

EXECUTIVE SUMMARY
Final Report: Virginia Child and Family Services Review
December 2009

INTRODUCTION

This document presents a summary of the findings of the Child and Family Services Review (CFSR) for the State of Virginia. The CFSR is the Federal Government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. The CFSR is authorized by the Social Security Amendments of 1994 requiring that the U.S. Department of Health and Human Services (HHS) promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau of the Administration for Children and Families within HHS.

The Virginia CFSR was conducted the week of July 13, 2009. The period under review for the onsite case review process was from April 1, 2008, through July 17, 2009. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Virginia Department of Social Services (VDSS), the Division of Family Services (DFS)
- The State Data Profile, prepared by the Children's Bureau, which provides the State's child welfare data for the 12-month CFSR target period ending March 31, 2008
- Reviews of 65 cases (40 foster care and 25 in-home services cases) at three sites: 31 cases in Fairfax County, 17 cases in Hampton City, and 17 cases in Tazewell County
- Interviews and focus groups (conducted at all three sites and at the State level) with stakeholders including, but not limited to, children, youth, parents, foster and adoptive parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, child advocates, and attorneys

Background Information

The CFSR assesses State performance with regard to its substantial conformity with seven child and family outcomes and seven systemic factors. For the outcome assessments, each outcome incorporates one or more of the 23 items included in the review, and each item is rated as a Strength or Area Needing Improvement based on the results of the case reviews. An item is assigned an overall rating of Strength if 90 percent or more of the applicable cases reviewed were rated as a Strength. The evaluation options for these outcomes are "substantially achieved," "partially achieved," or "not achieved." For a State to be in substantial conformity with a particular outcome, 95 percent or more of the cases reviewed must be rated as having substantially achieved the outcome. Two outcomes—Safety Outcome 1 and Permanency Outcome 1—also are evaluated based on State performance with regard to six national

data indicators. For a State to be in substantial conformity with these outcomes, both the national standards for each data indicator and the case review requirements must be met.

There are 22 items that are considered in assessing the State’s substantial conformity with the seven systemic factors. Each item reflects a key Federal program requirement relevant to the Child and Family Services Plan (CFSP) for that systemic factor. An item is rated as a Strength or an Area Needing Improvement based on whether State performance on the item meets the Federal program requirements. A determination of the rating is based on information provided in the Statewide Assessment and from interviews with stakeholders held during the onsite CFSR. Additional information may come from other Federal reports or assessments.

Overall performance on each systemic factor is based on the ratings for the individual items incorporated in the systemic factor. For any given systemic factor, a State is rated as being either “in substantial conformity” with that factor (a score of 3 or 4) or “not in substantial conformity” with that factor (a score of 1 or 2). Specific requirements for each rating are shown in the table below.

Rating the Systemic Factor

Not in Substantial Conformity		In Substantial Conformity	
1	2	3	4
None of the CFSP or program requirements is in place.	Some or all of the CFSP or program requirements are in place, but more than one of the requirements fail to function as described in each requirement.	All of the CFSP or program requirements are in place, and no more than one of the requirements fails to function as described in each requirement.	All of the CFSP or program requirements are in place and functioning as described in each requirement.

A State that is not in substantial conformity with a particular outcome or systemic factor must develop and implement a Program Improvement Plan to address the areas of concern associated with that outcome or systemic factor.

Because many changes were made in the CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State’s performance in the second round of the CFSR is not directly comparable to its performance in the first round. Key changes in the process that make comparing performance difficult across reviews are the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to increase consistency and to ensure an assessment of critical areas such as child welfare agency efforts to involve noncustodial parents

Key CFSR Findings Regarding Outcomes

The 2009 CFSR identified the following areas of high performance with regard to the State's performance in achieving the outcomes assessed during the review:

- Items pertaining to repeat maltreatment, foster care reentry, proximity of children's placements to parents, placement with siblings, and the physical and dental health of children were rated as a Strength for the State.
- The State met the national standards for the data indicators pertaining to the absence of recurrence of maltreatment within 6 months, the absence of maltreatment of children in foster care by their foster parents or a facility staff member, and the stability of placements for children in foster care.

Although the State's performance on Well-Being Outcome 3 (Children receive services to meet their physical and mental health needs) did not meet the required 95-percent level for substantial conformity, performance on this outcome was fairly high with the outcome being substantially achieved in 86.7 percent of the cases. In addition, although the State's performance on the items pertaining to preserving children's connections and addressing children's mental and behavioral health concerns did not reach the 90-percent level required for an overall rating of Strength, at least 85 percent of the cases reviewed were rated as a Strength for these items.

In addition to these positive CFSR findings, HHS acknowledges the efforts VDSS is making to bring about systems change through the statewide implementation of the Virginia Children's Services System Transformation (Transformation) initiative. The mission of the Transformation is to strengthen permanent family connections for children and youth by transforming how services are delivered. The objectives are to increase the number and rate at which youth in foster care move into permanent family arrangements, decrease the use of congregate care by increasing the number of children and youth placed with relatives and foster parents, and devote more resources to community-based care.

Through this initiative, VDSS has increased the emphasis on managing by data; developed a practice model to serve as a framework for systems change; increased capacity to recruit, develop, and support foster and adoptive parents; and focused on building capacity and improving the agency's infrastructure.

The State is concentrating on the following:

- Identifying best practices in family engagement
- Implementing a formal model that is specific to Virginia
- Providing support to local agencies on policy and regulation
- Developing external partnerships, improving communication, and realigning the agency's structure to support the Transformation

These practices have served as the basis for the State's coordinated approach to the Statewide Assessment and the CFSP and also will serve as the structure for its Program Improvement Plan.

The CFSR also identified the following concerns with regard to the State's performance in achieving the desired outcomes for children and families:

- The State was not in substantial conformity with Permanency Outcome 1 (Children have permanency and stability in their living situation) with the outcome substantially achieved in only 35 percent of the applicable cases.
- The State was not in substantial conformity with Well-Being Outcome 1 (Families have enhanced capacity to provide for children's needs) with the outcome substantially achieved in only 43.1 percent of the nine cases reviewed.
- The State was not in substantial conformity with Safety Outcome 1 (Children are, first and foremost, protected from abuse and neglect) with the outcome substantially achieved in only 53.3 percent of the applicable cases.
- Item 9 pertaining to the timeliness of adoptions was rated as a Strength in only 33 percent of applicable cases.
- Item 17 pertaining to assessing and addressing the service needs of the child, parents, and foster parents was rated as a Strength in only 46 percent of the cases.
- The State did not meet the national standards for the data indicators pertaining to the timeliness and permanency of reunifications, the timeliness of adoptions, and permanency for children in foster care for extended time periods.

The State's low performance with regard to these CFSR outcomes and national data standards may be attributed in part to the following key factors:

- Although the State child welfare agency made concerted efforts in the past 5 years to improve policy and practice with regard to establishing training requirements for caseworkers and supervisors, the agency was unable to gain approval for these changes from the State Board of Social Services. As a result, the State does not ensure consistency in the delivery of ongoing training for caseworkers and supervisors.
- Poorer performance in the in-home services cases compared to the foster care cases indicates that the State may not be placing enough emphasis on family preservation.
- The lack of a fully implemented quality assurance (QA) system prevents the State from monitoring and ensuring consistency in practice across local departments of social services (LDSS).

Key CFSR Findings Regarding Systemic Factors

With regard to systemic factors, Virginia is in substantial conformity with the systemic factor pertaining to Agency Responsiveness to the Community. The State is not in substantial conformity with the systemic factors pertaining to Statewide Information System; Case Review System; QA System; Staff and Provider Training; Service Array and Resource Development; and Foster and Adoptive Parent Licensing, Recruitment, and Retention.

Specific findings on the State's performance on safety and permanency outcomes are presented in table 1 at the end of this Executive Summary. Findings regarding well-being outcomes are presented in table 2. Table 3 presents the State's performance with regard to the

seven systemic factors assessed through the CFSR. In the following section, key findings are summarized for each outcome and systemic factor. Information also is provided about the State's performance on each outcome and systemic factor during the Federal fiscal year 2003 CFSR.

I. KEY FINDINGS RELATED TO OUTCOMES

Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect

Safety Outcome 1 incorporates two items. One pertains to the timeliness of initiating a response to a child maltreatment report (item 1), and the other relates to the recurrence of substantiated or indicated maltreatment within a 6-month time period (item 2). Safety Outcome 1 also incorporates two national data indicators for which national standards have been established. These data indicators measure the absence of maltreatment recurrence and the absence of maltreatment of children in foster care by foster parents or facility staff.

Virginia is not in substantial conformity with Safety Outcome 1. The outcome was substantially achieved in 53.3 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 43 percent of applicable Fairfax County cases, 60 percent of applicable Hampton City cases, and 67 percent of applicable Tazewell County cases. However, the State met the national standards for the data indicators pertaining to the absence of maltreatment recurrence within 6 months and the absence of maltreatment of children in foster care by foster parents or facility staff.

In the majority of case reviews for the 2009 CFSR there was an absence of maltreatment recurrence within a 6-month period. However, those reviews also found that the agency was not consistent in initiating a response to a maltreatment report within the timeframes established by State policy, even when the reports were prioritized as high risk. In addition, concerns were raised regarding the lack of State time requirements for establishing face-to-face contact with the children reported as the alleged victims of maltreatment.

Virginia also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The key concern identified in the 2003 review was that the agency was not consistent in its efforts to initiate an investigation of a maltreatment report and/or establish face-to-face contact with the child subject of a maltreatment report in accordance with State or local required timeframes. To address the identified concern, Virginia implemented the following strategies in its Program Improvement Plan:

- Established statewide requirements regarding minimum timeframes for initiating a response to reports of abuse or neglect
- Implemented a pilot program incorporating policies and tools related to the acceptance and prioritization of reports of maltreatment in 30 local agencies

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate

Performance on Safety Outcome 2 is assessed through two items. One item (item 3) assesses State efforts to prevent children's removal from their homes by providing the family with services to ensure children's safety while they remain in their homes. The other item (item 4) assesses efforts to manage safety and reduce risk of harm to children in their own homes and in their foster care placements.

Virginia is not in substantial conformity with Safety Outcome 2. The outcome was substantially achieved in 69.2 percent of the cases reviewed. This percentage is less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 77 percent of applicable Fairfax County cases, 59 percent of applicable Hampton City cases, and 65 percent of applicable Tazewell County cases.

The 2009 CFSR case reviews found that, in many cases, the agency was effective in providing services to the family to prevent the child's removal from the home and in conducting initial and ongoing risk and safety assessments to ensure the child's safety.

However, the 2009 CFSR also identified the following concerns in many of the cases reviewed:

- Children remaining in their own homes continued to be at risk either because services were not provided, or the services that were provided did not target the key safety concerns.
- There was a lack of initial and ongoing safety and risk assessments.
- Children in foster care were at risk during visitation with parents due to insufficient monitoring.

Virginia also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The following concerns were identified in the 2003 review:

- The State closed cases when the parent refused to comply with services although the child was still at risk.
- The State was not consistent in its efforts to reduce the risk of harm to children.
- There were no safety assessments in some cases or the safety assessment was not sufficiently comprehensive to capture critical family issues relevant to the child's safety, such as domestic violence.

To address these concerns Virginia implemented the following strategies in its Program Improvement Plan:

- Developed and implemented training for local Child Protective Services (CPS) and foster care staff on the knowledge and skills needed to engage families effectively in safety and risk assessment and reassessment
- Piloted a Structured Decision Making (SDM) assessment of risk of harm to children living in their own homes in 30 agencies
- Clarified policy related to the management of CPS in-home services cases, including policy regarding the intensity of service provision and the frequency of caseworker contacts based on risk

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Permanency Outcome 1: Children have permanency and stability in their living situations

Six items are incorporated in the assessment of Permanency Outcome 1, although not all of them are relevant for all of the foster care cases reviewed. The items pertain to State efforts to prevent foster care reentry (item 5), ensure placement stability for children in foster care (item 6), and establish appropriate permanency goals for children in foster care in a timely manner as well as seeking termination of parental rights (TPR) in accordance with the requirements of the Adoption and Safe Families Act (ASFA) (item 7). Depending on the child's permanency goal, the remaining items focus on an assessment of State efforts to achieve permanency goals (such as reunification, guardianship, adoption, or permanent placement with relatives) in a timely manner (items 8 and 9), or to ensure that children who have a case goal of other planned permanent living arrangement (OPPLA) are in stable long-term placements and are adequately prepared for eventual independent living (item 10).

Virginia is not in substantial conformity with Permanency Outcome 1. The outcome was substantially achieved in 35 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 30 percent of Fairfax County cases, 40 percent of Hampton City cases, and 40 percent of Tazewell County cases. In addition to case review findings, Virginia did not meet the national data indicators pertaining to timeliness and permanency of reunification, timeliness of adoptions, and permanency for children in foster care for extended time periods. However, the State met the national standard for the national data indicator pertaining to placement stability.

The 2009 CFSR case reviews found that foster care reentry was a rare occurrence, and that, in most cases, children experienced placement stability while in foster care. However, the 2009 CFSR also identified the following concerns in many of the cases reviewed:

- The child's permanency goal was either not appropriate or not established in a timely manner.
- The agency had not sought TPR in accordance with the requirements of ASFA.
- There was a lack of concerted effort to achieve reunification with parents or relatives in a timely manner.
- There were agency delays in achieving adoptions in a timely manner as well as delays due to appeals of TPR decisions.

Virginia also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The following key concerns were identified in the 2003 review:

- The State was not consistent in its efforts to ensure children's placement stability while in foster care.
- The State was not consistent in establishing permanency goals in a timely manner, and permanency goals were not always appropriate to meet the needs of the child.
- The State was not consistent in its efforts to attain the goal of reunification in a timely manner.
- The State was not consistent in achieving finalized adoptions in a timely manner due to both agency- and court-related barriers.

To address the identified concerns, the State implemented the following strategies:

- Submitted regulations to mandate pre-service and in-service training for resource parents, foster parents, and adoptive parents to prepare families to meet the needs of children entering foster care
- Developed and implemented strategies to strengthen the screening and assessment of children's needs to improve placement matches
- Piloted concurrent planning to ensure that appropriate permanency goals are selected and achieved for children in a timely manner
- Established a process for filing petitions for TPR simultaneously with petitions for an initial permanency planning hearing to change the goal to adoption or to document, in Virginia's On-Line Automated Services Information System (OASIS), the reasons for not pursuing termination
- Piloted SDM tools in the decision-making process for reunification in 30 localities
- Promulgated regulations and developed policy to allow for dual approval of resource parents, foster parents, and adoptive parents
- Developed Progress to Excellence Reports as a management tool for assessing efforts to expedite adoptions and ensure timely documentation of final orders of adoption and other actions
- Collaborated with the Court Improvement Program to identify child welfare best practices and issues influencing timely permanency for children in foster care, and educate agency and court staff about these practices and issues

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Permanency Outcome 2: The continuity of family relationships and connections is preserved for children

Permanency Outcome 2 incorporates six items that assess State performance with regard to placing children in foster care near their parents and close relatives (item 11); placing siblings together (item 12); ensuring frequent visitation between children and their parents and siblings in foster care (item 13); preserving connections of children in foster care with extended family, community, cultural heritage, religion, and schools (item 14); seeking relatives as potential placement resources (item 15); and promoting relationships between children and their parents while the children are in foster care (item 16).

Virginia is not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 66.7 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 65 percent of Fairfax County cases, 50 percent of Hampton City cases, and 89 percent of Tazewell County cases.

The 2009 CFSR case reviews found that the State was effective in regard to placing children near their parents and placing siblings together in foster care, and, in many cases, the State made concerted efforts to ensure that the connections of children in foster care were maintained. However, the 2009 CFSR also identified the following concerns in many of the cases reviewed:

- The frequency and quality of visitation between children in foster care and their parents and siblings were insufficient to meet the needs of the children and families.
- The agency had not made concerted efforts to search for either maternal or paternal relatives as potential placement resources.
- The agency had not made concerted efforts to support the child's relationship with the mother or father while the child was in foster care.

Virginia also was not in substantial conformity with Permanency Outcome 2 during its 2003 CFSR and was required to address this outcome in its Program Improvement Plan. The following concerns were identified in the 2003 review:

- The State was not consistent in ensuring sufficient visitation for children in foster care with their parents.
- The State was not consistent in supporting the relationship of children in care with either their mothers or fathers or in preserving the child's connections to extended family.
- The State was not consistent in seeking or assessing either maternal or paternal relatives as placement resources.

To address the identified concerns, the State implemented the following strategies in its Program Improvement Plan:

- Established guidelines and best practice strategies for visits among children in foster care and their parents and siblings
- Increased the involvement of resource parents, foster parents, and adoptive parents in facilitating contact among children in foster care and their parents and siblings
- Strengthened policies and practices on preserving connections for children in foster care such as statewide use of Life Books
- Developed and used a Relative Identifier form to expedite the identification and location of relatives as placement options for children entering foster care
- Developed State guidance and implemented collaborative efforts with the VDSS Division of Licensing Programs to promote increased contact between children in foster care and their parents through venues such as e-mail and phone calls as well as visitation

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs

Well-Being Outcome 1 incorporates four items. One item pertains to State efforts to ensure that the service needs of children, parents, and foster parents are assessed and that the necessary services are provided to meet identified needs (item 17). A second item examines State efforts to actively involve parents and children (when appropriate) in the case planning process (item 18). The two remaining items examine the frequency and quality of caseworker contacts with the children in their caseloads (item 19) and with the children's parents (item 20).

Virginia is not in substantial conformity with Well-Being Outcome 1. The outcome was substantially achieved in 43.1 percent of cases. This percentage is less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 45 percent of Fairfax County cases, 41 percent of Hampton City cases, and 41 percent of Tazewell County cases. In addition, the outcome was substantially achieved in 52.5 percent of the 40 foster care cases and 28 percent of the 25 in-home services cases.

