online sometime in 2016.

Of the 240 youth ages 18 and older under CFSA care between January and June 2016, 23 youth were in abscondence, developmentally disabled or declined to participate in the development of a YTP and were excluded from analysis. Out of 217 applicable youth, 210 (97%) 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 all YTPs for youth who turn 20.5 years during the monitoring period to determine if the plans address appropriate connections to specific options on housing, health insurance, education and linkages

to continuing adult support services agencies.¹⁶⁹ Twenty-four youth were applicable during this monitoring period and all of those youth's plans were reviewed. CFSA found that three of those cases should be excluded from the universe (youth incarcerated during the monitoring period, case closure ordered by the court). Of the remaining 21 plans, CFSA found that 20 (95%) of those plans addressed appropriate connections to specific services and options.

CFSA worked during this monitoring period to improve education, job and aftercare services for older youth. CFSA reports that OYE and the Office of Well-Being will now be working with rising eighth graders to advise these youth on their educational path and what they need to do in school to prepare to go to college. Further, currently available pre-college and career services will be expanded for youth who are ninth graders. For example, the Office of Well-Being and OYE will work to have youth placed in summer jobs that match their career interest and support youth with their resumes. Finally, the FY2017 budget includes funds to move forward to competitively procure aftercare services in a new model. CFSA issued a solicitation during this monitoring period, with a deadline for submission of July 2016. The solicitation incorporated stakeholder feedback about aftercare services and asks that the selected service provider better respond to the unique needs of this population, be trauma informed and support youth in meeting tailored goals related to housing, education, employment, health and well-being. The solicitation states in relevant part:

Cornerstones to the successful delivery of services to the young adults include:

- Young adults voice at all stages of service delivery.
- Young adults engagement strategies that address the unique needs of each of the young adults.
- Young adults Driven-Service Delivery Model that is varied and minimizes environmental barriers; uses young adult-friendly communication and offers group hands-on learning and discussion opportunities; and strategic peer and adult mentorships and access to appropriate educational, vocational, financial and household management literacy employment and housing resources. In addition services should offer young adults the opportunity to explore their own individual talents through cultural, recreational and career internship opportunities.

As of this report, the provider for aftercare services has not been selected and the contract has not been executed. The Monitor will continue to track the support youth are able to receive through aftercare services before they leave the care of CFSA.

¹⁶⁹ The Monitor has previously participated in this review and validated findings.

6. 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.)
- Achieving permanency within established timeframes through adoption, guardianship and reunification (IEP citation I.B.16.c.)

Approved Adoptive Placement

The IEP requires that children with a goal of adoption be placed in an approved adoptive placement within nine months of their permanency goal becoming adoption.¹⁷⁰ There are two Exit Standards to measure this outcome (IEP citation I.B.16.a.i.&ii.) and both are designated as Outcomes to be Maintained.¹⁷¹ The discussion below focuses on the Exit Standard which requires that 80 percent of children whose goal changed to adoption on July 1, 2010 or thereafter be placed in an approved adoptive placement within nine months of the goal change.

From January through June 2016, 41 (76%) of the 54 eligible children were placed in an approved adoptive placement by the end of the ninth month from the goal change. Although performance is below the required level of 80 percent, the cohort of children is small, with the total number of children applicable to this Exit Standard each month ranging from six to 12. From January to March 2016, performance ranged from 90 to 100 percent but then slipped from April to June when performance ranged from 50 to 67 percent. At this time, the Monitor considers this Exit Standard to be partially 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.

¹⁷⁰ 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.

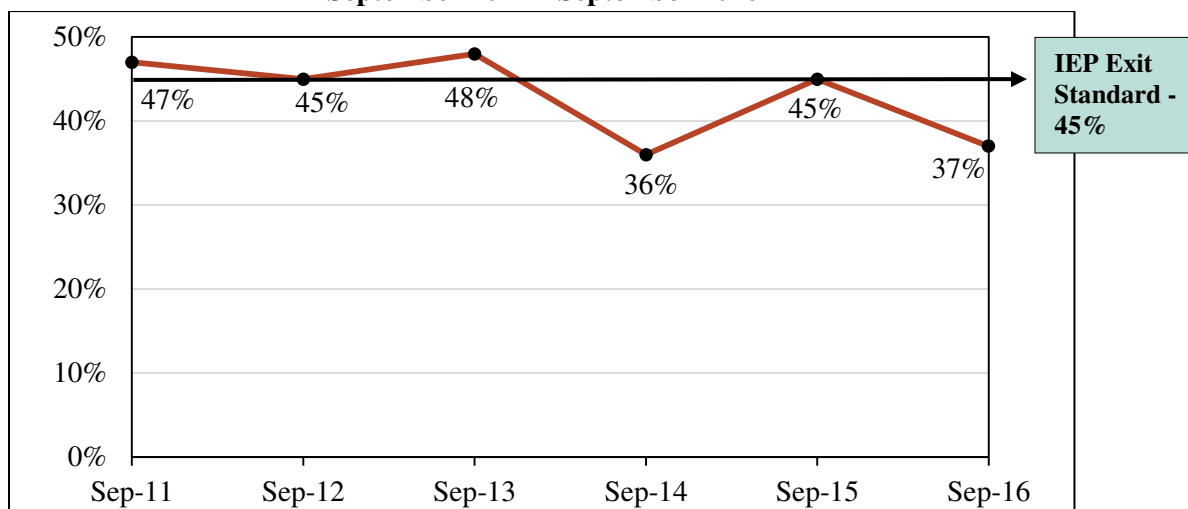
¹⁷¹ CFSA sufficiently achieved performance on the Exit Standard for children whose permanency goal changed to adoption prior to July 1, 2010 and because the review period for this IEP Exit Standard has expired and CFSA ultimately achieved compliance, the Monitor is no longer tracking performance for this measure.

From January through June 2016, 91 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 43 adoptions were finalized during this monitoring period. Of those 43, 19 cases were finalized within 12 months and reasonable efforts were made to finalize adoptions within 12 months for an additional 20 children. CFSA continued to meet the Exit Standard requirement during the current monitoring period.

Timely Permanency

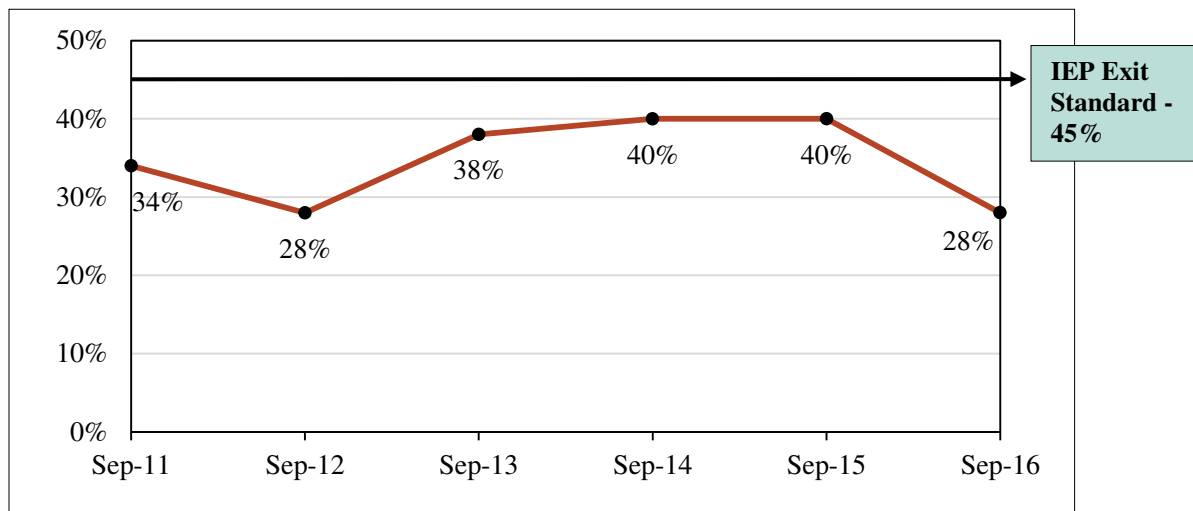
IEP Requirement	32. <u>Timely Adoption</u> : Timely permanency through reunification, adoption or legal guardianship. (IEP citation I.B.16.c.)
Exit Standard	<ul style="list-style-type: none"> i. Of all children who entered foster care for the first time in FY2015 and who remain in foster care for 8 days or longer, 45% will achieve permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2016. ii. Of all children who are in foster care for more than 12 but less than 25 months on September 30, 2015, 45% will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2016. iii. Of all children who are in foster care for 25 months or longer on September 30, 2015, 40% will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2016, whichever is earlier.

**Figures 36i: Timely Permanency for Children in Care between 8 days and less than 12 months
September 2011 – September 2016**



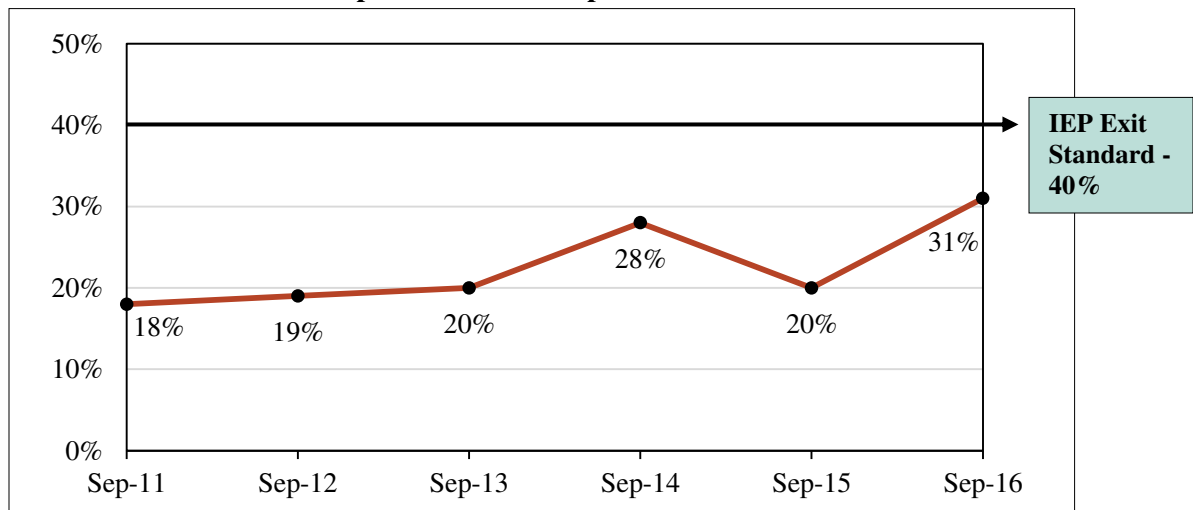
Source: CFSA Administrative Data, FACES.NET report CMT384

**Figures 36ii: Timely Permanency for Children in Care between 12 and less than 25 months
September 2011 – September 2016**



Source: CFSA Administrative Data, FACES.NET report CMT385

**Figures 36iii: Timely Permanency for Children in Care for 25 months or longer
September 2011 – September 2016**



Source: CFSA Administrative Data, FACES.NET report CMT385

Performance for the period September 30, 2015 through September 30, 2016:¹⁷²

The IEP requires CFSA to achieve timely exits for children to a permanent family through adoption, guardianship or reunification. This 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 through the fiscal year and is reported as of September 30, 2016.

¹⁷² Permanency data is measured on a fiscal year cycle so performance as of September 30, 2016 is included in this report.

The first part of the Exit Standard requires that of all children who entered foster care for the first time in FY2015 and who remain in foster care for eight days or longer, 45 percent will achieve permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2016. Of the 345 children who entered foster care in FY2015 and remained in foster care for eight days or more, 129 (37%) exited to positive permanency by September 30, 2016 (see Table 10).

The second part of the Exit Standard requires that of all children who are in foster care for more than 12 but less than 25 months on September 30, 2015, 45 percent will be discharged from foster care to permanency (reunification, kinship guardianship, adoption or non-relative guardianship) by September 30, 2016. Of the 218 children who were in care more than 12 months and less than 25 months on September 30, 2015, 60 (28%) achieved positive permanency by September 30, 2016 (see Table 10). Similar to previous monitoring periods, performance for this sub-part remains substantially below the performance level required by the Exit Standard.

The third part of the Exit Standard requires that of all children who are in foster care for 25 months or longer on September 30, 2015, 40 percent will be discharged through reunification, adoption, legal guardianship prior to their 21st birthday or by September 30, 2016, whichever is earlier. For the 457 children who had been in care 25 or more months on September 30, 2015, 143 (31%) achieved permanency by June 30, 2016 (see Table 10). Performance for this period is an improvement and reflects the highest performance level since September 2011.

Overall, performance over the past year declined for two cohorts and CFSA did not meet the required level of performance for this Exit Standard.

Table 10:
Children and Youth Exiting to Permanency by Cohort as of September 30, 2016

Length of time in out of home care during FY2015	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, 2016
8 days – 12 months	345	121 (35%)	2 (1%)	0 (0%)	6 (2%)	129 (37%)
12 – 24 months	218	19 (9%)	9 (4%)	9 (4%)	23 (11%)	60 (28%)
25 months or more	457	36 (8%)	12 (3%)	22 (5%)	73 (16%)	143 (31%)

Sources: CFSA Administrative Data, FACES.NET reports CMT384 and CMT385
Percentages may not equal total exits to permanency due to rounding.