The 2009 CFSR case reviews found that in general, the agency was effective in assessing and meeting the service needs of foster parents and children in foster care. However, the 2009 CFSR also identified the following concerns in many of the cases reviewed:

- The agency did not make concerted efforts to assess and address the service needs of mothers and/or fathers in both the foster care and in-home services cases.
- The agency did not make concerted efforts to involve children, mothers, and fathers in case planning in both the foster care and in-home services cases, although children in the foster care cases were slightly more likely to be involved than children in the in-home services cases.
- The frequency and quality of caseworker visits with children, particularly children in the in-home services cases, were not sufficient to ensure the child's safety and well-being.
- The frequency and quality of caseworker visits with parents were not sufficient to monitor the safety and well-being of the child or promote attainment of case goals.

Virginia also was not in substantial conformity with Well-Being Outcome 1 during its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. The following concerns were identified in the 2003 review:

- The State was not consistent in its efforts to assess needs and provide services to children, parents, and foster parents.
- The State was not consistent in its efforts to ensure that caseworker's face-to-face contacts with children and their parents were of sufficient frequency and quality to meet the needs of children and families.
- The State was not consistent in its efforts to involve children and parents in case planning.

To address the identified concerns, the State took the following measures:

- Developed practices designed to strengthen assessment of needs for children and parents, including SDM
- Developed practices designed to strengthen service planning for children, parents, and resource parents
- Developed and implemented standardized training for caseworkers focusing on improving the assessment of the needs of foster parents, and developed ongoing peer support groups to address those needs
- Revised policy to reinforce the involvement of parents in case planning and trained agency staff on the new policy
- Developed and implemented training on strength-based interviewing
- Developed and implemented policies to increase caseworker contacts with children and parents
- Developed a tool to guide caseworkers in making quality face-to-face contacts with children

Well-Being Outcome 2: Children receive appropriate services to meet their educational needs

Only one item is incorporated under Well-Being Outcome 2. It pertains to State efforts to assess and meet the educational needs of children in foster care and, when relevant, children in the in-home services cases (item 21).

Virginia is not in substantial conformity with Well-Being Outcome 2. The outcome was substantially achieved in 83.0 percent of the 47 applicable cases. This percentage is less than the 95 percent required for substantial conformity. The outcome was substantially achieved in 95 percent of Fairfax County cases, 75 percent of Hampton City cases, and 75 percent of Tazewell County cases. Also, the outcome was substantially achieved in 92 percent of the 36 applicable foster care cases and 55 percent of the 11 applicable in-home services cases.

The 2009 CFSR case reviews found that in general, the educational needs of children in foster care were being appropriately and adequately assessed and addressed. However, in several of the applicable in-home services cases, educational needs were not assessed or addressed, although education-related concerns were apparent and a reason for agency contact.

Virginia was in substantial conformity with Well-Being Outcome 2 during its 2003 CFSR and was not required to address this outcome in its Program Improvement Plan.

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs

This outcome incorporates two items pertaining to State efforts to assess and meet the physical health (item 22) and mental health (item 23) needs of children in foster care and children in the in-home services cases, if relevant.

Virginia is not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 86.7 percent of the applicable cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 93 percent of Fairfax County cases, 82 percent of Hampton City cases, and 80 percent of Tazewell County cases. In addition, the outcome was substantially achieved in 100 percent of the 40 foster care cases and in 60 percent of the 20 applicable in-home services cases.

The 2009 CFSR case reviews found that in general the physical, dental, and mental health needs of children in foster care were appropriately assessed and adequately addressed. However, the 2009 CFSR also found that for several of the children in the in-home services cases, mental health needs were not adequately assessed and/or addressed.

Virginia also was not in substantial conformity with Well-Being Outcome 3 during its 2003 CFSR and was required to address the outcome in its Program Improvement Plan. In the 2003 CFSR, the key concern identified was that children's mental health needs were

not being adequately assessed and when mental health services were recommended, the agency did not always provide timely and/or sufficient services to meet the child's needs.

To address the identified concerns, the State implemented the following strategies:

- Provided guidelines and tools to LDSS on mental health screening of children entering foster care and children and families receiving ongoing CPS services
- Implemented a range of strategies to increase mental health and substance abuse treatment resources

Virginia met its goals for this outcome by the end of its Program Improvement Plan implementation period.

II. KEY FINDINGS RELATED TO SYSTEMIC FACTORS

Statewide Information System

Substantial conformity with the systemic factor of Statewide Information System is determined by whether the State is operating an information system that can provide accurate and timely information pertaining to the status, demographic characteristics, location, and case goals for the placement of every child in foster care.

Virginia is not in substantial conformity with the systemic factor of Statewide Information System. The 2009 CFSR determined that OASIS incorporates data pertaining to the status, demographic characteristics, location, and case goals of children in foster care and can generate reports on that information. However, the 2009 CFSR also identified concerns regarding the accuracy of the data in OASIS at any given time, particularly data pertaining to the location of children's placements. This was attributed to delays in entering the child's placement information in some locations and to the State policy that allows a 30-day period for entering or updating information in OASIS.

Virginia was in substantial conformity with this factor in its 2003 CFSR and was not required to address the factor in its Program Improvement Plan.

Case Review System

Five items are included in the assessment of State performance for the systemic factor of Case Review System. The items examine development of case plans and parent involvement in that process (item 25), the consistency of 6-month case reviews (item 26) and 12-month permanency hearings (item 27), implementation of procedures to seek TPR in accordance with the timeframes established in

ASFA (item 28), and notifications to foster and pre-adoptive parents and relative caregivers of case reviews and hearings regarding the children in their care and about their rights to be heard in those proceedings (item 29).

Virginia is not in substantial conformity with the systemic factor of Case Review System. The 2009 CFSR determined that the State was holding permanency hearings in a timely manner and has a process for TPR proceedings in accordance with the provisions of ASFA. However, the CFSR also identified the following concerns:

- Although most children have a case plan, and case plans are updated in a timely manner, parents are not consistently involved in the development of case plans.
- Although the State has a policy requiring that reviews of the status of all children in foster care be held at least every 6 months, State policy does not require that the initial review be held less than 6 months from the date of the child's entry into foster care, even when "date of entry" is considered to be 60 days from the time of the child's removal from home.
- Notifying caregivers about hearings and reviews involving the children in their care is not occurring consistently across the State, and caregivers are not consistently given opportunities to be heard in these reviews and hearings.

Virginia also was not in substantial conformity with this factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan. The following concerns were identified in the 2003 CFSR:

- Parents were not consistently engaged or involved in the case planning process.
- The status of each child in foster care was not reviewed at least once every 6 months (periodic review).
- There was inconsistent implementation of the process for TPR in accordance with the provisions of ASFA.
- There was inconsistency in notifying foster parents, pre-adoptive parents, and relative caregivers about hearings and reviews and about their opportunities to be heard in reviews and hearings.

To address these concerns, the State implemented the following strategies:

- Developed specific protocols and policies for early involvement of children and parents in assessment and case planning
- Implemented concurrent planning to ensure regular meetings with the family to plan for the child's permanency
- Designed and implemented a QA process to monitor the development of written case plans and the inclusion of the child and child's parents in the planning process
- Updated and strengthened the periodic review process by creating policy regarding administrative panel reviews to include mandated timeframes and a requirement that a full administrative panel review be held for children in foster care with the goals of adoption, permanent foster care, and independent living
- Created monitoring reports to document compliance with the new policy
- Required the LDSS to file a petition for TPR at the time of the initial permanency planning hearing if it included a recommendation to change the goal to adoption or to enter into OASIS the reason TPR was not being sought
- Provided a process that allows resource parents, foster parents, pre-adoptive parents, and relative caregivers who are unable to attend court hearings to be included in the hearing through a conference call

- Strengthened foster care policy guidance and trained caseworkers regarding the right of caregivers to provide input during administrative panel reviews

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Quality Assurance System

Performance with regard to the systemic factor of QA System is based on whether the State has developed standards that ensure the safety and health of children in foster care (item 30), and whether the State is operating a statewide QA system that evaluates the quality and effectiveness of services and measures program strengths and areas needing improvement (item 31).

Virginia is not in substantial conformity with the systemic factor of QA System. The 2009 CFSR determined that the State has developed and implemented standards to ensure that children in foster care are provided with quality services that protect their health and safety. However, the 2009 CFSR also determined that although the State has piloted a QA process, it is not yet operating a fully functioning QA system that evaluates the quality of services and program improvement measures that have been implemented.

Virginia was in substantial conformity with this factor in its 2003 CFSR and was not required to address it in its Program Improvement Plan.

Staff and Provider Training

The systemic factor of Staff and Provider Training incorporates an assessment of the State's training of new caseworkers (item 32), the ongoing training provided to agency staff (item 33), and both initial and ongoing training provided to foster and adoptive parents (item 34). This systemic factor does not assess the training of service providers other than child welfare agency staff unless the service providers are private agency caseworkers operating under a contract with the State who have full case management responsibilities.

Virginia is not in substantial conformity with the systemic factor of Staff and Provider Training. The 2009 CFSR identified the following concerns with regard to training:

- The State's training requirements are not consistently and fully implemented, and there is no process in place for determining whether all staff has been trained or whether training results in gains in knowledge or skills.
- The State's training requirements for new caseworkers include courses that are critical to effective functioning, yet the caseworkers have 1 year to complete the required courses.
- The State has no requirements for ongoing training for caseworkers and supervisors, and opportunities for ongoing training are not consistently available across the State.

- Although the State mandates training for staff of licensed child care facilities, at the time of the 2009 CFSR there was no mandated pre-service or ongoing training for foster and adoptive parents.

Virginia also was not in substantial conformity with this factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan. The following key concerns were identified in the 2003 CFSR:

- The State did not mandate or provide initial training for all staff that delivered services under titles IV-B and IV-E.
- The State did not consistently provide ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties.
- The State did not mandate training for current or prospective foster parents and adoptive parents who care for foster children that addresses the skills and knowledge base needed to carry out foster care and/or adoption duties.

To address these concerns, the State implemented the following strategies:

- Submitted regulations for approval to the Board of Social Services that would mandate initial training for all child welfare caseworkers that must be completed prior to carrying a caseload and that addresses the skills and knowledge necessary for the performance of their jobs
- Submitted regulations for approval to the Board of Social Services that would mandate in-service training for child welfare caseworkers and supervisors that addresses the skills and knowledge base needed to carry out their duties in working with children and families involved in the child welfare system
- Submitted regulations for approval that would mandate pre-service and ongoing training for resource parents, foster parents and adoptive parents to prepare families to meet the needs of children entering foster care
- Established core training content and objectives to ensure statewide consistency in pre-service training of resource parents, foster parents, and adoptive parents

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Service Array and Resource Development

The assessment of the systemic factor of Service Array and Resource Development incorporates answers to three questions: Does the State have in place an array of services that meet the needs of children and families served by the child welfare agency (item 35)? Are the services accessible to families and children throughout the State (item 36)? Can services be individualized to meet the unique needs of the children and family served by the child welfare agency (item 37)?

Virginia is not in substantial conformity with the systemic factor of Service Array and Resource Development. The 2009 CFSR determined that the State has an appropriate array of key services to meet the needs of children and families. However, the 2009 CFSR also identified the following concerns:

- Some key services are not available in rural areas.
- A lack of transportation in some areas is a barrier to accessing services in both rural and urban areas.
- A scarcity of key services, such as mental health and substance abuse treatment services, results in waiting lists for these services.
- There are insufficient resources to ensure that the unique needs of children and families can be met, particularly for non-English-speaking families.

Virginia also was not in substantial conformity with this factor in its 2003 CFSR and was required to address it in its Program Improvement Plan. The following key concerns were identified in the 2003 CFSR:

- There were critical gaps in services that address the needs of families, enable children to remain safely with their parents when reasonable, and help children in foster placements achieve permanency.
- Many programs were not available statewide, particularly sexual offender treatment programs; preventive services; and psychiatrists, physicians, and dentists who accept Medicaid.
- There were waiting lists for services such as dental care and substance abuse evaluation and treatment in some areas.

To address these concerns Virginia implemented the following strategies:

- Collaborated with public and private agencies to increase access to mental health, dental, and medical services
- Increased substance abuse services availability and accessibility for families and children
- Collaborated with public and private partners to increase access to services for juveniles displaying sexually aggressive or reactive behaviors
- Expanded partnerships with local offices, other government agencies, and community organizations to improve the accessibility, availability, and delivery of services to older youth transitioning out of foster care

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Agency Responsiveness to the Community

Performance with regard to the systemic factor of Agency Responsiveness to the Community incorporates an assessment of the State's consultation with external stakeholders in developing the CFSP and producing annual reports (items 38 and 39), and the extent to which the State coordinates child welfare services with services or benefits of other Federal or federally assisted programs serving the same population (item 40).

Virginia is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. The 2009 CFSR determined the following:

- The State engages in ongoing consultation with a range of stakeholders in developing goals and objectives for CFSPs and in preparing Annual Progress and Service Reports.

- The State’s child welfare agency services are coordinated with the services and benefits of other Federal or Federally-assisted programs.

Virginia was in substantial conformity with this factor in its 2003 CFSR and was not required to address it in its Program Improvement Plan.

Foster and Adoptive Parent Licensing, Recruitment, and Retention

The assessment of this systemic factor focuses on the State’s standards for foster homes and child care institutions (items 41 and 42), the State’s compliance with Federal requirements for criminal background checks for foster and adoptive parents (item 43), the State’s efforts to recruit foster and adoptive parents that reflect the ethnic and racial diversity of foster children (item 44), and the State’s activities with regard to using cross-jurisdictional resources to facilitate permanent placements for waiting children (item 45).

Virginia is not in substantial conformity with the systemic factor of Foster and Adoptive Parent Licensing, Recruitment, and Retention. The 2009 CFSR determined that the State complies with Federal requirements for criminal background checks for foster and adoptive parents. However, the 2009 CFSR also identified the following concerns:

- At the time of the Onsite Review, the standards for approval of foster family homes did not include essential requirements such as foster parent training.
- At the time of the Onsite Review, the standards that applied to foster homes approved by licensed child placing agencies (LCPAs) were different from those applied to foster homes approved by LDSS.
- The State does not require LDSS to recruit foster and adoptive homes that reflect the ethnic and racial diversity of the children for whom foster and adoptive homes are needed.
- There are barriers to the interjurisdictional adoption of waiting children; some LDSS workers are unwilling to place waiting children in adoptive homes in different areas because they are concerned that other LDSS have less stringent adoptive home requirements.

Virginia also was not in substantial conformity with this factor in its 2003 CFSR and was required to address this factor in its Program Improvement Plan. The following concerns were identified in the 2003 CFSR:

- Although the State had standards for foster family homes and child care institutions, these standards did not include essential requirements such as foster parent training.
- State standards were not applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.
- The State did not have a recruitment process in place for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children who need foster and adoptive homes.

To address these concerns, the State implemented the following strategies in its Program Improvement Plan:

- Promulgated standards for resource parents, foster parents, and adoptive parents that are consistent for LDSS and LCPA, and are in reasonable accord with Child Welfare League of America standards
- Submitted regulations on minimum standards for LCPA to the State Board in August 2005 (however, the Secretary of Health and Human Resources pulled the regulations in November 2005)
- Implemented dual approval of resource parents, foster parents, and adoptive parents
- Developed and implemented a statewide recruitment plan in collaboration with LDSS and private agencies to ensure the diligent recruitment of potential resource parents, foster parents, and adoptive parents that reflect the ethnic and racial diversity of children in foster care

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Table 1. Virginia 2009 CFSR Ratings for Safety and Permanency Outcomes and Items

Outcomes and Indicators	Outcome Ratings			Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved*	Met National Standards?	Rating**	Percent Strength
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect	No	53.3	Met both		
Item 1. Timeliness of investigations				ANI	60
Item 2. Repeat maltreatment				Strength	93
Safety Outcome 2: Children are safely maintained in their homes when possible and appropriate	No	69.2			
Item 3. Services to protect children in home				ANI	68
Item 4. Risk of harm				ANI	69
Permanency Outcome 1: Children have permanency and stability in their living situations	No	35.0	Did not meet four		
Item 5. Foster care reentry				Strength	90
Item 6. Stability of foster care placements				ANI	82.5
Item 7. Permanency goal for child				ANI	57.5
Item 8. Reunification, guardianship, and placement with relatives				ANI	69
Item 9. Adoption				ANI	33
Item 10. Other planned living arrangement				ANI	80
Permanency Outcome 2: The continuity of family relationships and connections is preserved	No	66.7			
Item 11. Proximity of placement				Strength	100
Item 12. Placement with siblings				Strength	94
Item 13. Visiting with parents and siblings in foster care				ANI	55
Item 14. Preserving connections				ANI	85
Item 15. Relative placement				ANI	55
Item 16. Relationship of child in care with parents				ANI	53

* 95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

** Items may be rated as Strengths or as Areas Needing Improvement. For an overall rating of Strength, 90 percent of the cases must be rated as a Strength.

Table 2. Virginia 2009 CFSR Ratings for Child and Family Well-Being Outcomes and Items

Outcomes and Indicators	Outcome Ratings		Item Ratings	
	In Substantial Conformity?	Percent Substantially Achieved	Rating**	Percent Strength
Well-Being Outcome 1: Families have enhanced capacity to provide for children's needs	No	43.1		
Item 17. Needs/services of child, parents, and foster parents			ANI	46
Item 18. Child/family involvement in case planning			ANI	52
Item 19. Caseworker visits with child			ANI	66
Item 20. Caseworker visits with parents			ANI	38
Well-Being Outcome 2: Children receive services to meet their educational needs	No	83.0		
Item 21. Educational needs of child			ANI	83
Well-Being Outcome 3: Children receive services to meet their physical and mental health needs	No	86.7		
Item 22. Physical health of child			Strength	94
Item 23. Mental/behavioral health of child			ANI	87

* 95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

** Items may be rated as Strengths or as Areas Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases reviewed for the item (with the exception of item 21) must be rated as a Strength. Because item 21 is the only item for Well-Being Outcome 2, the requirement of a 95-percent Strength rating applies.

Table 3. Virginia 2009 CFSR Ratings for Systemic Factors and Items

Systemic Factors and Items	Substantial Conformity?	Score*	Item Rating**
Statewide Information System	No	2	
Item 24. The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care			ANI
Case Review System	No	2	
Item 25. The State provides a process that ensures that each child has a written case plan to be developed jointly with the child's parent(s) that includes the required provisions			ANI
Item 26. The State provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review			ANI

Item 27. The State provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter			Strength
Item 28. The State provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act			Strength
Item 29. The State provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child			ANI
Quality Assurance System	No	2	
Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children			Strength
Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented			ANI
Staff and Provider Training	No	1	
Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services			ANI
Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP			ANI
Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children			ANI

* 95 percent of the applicable cases reviewed must be rated as having substantially achieved the outcome for the State to be in substantial conformity with the outcome.

** Items may be rated as Strengths or as Areas Needing Improvement (ANI). For an overall rating of Strength, 90 percent of the cases reviewed for the item (with the exception of item 21) must be rated as a Strength. Because item 21 is the only item for Well-Being Outcome 2, the requirement of a 95-percent Strength rating applies.

Systemic Factors and Items	Substantial Conformity?	Score*	Item Rating**
Service Array and Resource Development	No	2	
Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency			Strength
Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP			ANI
Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency			ANI
Agency Responsiveness to the Community	Yes	4	
Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP			Strength
Item 39. The agency develops, in consultation with these representatives, Annual Progress and Services Reports delivered pursuant to the CFSP			Strength
Item 40. The State's services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population			Strength
Foster and Adoptive Parent Licensing, Recruitment, and Retention	No	2	
Item 41. The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards			ANI
Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds			ANI
Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children			Strength
Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed			ANI
Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children			ANI

* Scores range from 1 to 4. A score of 1 or 2 means that the factor is not in substantial conformity. A score of 3 or 4 means that the factor is in substantial conformity.

** Items may be rated as Strengths or as Areas Needing Improvement (ANI).

**Final Report
Virginia Child and Family Services Review
December 2009**

**U.S. Department of Health and Human Services
Administration for Children and Families
Administration on Children, Youth and Families
Children's Bureau**

INTRODUCTION

This document presents the findings of the Child and Family Services Review (CFSR) for the State of Virginia. The CFSR is the Federal Government's program for assessing the performance of State child welfare agencies with regard to achieving positive outcomes for children and families. It is authorized by the Social Security Amendments of 1994 requiring the Department of Health and Human Services (HHS) to promulgate regulations for reviews of State child and family services programs under titles IV-B and IV-E of the Social Security Act. The CFSR is implemented by the Children's Bureau of the Administration for Children and Families within HHS.

The Virginia CFSR was conducted the week of July 13, 2009. The period under review for the onsite case review process was from April 1, 2008, through July 17, 2009. The findings were derived from the following documents and data collection procedures:

- The Statewide Assessment, prepared by the Virginia Department of Social Services (VDSS), the Division of Family Services (DFS)
- The State Data Profile, prepared by the Children's Bureau, which provides the State's child welfare data for the 12-month CFSR target period ending March 31, 2008
- Reviews of 65 cases (40 foster care and 25 in-home services cases) at three sites: 31 cases in Fairfax County, 17 cases in Hampton City, and 17 cases in Tazewell County
- Interviews and focus groups (conducted at all three sites and at the State level) with stakeholders including, but not limited to, children, youth, parents, foster and adoptive parents, all levels of child welfare agency personnel, collaborating agency personnel, service providers, court personnel, child advocates, and attorneys

All 65 cases were open child welfare agency cases at some time during the period under review. The key characteristics of the children in the cases reviewed are presented in the table on the next page. In this and all the tables in the report, figures displayed may not total 100 percent due to rounding.

The first section of the report (Section A: Outcomes) presents the CFSR findings relevant to the State's performance in achieving specified outcomes for children in the areas of safety, permanency, and well-being. The second section of the report (Section B: Systemic Factors) provides an assessment and discussion of the systemic factors relevant to the child welfare agency's ability to achieve positive outcomes for children.

In reviewing this report, it is useful to know that Virginia has a State-supervised, locally administered child welfare system with 120 local departments of social services (LDSS). The State is responsible for providing leadership, developing policies and budgets, providing guidance and information to LDSS, collaborating with State-level partners, and identifying and disseminating information on the programs it supervises. LDSS provide direct supervision of staff and administration of child welfare services.

Key Characteristics of Cases Reviewed

Case Characteristics	Foster Care	In-Home Services
Total Number of Cases	40	25
Date case was opened		
Open prior to the period under review	31 (77.5%)	17 (68%)
Open during the period under review	9 (22.5%)	8 (32%)
Child entered foster care during the period under review	10 (25%)	NA
Child's age at start of period under review		
Younger than 10	14 (35%)	*
At least 10 but younger than 13	5 (12.5%)	*
At least 13 but younger than 16	11 (27.5%)	*
16 and older	10 (25%)	*
Race/Ethnicity		
American Indian/Alaskan Native Non-Hispanic	0	*
Asian Non-Hispanic	0	*
Black Non-Hispanic	11 (27.5%)	*
Hawaiian/Pacific Islander Non-Hispanic	0	*
Hispanic (of any race)	8 (20%)	*
White Non-Hispanic	17 (42.5%)	*
Unknown/Unable to Determine	0	*
Two or More Races Non-Hispanic	4 (10%)	*
Primary reason for opening case		
Physical abuse	2 (5%)	2 (8%)
Sexual abuse	2 (5%)	2 (8%)
Emotional maltreatment	0	0
Neglect (not including medical neglect)	15 (37.5%)	11 (44%)
Medical neglect	1 (2.5%)	3 (12%)
Abandonment	1 (2.5%)	0
Mental/physical health of parent	2 (5%)	1 (4%)
Mental/physical health of child	2 (5%)	2 (8%)
Substance abuse by parent	4 (10%)	4 (16%)
Child's behavior	5 (12.5%)	0
Domestic violence in child's home	1 (2.5%)	0
Child in juvenile justice system	2 (5%)	0
Other	3 (7.5%)	0

*Information on in-home services cases is not available for these characteristics.

SECTION A: OUTCOMES

In the Outcomes Section of the CSFR Final Report, an overall rating of Strength or Area Needing Improvement is assigned to each of the 23 items reviewed. An item is assigned an overall rating of Strength if 90 percent or more of the applicable cases reviewed were rated as a Strength. The item ratings are used to determine the performance of a State on the seven outcomes, each of which incorporates one or more of the individual items. The evaluation options for these outcomes are “substantially achieved,” “partially achieved,” or “not achieved.” For a State to be in substantial conformity with a particular outcome, 95 percent or more of the applicable cases reviewed must be rated as having substantially achieved the outcome. Two outcomes—Safety Outcome 1 and Permanency Outcome 1—also are evaluated based on State performance with regard to six national data indicators. For a State to be in substantial conformity with these outcomes, both the national standards for each data indicator and the case review requirements must be met. A State that is not in substantial conformity with a particular outcome must develop and implement a Program Improvement Plan to address the areas of concern identified for that outcome.

The Children’s Bureau has established very high standards of performance for the CFSR. The standards are based on the belief that because child welfare agencies work with our nation’s most vulnerable children and families, only the highest standards of performance should be considered acceptable. The standards are set high to ensure ongoing attention to achieving positive outcomes for children and families with regard to safety, permanency, and well-being. This is consistent with the goal of the CFSR to promote continuous improvement in performance on these outcomes.

It should be noted, however, that States are not required to attain the 95-percent standard established for the Onsite Review or the national standards for the six data indicators by the end of their Program Improvement Plan implementations. The Children’s Bureau recognizes that the kinds of systemic and practice changes necessary to bring about improvement in particular outcome areas often take time to implement. Also, improvements are likely to be incremental rather than dramatic. Instead, States work with the Children’s Bureau to establish a specified amount of improvement or to determine specified activities for their Program Improvement Plans. That is, for each outcome that is not in substantial conformity or item that is rated as an Area Needing Improvement, each State (working in conjunction with the Children’s Bureau) specifies the following: how much improvement the State will demonstrate and/or the activities that it will implement to address the Areas Needing Improvement and the procedures for demonstrating the achievement of these goals. Both the improvements specified and the procedures for demonstrating improvement vary across States. Therefore, a State can meet the requirements of its Program Improvement Plan and still not perform at the 95-percent (for outcomes) or the 90-percent (for items) levels established for the CFSR.

The second round of the CFSR assesses a State’s current level of performance by once more applying the high standards and a consistent, comprehensive, case review methodology. The results of this effort are intended to serve as the basis for continued Program Improvement Plans addressing areas in which a State still needs to improve, even though prior Program Improvement Plan

goals may have been achieved. The purpose is to ensure that program improvement is an ongoing process and does not end with the completion of a Program Improvement Plan.

The following sections provide information on how Virginia performed on each outcome in the first round of the CFSR as well as the current CFSR. If the outcome was not substantially achieved during the first round, the key concerns observed at that time and the strategies implemented in the Program Improvement Plan to address those concerns are discussed.

Because many changes were made in the CFSR process based on lessons learned during the first round and in response to feedback from the child welfare field, a State's performance in the second round of the CFSR is not directly comparable to its performance in the first round, particularly with regard to comparisons of data indicators or percentages regarding Strength and Area Needing Improvement ratings. Key changes in the CFSR case review process that make it difficult to compare performance across reviews include, but are not limited to, the following:

- An increase in the sample size from 50 to 65 cases
- Stratification of the sample to ensure a minimum number of cases in key program areas, resulting in variations in the number of cases relevant for specific outcomes and items
- Changes in criteria for specific items to enhance consistency and ensure an assessment of critical areas such as child welfare agency efforts to involve noncustodial parents in planning for their children

For each outcome, a table presents the data for the case review findings and national indicators (when relevant). The table is followed by a discussion of Virginia's status with regard to substantial conformity with the outcome at the time of its first CFSR, which was held in fiscal year (FY) 2003, the State's status relevant to the current review, and a presentation and discussion of each item (indicator) assessed under the outcome. Performance of individual sites included in the Onsite Review is presented in the tables. Variations in outcome and item ratings as a function of type of case (i.e., foster care or in-home services) also are identified when appropriate.

I. SAFETY

Safety Outcome 1

Outcome S1: Children are, first and foremost, protected from abuse and neglect					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	3	3	2	8	53.3
Partially Achieved	3	2	1	6	40.0
Not Achieved	1	0	0	1	6.7
Total Applicable Cases	7	5	3	15	
Not Applicable Cases	24	12	14	50	
Total Cases	31	17	17	65	
Substantially Achieved by Site	43%	60%	67%		

Conformity of Statewide Data Indicators With National Standards			
National Data Indicators	National Standard (%)	State's Percent	Meets Standards?
Absence of maltreatment recurrence	94.6+	97.9	Yes
Absence of maltreatment of children in foster care by foster parents or facility staff	99.68+	99.79	Yes

Status of Safety Outcome 1

Virginia is not in substantial conformity with Safety Outcome 1. The outcome was substantially achieved in 53.3 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. However, the State met the national standards for the data indicators pertaining to the absence of maltreatment recurrence within 6 months and the absence of maltreatment of children in foster care by foster parents or facility staff. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The key concerns identified in the 2003 review were that the agency was not consistent in its efforts to initiate an investigation of a maltreatment report and/or establish face-to-face contact with the child subject of a maltreatment report in accordance with State or local required timeframes.

To address the identified concerns, Virginia implemented the following strategies in its Program Improvement Plan:

- Established statewide requirements regarding minimum timeframes for initiating a response to reports of abuse or neglect
- Implemented a pilot program incorporating policies and tools related to the acceptance and prioritization of reports of maltreatment in 30 local agencies

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the specific items assessed under Safety Outcome 1 are presented and discussed below.

Item 1. Timeliness of initiating investigations of reports of child maltreatment

 Strength X Area Needing Improvement

Case Review Findings

The assessment of item 1 was applicable for 15 (23 percent) of the 65 cases. Cases were not applicable when there were no child maltreatment reports during the period under review. In assessing item 1, reviewers were to determine whether the response to a maltreatment report occurring during the period under review had been initiated in accordance with the State child welfare agency policy requirements.

Virginia has a differential response system (DRS), which means that a maltreatment report that is accepted may be assigned for either an investigation or a family assessment. The local department must consider all information collected at the time of the referral to determine the appropriate response based on the child’s immediate safety or other factors. One of the following three response levels may be assigned to a maltreatment report:

- Response 1 (R1): The response must be initiated as soon as possible but no later than 24 hours from the time of the referral.
- Response 2 (R2): The response must be initiated as soon as possible but no later than 48 hours from the time of the referral.
- Response 3 (R3): The response must be initiated as soon as possible but no later than 5 working days of the date of the referral.

Virginia policy defines “initiation” of a response as the first contact completed or attempted. The first “meaningful contact” provides information pertinent to determining whether or not the abuse or neglect occurred. This contact is usually in person with the victim to collect information about the safety of the child. However, Virginia policy also notes that the first meaningful contact may occur by telephone and may be with a collateral contact if the information contributes to the assessment of initial child safety. If a face-to-face contact with the alleged child victim and siblings is not conducted at the initiation of a response, child protective services (CPS) caseworkers are required to have a face-to-face interview with these children at some time during the investigation or assessment

process. However, there is no specific timeframe for face-to-face contacts with the alleged child victim and siblings if they do not occur as part of the first meaningful contact.

The results of the assessment of item 1 are presented in the table below.

Item 1 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	4	3	2	9	60
Area Needing Improvement	3	2	1	6	40
Total Applicable Cases	7	5	3	15	
Not Applicable	24	12	14	50	
Total Cases	31	17	17	65	
Strength by Site	57%	60%	67%		

Item 1 was rated as a Strength in nine cases when the investigation or family assessment was initiated within the timeframes required by State policy. Item 1 was rated as an Area Needing Improvement in six cases when the investigation or family assessment was not initiated within the required timeframes. There were eight reports included in the six cases rated as an Area Needing Improvement for this item. Two reports were classified as R1, five were classified as R2, and one was classified as R3. Four reports were assigned to the family assessment track, and four were assigned to the investigation track.

Rating Determination

Item 1 was assigned an overall rating of Area Needing Improvement. In 60 percent of the applicable cases, reviewers determined that the agency had initiated an investigation of a maltreatment report or a family assessment in accordance with required timeframes. This percentage is less than the 90 percent required for rating of Strength. Item 1 also was rated as an Area Needing Improvement in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, when an LDSS receives a report of suspected abuse or neglect, a caseworker must determine if it is a valid complaint. All of the following criteria must be met for the complaint to be determined valid:

- The child must be younger than age 18 at the time of the complaint.
- The alleged abuser must be the alleged victim child’s parent or other caregiver.
- The social service department receiving the complaint is the department of jurisdiction.
- The description of circumstances alleges suspected child abuse and/or neglect as defined in law.

The Statewide Assessment notes that LDSS have 5 days to determine if a complaint is valid. If a complaint is considered valid, a response time is assigned. As indicated in the Statewide Assessment, every valid report of abuse or neglect must be assigned to either

the family assessment or investigation track, and responses are to be initiated in accordance with the timeframes established for the three response categories. The Statewide Assessment reports that the track decision should be made at intake, if possible. In making the track decision, the intake caseworker and/or supervisor must take into consideration the following variables:

- Any history of abuse or neglect (e.g., the intake worker uses the investigation response if there are more than three valid CPS reports in 1 year)
- The type and severity of alleged abuse
- The child's age and ability to self-protect
- The presence of a disability that affects the child's ability to self-protect
- Whether or not the caregiver's behavior is violent or out of control
- Whether living conditions are hazardous (e.g., the presence of firearms or drugs)

As noted in the Statewide Assessment, additional local criteria for track assignment may be developed, but the criteria must be consistently applied within the locality. If sufficient information cannot be obtained from the complainant, the track assignment can be made at the first meaningful contact with any parties named in the complaint.

The Statewide Assessment notes that reports involving the following situations must be assigned for an investigation: sexual abuse; child fatality; abuse or neglect resulting in a serious injury; the child has been taken into LDSS custody; or reports involve a caregiver at a State-licensed child care center, religiously exempt child care center, regulated family day home, private or public school, or hospital or institution. The Statewide Assessment also notes that when an investigation is not mandated, the decision whether to assign a report to the family assessment track or to the investigation track is predicated on immediate concerns for the child's safety and the perception of the ability of LDSS to work with the family and community service providers.

The following information about the family assessment and investigation tracks was provided in the Statewide Assessment:

- There has been an increase in assignment of reports to the family assessment track from 55 percent of valid reports in 2002 to 70 percent of valid reports in 2007.
- With the exception of sexual abuse reports, the two tracks are similar in the types of abuse or neglect assigned to each track.
- Data from 2007 show that in both tracks physical neglect is the most frequent allegation, comprising 46 percent of investigations and 57 percent of family assessments. The second most frequent allegation is physical abuse, which is found in 36 percent of investigations and 38 percent of family assessments.

As indicated in the Statewide Assessment, the most recent data regarding the timeliness of investigations comes from a new statistical report that was developed to measure timeliness of response to CPS reports and was published statewide in April 2009 using February 2009 data. The report uses data from Virginia's On-Line Automated Services Information System (OASIS) to provide both summary and case detail about the timeliness of response to CPS reports in three areas:

- The response time occurred within the assigned response priority.
- The first victim contact occurred within the response priority.
- The first meaningful contact to begin the CPS response occurred within the response priority.

The Statewide Assessment reports that although the data indicate that the first meaningful contact occurred within the timeframes established by the response priority in 52 percent of the reports received during February 2009, caseworkers do not appear to be checking the appropriate box in OASIS that signifies the first meaningful contact. The Statewide Assessment suggests that because caseworkers and managers will now be able to see how LDSS are doing in making the contacts within required timeframes, compliance with using this box is expected to improve.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review expressed different opinions regarding the agency’s effectiveness in initiating a response to a maltreatment report within the timeframes established by policy. Some stakeholders said that responses usually are timely; others said that responses are not. A few Tazewell County stakeholders noted that when responses are not timely, it sometimes is due to poor weather conditions, poor directions to a rural home, and/or long distances to travel. A few Fairfax County stakeholders suggested that timeliness can be a problem when cases are transferred within the investigations unit or when a number of high priority (R1) reports are received at once.