Performance on Strategy Plan:

CFSA's implementation of strategies to support timely permanency efforts are described below:

- *In January and February 2016, CFSA completed the process of reviewing permanency cases managed by CFSA. The information from those reviews is used to inform plans to expedite permanency that are reviewed in 30-60-90 day intervals. CFSA will conduct the same exercise with the private agencies to be completed by August 31, 2016.¹⁷³ CFSA will continue to review permanency data on a quarterly basis to identify and resolve systemic barriers as well as to provide targeted management to workers and staff who need additional coaching (2016 Strategy Plan, #32).*

CFSA reports that permanency case reviews continued in June 2016 for CFSA case managed cases and began with private agencies in August 2016. CFSA identified the following themes from their review of CFSA case managed cases – fathers and the paternal family need to be more engaged; visitation between parents and children should be meaningful and focused on supporting permanency; parents need clearer expectations and continuous feedback from their workers about what is needed for permanency; and kin must be explored as placement options

¹⁷³ On June 22, 2016, CFSA submitted modification to this strategy by changing the start of this review process to August 2016 and the completion date to October 31, 2016.

and permanency supports on an ongoing basis. CFSA is continuing the review process; themes, trends and feedback will be provided to the permanency supervisors and the private agencies and updates will be included in the next monitoring report.

- *CFSA will complete the modification of the performance-based contracting tool used by the contract monitors. The modifications will focus on, but will not be limited to, positive permanency outcomes. The process to modify the tool will include obtaining feedback from the private agencies as well as from Casey Family Programs. The modified tool will be finalized by July 31, 2016. The contract monitoring staff will be trained and begin utilizing the tool by September 30, 2016 (2016 Strategy Plan, #33).*

CFSA completed modification of the new performance-based contracting tool and the Monitor provided feedback during the modification process. This new tool directs CFSA contract monitors to assess the quality of case practice and how well workers are supporting the safety, permanency and well-being of children and youth. The tool examines the information recorded regarding monthly visits in workers' contact notes and will require a practice change for some agencies. CFSA reports that initially the tool will be used to determine a baseline of performance for each agency and identify areas for improvement. Monitor staff attended the training of providers on this new tool in September 2016 and plan to observe the process in the next monitoring period.

7. Case Planning Process

The case planning process Exit Standard requires 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 and (2) deliver services identified in the current case plan. 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, supports and timetables for providing services needed by children and families to achieve identified goals. CFSA partially maintained compliance on timelines for case plan development.¹⁷⁴ The remaining Outcome to be Achieved is related to the quality of the case planning process; the Monitor measures performance on this requirement through ratings from the QSR.

¹⁷⁴ Monthly performance for completion of case plans are as follows: January, 87%; February, 88%; March, 85%; April, 88%; May, 90%; June, 94%.

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 36 and 37, 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 37: QSR *Planning Interventions* Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹⁷⁵

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.

¹⁷⁵ *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 38: QSR *Pathway to Case Closure* Indicator: Parameters to Consider and Description of Acceptable/Unacceptable Performance¹⁷⁶

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?

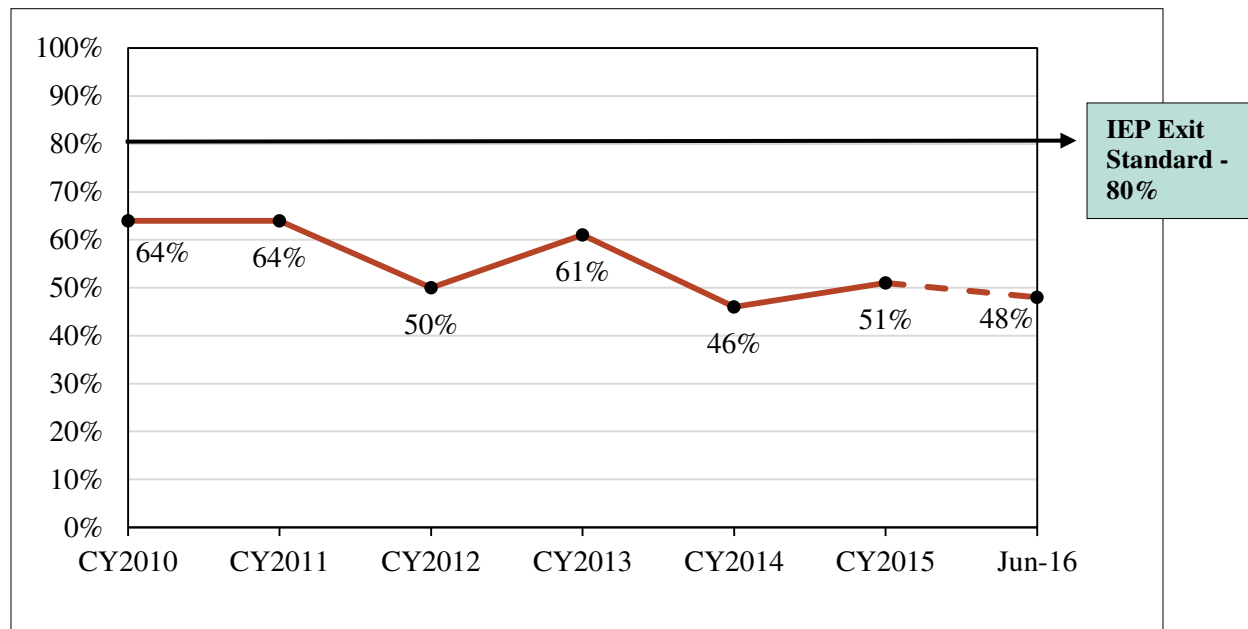
- *Description of Acceptable/Unacceptable Performance:*

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.

¹⁷⁶ *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 39: QSR Findings on Case Planning Process
CY2010 – June 2016



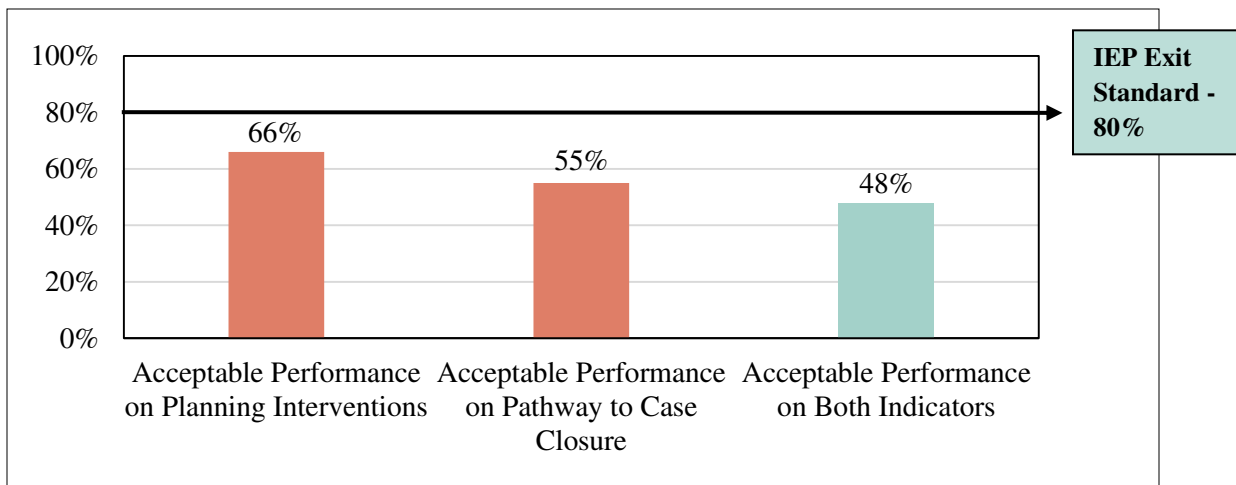
Source: QSR Data CY2010 – June 2016; June 2016 performance includes data from QSRs conducted January – June 2016.

Performance for January 1 through June 30, 2016:

Between January and June 2016, 64 cases were reviewed using the QSR methodology. As Figure 40 indicates, 48 percent (31 of 64) of cases reviewed were rated as acceptable on *both* the overall *Planning Interventions*¹⁷⁷ and *Pathway to Case Closure* indicators. In some cases, reviewers rated practice on one indicator as acceptable, while their assessment of practice on the other indicator was unacceptable. Specifically, 66 percent of cases (42 of 64) were rated acceptable on the *Planning Interventions* indicator and 55 percent of cases (35 of 64) were rated acceptable on the *Pathway to Case Closure* indicator. Similar to performance on the Exit Standard pertaining to services to children and families, performance on *Pathway to Case Closure* has decreased since the previous monitoring period and should be a point of substantial concern for CFSA leadership. Current performance remains below the Exit Standard requirement of 80 percent acceptable.

¹⁷⁷ All consistently rated sub-parts of this indicator (*Safety and Protection*, *Permanency*, *Well-Being*, *Daily Functioning* and *Life Role Fulfillment*, *Transition and Life Adjustment*, and *Early Learning and Education*) are used to evaluate if the overall *Planning Interventions* indicator is acceptable. Cases are rated as overall acceptable when: *Safety and Protection* is rated as acceptable and the majority of the sub-parts are rated as acceptable.

Figure 40: QSR Findings on Case Planning Process
January – June 2016
N=64



Source: QSR Data January – June 2016

Similar to performance on the Exit Standard pertaining to services to children and families, performance for the current monitoring period reflects an increase for cases managed by private agencies (37 percent for CY2015; 38 percent for January through June 2015 to 48 percent for January through June 2016). However, there continues to be a notable difference between CFSA and private agency managed cases where the focus child is in out-of-home placement compared to when the focus child is receiving in-home services.¹⁷⁸ A little more than half (54%; 26 of 48) of cases where the focus child was in out-of-home placement were rated acceptable on both indicators compared to 31 percent (5 of 16) of cases where the focus child was receiving in-home services. While performance on both indicators used to assess performance on this Exit Standard were notably lower when the focus child was receiving in-home services, this difference was largest for *Pathway to Case Closure*, again, reinforcing the importance of using a common vision in planning that is shared by all team members – including the family – regarding the family strengths, needs and behavioral changes necessary for safe case closure.

¹⁷⁸ Analyses indicate this difference is not statistically significant at a level of $p < .05$.

**Table 11: Performance on QSR Indicators by Case Management Provider
January – June 2016**

CFSA N=37	Private Agencies N=27
<i>Planning Interventions</i>	
68% (25)	63% (17)
<i>Pathway to Case Closure</i>	
54% (20)	56% (15)
<i>Both Indicators</i>	
49% (18)	48% (13)

Source: QSR Data, January – June 2016

**Table 12: Performance on QSR Indicators by Case Type
January – June 2016**

Out-of-Home Placement N=48	In-Home Services N=16
<i>Planning Interventions</i>	
69% (33)	56% (9)
<i>Pathway to Case Closure</i>	
60% (29)	38% (6)
<i>Both Indicators</i>	
54% (26)	31% (5)

Source: QSR Data, January – June 2016

Performance on Strategy Plan:

In addition to the strategies discussed in section A.4. of this report, *Services to Families and Children to Promote Safety, Permanency and Well-being*, CFSA has employed the following strategy to increase consistency of quality performance in its case planning process:

- *The R.E.D. Team framework has provided the agency with a common language and lens through which to review cases and make clinical practice determinations. By August 31, 2016,¹⁷⁹ CFSA will identify resources needed to utilize the framework and instruct, coach, and develop workers and supervisors across the system, including the private agencies, to improve clinical practice, case planning, and services (2016 Strategy Plan, #16).*

CFSA continues to engage Sue Lohrbach, a national expert on the consultation and information sharing framework (CISF) and R.E.D. Team process. In February 2016, Lohrbach worked with Child Welfare Training Academy (CWTA) staff to review and refine the existing supervisory

¹⁷⁹ On June 22, 2016, CFSA submitted a modification to this strategy changing the August 30, 2016 date to September 30, 2016.

training curriculum to ensure the CISF is present and reinforced throughout the curriculum as a key strategy for elevating clinical practice. As a result, the on-going training curriculum for supervisors, which is now mandatory, was updated – *Mastering the Art of Child Welfare Supervision 2.0* – and consists of three tiers. CFSA began training on Tier One, which consists of three sessions, in July 2016. Unfortunately, of 74 CFSA and private agency supervisors who are required to complete this training, five supervisors (7%) had completed all three sessions as of November 10, 2016.¹⁸⁰ In order for this training to have the desired results across the CFSA and the private agencies, it is essential that all supervisors complete every session. CWTA is currently holding make-up sessions for Tier One and is expecting that all supervisors will have completed Tier Three by June 2017.

C. GOAL: CHILD WELL-BEING

1. Sibling Placements and Visits

By placing siblings together, CFSA is able to mitigate some of the trauma children experience when they enter out-of-home care and can help children sustain their critically important lifelong connections and supports. CFSA continues to meet both Exit Standards related to sibling placement and frequency of visitation between siblings if they are placed apart (IEP citations I.C.20.a.&b.).