Item 2. Repeat maltreatment

Strength **Area Needing Improvement**

Case Review Findings

The assessment of item 2 was applicable for 14 (22 percent) of the 65 cases. Cases were not applicable for this item if there was no substantiated or indicated maltreatment report during the period under review. For all applicable cases, reviewers were to determine if there had been a substantiated or indicated maltreatment report on the family during the period under review, and, if so, whether another substantiated or indicated report involving similar circumstances had occurred within a 6-month period before or after that identified report. The results of the assessment of item 2 are presented in the table below.

Item 2 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	5	5	3	13	93
Area Needing Improvement	1	0	0	1	7
Total Applicable Cases	6	5	3	14	
Not Applicable	25	12	14	51	
Total Cases	6	5	3	14	
Strength by Site	83%	100%	100%		

Item 2 was rated as a Strength when there was only one substantiated or indicated maltreatment report on the family within a 6-month period. A report assigned to the family assessment track that is opened for services is considered to be “substantiated or indicated” for purposes of analysis of this item. Item 2 was rated as an Area Needing Improvement in one case because there were two reports received within a 6-month period and both reports were assigned to the family assessment track with the determination of “services needed.”

Case reviewers also reported the following findings with regard to the number of maltreatment reports on the family during the life of the case (“life of the case” refers to the time from the date of the first allegation of abuse or neglect to the time of the Onsite Review):

- In 38 cases, two or fewer reports
- In 15 cases, between three and four reports
- In 12 cases, five or more reports

Rating Determination

Item 2 was assigned an overall rating of Strength. In 93 percent of the applicable cases, there was no recurrence of substantiated or indicated maltreatment within a 6-month period. This percentage is greater than the 90 percent required for a rating of Strength. Item 2 also was rated as a Strength in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, nearly 70 percent of all reports of abuse or neglect are handled as a family assessment. Because there are no dispositions for family assessments, children who are the subject of a report that receives a family assessment response are not included in the determination of repeat maltreatment. In addition, OASIS does not provide a mechanism to include reports assigned to the family assessment track with a determination of services needed in the analysis of maltreatment recurrence.

As reported in the Statewide Assessment, if a valid report is received on an open CPS case, the type of allegations and the time elapsed since the initial report determines whether the new allegations are treated as a new report. If the allegations do not provide new or different information, they may be incorporated as part of the ongoing investigation or family assessment. If the additional

allegations address new types of abuse/neglect, and if 5 or more days have elapsed since the first report, the additional allegations are treated as a new report.

Stakeholder Interview Information

Most Tazewell County stakeholders commenting on this item during the Onsite Review expressed the opinion that maltreatment recurrence is rare in that county due primarily to efforts to follow up with the families and to provide services. The few Hampton City stakeholders commenting on this item also indicated that follow-up services and ongoing support help prevent maltreatment recurrence.

Safety Outcome 2

Outcome S2: Children are safely maintained in their homes whenever possible and appropriate					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	24	10	11	45	69.2
Partially Achieved	1	2	2	5	7.7
Not Achieved	6	5	4	15	23.1
Total Cases	31	17	17	65	
Substantially Achieved by Site	77%	59%	65%		

Status of Safety Outcome 2

Virginia is not in substantial conformity with Safety Outcome 2. The outcome was substantially achieved in 69.2 percent of the cases reviewed. This percentage is less than the 95 percent required for substantial conformity. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 review:

- The State closed cases when the parent refused to comply with services although the child was still at risk.
- The State was not consistent in its efforts to reduce the risk of harm to children.
- There were no safety assessments in some cases or the safety assessment was not sufficiently comprehensive to capture critical family issues relevant to the child’s safety, such as domestic violence.

To address these concerns Virginia implemented the following strategies in its Program Improvement Plan:

- Developed and implemented training for local CPS and foster care staff on the knowledge and skills needed to engage families effectively in safety and risk assessment and reassessment
- Piloted a Structured Decision Making (SDM) assessment of risk of harm to children living in their own homes in 30 agencies
- Clarified policy related to the management of CPS in-home services cases, including policy regarding the intensity of service provision and the frequency of caseworker contacts based on risk

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the specific items assessed under Safety Outcome 2 are presented and discussed below.

Item 3. Services to family to protect child(ren) in the home and prevent removal or reentry into foster care

 Strength **X** Area Needing Improvement

Case Review Findings

An assessment of item 3 was applicable in 41 (63 percent) of the 65 cases. Cases were excluded if the children entered foster care prior to the period under review and there were no other children in the home, or if there was no substantiated or indicated maltreatment report or identified risk of harm to the children in the home during the period under review. For applicable cases, reviewers assessed whether, in responding to a substantiated maltreatment report or risk of harm, the agency made diligent efforts to provide services to families that would prevent placement of children in foster care and at the same time ensure their safety. The results of the assessment of item 3 are presented in the table below.

Item 3 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	14	7	7	28	68
Area Needing Improvement	6	4	3	13	32
Total Applicable Cases	20	11	10	41	
Not Applicable	11	6	7	24	
Total Cases	31	17	17	65	
Strength by Site	70%	64%	70%		

Item 3 was rated as a Strength when reviewers determined the following:

- Although no services were provided when the child was removed from the home, the removal was necessary to ensure the safety of the child (four cases).
- Services were provided to the family to ensure the safety of the child and prevent removal (24 cases).

Case review information indicates that a range of services was offered or provided to families. This included (but was not limited to) the following: assessments for substance abuse; in-patient, out-patient, and in-home substance abuse treatment; intensive in-home family preservation services; anger management services; mentoring; financial assistance services (including payment of utility bills and vouchers for food); housing services; concrete services such as vouchers for rodent control; in-home parenting education services; case management services; in-home counseling services; transportation services; respite care services; psychological services (mental health screenings, medication management, and treatment); educational assessment services; child care services; behavioral therapy; assistance to parents to meet children's medical needs; and services for parents of children with developmental disabilities.

Item 3 was rated as an Area Needing Improvement when reviewers determined the following:

- Services were not provided to the family, and the children remained at risk in the home (five cases).
- Services were provided, but they did not target the key safety concern in the family, leaving the children at risk in the home (eight cases).

Rating Determination

Item 3 was assigned an overall rating of Area Needing Improvement. In 68 percent of the cases, reviewers determined that the agency had made concerted efforts to maintain children safely in their own homes. This percentage is less than the 90 percent required for a rating of Strength. Item 3 was rated as a Strength in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, services can be offered to families during a family assessment or investigation and must be offered to any family whose case is opened for ongoing CPS. The Statewide Assessment reports that an ongoing CPS case can result from either the family assessment or investigation track. Service needs are determined by working with the family to identify their strengths and needs, and services either are provided directly by an LDSS caseworker or arranged through another provider. The Statewide Assessment reports that agencies using the SDM model use the Family Strengths and Needs tool from that model to determine service needs.

The Statewide Assessment also reports that CPS policy requires that when moderate or high risk is determined in a completed family assessment or investigation, LDSS must consult with the family to provide or arrange for necessary protective or rehabilitative

services. However, as indicated in the Statewide Assessment, LDSS have no authority to enforce the provision of services if a family refuses to accept them, and a social service department may petition the court to order necessary services to maintain children safely in the home.

The Statewide Assessment notes that a DRS evaluation conducted in 2008 included a limited review of ongoing CPS cases. One analysis included whether ongoing services prevented a need for foster care in some families. The case reviewer examined 89 cases in which the family had received services and the child had not been removed from his home. The reviewer found clear evidence that services helped to prevent foster care in 10 percent of the 89 cases and some evidence that services may have prevented foster care in 30 percent of the cases. In 29 percent of the cases, the reviewer determined that foster care was not really at issue, and in 30 percent of the cases, the reviewer could not make a judgment.

As indicated in the Statewide Assessment, one barrier to providing services to children and families to prevent removal or reentry into foster care is a general lack of consistent assessment strategies and service resources. The Statewide Assessment notes that when the Citizen Review Panels were asked to comment on services provided to families and children, responses indicated a gap in resources for at-risk families that creates challenges for LDSS in preventing removals. However, the Statewide Assessment also notes that these panels described LDSS as partnering with the local community to find ways to meet service needs.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that LDSS generally make concerted efforts to maintain children safely in their homes rather than removing children when services may have prevented the removal. Various stakeholders across the CFSR sites identified the following as strategies implemented by LDSS to prevent removals or reentries into foster care:

- Short-term respite services for biological parents to allow a cool-down period (for juvenile justice cases) or to assist families when parents are in short-term treatment programs
- Specialized in-home services programs to prevent placement such as Healthy Families, the family stabilization program, and the transition home services
- The use of court protective orders and monitoring by LDSS
- Voluntary placement with relatives either as short-term respite or long-term placement without the agency taking custody of the child
- The use of the Family Assessment and Planning Team (FAPT)

Item 4. Risk assessment and safety management

Strength **Area Needing Improvement**

Case Review Findings

An assessment of item 4 was applicable for all 65 cases. In assessing item 4, reviewers were to determine whether the agency had made, or was making, diligent efforts to address the risk of harm to the children involved in each case. The results of the assessment of item 4 are presented in the table below.

Item 4 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	24	10	11	45	69
Area Needing Improvement	7	7	6	20	31
Total Cases	31	17	17	65	
Strength by Site	77%	59%	65%		

Item 4 was rated as a Strength when reviewers determined that the risk of harm to children was addressed appropriately by the agency through the following: conducting initial and ongoing assessments of risk and safety either in the child's home or in the child's foster home and addressing all safety-related concerns identified through the assessment.

Item 4 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- There was no initial safety or risk assessment (two cases).
- There was no ongoing safety and risk assessment in the child's home during the period under review (eight cases).
- There was no ongoing safety and risk assessment in the foster home during the period under review (one case).
- There were continued risk concerns in the home that were not addressed and/or monitored by the agency, and the children were at risk in the home (10 cases). Seven of these involved cases that had been opened as family assessments, and two involved cases in which a CPS report had been screened out despite serious allegations.
- The case was closed without a safety and risk assessment (one case).
- There was a safety concern related to the target child in foster care during visitation with parents due to insufficient monitoring of visitation (five cases).

Rating Determination

Item 4 was assigned an overall rating of Area Needing Improvement. In 69 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to assess and address the risk of harm to the child. This percentage is less than the 90 percent required for a rating of Strength. Item 4 also was rated as an Area Needing Improvement in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, in both family assessment cases and investigations cases, the caseworker completes an initial safety assessment and safety plan to determine whether any children are in immediate danger of serious physical harm that may

require an intervention and to decide what protective interventions should be initiated or maintained. The assessment must result in one of the following determinations:

- Safe: There are no children likely to be in immediate danger of moderate to serious harm and no safety plan is required.
- Conditionally safe: Safety interventions are in place and have resolved the unsafe situation for the present.
- Unsafe: Without controlling interventions, a child is in immediate danger of serious harm, and a court order or safety plan is required to document intervention.

The Statewide Assessment also notes that in addition to the initial safety assessment, when a family is assigned to the family assessment track the caseworker must complete a Family Needs Assessment (which includes a risk assessment) within 45–60 days of initiation of receipt of the complaint or report. When a family is assigned to the investigation track, the caseworker must complete an Investigation Dispositional Assessment and individual child risk assessments within 45–60 days of receipt of the complaint or report. With regard to ongoing risk assessments, the Statewide Assessment reports that for in-home services cases, an ongoing risk reassessment and risk determination must be completed with the family as part of the service plan or service plan review, which occurs at least once every 3 months or more often if there is a change in the level of risk to the child. The Statewide Assessment notes, however, that for in-home services cases, risk reassessment is not required at the time of case closure. The Statewide Assessment reports that although there are no required standardized processes or tools for assessing ongoing safety and risk to a child while in foster care, policy requires that child safety must be addressed in each caseworker visit with a child in foster care.

The Statewide Assessment also reports that the Court Appointed Special Advocate/Children’s Justice Act (CASA/CJA) Advisory Committee was asked to comment on the level of services to reduce risk to children. The group responded that in general they saw services offered, but the services did not always work. One concern expressed by committee members was that there are times when all services are offered, the situation remains unsafe or unstable, but LDSS will not bring that child into foster care. Another concern expressed was that sometimes, when services are provided by another entity a social service department tends to back away.

Stakeholder Interview Information

During the Onsite Review, only stakeholders from Fairfax County commented on the effectiveness of the agency in assessing risk of harm. Most of them reported that Fairfax County uses the SDM tool but that the tool is not very useful, and often the caseworker just records information on it rather than using it to drive decision-making. In particular, stakeholders noted that because the SDM tool focuses on the perpetrator and not the child, it is not useful in sexual abuse cases in which the perpetrator usually has been removed from the home.

Most stakeholders commenting on the effectiveness of the agency in managing safety expressed the opinion that safety generally is addressed by providing services to families or through a court order of protection.

II. PERMANENCY

Permanency Outcome 1

Outcome P1: Children have permanency and stability in their living situations					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	6	4	4	14	35.0
Partially Achieved	14	6	5	25	62.5
Not Achieved	0	0	1	1	2.5
Total Foster Care Cases	20	10	10	40	
Substantially Achieved by Site	30%	40%	40%		

Conformity of Statewide Data Indicators With National Standards			
National Data Indicators	National Standard (Scaled Score)	State Score (Scaled Score)	Meets Standards?
Composite 1: Timeliness and permanency of reunification	122.6+	118.3	No
Composite 2: Timeliness of adoptions	106.4+	75.1	No
Composite 3: Permanency for children in foster care for extended time periods	121.7+	102.5	No
Composite 4: Placement stability	101.5+	102.3	Yes

Status of Permanency Outcome 1

Virginia is not in substantial conformity with Permanency Outcome 1. The outcome was substantially achieved in 35 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. In addition to case review findings, Virginia did not meet the national standards for the data indicators pertaining to timeliness and permanency of reunification, timeliness of adoptions, and permanency for children in foster care for extended time periods. However, the State met the national standard for the data indicator pertaining to placement stability. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 review:

- The State was not consistent in its efforts to ensure children's placement stability while in foster care.
- The State was not consistent in establishing permanency goals in a timely manner, and permanency goals were not always appropriate to meet the needs of the child.

- The State was not consistent in its efforts to attain the goal of reunification in a timely manner.
- The State was not consistent in achieving finalized adoptions in a timely manner due to both agency- and court-related barriers.

To address the identified concerns, the State implemented the following strategies:

- Submitted regulations to mandate pre-service and in-service training for resource parents, foster parents, and adoptive parents to prepare families to meet the needs of children entering foster care
- Developed and implemented strategies to strengthen the screening and assessment of children’s needs to improve placement matches
- Piloted concurrent planning to ensure that appropriate permanency goals are selected and achieved for children in a timely manner
- Established a process for filing petitions for termination of parental rights (TPR) simultaneously with petitions for an initial permanency planning hearing to change the goal to adoption or to document, in OASIS, the reasons for not pursuing termination
- Piloted SDM tools in the decision-making process for reunification in 30 localities
- Promulgated regulations and developed policy that allows for dual approval of resource parents, foster parents, and adoptive parents
- Developed Progress to Excellence Reports as a management tool for assessing efforts to expedite adoptions and ensure timely documentation of final orders of adoption and other actions
- Collaborated with the Court Improvement Program (CIP) to identify child welfare best practices and issues influencing timely permanency for children in foster care, and educate agency and court staff about these practices and issues

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Permanency Outcome 1 are presented and discussed below.

Item 5. Foster care reentries

 X **Strength** **Area Needing Improvement**

Case Review Findings

An assessment of item 5 was applicable for 10 (25 percent) of the 40 foster care cases. Cases were not applicable if the child did not enter foster care during the period under review. In assessing this item, reviewers determined whether the entry into foster care during the period under review occurred within 12 months of discharge from a prior foster care episode. The results of the assessment of item 5 are presented in the table below.

Item 5 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	5	3	1	9	90
Area Needing Improvement	1	0	0	1	10
Total Applicable Foster Care Cases	6	3	1	10	
Not Applicable Foster Care Cases	14	7	9	30	
Total Foster Care Cases	20	10	10	40	
Strength by Site	83%	100%	100%		

Item 5 was rated as a Strength when the child’s entry into foster care during the period under review did not take place within 12 months of discharge from a prior episode. Item 5 was rated as an Area Needing Improvement in one case when the child’s entry into foster care occurred within 6 months of the date of discharge from a prior foster care placement episode.

Rating Determination

Item 5 was assigned an overall rating of Strength. The item was rated as a Strength in 90 percent of the cases reviewed. This percentage is equal to the 90 percent required for a rating of Strength. Item 5 also was rated as a Strength in Virginia’s 2003 CFSR.

Performance on the Composite 1 Measure Relevant to the Permanency of Reunification

The data below are presented to provide additional information about foster care reentry. There is no national standard for the measure of foster care reentry. National standards with regard to permanency have been established only for the scaled composite scores. The measure of foster care reentry is part of Composite 1: Timeliness and permanency of reunification. The State’s performance on Composite 1 is shown in the table for Permanency Outcome 1.

Virginia’s performance on the individual measure of foster care reentry (measure C1.4) included in Composite 1: Timeliness and permanency of reunification was the following: In the 12 months prior to the CFSR 12-month target period for the data indicators, 5.6 percent of children exiting foster care to reunification reentered foster care in less than 12 months from the time of discharge. This percentage is less than the 25th percentile of 9.9 percent. (For this measure, lower percentages reflect higher levels of performance.)

Statewide Assessment Information

According to the Statewide Assessment, a variety of tools are used by LDSS to assess risk of harm prior to a child returning home. These tools, intended to prevent reentry into foster care, include the following:

- The Risk Re-assessment and Reunification Assessment in the SDM tool
- The Individual Family Service Plan (IFSP) used during the FAPT meeting
- The Safety Assessment document, Safety Plan, or the Family Strengths and Needs Assessment

The Statewide Assessment reports, however, that members of the CASA/CJA Advisory Committee reported that they do not see many services in place when a child returns home. They noted that, in general, once the child is at home the case is closed, and the services that may be offered are very focused and limited. The Statewide Assessment notes that this is not consistent with foster care policy, which states that services should be provided to the child and his or her family to prevent the need for the child to reenter foster care.

The Statewide Assessment attributes Virginia’s generally low reentry rate to the use of trial home visits to help ensure the safety of the child when he returns home. In a trial home visit, physical custody is with the parent or other caregivers, but the legal custody remains with LDSS allowing for needed services to remain in place. It was noted that on average, a trial home visit lasts 6 months in Virginia. The Statewide Assessment reports that if the trial home visit does not work out, LDSS are able to return the child to foster care, and it is not recorded as a reentry. The juvenile and domestic relations (JDR) district court judge hears the case a final time to release custody of the child back to his parents at the end of a successful trial home visit.

Stakeholder Interview Information

There were insufficient substantive comments from stakeholders regarding this item during the Onsite Review.

Item 6. Stability of foster care placement

Strength Area Needing Improvement

Case Review Findings

All 40 foster care cases were applicable for an assessment of item 6. In assessing this item, reviewers were to determine whether the child experienced multiple placement settings during the period under review and, if so, whether the changes in placement settings were necessary to achieve the child’s permanency goal or meet the child’s service needs. Reviewers also assessed the stability of the child’s most recent placement setting. The results of the assessment of item 6 are presented in the table below.

Item 6 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	16	10	7	33	82.5
Area Needing Improvement	4	0	3	7	17.5
Total Foster Care Cases	20	10	10	40	
Strength by Site	80%	100%	70%		

Item 6 was rated as a Strength when reviewers determined that the child’s current placement was stable and that the child either did not experience a placement change during the period under review or that the placement changes experienced were in the child’s best interests (i.e., they were intended to further achievement of the child’s permanency goal or provide specialized services for the child).

Item 6 was rated as an Area Needing Improvement in six cases when reviewers determined that the child was in multiple placement settings during the period under review, and at least one placement change was not planned by the agency to attain the child's permanency goal. In five of these cases, the child was age 15 or older, and the placement changes were due to children with behavioral problems being placed in a foster home or care facility that was not appropriate to the child's needs. Item 6 was rated as an Area Needing Improvement in one case in which the child's placement was not stable.

Additional findings of the case review were the following:

- Children in 24 cases experienced only one placement during the period under review.
- Children in nine cases experienced two placements during the period under review.
- Children in seven cases experienced three or more placements during the period under review.

Rating Determination

Item 6 was assigned an overall rating of Area Needing Improvement. In 82.5 percent of the cases, reviewers determined that children experienced placement stability. This percentage is less than the 90 percent required for a rating of Strength. Item 6 also was rated as an Area Needing Improvement in the State's 2003 CFSR.

Performance on the Individual Measures Included in Composite 4: Placement stability

The data below are presented to provide additional information about placement stability. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State's performance on Composite 4 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, Virginia's performance on the individual measures included in Composite 4: Placement stability was the following:

- C4.1: 88.8 percent of the children in foster care for at least 8 days but less than 12 months experienced two or fewer placement settings. This percentage is greater than the national 75th percentile of 86.0 percent.
- C4.2: 65.3 percent of the children in foster care for at least 12 months but less than 24 months experienced two or fewer placement settings. This percentage is greater than the national median of 59.9 percent but less than the national 75th percentile of 65.4 percent.
- C4.3: 39.9 percent of the children in foster care for at least 24 months experienced two or fewer placement settings. This percentage is greater than the national median of 33.9 percent but less than the national 75th percentile of 41.8 percent.

Statewide Assessment Information

According to the Statewide Assessment, there are different reasons that foster children may have more than one placement change throughout their stay in foster care. It was noted that most localities in Virginia use temporary placements, such as an emergency foster home, to provide a safe place for a child to live when he or she is initially taken into foster care. In some cases a child must be

placed in a temporary home due to a lack of an appropriate foster family setting. This is done to stabilize the child in a crisis or to learn more about the child so an appropriate home can be found. The Statewide Assessment notes that although this type of placement is intended to be temporary, there are occasions where a child has remained in an emergency placement for more than 30 days due to a lack of another appropriate placement.

The Statewide Assessment also notes that stakeholder input received from a CASA directors’ meeting attributed placement instability to the following:

- Some children have severe behavior problems that cause conflicts within the foster home.
- In some situations, the extent of a child’s behavior problems are not fully known by the foster parent until after the child has been placed, and the foster parents may not be equipped or trained sufficiently to deal with the problems.
- There is a lack of therapeutic or specialized foster homes, which results in some children being placed in a home that is not equipped to meet their needs.
- Some foster parents report feeling “burned out” due to lack of training, perceived lack of support, or other stressors that lead them to ask for children to be removed from their homes.

Stakeholder Interview Information

Some Hampton City stakeholders commenting on this item expressed the opinion that placements there generally are stable. A few attributed stability to the expectation of the agency that “the first placement will be the last placement” and to the provision of services to foster families to support placement stability. Stakeholders in Fairfax and Tazewell counties did not provide substantive comments on the stability of placements. However, many stakeholders in those sites expressed the opinion that when placements fail, it is due to poor matching and lack of sufficient support and training for foster parents, especially for foster parents caring for children with behavioral or mental health concerns.

Item 7. Permanency goal for child

Strength Area Needing Improvement

Case Review Findings

All 40 foster care cases were applicable for an assessment of item 7. In assessing this item, reviewers were to determine whether the agency had established a permanency goal for the child in a timely manner and whether the most current permanency goal was appropriate. Reviewers also were to determine whether the agency had sought TPR in accordance with the requirements of the Adoption and Safe Families Act (ASFA) when relevant. The results of the assessment of item 7 are presented in the table below.

Item 7 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	13	4	6	23	57.5
Area Needing Improvement	7	6	4	17	42.5
Total Foster Care Cases	20	10	10	40	
Strength by Site	65%	40%	60%		

Item 7 was rated as a Strength when reviewers determined that the child’s permanency goal was appropriate, had been established in a timely manner, and, if relevant, that the agency had filed for TPR in accordance with the requirements of ASFA.

Item 7 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- The child’s permanency goal at the time of the Onsite Review was not appropriate given the case situation and the needs of the child (nine cases).
- The child’s permanency goal was not established in a timely manner (12 cases).
- The agency had not sought TPR in accordance with the requirements of ASFA, particularly with regard to documenting compelling reasons in the case file for not seeking TPR (five cases).

ASFA requirements with regard to filing for TPR were met in 81 percent of 26 applicable cases.

The following case goals were identified for the 40 foster care cases:

- Adoption only (12 cases)
- Reunification only (including reunification with relatives) (10 cases)
- Other planned permanent living arrangement (OPPLA) only (15 cases)
- Concurrent goals of reunification with parents and reunification with relatives (three cases)

Rating Determination

Item 7 was assigned an overall rating of Area Needing Improvement. In 57.5 percent of the applicable cases, reviewers determined that the agency had established an appropriate permanency goal for the child in a timely manner and had met ASFA requirements. This percentage is less than the 90 percent required for a rating of Strength. Item 7 also was rated as an Area Needing Improvement in the State’s 2003 CFSR.

Performance on the Individual Measures Included in Composite 3: Permanency for children in foster care for extended time periods

The data below are presented to provide additional information about permanency for children in foster care for extended time periods. There are no national standards for performance on these measures individually. National standards were established only for the scaled composite score. The State's performance on Composite 3 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, Virginia's performance on the individual measures included in Composite 3: Permanency for children in foster care for extended time periods was the following:

- C3.1: 15.5 percent of the children in foster care for 24 months or longer at the start of the 12-month CFSR target period were discharged from foster care to a permanent home (adoption, reunification with parents or other relatives, or guardianship) by the end of the target period. This percentage is less than the national median of 25.0 percent.
- C3.2: 89.2 percent of the children exiting foster care during the target period who were legally free for adoption at the time of exit were discharged to a permanent home. This percentage is less than the national median of 96.8 percent.
- C3.3: 45.2 percent of the children who were discharged from foster care during the 12-month target period with a discharge reason of emancipation had been in foster care for 3 years or longer at the time of discharge. This percentage is less than the national median of 47.8 percent but is greater than the national 25th percentile of 37.5 percent. (For this measure, lower percentages reflect higher levels of performance.)

Statewide Assessment Information

According to the Statewide Assessment, State statute requires that "each child in foster care shall be assigned a permanent plan goal to be reviewed and approved by the JDR district court having jurisdiction of the child's case." The Statewide Assessment notes that in Virginia permissible plan goals are the following: transfer custody of the child to his prior family, transfer custody of the child to a relative other than his prior family, finalize an adoption of the child, place the child in permanent foster care, transition to independent living, or place the child in another planned permanent living arrangement (APPLA).

The Statewide Assessment also notes that in 2003 Virginia implemented a concurrent planning pilot program in 20 LDSS and developed a concurrent planning handbook with assistance from the National Resource Center for Foster Care and Permanency Planning. It was reported that the pilot concluded in 2006, but that VDSS is exploring the possibility of implementing concurrent planning statewide as a strategy for the Virginia Children's Services System Transformation (the Transformation) initiative. The Statewide Assessment notes that the practice of using concurrent planning has served to increase the percentage of children who have an appropriate permanency goal established in a timely manner. However, no data were provided in the Statewide Assessment to support this assertion.

With regard to filing for TPR in accordance with ASFA requirements, the Statewide Assessment indicates that VDSS partnered with CIP to develop and disseminate policy on filing petitions for TPR simultaneously with petitions for an initial permanency planning

hearing to change the goal to adoption. The policy was distributed to LDSS, JDR courts, guardians *ad litem*, CASAs, and LDSS attorneys. The Statewide Assessment also reports that VDSS began tracking petition dates in OASIS and developed a report that identifies the percentage of cases that have petitions for TPR filed simultaneously with the petitions for the initial permanency planning hearing. It was noted that generating reports from OASIS has helped to promote the timeliness of filing the petition for TPR. The Statewide Assessment did not provide data pertaining to the percentage of cases in which TPR is filed in accordance with ASFA requirements.

The Statewide Assessment also reports that caseworkers were asked to rank the following reasons for not filing a TPR in accordance with ASFA timeframes: child opposed to TPR, parent opposed to TPR, unavailability of services, child perceived as unadoptable, and availability of adoptive parents. The survey results were the following:

- 43 percent indicated that the number one reason for not filing was “child opposed to TPR.”
- 24 percent indicated that “parents opposed to TPR” was the second most common reason.
- 26 percent and 29 percent indicated that “unavailability of services” was the third and fourth most common reason.
- 29 percent indicated that the lack of “availability of adoptive parents” was the fifth most common reason.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review did not provide substantive comments regarding whether appropriate permanency goals are established in a timely manner. However, several stakeholders expressed the opinion that the child welfare agency uses concurrent planning when it is appropriate. A few stakeholders reported that caseworkers discuss the concurrent planning process and concurrent goals with parents. A few stakeholders also reported that the concurrent plan usually involves exploring relatives as options for permanent custody while pursuing reunification with parents.

Stakeholder comments pertaining to the agency filing for TPR in accordance with the timeframes established by ASFA are provided under item 28 in the Systemic Factors section of this report.

Item 8. Reunification, guardianship, or permanent placement with relatives

Strength Area Needing Improvement

Case Review Findings

Item 8 was applicable for 13 (32.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine whether the agency had achieved the permanency goals of reunification, guardianship, or permanent placement with relatives in a timely manner or, if the goals had not been achieved, whether the agency had made, or was in the process of making, diligent efforts to achieve the goals. The results of the assessment of item 8 are presented in the table below.

Item 8 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	4	4	1	9	69
Area Needing Improvement	2	0	2	4	31
Total Applicable Foster Care Cases	6	4	3	13	
Not Applicable Foster Care Cases	14	6	7	27	
Total Foster Care Cases	20	10	10	40	
Strength by Site	67%	100%	33%		

Item 8 was rated as a Strength when reviewers determined that the goal had been achieved in a timely manner or that the agency had made concerted efforts to achieve the goal in a timely manner. Item 8 was rated as an Area Needing Improvement in four cases when reviewers determined that the agency had not made concerted efforts to achieve reunification or permanent placement with relatives in a timely manner.

Rating Determination

Item 8 was assigned an overall rating of Area Needing Improvement. In 69 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to attain the goals of reunification or permanent placement with relatives in a timely manner. This percentage is less than the 90 percent required for a rating of Strength. Item 8 also was rated as an Area Needing Improvement in the State's 2003 CFSR.

Performance on the Individual Measures Pertaining to Timeliness Included in Composite 1: Timeliness and permanency of reunification

The data below are presented to provide additional information about the timeliness of reunification. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State's performance on Composite 4 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, Virginia's performance on the individual timeliness measures included in Composite 1: Timeliness and permanency of reunification was the following:

- C1.1: 64.0 percent of the reunifications occurred in at least 8 days but less than 12 months of the child's entry into foster care. This percentage is less than the national median of 69.9 percent.
- C1.2: The median length of stay in foster care for children discharged to reunification was 8.0 months. This length of stay is greater than the national median of 6.5 months. (For this measure, a lower number of months reflects a higher level of performance.)
- C1.3: 23.1 percent of children entering foster care in the 6 months prior to the 12-month target period were discharged from foster care to reunification in more than 7 days but less than 12 months of entry into foster care. This percentage is less than the national median of 39.4 percent.

Statewide Assessment Information

According to the Statewide Assessment, foster care policy indicates that reunification usually is the initial permanent case goal and when reunification is the goal reasonable efforts must be made to reunite the child with his or her family. Reunification services must be provided to the child and parents early in the placement process to ensure that parents have adequate time to remedy the conditions that brought the child into foster care.

The Statewide Assessment notes that Virginia's Progress to Excellence Report indicates that 66.31 percent of the reunifications occurring from July 1, 2007, to June 30, 2008, were completed within 12 months of the children entering foster care.

Stakeholder Interview Information

There were insufficient substantive comments from stakeholders regarding this item during the Onsite Review.

Item 9. Adoption

Strength Area Needing Improvement

Case Review Findings

Item 9 was applicable for 12 (30 percent) of the 40 foster care cases. In assessing this item, reviewers were to determine whether diligent efforts had been, or were being, made to achieve a finalized adoption in a timely manner. The results of the assessment of item 9 are presented in the table below.

Item 9 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	2	0	2	4	33
Area Needing Improvement	4	3	1	8	67
Total Applicable Foster Care Cases	6	3	3	12	
Not Applicable Foster Care Cases	14	7	7	28	
Total Foster Care Cases	20	10	10	40	
Strength by Site	33%	0%	67%		

Item 9 was rated as a Strength when reviewers determined that the State had made diligent efforts to achieve finalized adoptions in a timely manner. Item 9 was rated as an Area Needing Improvement in eight cases when reviewers identified the following:

- Delays in filing for TPR (one case)
- Delays in the TPR process due to appeals (two cases)
- Delays in completing or approving home studies (two cases)
- Delays due to a general lack of effort to finalize an adoption (three cases)

Additional findings relevant to this item were the following:

- Of the 12 children with a goal of adoption, 7 achieved the goal during the period under review.
- Of the seven children who had a finalized adoption during the period under review, one had been in foster care for 24 months, three had been in foster care for 25 to 30 months, and three had been in foster care for more than 30 months.
- Of the five children with a goal of adoption who were not adopted during the period under review, three had been in foster care for at least 24 months.

Rating Determination

Item 9 was assigned an overall rating of Area Needing Improvement. In 33 percent of the cases, reviewers determined that the agency had made concerted efforts to achieve a finalized adoption in a timely manner. This percentage is less than the 90 percent required for a rating of Strength. Item 9 also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Performance on the Individual Measures Included in Composite 2: Timeliness of adoptions

The data below are presented to provide additional information about the timeliness of adoptions. There are no national standards for performance on these measures individually. National standards have been established only for the scaled composite score. The State's performance on Composite 2 is shown in the table for Permanency Outcome 1.

For the target 12-month CFSR period established for the data indicators, the State's performance on the individual measures included in Composite 2: Timeliness of adoptions was the following:

- C2.1: 30.9 percent of the children exiting to adoption were discharged in less than 24 months from the time of entry into foster care. This percentage is greater than the national median of 26.8 percent but less than the national 75th percentile of 36.6 percent.
- C2.2: The median length of stay in foster care for children adopted was 29.8 months. This median length of stay is less than the national median of 32.4 months, but greater than the national 25th percentile of 27.3 months. (For this measure, a lower number of months reflects a higher level of performance.)
- C2.3: 13.9 percent of children who were in foster care for 17 months or longer on the first day of the year were discharged to a final adoption by the last day of the year. This percentage is less than the national median of 20.2 percent.
- C2.4: 4.3 percent of children who were in foster care for 17 months or longer on the first day of the year became legally free for adoption (i.e., there was a TPR for both mother and father) within the first 6 months of the year. This percentage is less than the national median of 8.8 percent.
- C2.5: 38.2 percent of children who were legally free for adoption were adopted within 12 months of becoming legally free. This percentage is less than the national median of 45.8 percent.

Statewide Assessment Information

According to the Statewide Assessment, the State's performance with regard to achieving adoptions in a timely manner is an Area Needing Improvement due to the following:

- Insufficient staff resources at both the State and local levels to support adoption efforts
- Insufficient numbers of adoptive families
- Substantial delays in achieving TPR due to the Code of Virginia's provision for two levels of appeals to a TPR order from the JDR court

The Statewide Assessment notes that 98 of the 120 LDSS surveyed responded to the survey's request to rank from one to three the following reasons for delays in achieving TPR. The reasons were appeals, court reluctance to terminate, and court scheduling. The results were as follows:

- 53 percent responded that "appeals" was the number 1 reason.
- 43 percent responded that the "courts' reluctance to terminate" was the number 2 reason.
- 39 percent reported that "court scheduling" was the number 3 reason.