As of June 30, 2016, 82 percent of children who entered care between January and June 2016 with their siblings or within 30 days of their siblings were placed with some or all of their siblings. Performance continues to exceed the required performance of 80 percent. For sibling visitation, during this monitoring period a monthly range of 86 to 94 percent of siblings had at least monthly sibling visits and a range of 80 to 89 percent of siblings each month had at least twice monthly visits with their brothers and/or sisters, exceeding the required levels of 80 percent for monthly and 75 percent for at least twice monthly sibling visits.

2. 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 whose placements are disrupted 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.). During the previous monitoring period, due to monthly

¹⁸⁰ In addition to supervisors, program managers and program administrators who supervise social workers are required to take this training. As of November 10, 2016, 4 of the 33 required managers and administrators have completed all three sessions of Tier One.

performance below the required level for four of six months and quality concerns with the Child Needs Assessments (CNA) themselves, this Exit Standard was redesignated as an Outcome to be Achieved.

For several years, CFSA has utilized the CNA tool to inform placement decisions for all children who enter care, require a placement change or experience a placement disruption. The CNA collects information on the child's needs in numerous domains, including mental and behavioral health, medical and physical characteristics, personal care, education and cultural and linguistic. Based upon the information collected on the child's needs, a rating is determined which recommends the type of placement most appropriate for the child – ranging from a traditional/kinship foster home to a residential treatment facility. The tool is completed by a CFSA Resource Development Specialist (RDS) with input from the social worker and, in some cases, supervisor.

Between January and June 2016, a range of between 11 and 20 children's placements disrupted each month.¹⁸¹ A monthly range of 85 and 100 percent of children experiencing a disruption had a CNA completed within 30 days of notification of the need for a placement change.¹⁸² Specifically, in June 2016, there were 16 placement disruptions and a CNA tool was timely completed in 14 (88%) instances.

The Monitor reviewed a sample of CNAs completed during the current monitoring period and found that in many instances, the tools were not completed appropriately and included conflicting or outdated information. Additionally, similar to the previous monitoring period, the type of placement the child received did not always match the placement recommendation from the CNA and a justification for not following the CNA recommendation was not always provided. Due to these quality issues, the Monitor continues to consider this Exit Standard unmet.

Beginning in September 2016, CFSA started utilizing a new process for assessing and selecting placements for children and youth following a placement disruption. When notified of a placement disruption, the RDS schedules a Placement Disruption Staffing with a multidisciplinary team to include social worker, supervisor, Office of Well-Being, GAL, therapist and other team members as appropriate. During this staffing, the placement concerns are discussed and the team determines what is needed to stabilize the placement. If the placement cannot be stabilized, the team discusses an appropriate level of care and services needed to support the new placement. The CNA is replaced with ratings from the child's CAFAS/PECFAS to inform functioning within life domains. Within 30 days of the placement change, the RDS

¹⁸¹ The number of disruptions each month are as follows: January, 20; February, 15; March, 17; April, 13; May, 11; June, 16.

¹⁸² Monthly performance data are as follows: January, 90%; February 100%; March, 94%; April, 85%; May, 91%; June, 88%.

worker schedules a Placement Stability Staffing which includes social worker, service providers, Foster Parent Support Worker, foster parent and child, as appropriate, to assess the placement and services and determine if additional support is needed. Placement Disruption Staffings are held within one week of notification. The Monitor anticipates that this process will improve CFSA's assessment and placement matching capabilities for children and youth who experience a disruption.

3. Health and Dental Care

The IEP has multiple Exit Standards related to ensuring that children and youth in out-of-home placement receive appropriate and routine medical and dental services and timely access to appropriate health care. Most of these Exit Standards are designated as Outcomes to be Maintained.

Health Screening Prior to Placement

The IEP requires 95 percent of children in foster care have a health screening prior to an initial placement or upon re-entry into care and 90 percent of children have health screening before a change in placement (IEP citation I.C.22.a.). The purpose of the health screening prior to placement is to identify health conditions that require prompt medical attention such as acute illnesses, chronic diseases, signs of abuse or neglect, signs of infection or communicable diseases, hygiene or nutritional problems and developmental or mental health concerns. Additionally, the screening gathers information about the child's health care needs to be shared with the child's foster parent or caregiver, social worker and other service providers.

During this monitoring period, CFSA's performance for health screening prior to initial placement or re-entry into care ranged monthly from 92 to 100 percent and monthly performance for medical screenings prior to a placement change ranged from 83 to 93 percent occurring. Performance fell below the required level of 95 percent for health screenings prior to an initial placement for three months of the monitoring period and below the required level of 90 percent for health screenings required prior to a placement change in January, April and June 2016. The Monitor currently considers these deviations to be insubstantial, however, will continue to closely assess performance in this area.

Full Medical Evaluation and Full Dental Evaluation

The IEP requires that 85 percent of children receive a full medical evaluation within 30 days of placement and 95 percent receive the evaluation within 60 days of placement (IEP citation I.C.22.b.i.). Performance on completion of full medical evaluations within 30 days of placement ranged monthly from 79 to 92 percent, below the required level of 85 percent for three of the six

months in the monitoring period.¹⁸³ Performance on completion of full medical evaluations within 60 days of placement ranged monthly from 94 to 96 percent of children in care. The Monitor considers current performance to be an insubstantial deviation and this Exit Standard to be maintained.

CFSA maintained required performance for two of the three sub-parts of the Exit Standard pertaining to full dental evaluations (IEP citation I.C.22.b.ii.). CFSA performance for full dental evaluations met the required level of 25 percent for evaluations within 30 days of placement and 50 percent within 60 days of placement (monthly range of 30 to 61 percent and 54 to 96 percent respectively). Performance for full dental evaluations within 90 days of placement continued to fall short of the required 85 percent during four of the six months of the monitoring period and ranged from 70 to 98 percent within 90 days of placement, with improved performance in the last two months of the period.¹⁸⁴ The Monitor considers this Exit Standard to be partially maintained.

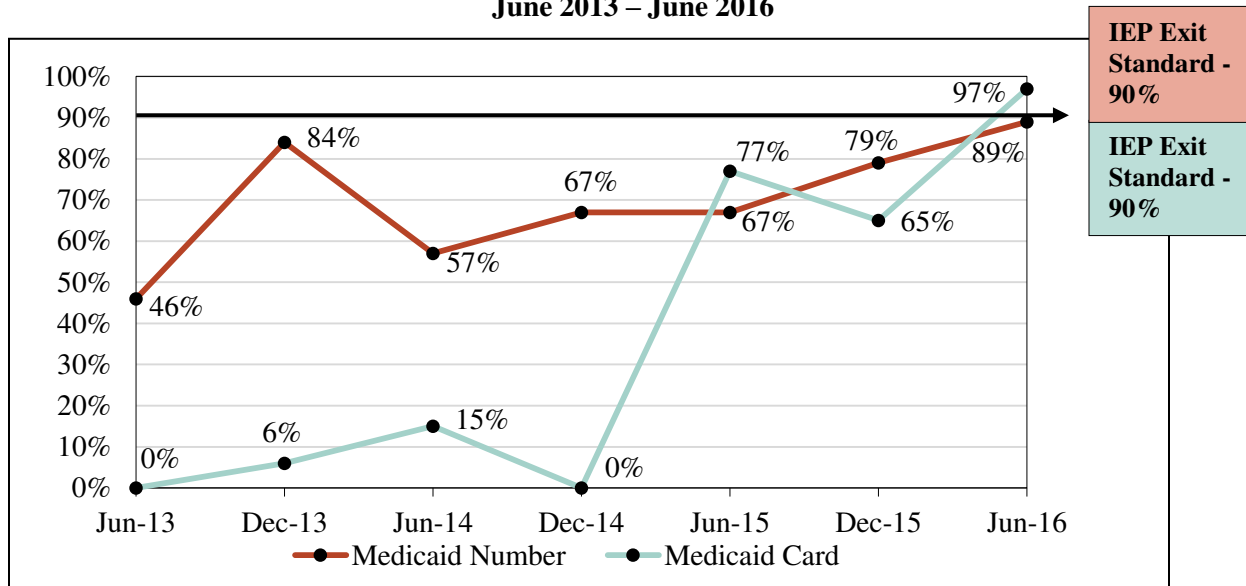
Medicaid Coverage

IEP Requirement	43. <i>Health and Dental Care</i> : CFSA shall ensure the prompt completion and submission of appropriate health insurance paperwork, and shall keep records of, e.g., Medicaid application dates, HMO severance dates, and enrollment dates. CFSA shall provide caregivers with documentation of Medicaid coverage within 5 days of every placement and Medicaid cards within 45 days of placement. (IEP citation I.C.22.d.)
Exit Standard	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.

¹⁸³ Monthly performance data for children having medical evaluations completed within 30 days of placement are as follows: January, 79%; February, 80%; March, 83%; April, 86%; May, 92%; June, 91%.

¹⁸⁴ Monthly performance data for children having dental evaluations completed within 90 days of placement are as follows: January, 70%; February, 75%; March, 77%; April, 71%; May, 92%; June, 98%.

Figure 41: Distribution of Medicaid Number and Medicaid Card to Foster Parents
June 2013 – June 2016



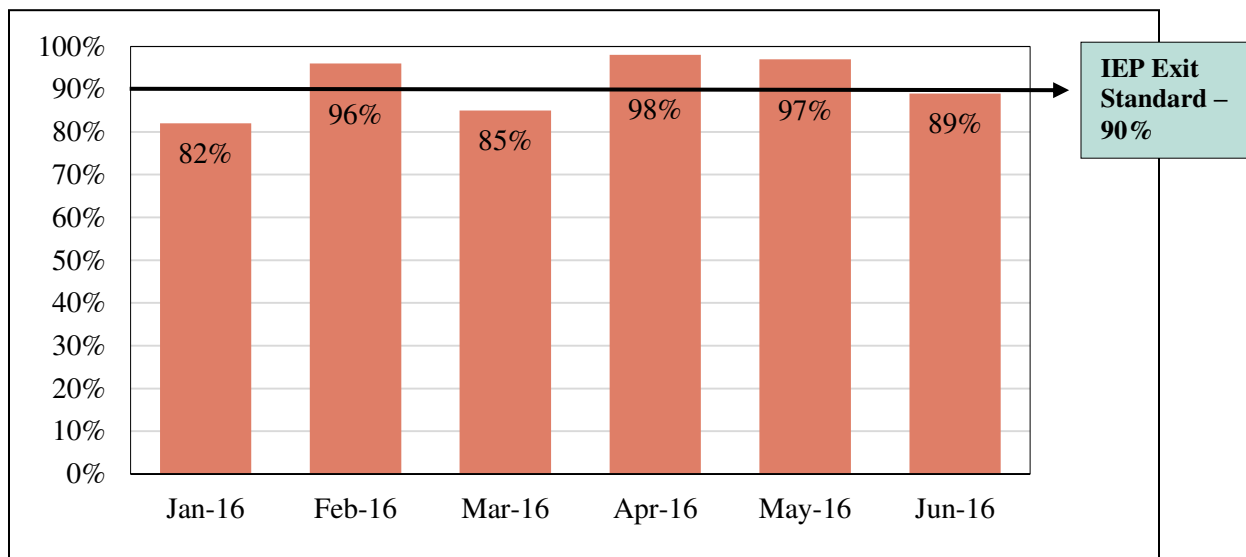
Source: CFSA Manual Data

Performance for the period January 1 through June 30, 2016:

CFSA continues to track the distribution of Medicaid numbers to foster parents when a child is initially placed in foster care or experiences a placement change. In June 2016, 80 children experienced a placement activity and remained in that placement for at least five days. Of these 80 children, CFSA was able to verify that 71 foster parents (89%) received the child's Medicaid number within five days of their placement. Between January and June 2016, performance ranged from 82 to 98 percent per month (see Figure 42).¹⁸⁵ Performance on this sub-part of the Exit Standard demonstrates improvement from the previous monitoring period and met the required level of 90 percent in three of the six months during the period.

¹⁸⁵ These data report performance on Medicaid number distribution to foster parents when a child experiences a placement activity – either an initial placement or placement change. CFSA reports that Medicaid cards for children who experience a placement change are transferred through the placement passport packet and are available through the foster parent mobile application. CFSA does not currently track or confirm receipt of the Medicaid card by new foster parents.

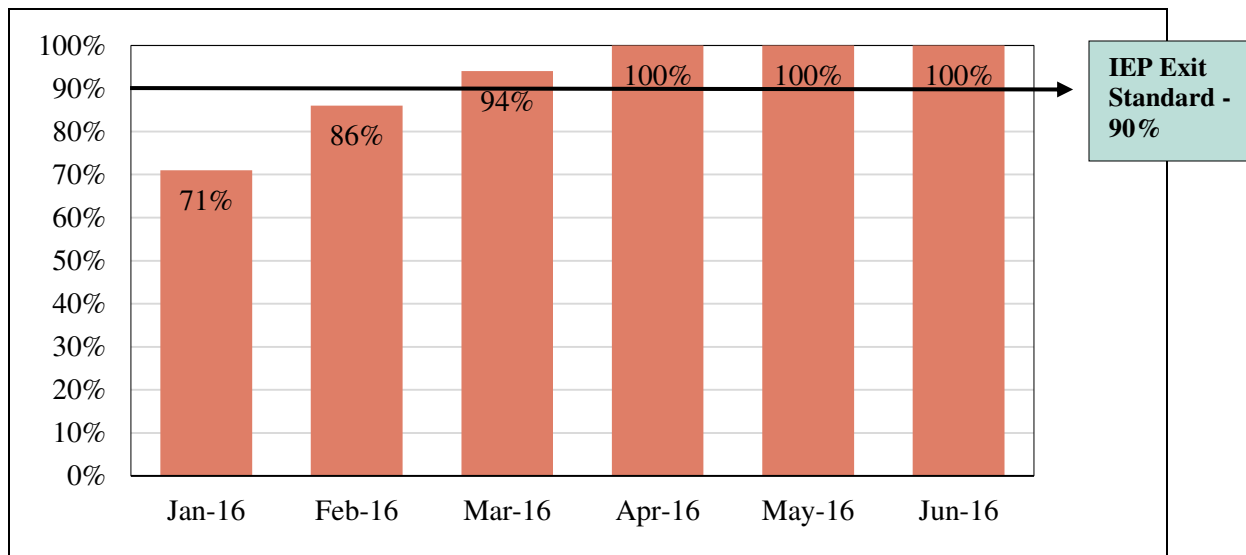
**Figure 42: Foster Parents who Received Child's Medicaid Number within Five Days of the Child's Placement
January – June 2016**



Source: CFSA Manual Data

CFSA has implemented a complicated manual system to track the distribution of Medicaid cards to foster parents when a child is initially placed or re-enters foster care. Between January and June 2016, CFSA was able to verify that between 71 and 100 percent of foster parents each month received the child's Medicaid card within 45 days of the child's placement (see Figure 43). CFSA's performance on this sub-part of the Exit Standard increased dramatically from the previous monitoring period and met the performance level of 90 percent required by the IEP in four out of six months.

**Figure 43: Foster Parents who Received Child's
Medicaid Card within 45 Days of the Child's Placement
January – June 2016**



Source: CFSA Manual Data

The Monitor notes the significant increase in performance in timely distribution of Medicaid numbers and cards to foster parents as this is an instrumental need for ensuring the health and well-being of children in foster care. This Exit Standard is partially achieved.

Performance on Strategy Plan:

CFSA has employed the following strategy to increase performance on timely receipt of Medicaid numbers and cards by foster parents:

- *The Placement Administration will continue to monitor the distribution of Medicaid numbers and cards by (a) following-up each week to ensure the number and card are provided to the foster parents when there has been a new placement or re-placement and (b) verifying that the Medicaid number is in FACES.NET so that any foster parent who uses the foster parent app will have immediate access to the number. Additionally, CFSA has engaged the Office of the Deputy Mayor [of Health and Human Services] to develop a longer term strategy to provide Medicaid cards to caregivers to be implemented by December 31, 2016 (2016 Strategy Plan, #20).*

CFSA credits the significant improvement in performance for timely distribution of Medicaid numbers and cards to foster parents to the diligence of workers within the Placement Administration and Business Services Administration. Rather than following-up with foster parents each week, staff from the Placement Administration follow-up with foster parents each

day following a new placement or placement change to ensure that the foster parent has the Medicaid number and receives the Medicaid card timely. In addition, staff are utilizing technology to minimize challenges in providing the Medicaid number in a timely manner. Placement Administration staff contact social workers directly when a Medicaid number is not in FACES.NET and enter the missing data so that it is readily available should the child experience a future placement change. Additionally, by appropriately entering the information into FACES.NET, this ensures that the current and possible future foster parents will have the information readily available if they use the foster parent mobile app.

CFSA also reports that a memorandum has been sent to the office of the Deputy Mayor for Health and Human Services outlining previous challenges in ensuring the timely distribution of Medicaid cards. CFSA and the Department of Human Services (DHS) have now implemented a system where after CFSA requests a Medicaid card, DHS issues a temporary card within five days and then prioritizes processing the paperwork for a permanent Medicaid card. CFSA reports that this process is working for staff and the increase in performance is a result of this partnership.

D. RESOURCE DEVELOPMENT AND SYSTEM ACCOUNTABILITY

1. Caseloads

Exit Standards pertaining to caseloads and supervisory responsibilities are designated as Outcomes to be Maintained (IEP citations I.D.25.&26.). During this monitoring period, caseloads for permanency, in-home and home study workers continued to meet the levels required by the IEP. Performance data for investigative and FA workers were unable to be validated and are thus not included in this report.

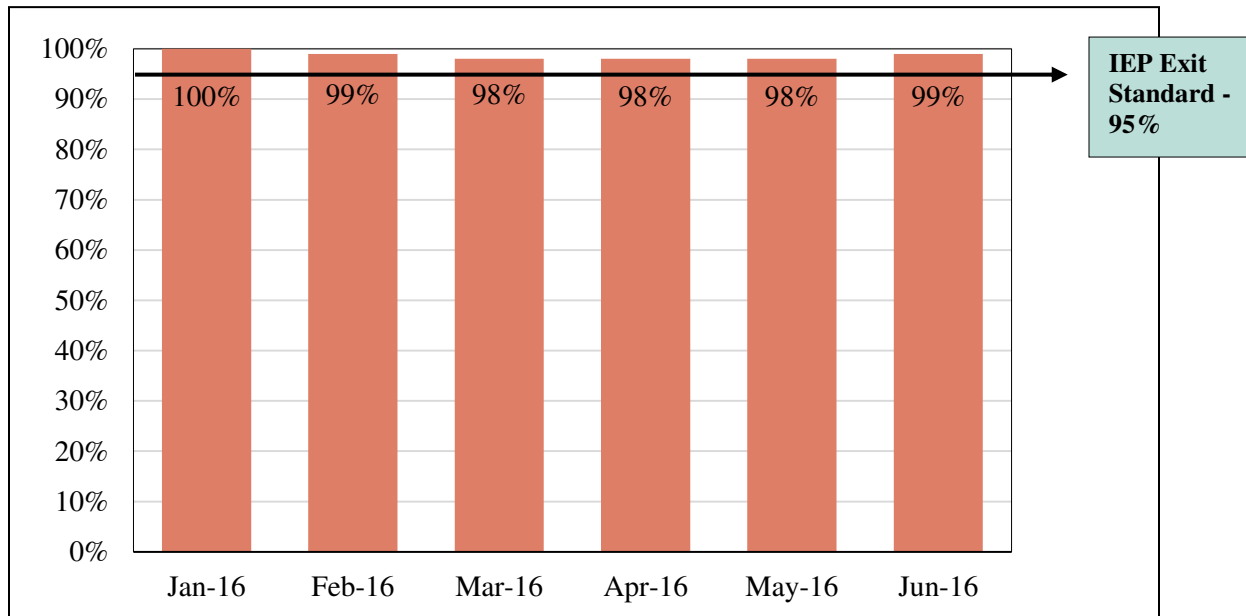
Caseloads for In-Home Social Workers, Permanency Social Workers and Workers Conducting Home Studies

The IEP requires that 90 percent of workers have caseloads that meet the ratios required. For in-home and permanency social workers, the standard is 15 cases per worker and no individual worker with a caseload greater than 18. For workers conducting home studies, the standard is 30 cases per worker and no individual worker with a caseload greater than 35.

Performance for the period January 1 through June 30, 2016:

One hundred percent of home study workers each month met the required levels and performance for in-home and permanency workers ranged monthly from 98 to 100 percent (see Figure 44).

**Figure 44: Caseloads for Permanency and In-home Social Workers
January – June 2016**



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 21 cases in February 2016 to a high of 43 in January 2016 (1 to 3% of total permanency and in-home cases), a slight increase from the previous monitoring period (monthly range of 10 to 38 cases unassigned between July and December 2015). In addition to these unassigned cases, between January and June 2016 a monthly range of between 27 and 67 ongoing cases remained assigned to investigative social workers, supervisors and program managers. CFSA indicates that these investigations have closed and are awaiting transfer to a worker in an ongoing unit. It is unclear from the data the Monitor reviewed how long these cases have been in this transfer process and which administration and worker are responsible for visiting with the family, completing safety checks and providing services during this time.

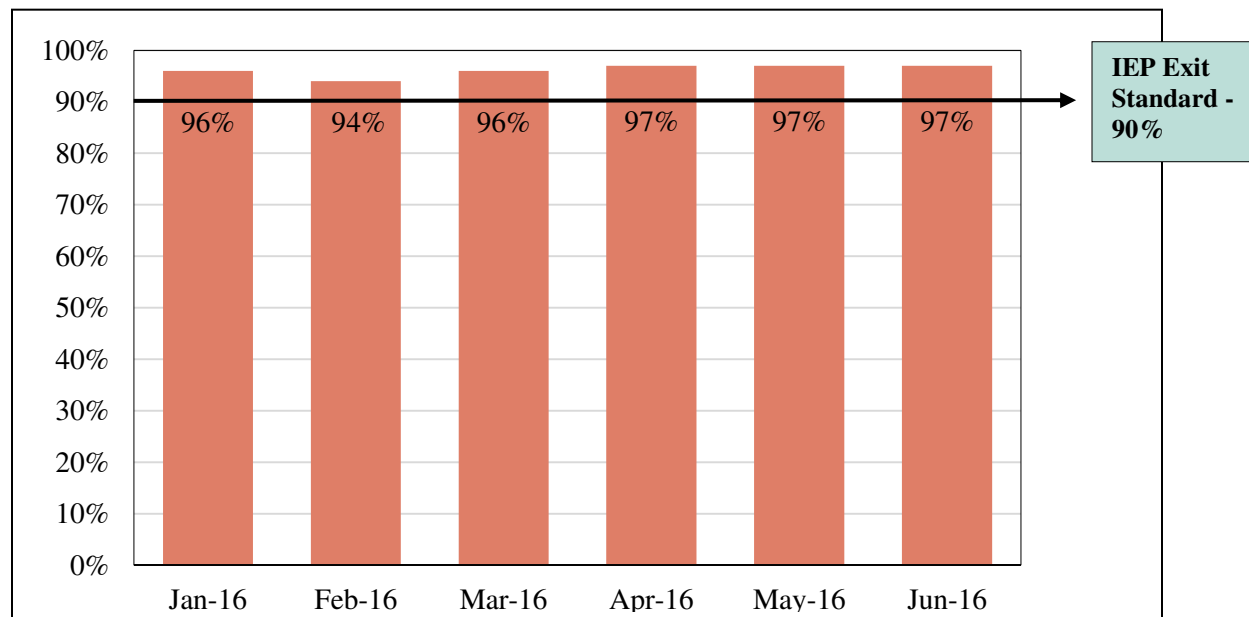
Supervisory Responsibilities

There are two Exit Standards related to caseloads and supervisory expectations for supervisors of workers carrying caseloads. 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.).

Performance for the period January 1 through June 30, 2016:

During the current monitoring period, a monthly range of 94 to 97 percent of supervisors were responsible for supervising no more than five case-carrying social workers and a case aide, family support worker or non-case-carrying social worker, which exceeds the required level of 90 percent for this sub-part of the Exit Standard and demonstrates an improvement from the previous monitoring period (see Figure 45).

**Figure 45: Supervisors Responsible for No More Than Five Case-Carrying Workers and a Case Aide/FSW
January – June 2016**



Source: CFSA Administrative Data, FACES.NET report CMT387

For the second Exit Standard, which requires that 95 percent of ongoing permanency and in-home cases be assigned to social workers (IEP citation I.D.26.b.ii.), the percentage of ongoing cases that were carried by social workers ranged from 90 to 95 percent monthly this period.¹⁸⁶ CFSA's performance was below the required level for five of the six months this period. The Monitor considers this decrease insubstantial and this Exit Standard to be maintained. However, this trend of having a high number of cases unassigned for more than five days and a higher percentage of cases assigned to supervisors has been consistent over previous monitoring periods and should be a signal to CFSA management that additional strategies are needed to identify and take steps to improve the case assignment process and address possibly rising supervisory workloads due to cases unassigned to frontline workers.

¹⁸⁶ Monthly performance data are as follows: January, 90%; February, 94%; March, 93%; April, 94%; May, 95%; June, 94%.

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 January 1 through June 30, 2016:

The Monitor engages in independent validation of investigation and FA caseload data through analyzing back-up data as well as speaking directly with frontline workers. As was reported during the previous monitoring period (July – December 2015), the Monitor and CFSA agreed in April 2016 that the data in FACES.NET management reports did not capture current, accurate information regarding investigation and FA worker caseloads. As a result, the Monitor determined that January through June 2016 caseload data cannot be validated or reported on. The Monitor shared this information with CFSA leadership, who engaged supervisors and frontline workers to assess the extent of the problem and implement solutions to remedy any inaccuracies in the data including issuing guidance to staff around the importance of accurate case assignment and reporting.