As indicated in the Statewide Assessment, caseworkers also were asked how often certain factors caused delays in the timely finalization of an adoption. The survey results were the following:

- "Delay in TPR" usually delayed finalization: 38 percent
- "Delay in TPR" often delayed finalization: 21 percent
- "Child behavioral issues" sometimes delayed finalization: 48 percent
- "A child's medical issues" rarely delayed finalization: 47 percent
- "A child's medical issues" never delayed finalization: 17 percent
- "Delay in completing paperwork" rarely delayed finalization: 45 percent
- "Delay in completing paperwork" never delayed finalization: 18 percent

Stakeholder Interview Information

Several stakeholders commenting on this item during the Onsite Review expressed the opinion that a key barrier to achieving adoptions in a timely manner is the TPR appeals process in Virginia. Two Hampton City stakeholders also noted that TPR generally does not occur in that location until an adoptive family is identified. A few stakeholders noted that in the majority of adoptions, the adoptive families are the child's foster parents.

Item 10. Other planned permanent living arrangement

 Strength X Area Needing Improvement

Case Review Findings

Item 10 was applicable for 15 (37.5 percent) of the 40 foster care cases. In assessing these cases, reviewers were to determine if the agency had made, or was making, diligent efforts to assist children in attaining their goals related to OPPLA. The results of the assessment of item 10 are presented in the table below.

Item 10 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	6	3	3	12	80
Area Needing Improvement	2	0	1	3	20
Total Applicable Foster Care Cases	8	3	4	15	
Not Applicable Foster Care Case	12	7	6	25	
Total Foster Care Cases	20	10	10	40	
Strength by Site	75%	100%	75%		

Item 10 was rated as a Strength in 12 cases when reviewers determined that the agency had made concerted efforts to ensure a long-term placement for the child and/or to provide services necessary to prepare the child for independent living. Item 10 was rated as an Area Needing Improvement in three cases when reviewers determined that the child was not in a permanent placement, and there were no formal agreements to provide a home for the child until the age of majority.

The table below provides the ages of the children when the goal of OPPLA was established.

Age of Child When OPPLA Was Established	Number of Children
12 or younger	2
At least 13 but younger than 16	7
16 or older	6
Total	15

Rating Determination

Item 10 was assigned an overall rating of Area Needing Improvement. In 80 percent of the applicable cases, reviewers determined that the goal of OPPLA was being addressed in an appropriate way. This percentage is less than the 90 percent required for a rating of Strength. Item 10 was rated as a Strength in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the State has three permanency goals that would fall under the CFSR category of OPPLA. One is the goal of permanent foster care, which is to be selected for a child only after a determination that the goals of return home, placement with relatives, or adoption of the child are not reasonable alternatives and the child is age 14 or older. Another goal,

independent living, may be chosen for youth ages 16 and older when all other goals have been considered and found to be not feasible. The third goal, APPLA, is considered appropriate only if the child has a severe, disabling, and chronic emotional, physical, or neurological condition that requires residential treatment of 6 months or longer.

Stakeholder Interview Information

Most State-level, Hampton City, and Tazewell County stakeholders who commented on this item during the Onsite Review spoke about independent living (IL) programs available for youth in foster care. They expressed different opinions about the quality and sufficiency of these services. Some stakeholders suggested that existing IL services adequately prepare youth for successful independent living, and a few said the IL program focuses on ensuring that youth participate in higher education opportunities. Other stakeholders, however, indicated that youth are not receiving the IL services they need to succeed and that funding for IL services is insufficient.

Permanency Outcome 2

Outcome P2: The continuity of family relationships and connections is preserved for children					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	13	5	8	26	66.7
Partially Achieved	7	5	1	13	33.3
Not Achieved	0	0	0	0	0
Total Applicable Cases	20	10	9	39	
Not Applicable Foster Care Cases	0	0	1	1	
Total Foster Care Cases	20	10	10	40	
Substantially Achieved by Site	65%	50%	89%		

Status of Permanency Outcome 2

Virginia is not in substantial conformity with Permanency Outcome 2. The outcome was substantially achieved in 66.7 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 CFSR:

- The State was not consistent in ensuring sufficient visitation for children in foster care with their parents.

- The State was not consistent in supporting the relationship of children in care with either their mothers or fathers or in preserving the child’s connections to extended family.
- The State was not consistent in seeking or assessing either maternal or paternal relatives as placement resources.

To address the identified concerns, the State implemented the following strategies:

- Established guidelines and best practice strategies for visits among children in foster care and their parents and siblings
- Increased the involvement of resource parents, foster parents, and adoptive parents in facilitating contact among children in foster care and their parents and siblings
- Strengthened policy and practice on preserving connections for children in foster care such as statewide use of Life Books
- Developed and used a Relative Identifier form to expedite the identification and location of relatives as placement options for children entering foster care
- Developed State guidance and implemented collaborative efforts with the VDSS Division of Licensing Programs (DOLP) to promote increased contact between children in foster care and their parents through venues such as e-mail and phone calls as well as visitation

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Key Findings of the 2003 CFSR

The findings pertaining to the items assessed under Permanency Outcome 2 are presented and discussed below.

Item 11. Proximity of foster care placement

 X Strength Area Needing Improvement

Case Review Findings

Item 11 was applicable for 29 (72.5 percent) of the 40 foster care cases. Cases were not applicable if TPR was attained prior to the period under review; contact with parents was not considered to be in the child’s best interests; and/or parents were deceased or their whereabouts were unknown. In assessing item 11, reviewers were to determine whether the child’s most current foster care setting was near the child’s parents or close relatives. The results of the assessment of item 11 are presented in the table below.

Item 11 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	16	5	8	29	100
Area Needing Improvement	0	0	0	0	0
Total Applicable Foster Care Cases	16	5	8	29	
Not Applicable Foster Care Cases	4	5	2	11	
Total Foster Care Cases	20	10	10	40	
Strength by Site	100%	100%	100%		

Item 11 was rated as a Strength when reviewers determined that the child was placed either in the same community as the parents or near the parents' community. The item also was rated as a Strength when reviewers determined that even though the child was placed out of his or her community, the placement was necessary to meet the needs of the child and/or support attainment of the permanency goal.

Rating Determination

Item 11 was assigned an overall rating of Strength. In 100 percent of applicable cases, reviewers determined that the agency placed children in locations close to their parents or relatives when appropriate. This percentage is greater than the 90 percent required for a rating of Strength. Item 11 also was rated as a Strength in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, agency policy requires LDSS to place the child as close as possible to the parent(s) or prior custodian's home. The Statewide Assessment also notes that the service plan must include a discussion of efforts made to place the child close to the parent's home.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the State is effective in placing children close to parents whenever possible.

Item 12. Placement with siblings

 X **Strength** **Area Needing Improvement**

Case Review Findings

Item 12 was applicable for 18 (45 percent) of the 40 foster care cases. Cases were not applicable if the child did not have a sibling in foster care at any time during the period under review. In assessing item 12, reviewers were to determine whether siblings were

currently, or had been, placed together, and if separated, whether the separation was necessary to meet the service or safety needs of one or more of the children. The results of the assessment of item 12 are presented in the table below.

Item 12 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	10	5	2	17	94
Area Needing Improvement	0	1	0	1	6
Total Applicable Foster Care Cases	10	6	2	18	
Not Applicable Foster Care Cases	10	4	8	22	
Total Foster Care Cases	20	10	10	40	
Strength by Site	100%	83%	100%		

Item 12 was rated as a Strength when reviewers determined that the child was placed with siblings (5 cases), the separation of siblings was necessary because one of the siblings had special placement needs, or because placement with siblings was not in the child’s best interests (12 cases). Item 12 was rated as an Area Needing Improvement in one case when reviewers determined that the agency had not made concerted efforts to place three siblings together.

Rating Determination

Item 12 was assigned an overall rating of Strength. In 94 percent of the applicable cases, reviewers determined that the agency placed siblings together in foster care whenever appropriate. This percentage is greater than the 90 percent required for a rating of Strength. Item 12 also was rated as a Strength in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the Code of Virginia requires that all reasonable steps be taken to place siblings together.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the State makes concerted efforts to place siblings together when it is appropriate.

Item 13. Visiting with parents and siblings in foster care

 Strength **X** Area Needing Improvement

Case Review Findings

Item 13 was applicable for 33 (82.5 percent) of the 40 foster care cases. Cases were not applicable for an assessment of this item if the child had no siblings in foster care and if one of the following conditions was met with regard to the parents: TPR was established

prior to the period under review and parents were no longer involved in the child’s life or were deceased; or visitation with a parent was not considered in the best interests of the child. In assessing this item, reviewers were to determine whether the agency had made, or was making, diligent efforts to facilitate sufficient visitation between children in foster care and their parents and between children in foster care and their siblings also in foster care and whether the visits occurred with sufficient frequency to meet the needs of children and families. The results of the assessment of item 13 are presented in the table below.

Item 13 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	11	1	6	18	55
Area Needing Improvement	7	6	2	15	45
Total Applicable Foster Care Cases	18	7	8	33	
Not Applicable Foster Care Cases	2	3	2	7	
Total Foster Care Cases	20	10	10	40	
Strength by Site	61%	14%	75%		

Item 13 was rated as a Strength when reviewers determined that the frequency and quality of visitation with parents and siblings met the needs of the children. Item 13 was rated as an Area Needing Improvement in 15 cases when reviewers determined one or more of the following:

- The agency did not make concerted efforts to promote visitation with the mother (seven cases).
- The agency did not make concerted efforts to promote visitation with the father (nine cases).
- The agency did not make concerted efforts to promote visitation with siblings in foster care (seven cases).

Additional information about visitation frequency is provided in the table below.

Typical Frequency of Child’s Visits During the Period Under Review	With Mother	With Father	With Siblings in Foster Care
Visits occurred at least once a week	6 (21%)	4 (21%)	2 (15%)
Visits occurred less frequently than once a week but at least twice a month	7 (25%)	2 (11%)	1 (8%)
Visits occurred less frequently than twice a month but at least once a month	6 (21%)	1 (5%)	1 (8%)
Visits occurred less frequently than once a month	5 (18%)	7 (37%)	6 (46%)
There were no visits during the period under review	4 (14%)	5 (26%)	3 (23%)
Total Applicable Cases	28	19	13

The data indicate that children in the cases reviewed visited with their mothers at least once a month in 68 percent of applicable cases, visited with their fathers at least once a month in 37 percent of applicable cases, and visited with their siblings at least once a month in 31 percent of applicable cases.

Rating Determination

Item 13 was assigned an overall rating of Area Needing Improvement. In 55 percent of the applicable cases, reviewers determined that the agency made concerted efforts to ensure that visitation was of sufficient frequency to meet the needs of the family. This percentage is less than the 90 percent required for a rating of Strength. Item 13 also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, LDSS are required to develop a visitation plan with the birth parents and siblings and present it to the court as part of the service plan. The Code of Virginia grants the courts the authority to grant visitation and to determine the nature and extent of any visitation rights granted.

Stakeholder Interview Information

There were insufficient substantive comments from stakeholders regarding this item during the Onsite Review.

Item 14. Preserving connections

Strength Area Needing Improvement

Case Review Findings

Item 14 was applicable for 39 (97.5 percent) of the 40 foster care cases. One case was not applicable because parental rights were terminated prior to the period under review and when the child was an infant. In assessing item 14, reviewers were to determine whether the agency had made, or was making, diligent efforts to preserve the child's connections to neighborhood, community, heritage, extended family, faith, and friends while the child was in foster care. This item is not rated on the basis of visits or contacts with parents or siblings in foster care.

The results of the assessment of item 14 are presented in the table below.

Item 14 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	16	9	8	33	85
Area Needing Improvement	4	1	1	6	15
Total Applicable Foster Care Cases	20	10	9	39	
Not Applicable Foster Care Cases	0	0	1	1	
Total Foster Care Cases	20	10	10	40	
Strength by Site	80%	90%	89%		

Item 14 was rated as a Strength when reviewers determined that the agency made concerted efforts to preserve the child’s connections with extended family members, religious or cultural heritage, schools, community, and friends. Item 14 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The agency did not make concerted efforts to maintain the child’s connections to extended family (four cases).
- The agency did not make concerted efforts to maintain the child’s connections with neighborhood, community, school, and friends (four cases).

Rating Determination

Item 14 was assigned an overall rating of Area Needing Improvement. In 85 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to maintain the child’s connections with extended family, culture, religion, community, and school. This percentage is less than the 90 percent required for a rating of Strength. Item 14 also was rated as an Area Needing Improvement in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, policy requires the following caseworker actions in order to support continuity of a child’s connections:

- Placement as close as possible to the birth parents
- Promotion and preservation of kinship, sibling, and community connections
- Creation of a Life Book to accompany a child through the course of his or her involvement in foster care
- Retention in the same school when it is in the child’s best interests

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the agency makes efforts to ensure that children’s connections to school, extended family, community, religion, and cultural heritage are preserved while the child is in foster care.

Item 15. Relative placement

Strength Area Needing Improvement

Case Review Findings

Item 15 was applicable for 29 (72.5 percent) of the 40 foster care cases. Cases were not applicable if relative placement was not an option during the period under review because the child was in an adoptive placement at the start of the time period, or the child entered foster care needing specialized services that could not be provided in a relative placement. In assessing this item, reviewers were to determine whether the agency made diligent efforts to locate and assess both maternal and paternal relatives as potential placement resources for children in foster care. The results of the assessment of item 15 are presented in the table below.

Item 15 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	7	5	4	16	55
Area Needing Improvement	9	2	2	13	45
Total Applicable Foster Care Cases	16	7	6	29	
Not Applicable Foster Care Case	4	3	4	11	
Total Foster Care Cases	20	10	10	40	
Strength by Site	44%	71%	67%		

Item 15 was rated as a Strength when reviewers determined the following:

- The child was placed with relatives (two cases).
- The child was not placed with relatives, but the agency made diligent efforts to search for both maternal and paternal relatives when applicable (13 cases).
- The child was in a court-ordered permanent placement in a foster home during the entire period under review and sufficient relative searches had been conducted prior to establishing the permanent placement (one case).

Item 15 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The agency had not made efforts to search for maternal relatives (11 cases).
- The agency had not made efforts to search for paternal relatives (11 cases).

Rating Determination

Item 15 was assigned an overall rating of Area Needing Improvement. In 55 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to locate and assess relatives as potential placement resources. This percentage is less than the 90 percent required for a rating of Strength. Item 15 also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the Code of Virginia requires that local agencies seek kinship care options to keep children out of foster care or to provide a placement for children in foster care, if it is in the child's best interest. The Statewide Assessment reports that in Federal FY 2008 there were 7,126 children in foster care; of this number, 380 children (5 percent) were placed in foster homes with relatives.

Stakeholder Interview Information

Many stakeholders at the local sites who commented on this item during the Onsite Review expressed the opinion that relatives are routinely sought as placement options for children in foster care. However, State-level stakeholders expressed some concerns about the diligence of relative searches and noted that relatives are more likely to be sought to divert children from foster care rather than as placement options for children in foster care.

According to some stakeholders, the Virginia barrier crime law is viewed as an impediment to the placement of children with relative families. They noted that when a family member has a criminal record that includes a barrier crime, a child cannot be placed with that person, even when it is determined that the barrier crime poses no immediate risk of harm to the child and that the home is otherwise suitable for placement.

Item 16. Relationship of child in care with parents

Strength Area Needing Improvement

Case Review Findings

Item 16 was applicable for 30 (75 percent) of the 40 foster care cases. Cases were not applicable if parental rights had been terminated before the period under review and parents were no longer involved with the child; a relationship with the parents was not considered in the child's best interests throughout the period under review; or both parents were deceased. In assessing this item, reviewers were to determine whether the agency had made diligent efforts to support or maintain the bond between children in foster care and their mothers and fathers through efforts other than arranging visitation. The results of the assessment of item 16 are presented below.

Item 16 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	9	2	5	16	53
Area Needing Improvement	7	4	3	14	47
Total Applicable Foster Care Cases	16	6	8	30	
Not Applicable Foster Care Cases	4	4	2	10	
Total Foster Care Cases	20	10	10	40	
Strength by Site	56%	33%	62.5%		

Item 16 was rated as a Strength when reviewers determined that the agency had made concerted efforts to support and/or strengthen the bond between parents and children through various activities. Item 16 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The agency did not make concerted efforts to support the relationship with the mother (11 cases).
- The agency did not make concerted efforts to support the relationship with the father (10 cases).

Specific findings pertaining to this item are shown in the table below.

Efforts Made	With Mother (Number of Cases)	With Father (Number of Cases)
Encouraging the parent’s participation in school or after-school activities and attendance at medical appointments and special events	9 (31%)	2 (11%)
Providing transportation so that parents can participate in these events, activities, or appointments	5 (17%)	3 (16%)
Providing opportunities for family therapeutic situations	15 (52%)	7 (37%)
Encouraging foster parents to mentor biological parents and serve as parenting role models for them	4 (14%)	2 (11%)
Encouraging and facilitating contact with incarcerated parents (when appropriate) or with parents living far away from the child	3 (10%)	3 (16%)
Total Applicable Cases	29	19

Rating Determination

Item 16 was assigned an overall rating of Area Needing Improvement. In 53 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to support the parent-child relationships of children in foster care. This percentage is less than the 90 percent required for a rating of Strength. Item 16 also was rated as an Area Needing Improvement in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, parents are encouraged to attend school meetings and medical appointments with their child who is in foster care when it is appropriate to do so. The Statewide Assessment notes that the State does not collect data related to item 16.

Stakeholder Interview Information

Some stakeholders commenting on this item during the Onsite Review expressed the opinion that parents are encouraged to participate in school events and medical appointments. Fairfax County stakeholders reported that in that county there is a program called Bridging the Gap that focuses on building relationships between foster parents and biological families.

III. CHILD AND FAMILY WELL-BEING

Well-Being Outcome 1

Outcome WB1: Families have enhanced capacity to provide for their children's needs					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	14	7	7	28	43.1
Partially Achieved	13	3	6	22	33.8
Not Achieved	4	7	4	15	23.1
Total Cases	31	17	17	65	
Substantially Achieved by Site	45%	41%	41%		

Status of Well-Being Outcome 1

Virginia is not in substantial conformity with Well-Being Outcome 1. The outcome was determined to be substantially achieved in 43.1 percent of the cases reviewed. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 52.5 percent of the 40 foster care cases and 28 percent of the 25 in-home services cases. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 review:

- The State was not consistent in its efforts to assess needs and provide services to children, parents, and foster parents.
- The State was not consistent in its efforts to ensure that caseworker's face-to-face contacts with children and their parents were of sufficient frequency and quality to meet the needs of children and families.
- The State was not consistent in its efforts to involve children and parents in case planning.

To address the identified concerns, the State took the following measures:

- Developed and implemented strategies to strengthen assessment of needs for children and parents, including SDM
- Developed and implemented strategies to strengthen service planning for children, parents, and resource parents
- Developed and implemented training for caseworkers focusing on improving the assessment of needs of foster parents and developed ongoing peer support groups to address those needs
- Revised policy to reinforce the involvement of parents in case planning and trained agency staff on the new policy

- Developed training on strength-based interviewing
- Developed and implemented policies to increase caseworker contacts with children and parents
- Developed a tool to guide caseworkers in making quality face-to-face contacts with children

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Well-Being Outcome 1 are presented and discussed below.

Item 17. Needs and services of child, parents, and foster parents

Strength Area Needing Improvement

Case Review Findings

Item 17 was applicable for all 65 cases. In assessing this item, reviewers were to determine whether the agency had adequately assessed the needs of children, parents, and foster parents and provided the services necessary to meet those needs. This item excludes the assessment of children’s (but not parents’) needs pertaining to education, physical health, and mental health. These areas are addressed in later items. The results of the assessment of item 17 are presented in the table below.

Item 17 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	15	7	8	30	46
Area Needing Improvement	16	10	9	35	54
Total Cases	31	17	17	65	
Strength by Site	48%	41%	47%		

Item 17 was rated as a Strength in 52.5 percent of the 40 foster care cases and 36 percent of the 25 in-home services cases. Item 17 was rated as a Strength when reviewers determined that the needs of children, parents, and foster parents had been adequately assessed and that identified service needs had been met. Item 17 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- The agency did not assess the needs of the mother (17 cases).
- The agency did not meet the assessed needs of the mother (21 cases).
- The agency did not assess the needs of the father (21 cases).
- The agency did not meet the assessed needs of the father (21 cases).

- The agency did not assess the needs of the child (seven cases).
- The agency did not meet the assessed needs of the child (six cases).
- The agency did not assess or meet the needs of the foster parents (one case).

Additional case review findings pertaining to needs assessments and service provisions are shown in the table below.

Target Person for Needs Assessment and Services	Foster Care Cases		In-Home Services Cases	
	Yes	Applicable	Yes	Applicable
Mother's needs assessed and met	15 (56%)	27	15 (60%)	25
Father's needs assessed and met	9 (45%)	20	9 (45%)	20
Foster parents' needs assessed and met	33 (97%)	34	NA	NA
Child's needs assessed and met	38 (95%)	40	20 (80%)	25

The data indicate that VDSS is more likely to assess needs and provide the necessary services to children (89 percent) and foster parents (97 percent) than it is to assess needs and provide the necessary services to mothers (58 percent) and fathers (45 percent).

Rating Determination

Item 17 was assigned an overall rating of Area Needing Improvement. In 46 percent of the cases, reviewers determined that the agency had adequately assessed and addressed the service needs of children, parents, and foster parents. This percentage is less than the 90 percent required for a rating of Strength. Item 17 also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, agency policy requires that the needs of the child, birth parents, and foster parents must be documented in the service plan and appropriate services must be made available. The Statewide Assessment notes that if a needed service is not available in the community, it is not included in the service plan. However, the Statewide Assessment also notes that caseworkers may include a service in the plan that is close to what is needed when that service is available in the community (e.g., outpatient substance abuse treatment when there is no in-patient treatment available).

As indicated in the Statewide Assessment, children receiving services funded by the Comprehensive Services Act (CSA) must have a Child and Adolescent Needs and Strengths assessment. Additional information about the CSA is provided under item 37 in the Systemic Factors section of this report.

Stakeholder Interview Information

Many stakeholders commenting on this item during the Onsite Review indicated that there are multiple and comprehensive assessments of the needs of children and parents and that concerted efforts are made to provide services to meet those needs. In

addition, most stakeholders indicated that the agency usually asks foster parents what they need and meets those needs. The supportive services most frequently mentioned by stakeholders as provided to foster parents were respite and training. However, a few State-level stakeholders expressed the opinion that foster parents often do not feel that their needs are addressed.

Item 18. Child and family involvement in case planning

 Strength X Area Needing Improvement

Case Review Findings

Item 18 was applicable for 61 (94 percent) of the 65 cases. A case was not applicable if parental rights had been terminated prior to the period under review, parents were not involved with the child in any way, and/or the child was too young or had cognitive delays or other conditions that were barriers to participation in case planning. In assessing this item, reviewers were to determine whether parents and children (when appropriate) had been involved in the case planning process, and, if not, whether their involvement was contrary to the child’s best interests. A determination of involvement in case planning required that a parent or child actively participated in identifying the services and goals included in the case plan. The results of the assessment of item 18 are presented in the table below.

Item 18 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	17	8	7	32	52
Area Needing Improvement	12	9	8	29	48
Total Applicable Cases	29	17	15	61	
Not Applicable Cases	2	0	2	4	
Total Cases	31	17	17	65	
Strength by Site	59%	47%	47%		

Item 18 was rated as a Strength in 58 percent of the 36 applicable foster care cases and 44 percent of the 25 applicable in-home services cases. The item was rated as a Strength when reviewers determined that all appropriate parties had actively participated in the case planning process or that the agency had made concerted efforts to involve them in the case planning process. Item 18 was rated as an Area Needing Improvement when reviewers determined that the agency had not made concerted efforts to involve the mother, father, and/or child (when appropriate) in the case planning process.

Specific information about involving mothers, fathers, and children in case planning is shown in the table below.

Person Involved in Case Planning	Foster Care Cases		In-Home Services Cases	
	Yes	Applicable Cases	Yes	Applicable Cases
Mother involved in case planning?	19 (68%)	28	17 (68%)	25
Father involved in case planning?	9 (47%)	19	9 (45%)	20
Children involved in case planning?	25 (83%)	30	12 (67%)	18

Rating Determination

Item 18 was assigned an overall rating of Area Needing Improvement. In 52 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to involve parents and/or children in the case planning process. This percentage is less than the 90 percent required for a rating of Strength. Item 18 also was rated as an Area Needing Improvement in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, agency policy requires that the family be involved and engaged in case planning, including children who are old enough (generally age 12 and older) and/or of sufficient maturity to participate. The Statewide Assessment provides the following findings from a survey in which 98 LDSS responded to questions regarding whether children and parents were able to self-identify needs for inclusion in the case plan:

- When asked if children’s self-identified needs were incorporated into case plans, 99 percent of the 98 LDSS responded “yes.”
- When asked if parent’s self-identified needs were incorporated into case plans, 100 percent of the 98 LDSS responded “yes.”

Despite the willingness of caseworkers to incorporate parents’ and children’s self-identified needs in the case plan, the Statewide Assessment notes that lack of input from parents in the development of the case plan continues to be an issue that the State needs to address. As reported in the Statewide Assessment, in a survey of 120 LDSS with 98 LDSS responding, only 51 percent of respondents said that parents “usually” participate in developing case plans.

Stakeholder Interview Information

Several Fairfax County and Hampton City stakeholders commenting on this item during the Onsite Review expressed the opinion that children, particularly those age 12 and older, are involved in case planning. Hampton City stakeholders also noted that, in that location, the agency makes concerted efforts to engage parents in the case planning process. Additional stakeholder comments about the involvement of parents in case planning are provided under item 25 in the systemic factors section of this report.

Item 19. Caseworker visits with child

Strength Area Needing Improvement

Case Review Findings

Item 19 was applicable for all 65 cases. In assessing this item, reviewers were to determine whether the frequency of visits between the caseworkers and children was sufficient to ensure adequate monitoring of the child’s safety and well-being, and whether visits focused on issues pertinent to case planning, service delivery, and goal attainment. The results of the assessment of item 19 are presented in the table below.

Item 19 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	25	10	8	43	66
Area Needing Improvement	6	7	9	22	34
Total Cases	31	17	17	65	
Strength by Site	81%	59%	47%		

Item 19 was rated as a Strength in 80 percent of the 40 foster care cases and 44 percent of the 25 in-home services cases. The item was rated as a Strength when reviewers determined that the frequency and quality of visits between the caseworkers and children were sufficient to ensure adequate monitoring of the child’s well-being and promote attainment of case goals. Item 19 was rated as an Area Needing Improvement when reviewers determined the following:

- The frequency of caseworker visits was not sufficient to meet the needs of the child and when visits did occur they did not focus on issues pertinent to case planning, service delivery, and goal attainment (seven cases).
- The frequency of caseworker visits with children was not sufficient to meet the needs of the child, although when visits did occur, they focused on issues pertinent to case planning, service delivery, and goal attainment (five cases).
- The frequency of caseworker visits was sufficient, but the visits did not focus on issues pertinent to case planning, service delivery, and goal attainment (10 cases).

Specific information regarding the frequency of visitation is provided in the table below.

Typical Frequency of Caseworker Visits With Child During the Period Under Review	Foster Care Cases (Number and Percent)	In-Home Services Cases (Number and Percent)
Visits occurred at least once a week	2 (5%)	4 (16%)
Visits occurred less frequently than once a week but at least twice a month	8 (20%)	2 (8%)
Visits occurred less frequently than twice a month but at least once a month	27 (67.5%)	11 (44%)
Visits occurred less frequently than once a month	3 (7.5%)	8 (32%)
There were no visits during the period under review	0	0
Total Cases	40	25

Rating Determination

Item 19 was assigned an overall rating of Area Needing Improvement. In 66 percent of the cases, reviewers determined that caseworker visits with children were of sufficient frequency and quality. This percentage is less than the 90 percent required for a rating of Strength. Item 19 also was rated as an Area Needing Improvement in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, on August 27, 2008, VDSS issued Broadcast 5131, which required that all children in foster care have a monthly face-to-face contact with an approved caseworker that occurs in the child's place of residence more than 50 percent of the time. Approved caseworkers were defined as one of the following:

- The primary LDSS caseworker
- Other caseworkers who attend case planning meetings for the child on an ongoing basis and are known by the child
- Case aides, volunteers, bachelor or master's level student interns as long as they meet the criteria above and are specifically assigned to provide ongoing assistance in a particular case
- CSA coordinators

The Statewide Assessment notes that information concerning caseworker visits is gathered on a monthly and quarterly basis and sent to all LDSS for review. The data from the last quarterly report, which ran from October 2008 through December 2008, indicate that 64.4 percent of the children in foster care had monthly visits, and 50.65 percent of those visits were in the place of residency. As reported in the Statewide Assessment, 98 LDSS completing an agency survey identified the following barriers to caseworker visits with children in foster care: staff shortages, lack of trained staff, distance of the children's placements from LDSS, and transportation costs.

The Statewide Assessment also notes that CPS policy includes the following minimum requirements for the frequency of contacts between CPS caseworkers and the child and family:

- There must be face-to-face contact between the CPS caseworker and the child and family at least one time per month.
- The CPS caseworker must visit in the family home at least one time every other month.
- All contacts must be documented in the automated data system.

Stakeholder Interview Information

Stakeholders commenting on the frequency of caseworker visits with children expressed different opinions. Although most stakeholders indicated that visits with children occur at least once a month, a few stakeholders reported that sometimes visits are less frequent. However, for many of these stakeholder comments, it is not clear whether they are referring to children in the foster care or in-home services cases.

Item 20. Caseworker visits with parent(s)

Strength **Area Needing Improvement**

Case Review Findings

Item 20 was applicable for 55 (85 percent) of the 65 cases. Cases were not applicable for this assessment if parental rights had been terminated prior to the period under review and parents were no longer involved in the lives of their children. All cases that were not applicable are foster care cases. Reviewers were to assess whether the caseworker’s face-to-face contact with the children’s mothers and fathers was of sufficient frequency and quality to promote attainment of case goals and ensure the children’s safety and well-being. The results of the assessment of item 20 are presented in the table below.

Item 20 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	12	5	4	21	38
Area Needing Improvement	16	7	11	34	62
Total Applicable Cases	28	12	15	55	
Not Applicable Cases	3	5	2	10	
Total Cases	31	17	17	65	
Strength by Site	43%	42%	27%		

Item 20 was rated as a Strength in 40 percent of the 30 applicable foster care cases and 36 percent of the 25 in-home services cases. The item was rated as a Strength when reviewers determined that visits occurred with sufficient frequency to meet the needs of parents and children and that visits focused on issues pertinent to case planning, service delivery, and goal attainment. Item 20 was rated as an Area Needing Improvement when reviewers determined one or more of the following:

- There were no visits with the mother (four cases).
- Visits with the mother were neither of sufficient frequency nor quality (12 cases).
- Visits with the mother were not of sufficient frequency, although when they did occur they were of sufficient quality (two cases).
- Visits with the mother were of sufficient frequency but were not of sufficient quality (six cases).
- Visits with the mother were not of sufficient frequency but the quality was not evaluated (one case).
- There were no visits with the father (nine cases).
- Visits with the father were not of sufficient frequency or quality (11 cases).
- Visits with the father were of sufficient frequency but were not of sufficient quality (one case).

Additional information from the case reviews is provided in the table below.

Typical Frequency of Caseworker Visits With Parents During the Period Under Review	Foster Care Cases		In-Home Services	
	Mother	Father	Mother	Father
Visits occurred at least once a week	2 (7%)	2 (11%)	3 (12%)	0
Visits occurred less frequently than once a week but at least twice a month	1 (4%)	0	3 (12%)	0
Visits occurred less frequently than twice a month but at least once a month	11 (39%)	4 (22%)	11 (44%)	6 (32%)
Visits occurred less frequently than once a month	11 (39%)	8 (44%)	7 (28%)	8 (42%)
There were no visits during the period under review	3 (11%)	4 (22%)	1 (4%)	5 (26%)
Total Applicable Cases	28	18	25	19

The data in the table indicate that in the cases reviewed, mothers were visited at least once a month in 58 percent of the applicable cases, while fathers were visited at least once a month in 32 percent of the applicable cases.

Rating Determination

Item 20 was assigned an overall rating of Area Needing Improvement. In 38 percent of the applicable cases, reviewers determined that the frequency and quality of caseworker visits with parents were sufficient to monitor the safety and well-being of the child or promote attainment of case goals. This percentage is less than the 90 percent required for a rating of Strength. Item 20 also was rated as an Area Needing Improvement in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, as noted under item 19, CPS policy requires that CPS caseworkers must have face-to-face contact with the parents in the in-home services cases at least once a month, and, at least once every other month, the caseworker must visit the parents in the family home. Foster care policy requires caseworkers to encourage and maintain regular involvement with the family to facilitate the child’s return home.

Stakeholder Interview Information

There were insufficient substantive comments from stakeholders regarding this item during the Onsite Review.

Well-Being Outcome 2

Outcome WB2: Children receive appropriate services to meet their educational needs					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	18	12	9	39	83.0
Partially Achieved	0	1	1	2	4.3
Not Achieved	1	3	2	6	12.8
Total Applicable Cases	19	16	12	47	
Not Applicable Cases	12	1	5	18	
Total Cases	31	17	17	65	
Substantially Achieved by Site	95%	75%	75%		

Status of Well-Being Outcome 2

Virginia is not in substantial conformity with Well-Being Outcome 2. The outcome was substantially achieved in 83 percent of the cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in 92 percent of the 36 applicable foster care cases and 55 percent of the 11 applicable in-home services cases. The State was in substantial conformity with this outcome in its 2003 CFSR and was not required to address the outcome in its Program Improvement Plan.

Key Findings of the 2009 CFSR

Findings pertaining to the single item assessed under Well-Being Outcome 2 are presented and discussed below.

Item 21. Educational needs of the child

Strength Area Needing Improvement

Case Review Findings

Item 21 was applicable for 47 (72 percent) of the 65 cases reviewed. Cases were not applicable if either of the following applied: Children were not of school age, or children in the in-home services cases did not have service needs pertaining to education-related issues. In assessing this item, reviewers were to determine whether children's educational needs were appropriately assessed and whether services were provided to meet those needs. The results of the assessment of item 21 are presented in the table below.

Item 21 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	18	12	9	39	83
Area Needing Improvement	1	4	3	8	17
Total Applicable Cases	19	16	12	47	
Not Applicable	12	1	5	18	
Total Cases	31	17	17	65	
Strength by Site	95%	75%	75%		

Item 21 was rated as a Strength when reviewers determined that the child’s educational needs were appropriately assessed and services were provided, if necessary. Item 21 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The child’s educational needs were not assessed (seven cases).
- The child had identified educational needs that were not addressed (seven cases).

Rating Determination

Item 21 was assigned an overall rating of Area Needing Improvement. In 83 percent of the applicable cases, reviewers determined that the agency had made diligent efforts to meet the educational needs of children. This percentage is less than the 95 percent required for this item to be rated as a Strength. A 95-percent standard is established for this item because it is the only item assessed for this outcome. Item 21 was rated as a Strength in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, agency policy requires that information on the child’s educational achievement and difficulties must be included in the initial assessment for all children entering foster care and the service plan review must address the current educational status of the child. The Statewide Assessment notes that the caseworker must give the foster parent a copy of the initial assessment and all service plan reviews at the time of placement in the foster home and periodically, as needed. The Statewide Assessment also notes that all LDSS are responsible for advocating for the educational needs of children in foster care by attending the Individual Education Program (IEP) meetings and/or FAPT meetings during which the child’s educational needs are addressed.