The Monitor and CFSA leadership have worked together to develop a protocol for analyzing caseload data which includes both quantitative and qualitative analysis. CFSA, in discussion with the Monitor, developed new FACES.NET management reports to best understand the caseloads of investigation and FA workers. The new reports allow for the Monitor and CFSA leadership to assess the daily caseloads, monthly average, number of new referrals and number of closed referrals for each investigation and FA worker. In addition, during October 2016, the Monitor conducted an anonymous, confidential survey of investigation and FA workers to assess their current caseloads and agency efforts dedicated to supporting investigation and FA practice and workloads. By reviewing multiple pieces of information, both quantitative and qualitative, the Monitor will be able to accurately assess and report on investigation and FA caseloads for the July through December 2016 monitoring period.

Notwithstanding the issues with investigation and FA caseloads, the Monitor considers the Exit Standard on overall caseload compliance to be partially maintained.

Performance on Strategy Plan:

CFSA has employed the following strategies to increase performance on caseload standards:

- *Beginning January 1, 2016, the floater unit staff will provide supplemental support as needed for those investigations open for the greatest number of days to assist assigned workers to resolve the issues necessary for safe closure (2016 Strategy Plan, #12).*

CFSA initially created a floater unit of five social workers in April 2015 to support over-burdened units, equalize workloads and improve performance on timely initiation and closure of investigations and FAs. However, CFSA reports that the unit has been disbanded as it was not able to serve its purpose and improve outcomes as desired. One worker from the floater unit was permanently reassigned to CPS and two workers were assigned to the new chronic neglect unit in Community Partnerships.

During the current monitoring period, CFSA conducted an assessment of factors impacting investigation and FA caseloads and determined that the Entry Services Administration was understaffed and thus decided to hire and assign additional full-time investigation and FA workers. To address this issue, CFSA converted a FA unit into an investigation unit in late August 2016. In addition, CFSA established two new investigation units – each with a supervisor, five social workers and one family support worker.

- *CFSA will continue to prioritize CPS hiring to ensure that caseloads for CPS workers meet LaShawn standards. CFSA will continue to have a dedicated recruiter for social workers. CFSA will continue to monitor unit level and team level caseload data and make adjustments as necessary (2016 Strategy Plan, #13).*

CFSA reports they continue to prioritize CPS hiring. During this monitoring period, eight investigative social workers left the agency and as of November 2016, CFSA reports that those eight vacant positions have been filled.

2. Staff Training

Training is a core function of any child welfare agency and is 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 direct service staff receive 80 hours of pre-service training (IEP citation I.D.27.a.)¹⁸⁷ 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 social workers (93%)¹⁸⁸ and pre-service training for supervisors (93%)¹⁸⁹.

The IEP also requires that 80 percent of previously hired CFSA and private agency direct service 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.). In-service training for social workers and supervisors is tracked on a July 1 through June 30 annual schedule. CFSA continued to maintain performance on this Exit Standard with 94 percent of social workers and 97 percent of supervisors receiving the required number of in-service training hours.

Performance on Strategy Plan:

- *By June 30, 2016, the Child Welfare Training Academy (CWTA) will augment the existing pre-service training and develop in-service track for all program supervisors that will focus on critical thinking to reinforce the skills and knowledge necessary to support staff in achieving performance outcomes for children and families. Supervisors will complete the training by September 30, 2016. Additionally, agency leadership will work with CWTA to develop a supervision guide for supervisors. (2016 Strategy Plan, #6).*

In July 2016, CFSA launched the “I am Interventionist” campaign to help supervisors prepare for CWTA’s changes to the supervisory pre-service training, titled *Mastering the Art of Child Welfare Supervision 2.0*. The training focused on critical thinking and clinical judgement and is delivered in a three tiered format. However, only five of 74 supervisors have completed all three

¹⁸⁷ The Monitor reports on compliance utilizing the level required by the IEP Exit Standard of 80 hours but understands that CFSA policy requires 129 hours of pre-service training for direct service staff prior to taking on case management responsibilities.

¹⁸⁸ Of the 54 direct service staff who were required to complete pre-service training between January and June 2016, 50 completed the required training. Of the 4 who did not complete the required training in 90 days, 1 is no longer employed with the agency.

¹⁸⁹ This Exit Standard applied to 15 supervisors during the period who had received their supervisory clearance 8 months prior to the monitoring period (between May 2015 and October 2015). Additionally, 1 supervisor hired during this period was inactive prior to holding the position for 8 months.

sessions of Tier One. CWTA is currently offering make-up sessions for the majority of supervisors who did not complete the sessions. Additionally, in August 2016, CWTA developed a supervision guide regarding appropriate use of the QSRs, however, it will not be disseminated until Tier Three of the *Mastering the Art of Child Welfare Supervisors 2.0*, which is scheduled to begin in March 2017. The Monitor is unclear as to why CFSA has not disseminated this resource which was completed in August 2016.

- *By May 31, 2016, CFSA and private agency managers and supervisors will participate in a “Managing with Data” training, which utilizes BIRST. The training will aid program managers and supervisors to review data to determine that visits occur timely and are documented appropriately. (2016 Strategy Plan, #21).*

Private agency managers participated in a refresher BIRST training on June 2, 2016. Refresher trainings for CFSA permanency supervisors were held in September 2016 and additional trainings were held monthly as part of CISA’s core training program for new and existing supervisors and managers. BIRST training strengthen managers’ data skills, including using data to make informed decisions.

- *By April 30, 2016, CFSA will identify specific skill areas related to engagement of families during worker visitation that need to be addressed through training. Agency Performance and CWTA will identify the areas based on the results of prior case reviews and reports and by conducting a survey of private agency and CFSA social workers and supervisors. By July 31, 2016, CWTA will coordinate with Agency Performance to modify existing training curricula and obtain contracted training to address the identified needs to enhance workers skills in the engagement of families identified to receive services. The training will begin by August 1, 2016. (2016 Strategy Plan, #22).*

CFSA conducted a survey of private agency and CFSA social workers and supervisors to assess their knowledge, skills and abilities around family engagement practices and to solicit information on barriers to implementing strengths-based, solution-focused family engagement. Survey results showed that social workers felt the most highly ranked barriers were caseload size and availability of culturally competent services followed by collaboration between CFSA and cross-system partners and organizational culture. When asked to identify additional training that would be helpful to staff, respondents indicated the need for support in the areas of cultural competency, project management, supervision, implicit bias, substance abuse, immigration and additional family engagement.

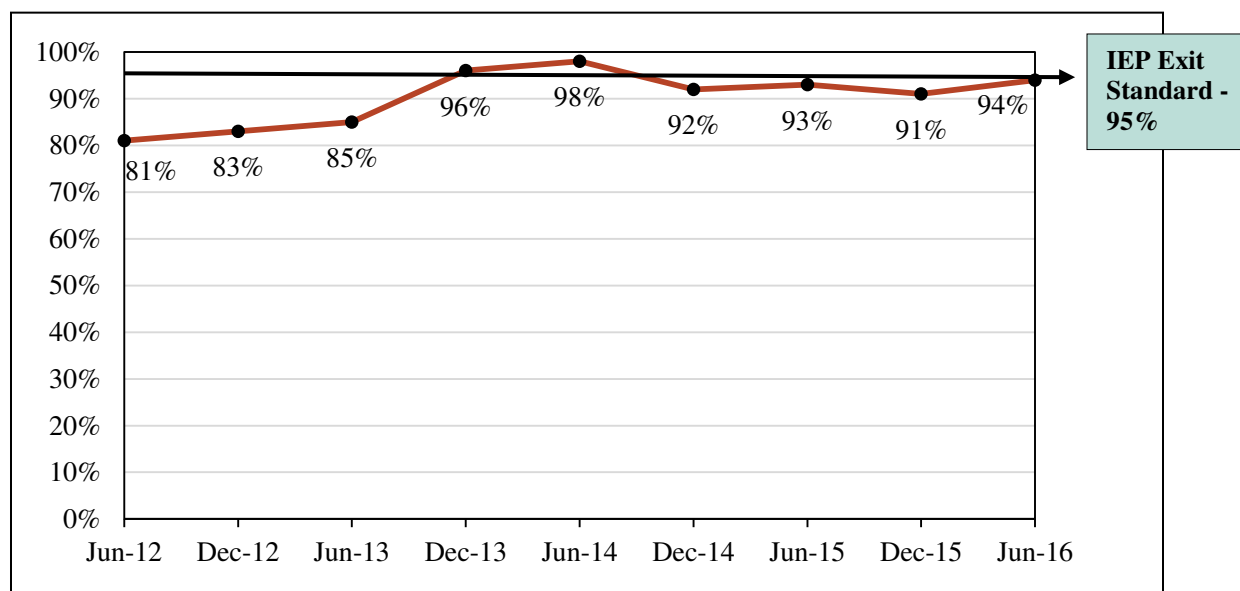
CFSA reports that a RFP was issued to solicit organizations to provide training on family

engagement with a goal to deliver training in September 2016 and into FY17. CFSA reports that the training was offered in May 2016 and will be offered again in November 2016. CFSA also reports that CWTA has developed and is providing training on engagement, which began being offered in May 2016.

3. Training for Foster and Adoptive Parents

The IEP requirements for pre-service (IEP citation I.D.29.a.) and in-service (IEP citation I.D.29.b.) training for foster parents are designated as Outcomes to be Maintained; current performance remains at the required level of 95 percent. Almost all (98%) foster parents completed 15 hours of pre-service training prior to licensure and 94 percent (240 of 256) of foster parents relicensed during this monitoring period completed the required number of in-service training hours.¹⁹⁰

**Figure 46: Foster/Adoptive Parents with 30 hours of In-Service Training
June 2012 – June 2016**



Source: CFSA Administrative Data, FACES.NET report TRN009

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

4. Special Corrective Action

During this monitoring period, CFSA continued to meet the Exit Standard that requires production of monthly reports identifying children in special corrective action categories and completion of child-specific case reviews to develop corrective action plans as appropriate (IEP

¹⁹⁰ The Monitor considers this an insubstantial deviation and this Exit Standard maintained.

citation I.D.30.). CFSA reports that these plans are completed during weekly Special Corrective Action R.E.D. Team meetings for children newly entering a corrective action category.

Data on the number of children in special corrective action categories between January and June 2016 are presented in Table 13 below. Between January and June 2016, 291 children newly entered at least one special corrective action category and 320 special corrective action plans were considered to address issues in those children's cases.¹⁹¹ Of the 320 possible plans, CFSA reports that after review, 148 plans were not required.¹⁹² All necessary plans (100%) were completed.

¹⁹¹ Individual children may be in more than 1 category and require more than 1 plan to address the issues specific to each category.

¹⁹² Reasons for a plan not being required may include the following: by the time the case was being reviewed, the home was licensed; the child's goal changed; the child's move was to respite or a hospital; no physical move occurred; or youth was reunified, adopted or emancipated.

Table 13: Children in Special Corrective Action Categories by Month*
January – June 2016

Special Corrective Action Category	Jan 2016	Feb 2016	Mar 2016	Apr 2016	May 2016	June 2016
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	232	236	235	230	234	236
Children Placed in Emergency Facilities Over 90 Days	0	0	0	0	0	0
Children Placed in Foster Homes without Valid Permits/Licenses or Foster Homes that Exceed their Licensed Capacity	67	73	49	54	50	50
Children in Facilities More than 100 Miles from DC	17	17	18	18	16	17
Permanency Categories						
Children with the Goal of Adoption for More than 12 Months who are not in an Approved Adoptive Home	38	34	36	37	30	30
Children in Care who Returned Home twice and Still have the Goal of Reunification	1	1	1	1	1	1
Children under 14 with a Goal of APPLA	1	1	1	1	1	3
Children with the Goal of Reunification for More than 18 Months	34	30	40	35	35	30

Source: CFSA Administrative Data, FACES.NET report COR013

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

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 legislation¹⁹³. 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

¹⁹³ D.C. Code §4-1371

years prior to their death in order to determine systemic, legal or policy and practice deficits and to make recommendations for improvement. The Committee is required to be composed of representatives from various District agencies^{194,195} and is located and staffed within the Office of the Chief Medical Examiner (OCME). Cases are reviewed when all requested documents are received.

CFSA also has an Internal Child Fatality Review Committee which reviews the deaths of resident 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 Internal Committee reviews cases within 45 days of notification of the child's death.

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

Performance for the period January 1 through June 30, 2016:

City-wide Child Fatality Review Committee:

The City-wide Child Fatality Review Committee (CFRC), comprised of both an Infant Mortality Review (IMR) Team and Child Fatality Review Team, continued to meet during this monitoring period and reviewed a total of 28 cases and developed recommendations as needed. The OCME hired two additional staff to support the CFRC including an Outreach Program Specialist who will assist with educating the community on recommendations generated from committee reviews. In July 2016, the Outreach Program Specialist coordinated a presentation for committee members on safe sleep practices.

The CFRC submitted a draft of the 2015 Annual Report to committee members on September 16, 2016. Committee members submitted feedback and the report should be finalized in November or December 2016.