In addition, the Statewide Assessment indicates that educational assessments are conducted on children in the in-home services cases as part of the assessment of the child’s strengths and needs. The Statewide Assessment reports that for the children in the in-home services cases, assessed educational needs are addressed on an individual basis.

Stakeholder Interview Information

Some stakeholders commenting on this item during the Onsite Review indicated that the agency and/or the foster parent will try to get an IEP for a child if needed and caseworkers will attend IEPs if they are invited or given enough notice. A few stakeholders also mentioned that the agency makes concerted efforts to keep children in the same school. Fairfax County stakeholders indicated that there is a Foster Care Parent Educator within the public school system who works specifically with foster children.

Well-Being Outcome 3

Outcome WB3: Children receive adequate services to meet their physical and mental health needs					
Number of Cases Reviewed by the Team According to Degree of Outcome Achievement					
Degree of Outcome Achievement	Fairfax County	Hampton City	Tazewell County	Total	Percent
Substantially Achieved	26	14	12	52	86.7
Partially Achieved	0	0	0	0	0
Not Achieved	2	3	3	8	13.3
Total Applicable Cases	28	17	15	60	
Not Applicable Cases	3	0	2	5	
Total Cases	31	17	17	65	
Substantially Achieved by Site	93%	82%	80%		

Status of Well-Being Outcome 3

Virginia is not in substantial conformity with Well-Being Outcome 3. The outcome was substantially achieved in 86.7 percent of the applicable cases. This percentage is less than the 95 percent required for a determination of substantial conformity. The outcome was substantially achieved in all 40 foster care cases and in 60 percent of the 20 applicable in-home services cases. The State also was not in substantial conformity with this outcome in its 2003 CFSR and was required to address the outcome in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

In the 2003 CFSR, concerns identified were that children’s mental health needs were not being adequately assessed, and when mental health services were recommended, the agency did not always provide timely and/or sufficient services to meet the child’s needs.

To address the identified concerns, the State implemented the following strategies:

- Provided guidelines and tools to LDSS on mental health screening of children entering foster care and children and families receiving ongoing CPS services
- Implemented a range of strategies to increase mental health and substance abuse treatment resources

The State met its goals for this outcome by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

Findings pertaining to the items assessed under Well-Being Outcome 3 are presented and discussed below.

Item 22. Physical health of the child

 X Strength Area Needing Improvement

Case Review Findings

Item 22 was applicable for 49 (75 percent) of the 65 cases reviewed. Cases that were not applicable were in-home services cases in which physical health concerns were not an issue. In assessing this item, reviewers were to determine whether children’s physical health needs (including dental needs) had been appropriately assessed, and the services designed to meet those needs had been, or were being, provided. The findings of the assessment of item 22 are presented in the table below.

Item 22 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	22	13	11	46	94
Area Needing Improvement	0	2	1	3	6
Total Applicable Cases	22	15	12	49	
Not Applicable Cases	9	2	5	16	
Total Cases	31	17	17	65	
Strength by Site	100%	87%	92%		

Item 22 was rated as a Strength in 100 percent of the 40 foster care cases and 67 percent of the 9 applicable in-home services cases. The item was rated as a Strength when reviewers determined that children’s medical and dental needs were routinely assessed and necessary services were provided. Item 22 was rated as an Area Needing Improvement when reviewers determined one or both of the following:

- The child’s physical health needs were not adequately assessed nor addressed (two cases).
- The child’s physical health needs were assessed but the services needed were not provided (one case).

Rating Determination

Item 22 was assigned an overall rating of a Strength. In 94 percent of the applicable cases, reviewers determined that the agency was effective in assessing and meeting children’s physical health needs. This percentage is greater than the 90 percent required for a rating of Strength. Item 22 also was rated as a Strength in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the caseworker is responsible for ensuring that each child in foster care receives a medical examination no later than 30 days after placement. The medical examination uses the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program, which makes health screening and treatment services available to Medicaid-eligible children. The Statewide Assessment notes that a copy of the service plan containing the medical and dental needs of the child must be given to the foster care provider at the time of placement, and on an ongoing basis, to ensure that providers have basic medical and dental information about the child. The Statewide Assessment also notes that regulations currently being promulgated by VDSS will include a provision that a child must receive well-child medical examinations in accordance with the Department of Medical Assistance Services (DMAS) periodicity chart.

The Statewide Assessment reports that a recent survey of LDSS found that 96 of 98 respondents provide annual dental exams for their foster care children and 95 of 98 respondents provide annual physical examinations.

Stakeholder Interview Information

Many of the stakeholder comments on this item suggest that most children in foster care are having their physical and dental health needs appropriately assessed and met. Stakeholders did not provide comments on the physical and dental health needs of children in the in-home services cases.

Item 23. Mental/behavioral health of the child

Strength Area Needing Improvement

Case Review Findings

Item 23 was applicable for 46 (71 percent) of the 65 cases reviewed. Cases were not applicable if the child was too young for an assessment of mental health needs or if there were no mental health concerns. In assessing this item, reviewers were to determine whether mental health needs had been appropriately assessed and appropriate services to address those needs had been offered or provided. The results of the assessment of item 23 are presented in the table below.

Item 23 Ratings	Fairfax County	Hampton City	Tazewell County	Total	Percent
Strength	20	10	10	40	87
Area Needing Improvement	2	2	2	6	13
Total Applicable Cases	22	12	12	46	
Not Applicable Cases	9	5	5	19	
Total Cases	31	17	17	65	
Strength by Site	91%	83%	83%		

Item 23 was rated as a Strength in 100 percent of the 30 applicable foster care cases and in 62.5 percent of the 16 applicable in-home services cases. The item was rated as a Strength when reviewers determined that children’s mental health needs were appropriately assessed and the identified mental health needs were addressed. Item 23 was rated as an Area Needing Improvement when reviewers determined the following:

- Mental health needs were neither assessed nor addressed (four cases).
- Mental health needs were assessed but services were not provided to address identified needs (two cases).

Rating Determination

Item 23 was assigned an overall rating of Area Needing Improvement. In 87 percent of the applicable cases, reviewers determined that the agency had made concerted efforts to address the mental health needs of children. This percentage is less than the 90 percent required for a rating of Strength. Item 23 also was rated as an Area Needing Improvement in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, foster care policy requires that a formal assessment must be used to document the child’s therapeutic needs within 30 days of placement. Assessments are expected to be ongoing but must occur at least every 6 months. The assessment occurs prior to court hearing in order to be included in the service plan, which is submitted to the court prior to hearings. The agency began using the Child and Family Needs Assessment (CFNA) statewide on July 1, 2009, rather than the Child and Adolescent Functional Assessment Scale, which was previously used. The CFNA is a comprehensive assessment that includes mental, behavioral, and emotional health issues.

Stakeholder Interview Information

Several stakeholders commenting on this item during the Onsite Review expressed the opinion that the agency appropriately assesses mental health needs of children. However, stakeholders expressed different opinions regarding the provision of mental health services. A few stakeholders suggested that services that are authorized and funded by FAPT usually are appropriate. However, other stakeholders indicated that the public mental health system does not adequately address the service needs of foster children because of

budget cuts that have resulted in a loss of staff positions in mental health agencies and in waiting lists for services. Some stakeholders also expressed concern about the availability of child psychiatrists and the fact that most of the people monitoring use of psychotropic medications are not psychiatrists.

SECTION B: SYSTEMIC FACTORS

This section of the CFSR Final Report provides information regarding the State’s substantial conformity with the seven systemic factors examined during the CFSR. Information on the items included under each systemic factor comes from the Statewide Assessment and from interviews with stakeholders held during the Onsite Review. Additional information may come from other Federal reports or assessments.

Each item included in a systemic factor reflects a key Federal program requirement relevant to the Child and Family Services Plan (CFSP) for that systemic factor. The overall rating for each systemic factor is based on the ratings for the individual items incorporated in the systemic factor. For any given systemic factor, a State is rated as being either “in substantial conformity” with that factor (a score of 3 or 4) or “not in substantial conformity” with that factor (a score of 1 or 2). Specific requirements for each rating are shown in the table below.

Rating the Systemic Factor

Not in Substantial Conformity		In Substantial Conformity	
1	2	3	4
None of the CFSP or program requirements is in place.	Some or all of the CFSP or program requirements are in place, but more than one of the requirements fail to function as described in each requirement.	All of the CFSP or program requirements are in place, and no more than one of the requirements fails to function as described in each requirement.	All of the CFSP or program requirements are in place and functioning as described in each requirement.

It should be noted that ratings for the items included in each systemic factor are not based on single comments from an individual stakeholder; however, these comments are included in the report when they provide important insights or clarification on the State’s performance on a particular systemic factor.

If a State is not in substantial conformity with a particular systemic factor, then that factor must be addressed in the State’s Program Improvement Plan. For each systemic factor, information is provided about the State’s performance in its first CFSR as well as in the current CFSR. If the systemic factor was part of the State’s Program Improvement Plan, the key concerns addressed in the Program Improvement Plan and the strategies for assessing those concerns are noted.

I. STATEWIDE INFORMATION SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

Status of Statewide Information System

Virginia is not in substantial conformity with the systemic factor of Statewide Information System. The State was in substantial conformity with this factor in its 2003 CFSR and was not required to address the factor in its Program Improvement Plan.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Statewide Information System are presented and discussed below.

Item 24. The State is operating a statewide information system that, at a minimum, can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or, within the immediately preceding 12 months, has been) in foster care

 Strength X Area Needing Improvement

Item 24 is rated as an Area Needing Improvement because concerns were identified during the CFSR about the accuracy of the data in OASIS at any given point in time, particularly data pertaining to children’s placement locations. Information from both the Statewide Assessment and stakeholder interviews indicates that State policy provides for a 30-day period for updating and entering data in OASIS, including data pertaining to the child’s location. In addition, several stakeholders in Fairfax and Tazewell Counties expressed the opinion that information about the child’s placement location in OASIS may not always be correct due to delays in entering placement changes. This item was rated as a Strength in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, OASIS is used to store the case record and is capable of determining the legal status, demographics, location, and goals for all children in foster care. OASIS contains case information from the point of entry into the child welfare system to the point of discharge from the foster care system, including completion of the adoption process. The Statewide Assessment reports that OASIS is available to LDSS and to State agency staff and that it contains numerous ticklers and

reports to assist with case management and tracking of clients and resource providers. As indicated in the Statewide Assessment, State policy requires that all data must be entered and updated in OASIS as soon as possible, but no later than 30 days after the occurrence of a relevant case event.

The Statewide Assessment reports that to address data quality issues, DFS established the Outcome-Based Reporting and Analysis Unit, which is responsible for implementing the Data Integrity Initiative. The Statewide Assessment notes that the Data Integrity Initiative has improved data quality and that a recent review of case data resulted in the following findings:

- 92 percent of cases have placement information.
- 92 percent of cases have legal information.
- 97 percent of cases have established permanency goals.
- All cases have demographic information.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that OASIS is effective in identifying the legal status, demographics, and goals of children in foster care. While some stakeholders also said that the system is effective in identifying the child’s location, other stakeholders questioned the accuracy of the child’s placement location at any given point in time. This was attributed either to delays in entering information about a child’s placement change or to entering placement information incorrectly.

Most stakeholders also reported that OASIS is available 24 hours a day in offices, although it is not yet available over the Internet. Many stakeholders indicated various reports are available in OASIS that administrators and supervisors use to monitor case loads, court hearings, caseworker visits, and completion of case-related tasks. Despite these strengths, some stakeholders voiced concerns that OASIS screens are not always easy to use, the system is not easy to navigate, and data entry is cumbersome and often duplicative.

II. CASE REVIEW SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

Status of Case Review System

Virginia is not in substantial conformity with the systemic factor of Case Review System. The State was not in substantial conformity with this systemic factor in its 2003 CFSR and was required to address the factor in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following concerns were identified in the 2003 review:

- Parents were not consistently engaged or involved in the case planning process.
- The status of each child in foster care was not reviewed at least once every 6 months (periodic review).
- There was inconsistent implementation of the process for TPR in accordance with the provisions of ASFA.
- There was inconsistency with regard to notifying foster parents, pre-adoptive parents, and relative caregivers about hearings and reviews and about their opportunities to be heard in reviews and hearings.

To address these concerns, the State implemented the following strategies:

- Developed specific protocols and policies for early involvement of children and parents in assessment and case planning
- Implemented concurrent planning to ensure that there are regular meetings with the family to plan for the child's permanency
- Designed and implemented a quality assurance (QA) process to monitor the development of written case plans and the inclusion of the child and child's parents in the planning process
- Updated and strengthened the periodic review process by creating policy regarding administrative panel reviews (APRs) to include mandated timeframes and a requirement that a full APR be held for children in foster care with the goals of adoption, permanent foster care, and independent living
- Created monitoring reports to document compliance with the new policy
- Required LDSS to file a petition for TPR at the time of the initial permanency planning hearing if it included a recommendation to change the goal to adoption or document in OASIS the reason TPR was not being sought
- Provided a process that allows resource parents, foster parents, pre-adoptive parents, and relative caregivers who were unable to attend court hearings to be included in the hearing through a conference call
- Strengthened foster care policy guidance and trained caseworkers regarding the right of caregivers to provide input during APRs

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Case Review System are presented and discussed below.

Item 25. The State provides a process that ensures that each child has a written case plan to be developed jointly with the child’s parent(s) that includes the required provisions

Strength Area Needing Improvement

Item 25 is rated as an Area Needing Improvement. Although the State provides a process to ensure that each child has a written case plan that includes the required provisions and that is completed and updated in a timely manner, information from the Statewide Assessment indicates that parents are not consistently involved in the development of the case plan. In addition, the CFSR case review found that the agency made concerted efforts to involve the mothers in case planning in 68 percent of applicable cases and the fathers in 46 percent of applicable cases. This item also was rated as an Area Needing Improvement in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, foster care policy requires caseworkers to develop a written case plan within 60 days from the date of custody or placement (whichever comes first) for every child in foster care. Policy also requires that the plan must be developed jointly with the child and the child’s parents and must include documentation of the involvement of all appropriate parties. In addition, the Statewide Assessment reports that the agency must develop a new service plan when there is a change in the child’s case goal, after a permanency hearing, or when the child returns from a commitment to the Department of Juvenile Justice (DJJ).

The Statewide Assessment indicates that lack of input from parents in the development of the case plan is an issue that the State needs to address. As noted in the Statewide Assessment, in a survey of 120 LDSS with 98 LDSS responding, only 51 percent said that parents “usually” participate in developing case plans. In another LDSS survey, only 40 percent of respondents reported using Family Team Meetings (FTM), only 25 percent reported using Team Decision Making (TDM), and only 16 percent reported using Family Group Conferences (FGCs) as strategies to involve parents actively in case plan development.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review addressed the following three issues with regard to the case planning process; the extent to which all children have case plans, the timeliness of the case plan development or update, and the involvement of parents in the development of the case plan.

Most stakeholders expressed the opinion that every child has a case plan that is routinely updated and that both the initial case plan and the updated plan are completed within the required timeframes. Similarly, most stakeholders expressed the opinion that case plans are individualized and are easy for the family to understand.

Regarding involvement of parents in case planning, most stakeholders expressed the opinion that the agency uses a family-centered, strength-based, and collaborative effort in case planning. Some stakeholders commented that FGCs, TDM, service planning meetings,

mediations, and FAPTs are all used in various localities to engage parents in case planning. A few stakeholders also commented that there has been improvement in the involvement of both fathers and incarcerated parents in the case planning process.

Item 26. The State provides a process for the periodic review of the status of each child, no less frequently than once every 6 months, either by a court or by administrative review

 Strength X Area Needing Improvement

Item 26 is rated as an Area Needing Improvement because information from the Statewide Assessment and stakeholder interviews indicates that State policy does not require the first periodic review of the child’s status in foster care to occur within 6 months of the date of the child’s adjudication or 6 months from the date at which the child had been in an out-of-home placement for 60 days, whichever comes first. Instead, State policy requires that the initial periodic review must occur within 6 months from the time of the dispositional hearing, which must be held within 75 days of the child’s entry into foster care. Although the timeframe established for the initial review does not meet the Federal 6-month requirement, after the initial review the State is conducting periodic reviews at least once every 6 months by a court or an administrative review panel.

Statewide Assessment Information

According to the Statewide Assessment and the Code of Virginia, the initial foster care review hearing is held within 6 months of the dispositional hearing, which must be held within 75 days from the time of the child’s removal from the home. Consequently, policy requires that the initial periodic review be held no later than 8.5 months from the time of the child’s removal from the home. The initial foster care review hearing is a court hearing that reviews progress made on the foster care plan, including progress in achieving the permanency goal. The Statewide Assessment also notes that an APR is conducted by LDSS every 6 months after a permanency planning hearing for children who are subject to annual foster care reviews by the court and who have an approved permanent goal of adoption, permanent foster care, or independent living. The child then alternates the 6-month APR with annual foster care review hearings until a final order of adoption is issued by the court or the child reaches the age of 18. For children with a permanent goal of APPLA, there is a foster care review hearing by the court every 6 months.

With regard to compliance with State policy for periodic reviews, the Statewide Assessment reports that the dates of hearings and reviews are entered into OASIS and that the Administrative Review Report is run every 6 months to monitor compliance with the review timeframes. The Statewide Assessment notes that data as of July 1, 2009 indicate that periodic reviews were held within the State-established timeframes in 79.9 percent (5,062) of the 6,332 foster care cases.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review reported that after the dispositional hearing, which is to be held within 75 days of the child’s entry into foster care, the child’s case is reviewed by the court or an administrative review panel at least

once every 6 months. Most stakeholders also expressed the opinion that the agency is effective in holding timely initial and subsequent periodic reviews of all cases in accordance with State-established timeframes. In addition, many stakeholders indicated that the periodic reviews are effective in moving children toward permanency.

Item 27. The State provides a process that ensures that each child in foster care under the supervision of the State has a permanency hearing in a qualified court or administrative body no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter

 X **Strength** **Area Needing Improvement**

Item 27 is rated as a