¹⁹⁴ These agencies include Department of Human Services, Department of Health, Office of the Chief Medical Examiner, CFSA, Metropolitan Police Department, Fire and Emergency Medical Services Department, Office of the State Superintendent of Education, District of Columbia Public Schools, District of Columbia Housing Authority, Office of the Attorney General, Superior Court of DC, Office of the US Attorney, Department of Behavioral Health, Department of Health Care Finance, Department of Youth Rehabilitation Services, DC hospitals where children are born or treated, college or university schools of social work, Mayor's Committee on Child Abuse and Neglect and 8 community representatives.

¹⁹⁵ 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.

Internal Child Fatality Review Committee:

CFSA leadership ceased the Internal Child Fatality Review Committee meetings from December 2015 through March 2016 in order to reevaluate the review process and make adjustments to ensure the meetings are constructive and deliver the desired results with a particular focus on systemic findings and recommendations. Between April and June 2016, three meetings were held and nine cases were reviewed. Recommendations developed during the three meetings include:

- Creation of a workgroup to look closely at agency practice and policy related to parental substance abuse, in particular regarding PCP, the related safety and risk level and appropriate safety planning related to PCP use.¹⁹⁶
- CWTA will include a discussion of clinical practice and critical thinking in decision making and safety planning with families in the training curriculum with new social workers and ongoing as deemed necessary by social work supervisors, program managers and program administrators. Example – ensure that safety plans reflect the reality of substance treatment and recovery and include appropriate support resources and realistic ways to be monitored.¹⁹⁷
- CFSA will define “parentified child” and provide training to social workers in addressing this issue with parents and identifying with parents age-appropriate supports for child care.¹⁹⁸
- CFSA/CWTA/Risk Management should encourage partnership with MPD to improve worker safety and well-being when entering neighborhoods that are potentially unsafe.¹⁹⁹
- CFSA should clarify how it will respond to notifications of child deaths when there is no suspicion of maltreatment. This clarification should address any response by CPS, ongoing case management and Agency Performance.²⁰⁰

Three fatalities were awaiting reviews at the end of the monitoring period; one was reviewed in July and the other two were scheduled for review in September.

The Internal Child Fatality Review Committee Annual Report with combined data and recommendations for 2014 and 2015 has not yet been finalized. A draft of the report was

¹⁹⁶ CFSA did not provide an update on implementation status of this recommendation.

¹⁹⁷ CFSA reports that content on safety planning discussions has been embedded into pre-service training for all new direct service hires and is addressed through training session assessments.

¹⁹⁸ CFSA reports that content on “parentified child” is discussed during pre-service training for new hires in sessions on Child-Centered Practice, Life of a Case and Ongoing Case Management.

¹⁹⁹ CFSA reports working collaboratively with other agencies to develop and implement the RAVE panic button – a phone application designed to provide staff with an instant means of notifying the MPD in case of an emergency situation. The project is currently being piloted with the Risk Management Office, CISA and the Office of Unified Command.

²⁰⁰ CFSA is in the process of amending the Child Fatality Review and Critical Event policies which will address notification of child death when there is no suspicion of child maltreatment.

provided to committee members in September 2016 and was discussed during the October 2016 committee meeting.

Due to the continued delays in the completion of annual reports, the Monitor considers this Exit Standard to be partially maintained.

6. Quality Assurance

Quality Assurance

Continuous quality assurance is essential to CFSA's practice improvement and system functioning. During this monitoring period, CFSA continued to focus on the integration of agency CQI activities and *LaShawn* monitoring activities after moving the QA unit to Agency Performance (AP). This move has provided for increased alignment in processes and opens the opportunity for strengthening CQI functions. The Monitor hopes this integration will support independent, system-wide accountability processes moving forward.

Performance on Strategy Plan:

CFSA implemented the following strategies to ensure growth and development of the quality of practice in accordance with its overall CQI plan:

- *By April 30, 2016, CFSA will engage a consultant to provide technical assistance on analyzing QSR data. The analysis will identify historical trends and provide target areas for improvement in CFSA's case planning and service delivery to children and families. Additionally, the analysis will provide a foundation for quarterly reporting of QSR data findings to the management team. The quarterly reporting will include findings by unit, supervisor, and worker and will be shared with program areas and private agencies to inform and improve practice. Action steps will be developed and monitored on a quarterly trend analysis (2016 Strategy Plan, #14).*

CFSA contracted with a national expert to provide technical assistance on strategies for analyzing, integrating and utilizing QSR data to understand trends in barriers to acceptable performance. The consultant provided an on-site, two-day session in August 2016 to begin an assessment of the root causes behind CFSA performance on select QSR indicators and areas of practice – specifically those indicators and areas impacting performance on *Services to Families and Children to Promote Safety, Permanency and Well-Being* and *Case Planning Process* and overall practice with families receiving in-home services. Through the initial analyses conducted, common themes impacting unacceptable practice were identified including poor engagement with fathers and older youth; incomplete assessments of children and parent needs; insufficient

teaming within CFSA and across services providers (including mental health providers and schools); and a lack of knowledge about available community resources. The national consultant will be a continued resource as CFSA moves forward in their analyses and integration of QSR data and findings with other continuous quality improvement and data review activities.

Following the two-day session, CFSA moved forward with focus groups with frontline staff and supervisors to further discuss the barriers to performance on key QSR indicators – *Services to Families and Children to Promote Safety, Permanency and Well-Being* and *Case Planning Process*. CFSA is also planning to revise how data and findings gathered through the QSR are shared with leadership to ensure the information is integrated into strategic planning for the agency. A formal presentation of QSR CY2016 data, findings from the root cause analysis and identified next steps will be shared with management staff in February 2017.

- *By April 30, 2016, Agency Performance and Program Operations will develop and start to implement a targeted CQI work plan. The work plan will be created based on a review of existing CQI processes with the goal of elimination duplications and ineffective activities and adding or strengthening activities identified to inform and improve practice. Systemic themes will be identified at the unit, supervisor, and worker levels to inform improvement for practice, policy and training for case planning and services (2016 Strategy Plan, #15).*

Since the reorganization of the QA unit under AP, CFSA has taken active efforts to align all CQI activities and eliminate duplicative processes. Through a review of all CQI activities, CFSA was able to identify where duplicative efforts were occurring and where there were opportunities for new agency-wide efforts to address systemic barriers. A work plan has been created to support CQI activities in each program area – including regular review and analysis of important data that is then shared with leadership. The work plan includes the assignment of tasks and program areas to AP staff and in some areas includes the purpose for the CQI activity and the deliverable. This remains a work in progress and the CQI work plan is currently not comprehensive or complete. It does not consistently include critical information – in some places the purpose or deliverable – or expectations for how the deliverables will be shared and utilized to drive practice change. In addition, the Principal Deputy Director has implemented monthly meetings with agency Deputies, program administrators, program managers, AP staff and CWTA staff to review data, discuss strengths and existing barriers in practice and develop strategies to support practice integration and removal of barriers.

Data and Technology

CFSA uses data for management purposes and to assess the quality of its practice. The Monitor has regular discussions with CFSA on ways to improve data collection methods and make current data reports more useful.

Over the past two monitoring periods, CFSA has experienced challenges in placing children in appropriate homes in a timely manner due, in part, to deficits in the placement matching process. CFSA engaged in extensive efforts to clean-up the placement database in FACES.NET by removing foster homes that were no longer open with CFSA or one of the private agencies. In order to have real-time information on available foster home placements, CFSA developed an electronic form for private agencies and CFSA placement staff to complete on a weekly basis. In September 2016, CFSA began using the revised placement matching database in FACES.NET in conjunction with the electronic form to identify appropriate placements and determine vacancies. Requiring use of the electronic form is a short-term solution; CFSA must operationalize a long-term solution to maintain a functioning, placement database that can provide accurate real-time information on both foster parent availability and their strengths to inform successful matching based on youth needs.

To address questions about CPS caseloads, CFSA is in the process of developing two new management reports in FACES.NET that when reviewed together, along with qualitative data, will provide a comprehensive picture of CPS staff workloads. The FACES.NET reports will capture average caseload assignment and closure practices for each worker, providing insight into CPS workload management and support.

7. Financing

Federal Revenue

CFSA continues to demonstrate its ability to maximize Title IV-E revenue through quarterly claims for Title IV-E as well as providing documentation to support claiming under the Title IV-E waiver.²⁰¹

Table 14 presents the actual and approved Title IV-E federal resources used to support services to children and families involved with CFSA. For January through March 2016, CFSA reports its Title IV-E penetration rate of 63 percent for foster care cases and 75 percent for adoption cases.

²⁰¹ 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.

For April through June 2016, CFSA reports its Title IV-E penetration rate of 62 percent for foster care cases and 74 percent for adoption cases.

**Table 14: Actual and Budgeted Gross Title IV-E Federal Funds Operating Budget
FY2009 – FY2017**

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)	\$64.9	\$244.8
FY2017 (approved)	\$60.0	\$232.6

Source: CFSA FY2010 – 2015 Actual Budget, 2016 and 2017 Approved Budget and Financial Plan and District's Financial System (SOAR)

Budget

CFSA's FY2016 budget (which runs from October 1, 2015 through September 30, 2016) is \$244,836,996 of which \$165,503,240 (68%) is local funding²⁰² and the remainder is primarily federal funding. CFSA's FY2016 FTEs increased to 825 positions from 817 positions in FY2015 with an assumed vacancy rate of 6.5 percent.

The Mayor's approved FY2017 budget is \$232,629,822 of which \$167,753,240 (72%) is local funding²⁰³ and the remainder is primarily federal funding. This represents a decrease in federal funding and a 0.9 percent increase in local funding. CFSA's proposed FY2017 FTEs remains the same, with 825 positions and an assumed vacancy rate of 6.5 percent. CFSA's proposed FY2017

²⁰² Includes both local funds and Special Purpose Revenue funds.

²⁰³ Ibid.

overall budget represents a decrease of 1.4 percent, approximately 3.3 million dollars, not accounting for the reduction caused by the Intra-District swap of federal TANF dollars.²⁰⁴

²⁰⁴ A \$10 million reduction in the overall budget reflects the elimination of an Intra-District swap between CFSA and the Department of Human Services (DHS) related to federal TANF dollars. Previously, CFSA was able to support the District's efforts in drawing down federal TANF dollars by using these dollars to fund prevention services in the community through the Collaboratives and then creating a line-item for the same amount of local dollars to allocate to DHS. Due to the Title IV-E waiver, CFSA is now able to fund these services through waiver dollars. CFSA leadership has indicated that there will be no impact on community-based services solely as a result of the elimination of this Intra-District swap.

APPENDIX A

Glossary of Acronyms Used in Monitoring Report

ACEDS: Automated Client Eligibility Determination System	FTM: Family Team Meeting
AI: Administrative Issuance	FY: Fiscal Year
AP: Agency Performance	GAL: Guardian ad Litem
APPLA: Another Planned Permanent Living Arrangement	HMO: Health Maintenance Organization
ASFA: Adoption and Safe Families Act	ICPC: Interstate Compact for the Placement of Children
BIRST: CFSA's data visualization system	IEP: Implementation and Exit Plan
BSA: Business Services Administration	IMR: Infant Mortality Review
BSW: Bachelor of Social Work	I&R: Information and Referral
CAFAS: Child and Adolescent Functional Assessment Scale	LYFE: Listening to Youth and Families as Experts
CFRC: Child Fatality Review Committee	MACWS: Mastering the Art of Child Welfare Supervision
CFSA: Child and Family Services Agency	MFO: Modified Final Order
CISA: Child Information Systems Administration	MSW: Master of Social Work
CISF: Consultation and Information Sharing Framework	OAG: Office of the Attorney General
CNA: Child Needs Assessment	OCME: Office of the Chief Medical Examiner
CPS: Child Protective Services	OYE: Office of Youth Empowerment
CQI: Continuous Quality Improvement	PECFAS: Preschool and Early Childhood Functional Assessment Scale
CRC: Children's Research Center	PIP: Program Improvement Plan
CSSP: Center for the Study of Social Policy	QA: Quality Assurance
CWTA: Child Welfare Training Academy	QSR: Quality Service Review
CY: Calendar Year	RDP: Resource Development Plan
DBH: Department of Behavioral Health	RDS: Resource Development Specialist
DHS: Department of Human Services	R.E.D.: Review, Evaluate and Direct
DR: Differential Response	SDM: Structured Decision Making
FA: Family Assessment	SSI: Supplemental Security Income
FACES.NET: CFSA's automated child welfare information system	STARS: Student Tracking and Reporting System
FPSW: Foster Parent Support Worker	USDA: United States Department of Agriculture
FTE: Full Time Employment	YTP: Youth Transition Plan

APPENDIX B

LaShawn 2016 Strategy Plan

LaShawn A. v. Bowser

Implementation and Exit Plan

Section IV:

2016 Strategy Plan

Introduction

Pursuant to the Implementation and Exit Plan entered December 17, 2010 (Exit Plan), the Child and Family Services Agency (CFSA), after consultation with the Court Monitor and Counsel for Plaintiffs, submits the following 2016 Strategy Plan. The strategies and action steps in the 2016 Plan relate to outcomes and exit standards in the Outcomes to be Achieved section (as modified) in the Exit Plan. The 2016 Plan is a means to achieve compliance with the exit standards. Absent a substantial or unjustifiable disparity, the Court will not find deviations to constitute noncompliance. Moreover, the 2016 Plan, including applicable due dates, can be modified with timely consultation with the Court Monitor. In the event that the District has not satisfied the exit standards remaining in the Exit Plan by December 31, 2016, the District, after consultation with the Monitor and Counsel for Plaintiffs, will review, modify as appropriate, and submit to the Court an updated Strategy Plan for 2017.

The 2016 Plan is presented in the context of CFSA's overall strategic framework, which is comprised of four pillars.

LaShawn A. v. Bowser
Implementation and Exit Plan
Section IV:
2016 Strategy Plan

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
Front Door	<p style="text-align: center;">Initiation of Investigations [Exit Standard 1(a)]</p> <p style="text-align: center;">Timely Closure of Investigations [Exit Standard 1(b)]</p> <p style="text-align: center;">Acceptable Investigations [Exit Standard 2]</p> <p style="text-align: center;">Caseloads [Exit Standard 25(a)]</p>	<ol style="list-style-type: none"> 1. Beginning May 1, 2016, Entry Services and Agency Performance will conduct an assessment of the Child Protection Services (CPS) shift-to-shift reports to identify gaps that occur when tasks to initiate the investigation are not completed timely. The assessment will examine administrative, clinical, and caseload factors affecting performance and will include front-line staff. The final report will be issued by June 30, 2016 and will contain recommendations and a work plan with timeframes to improve performance on initiation of investigations. CFSA will implement recommendations in accordance with the work plan. 2. In an effort to increase performance and implement targeted management accountability, CPS supervisors will review data at daily huddles to improve performance on (1) timely initiation of investigations, (2) caseloads, and (3) timely closure of investigation. Daily huddles occur three times each day at shift changes. The data review will identify investigations that have not yet been assigned and will review efforts to locate children/families and ensure that those efforts are properly documented. 3. Program managers will conduct reviews with supervisors weekly to assess workloads, status of timely initiation of investigations, and timely closures. As a follow up, program administrators will track completion of program manager/worker reviews and outcomes to develop corrective actions each month, as needed. 4. By May 31, 2016, CPS managers and supervisors will participate in a mandatory refresher "Managing with Data" training utilizing CFSA's data visualization system (BIRST). The purpose of the refresher training is to strengthen the managers' skills to review data and train staff to use data to make informed decisions to effectively manage caseloads and improve performance outcomes.

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<ol style="list-style-type: none"> <li data-bbox="806 354 1999 699">5. Each Monday through Thursday at the 10/15 Day RED team meetings, team members will review five investigations/assessments and identify the action steps necessary to progress toward timely closure. After supervisory consult with social workers, investigations identified for review at the meetings will include those with: (1) familial complicating factors, (2) a need for enhanced services, and (3) significant barriers to safe closure, which include joint investigations with law enforcement. Supervisors will coach staff at these meetings on improved CPS practice. Beginning April 2016 and at each quarter, Agency Performance will conduct an analysis of the data and share findings with CPS managers. <li data-bbox="806 743 1999 971">6. By June 30, 2016, the Child Welfare Training Academy (CWTA) will augment the existing pre-service training and develop an in-service track for all program supervisors that will focus on critical thinking to reinforce the skills and knowledge necessary to support staff in achieving performance outcomes for children and families. Supervisors will complete the training by September 30, 2016. Additionally, agency leadership will work with CWTA to develop a supervision guide for supervisors. <li data-bbox="806 1015 1999 1279">7. CFSA will continue to have bi weekly group coaching support through Program Management observation to assess supervisory skills and offer strategies in work plan development for CPS frontline workers. Supervisors will develop action plans with investigative workers for investigations that have been opened for 35 days or longer. The action plans will include specific steps and timelines to be completed for safe closure. Program managers will review the action plans with supervisors on a weekly basis. The Administrator will review the plans twice each month. <li data-bbox="806 1323 1999 1357">8. CFSA will continue to use the "acceptable investigation tool" to review investigation

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<p>practice. CPS supervisors, managers, and agency performance staff will review 66 investigations per quarter. Based on the results of the reviews, CPS managers and supervisors will standardize the way coaching and support is provided to social workers by developing a supervision template to be completed by supervisors that will track the themes discussed during supervision and will include individualized corrective action plans. CPS managers will meet consistently with supervisors and workers to provide supervisory and worker supports.</p> <p>9. Supervisors will use the "four plus reviews" at the start of an investigation to review themes or trends identified in the families' history and determine if additional actions are needed to address the history within the current investigation or closure recommendations. CPS managers and supervisors will coach and support social workers to include the development of individualized plans for families based on history and will collect trends to be used in future planning (e.g., service development) and trainings.</p> <p>10. By April 30, 2016, CFSA will reissue the Administrative Issuance on Community Papering to provide guidance to program areas and workers and provide training so that workers and supervisors fully understand the criteria to community paper cases and their roles in the process.</p> <p>11. Each month beginning April 2016, the Deputy Director for Entry Services, the Deputy Director for Community Partnerships, and the Deputy for the Office of the Attorney General will review all cases presented for community papering, strategize regarding problematic cases, and identify themes and concerns for resolution.</p> <p>12. Beginning January 1, 2016, the floater unit staff will provide supplemental support as needed for those investigations open for the greatest number of days to assist assigned</p>

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<p>workers to resolve the issues necessary for safe closure.</p> <p>13. CFSA will continue to prioritize CPS hiring to ensure that caseloads for CPS workers meet LaShawn standards. CFSA will continue to have a dedicated recruiter for social workers. CFSA will continue to monitor unit level and team level caseload data and make adjustments as necessary.</p>
Well Being	<p>Services to families and children to promote safety, permanency and well-being [Exit Standard 3]</p> <p>Case planning process [Exit Standard 17]</p>	<p>CFSA will enhance existing continuous quality improvement (CQI) activities and implement an agency-wide CQI process to improve the case planning process and to improve services to families. The Office of Agency Performance has merged with the Quality Assurance unit under Office of Planning, Policy, and Program Support.</p> <p>14. By April 30, 2016, CFSA will engage a consultant to provide technical assistance on analyzing QSR data. The analysis will identify historical trends and provide target areas for improvement in CFSA's case planning and service delivery to children and families. Additionally, the analysis will provide a foundation for quarterly reporting of QSR data findings to the management team. The quarterly reporting will include findings by unit, supervisor, and worker and will be shared with program areas and private agencies to inform and improve practice. Action steps will be developed and monitored based on quarterly trends analysis.</p> <p>15. By April 30, 2016, Agency Performance and Program Operations will develop and start to implement a targeted CQI work plan. The work plan will be created based on a review of existing CQI processes with the goal of eliminating duplications and ineffective activities and adding or strengthening activities identified to inform and improve practice. Systematic themes will be identified at the unit, supervisor, and worker levels to inform improvement for practice, policy and training for case planning and services.</p>

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<p>16. The RED team framework has provided the agency with a common language and lens through which to review cases and make clinical practice determinations. By August 31, 2016, CFSA will identify resources needed to utilize the framework and instruct, coach, and develop workers and supervisors across the system, including the private agencies, to improve clinical practice, case planning, and services.</p> <p>17. By June 30, 2016, CFSA will refine the referral process for Project Connect (a family preservation service that works with high-risk families involved with the child welfare system that are affected by parental substance abuse) and Homebuilders (a family intensive preservation service that provides in-home crisis intervention, counseling, and life-skills education for applicable families) by expanding eligibility to include in-home families that experience substance abuse and/or chronic neglect. CFSA will train staff on new practices by August 31, 2016. CFSA will continue to provide Project Connect staff on-site access each week and will continue to track referrals, utilization, and modify protocols as needed to improve utilization.</p> <p>18. CFSA will assemble a team by May 2016 to assess the effectiveness of the new case planning process to include implementation of the CAFAS/PECFAS, danger and safety assessment, caregiver strength and barriers assessment, and behaviorally-based case planning. CFSA will analyze available data, determine the barriers to workers completing the new case plan (including private agency and CFSA line worker feedback), and develop corresponding solutions and strategies for full implementation. A QA/QI process will be used to provide feedback on use of the tool and training will be provided to private agency and CFSA workers identified as needing additional support by December 31, 2016.</p>

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		19. By August 31, 2016, Community Partnerships will designate two in-home units staffed by trained workers to provide supports and services for families identified as experiencing chronic neglect. ¹
	Health and Dental Care (distribution of Medicaid cards) [Exit Standard 22(d)]	20. The Placement Administration will continue to monitor the distribution of Medicaid numbers and cards by (a) following up each week to ensure the number and card are provided to foster parents when there has been a new placement or re-placement and (b) verifying that the Medicaid number is in FACES.NET so that any foster parent who uses the foster parent app will have immediate access to the number. Additionally, CFSA has engaged the Office of the Deputy Mayor to develop a longer term strategy to provide Medicaid cards to caregivers to be implemented by December 31, 2016.
Temporary Safe Haven	Visitation [Exit Standards 4(c), 5(d), 6, 10, 11]	21. By May 31, 2016, CFSA and private agency managers and supervisors will participate in a "Managing with Data" training, which utilizes BIRST. The training will aid program managers and supervisors to review data to determine that visits occur timely and are documented appropriately. 22. By April 30, 2016, CFSA will identify specific skill areas related to engagement of families during worker visitation that need to be addressed through training. Agency Performance and CWTA will identify the areas based on the results of prior case reviews and reports and by conducting a survey of private agency and CFSA social workers and supervisors. By July 31, 2016, CWTA will coordinate with Agency Performance to modify

¹ The chronic neglect unit is characterized by: Strengths Based & Solution Focused, Fidelity to these models, Reduced caseload of 6-8 Families, Cases are open 12-18 months, Social Worker meets with the family at least once per week, Contact primary caretaker at least twice per week, Involvement of Nurse Care Managers, Co-Located DBH Staff, and Family Peer Coaches and Collaborative as appropriate.

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<p>existing training curricula and obtain contracted training to address the identified needs to enhance workers skills in the engagement of families identified to receive services. The training will be begin by August 1, 2016.</p> <p>23. Agency Performance will continue to share findings from the safety assessment case review process with management on a quarterly basis. Beginning in April 2016, and on a quarterly basis, Agency Performance and CWTA will schedule targeted peer-to-peer supervisor sessions based on performance. High performing supervisors will share successful strategies to enhance performance and the quality of the documentation for the assessment of safety during worker visits to children.</p>
	<p>Placement of Children in Most Family-Like Setting [Exit Standard 8(b)]</p> <p>Resource Development Plan [Exit Standard 23]</p>	<p>24. By September 30, 2016, CFSA will identify evidence-based, trauma informed foster care models that provide sufficient support to both foster children and foster parents. , CFSA will issue a Request for Proposals to implement the identified models in the first quarter of FY 2017.</p> <p>25. By April 30, 2016, CFSA will enhance the current placement matching database to allow provider agencies to update the status of bed availability on a daily basis. Additionally, by May 31, 2016, the database will be in use to support matching and placing children in the most appropriate setting. The Placement Administration in consultation with Agency Performance will continue to monitor the database and its implementation.</p> <p>26. CFSA will continue to use social media, advertising, community outreach, and one-on-one informational sessions to recruit resource parents. On a quarterly basis, CFSA will evaluate the effectiveness of the recruiting, marketing, and outreach strategies and will share this information with the private providers to strengthen collaboration and development of a robust placement continuum.</p>

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<p>27. Beginning April 2016, the Principal Deputy Director and Deputy for Program Operations will establish a foster parent buddy system where each prospective foster parent will be assigned a resource worker as a buddy to participate in pre-service training and assist through the process of training and placement. The worker will be their point of contact for all issues regarding CFSA. This should facilitate better communication and problem solving.</p> <p>28. The Principal Deputy Director and the Contract Administrator will revise the scope of work by April 30, 2016 and negotiate contract modifications with current family-based providers for children/youth in need of traditional, therapeutic, and specialized placement, including homes for pregnant youth, medically fragile, developmentally disabled, and older youth to enhance flexibility to:</p> <ul style="list-style-type: none"> a. Develop process for child specific recruitment, with funding and planning initiated and monitored for 60 days; b. Fund bed hold stays to allow youth on abscondance to return to same placement; and, c. By May 2016, CFSA will review incentive plans and per diem rates and their impact on recruitment, retention, and stability to inform policy and FY2017 contract changes. <p>29. By May 31, 2016, under the guidance and direction of the Principal Deputy Director and Placement Administrator, CFSA will seek to increase kinship care resources as an initial and ongoing placement options by completing the following action steps:</p> <ul style="list-style-type: none"> a. Develop protocols to ensure that staff has exhausted possible avenues to identify, locate, and engage extended family options for children before they are placed in non-relative foster care.

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
		<ul style="list-style-type: none"> b. Implement a policy of "full disclosure" to ensure that all prospective kinship caregivers are educated about the full range of options available to them for care and support of children. c. Ensure that we have the full range of tools needed to assess and approve relative homes in a timely manner. The Deputy for Program Operations will review the current kinship process and develop additional training materials as needed. d. Provide foster parent training that is relevant to the needs of prospective kinship foster parents. CFSA will continue to use the kinship specific training model that will be augmented with additional information about child development and access to mental health support services. e. Ensure that kinship parents have access to the full range of services and supports to stabilize the placement(s) and ensure child safety and well-being. <p>30. When all other placement options have been explored, CFSA will utilize emergency beds contracted through Sasha Bruce Youthwork where a youth may stay for up to 30 days until a more suitable placement is secured. All placements in this facility will require approval by the Placement Administrator or the Deputy Director for Program Operations and be monitored on a weekly basis to assure that an appropriate alternative is being developed.</p> <p>31. By June 30, 2016, CFSA will complete the 2016 Resource Development Plan that addresses the agency's placement and support services required for the population served. The plan will include a comprehensive analysis of placement requirements and support services for foster and kinship parents.</p>

Strategic Framework ("Four Pillars")	<i>LaShawn</i> Requirements	<i>LaShawn</i> Strategies
Exit to Permanence	Timely adoption (Timely Permanence to include reunification, adoption and guardianship) [Exit Standard 16]	<p>32. In January and February 2016, CFSA completed the process of reviewing permanency cases managed by CFSA. The information from those reviews is used to inform plans to expedite permanency that are reviewed in 30-60-90 day intervals. CFSA will conduct the same exercise with the private agencies to be completed by August 31, 2016. CFSA will continue to review permanency data on a quarterly basis to identify and resolve systemic barriers as well as to provide targeted management to workers and staff who need additional coaching.</p> <p>33. CFSA will complete the modification of the performance-based contracting tool used by the contract monitors. The modifications will focus on, but not limited to, positive permanency outcomes. The process to modify the tool will include obtaining feedback from the private agencies as well as from CASEY Family programs. The modified tool will be finalized by July 31, 2016. The contract monitoring staff will be trained and begin utilizing the tool by September 30, 2016.</p>

APPENDIX C

Amendments to LaShawn 2016 Strategy Plan

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency



June 22, 2016

By Electronic Mail

Judith Meltzer
Court Monitor
Center for the Study of Social Policy
1575 Eye Street, N.W.
Washington, DC 20005
Judith.Meltzer@cssp.org

Re: 2016 Strategy Plan Status Update

Dear Judy:

My staff reported that they had a very productive meeting with you and our counsel on June 13, 2016. As a follow-up to that meeting, please accept this notice as our proposed changes to the 2016 Strategy Plan (2016 Plan). I want to assure you that CFSA has completed and/or is on track in meeting most of the deadlines outlined in the 2016 Plan. Those 2016 Plan Items include Nos.: 1-3, 5-9, 13-15, 17-26, 28, 30-31 and 33. However, after thorough analysis and assessment, CFSA has determined that there are a number of deadlines and 2016 Plan Items that require slight modification. CFSA proposed modifications are as follows:

I. Managing with Data Training (2016 Plan Item #4)

CFSA substantially completed the mandatory "Managing with Data" training for Child Protection Services (CPS) managers and supervisors by May 31, 2016. However, a small number of managers and supervisors (approximately six (6)) still need to be trained due to scheduled and unscheduled leave. CFSA will provide make-up training for those staff members by **mid-July 2016** and will provide refresher training for all applicable staff as needed.

II. Administrative Issuance (AI) on Community Papering (2016 Plan Item #10)

Pursuant to the 2016 Plan, CFSA planned to reissue the AI on Community Papering in order to provide guidance and training to program areas and workers so that workers and supervisors fully understand the criteria to community paper cases and their roles in the process by April 30, 2016. Unfortunately, CFSA was unable to comply by the April 30, 2016 deadline. Rather than simply clarifying the existing policy, CFSA determined that the AI on Community Papering required some level of procedural redesign and required the input of various stakeholders from CFSA and the Attorney General's Office. This additional level of analysis required additional time for CFSA to plan, obtain and incorporate the necessary feedback. The AI on Community Papering was finalized on June 17, 2016 and has been issued. CFSA recognizes that the notification regarding the AI on Community Papering proposed deadline change is untimely and apologizes for the delay. CFSA is committed to improving communication with you and in the future will timely notify you of any proposed Plan modifications when necessary.

III. Review of Cases Presented for Community Papering (2016 Plan Item #11)

Pursuant to the 2016 Plan, CFSA planned to review all cases presented for community papering, strategize regarding problematic cases, and identify themes and concerns for resolution. CFSA meets with the Office of the Attorney General on a monthly basis to review community papering cases to evaluate trends and program processes. Since the AI on Community Papering was recently issued as discussed in Section II above, CFSA proposes that by **July 2016**, it will begin conducting monthly reviews of cases presented for community papering. Any review of cases presented for community papering will be consistent with the enhanced process that is outlined in the AI for Community Papering.

IV. Elimination of the Floater Unit (2016 Plan Item #12)

CFSA created the Floater Unit (Unit) in order to provide additional team support and staffing in CPS and other agency programs as a temporary workforce solution due to turnover and employees on medical and paid family leave. While the unit provided initial supplemental support it was not the best solution for continuity of investigations. Also, unfortunately two of the five (5) unit employees were out on long-term leave. Since the Unit was unable to provide the required workload support, a decision was made to transition remaining members (based on skills) of the Unit to CPS (one (1) Social Worker) and back to In-Home (two (2) Social Workers now assigned to the Chronic Neglect unit). In the interim, CPS has worked with Human Resources to overstaff three (3) to four (4) positions in the pipeline to abate the normal hiring and training timeframe when turnover occurs. CFSA conducted a thorough examination of our administrative, clinical and caseload factors affecting CPS workers and determined that additional staff is necessary to ensure that CPS caseloads and workload demands are effectively managed. As a result of that analysis and the transition of the Floater Unit, I plan to hire additional staff for the CPS unit within the next 45 to 60 days.

V. Worker and Supervisor Training (2016 Plan Item #16)

CFSA planned to identify resources needed to utilize a common language and lens framework developed by the RED team in order to instruct, coach and develop workers and supervisors across the system, including the private agencies, to improve clinical practice, case planning and services by August 31, 2016. CFSA is unable to comply with the August 31, 2016 deadline due to the fact that additional time is needed to provide training to the workers and supervisors during the summer months. CFSA proposes a new deadline of an additional thirty (30) days to **September 30, 2016** to provide training to the workers and supervisors. The additional thirty (30) days is necessary in order to account for summer vacation schedules.

VI. Foster Parent Buddy System (2016 Plan Item #27)

Pursuant to the 2016 Plan, CFSA was tasked with establishing a foster parent buddy system by April 2016, where each prospective foster parent will be assigned a resource worker as a buddy to participate in pre-service training and assist through the process of training and placement. CFSA is currently working on the organization and alignment of staff that will serve as the resource workers for foster parents participating in the Foster Parent Buddy System. CFSA

proposes that by **July 31, 2016**, it will complete the organization and alignment of staff and will implement the Foster Parent Buddy System by **August 31, 2016**.

VII. Kinship Care Resources (2016 Plan Item #29)

Pursuant to the 2016 Plan, CFSA intended to take steps to increase kinship care resources as an initial and ongoing placement option by May 31, 2016. CFSA has begun, but has not yet completed this strategy. CFSA is currently taking the necessary steps to increase kinship care resources and proposes that we will comply by **August 31, 2016**.

VIII. Permanency Cases Managed by Private Agencies (2016 Plan Item #32)

In January and February 2016, CFSA completed the process of reviewing permanency cases managed by CFSA. The information from those reviews is used to inform plans to expedite permanency that are reviewed in 30-60-90 day intervals. Pursuant to the 2016 Plan CFSA intended to conduct the same exercise with the private agencies to be completed by August 31, 2016. CFSA has determined that this undertaking is more monumental than we initially anticipated. CFSA intends to begin its process of reviewing permanency cases managed by private agencies by the beginning of **August 2016** and proposes completion by **October 31, 2016**.

I appreciate your continued cooperation and support. Should you have any questions about our comments, proposed deadlines, any of the 2016 Plan Items or if you want the contents of this document memorialized in CFSA's Modifications to the 2016 Strategy Plan form, please do not hesitate to contact me or Mary C. Williams.

Sincerely,



Raymond C. Davidson
Director

Copies to:

Brenda Donald, Deputy Mayor for Health and Human Services
Richard Love, Senior Assistant Attorney General
Toni Jackson, Section Chief, Equity
Esther Yong McGraw, Assistant Attorney General
Amanda Montee, Assistant Attorney Counsel
Mary C. Williams, Director of Agency Performance
Cory M. Chandler, General Counsel
Nicola N. Grey, Deputy General Counsel

GOVERNMENT OF THE DISTRICT OF COLUMBIA
Child and Family Services Agency



September 30, 2016

By Electronic Mail

Judith Meltzer
Court Monitor
Center for the Study of Social Policy
1575 Eye Street, N.W.
Washington, DC 20005
Judith.Meltzer@cssp.org

Re: **2016 Strategy Plan Status Update**

Dear Judy:

Please accept this notice of our proposed changes to the 2016 Strategy Plan (2016 Plan). CFSA has completed and continues to be on track in meeting the majority of the deadlines outlined in the 2016 Plan. Those 2016 Plan Items include Nos.: 1-4, 6-23, 25-26, and 28-33. However, after thorough analysis and assessment, CFSA has determined that there are a few deadlines and 2016 Plan Items that require slight modification. CFSA's proposed modifications are as follows:

I. 10/15 RED Team Meetings (2016 Plan Item #5)

Pursuant to the 2016 Plan, each Monday through Thursday at the 10/15 Day R.E.D. Team meetings, team members review five investigations/assessments and identify the action steps necessary to progress towards timely closure. After assessing this process, in an effort to best utilize our resources, the team also reviews in-home case transfers during these meetings. CFSA proposes as a new strategy for Item #5 to formalize the integration of the Consultation and Information Sharing Framework into the supervisory practice and process. CFSA plans to implement this new supervisory strategy during **FY 2017 First Quarter** with the goal of utilizing the Consultation and Information Sharing Framework. This process should yield similar results. In the long run, this process will be more efficient and effective as it will serve as training and coaching opportunities for CFSA's supervisors and staff and will help strengthen and foster the supervisor/staff interaction as this process is imbedded in the supervisory practice. In addition, this modified process will improve and increase critical thinking and the quality of the investigations/assessments as cases are brought to timely closure.

II. Foster Care Models (2016 Plan Item #24)

Pursuant to the 2016 Plan, CFSA has been engaged in a thoughtful and deliberate process to determine which evidence-based, trauma informed foster care model(s) will meet the needs of the children and youth in the DC foster care system. CFSA's leadership team members engaged in discussions with the implementers in other jurisdictions and convened the leadership team to discuss the pros and cons of various foster care models. CFSA intends to discuss the models

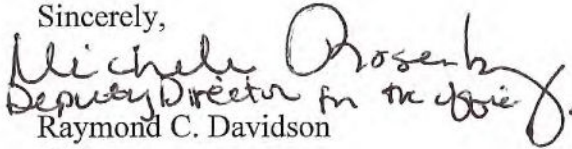
with the private providers and CFSA's management team in October 2016 to also obtain input on the pros, cons and implications. CFSA plans to identify evidence-based, trauma informed foster care models by **October 31, 2016**, and develop an implementation plan to identify target deliverables by **November 30, 2016**. It is estimated that a Request for Proposal will be issued to implement the identified models during the **FY 2017 Fourth Quarter**.

III. Foster Parent Buddy System (2016 Plan Item #27)

Pursuant to the 2016 Plan, CFSA was tasked with establishing a foster parent buddy system by April 2016, where each prospective foster parent will be assigned a resource worker as a buddy to participate in pre-service training and assist through the process of training and placement. In June 2016, CFSA modified the deadline to August 31, 2016. CFSA did complete the organization and alignment of staff and will implement the Foster Parent Buddy System by August 31, 2016. CFSA will begin training in October 2016 and plans to complete training by December 2016. CFSA intends to implement the Foster Parent Buddy System by **January 31, 2017**, with CFSA's first Foster Buddy Cohort.

Lastly, we are requesting a status of the Resource Development Plan (RDP) and would like to know when you intend to file. I appreciate your continued cooperation and support. Should you have any questions about our comments, proposed deadlines, any of the 2016 Plan Items or if you want the contents of this document memorialized in CFSA's Modifications to the 2016 Strategy Plan form, please do not hesitate to contact me or Mary C. Williams.

Sincerely,


Deputy Director for the Office of Policy, Planning and Program Support
Raymond C. Davidson
Director

Copies to:

Brenda Donald, Deputy Mayor for Health and Human Services
Richard Love, Senior Assistant Attorney General
Toni Jackson, Section Chief, Equity
Esther Yong McGraw, Assistant Attorney General
Amanda Montee, Assistant Attorney Counsel
Mary C. Williams, Director of Agency Performance
Cory M. Chandler, General Counsel
Nicola N. Grey, Deputy General Counsel

APPENDIX D

CFSA Organizational Chart as of November 7, 2016

CHILD AND FAMILY SERVICES AGENCY-OVERVIEW

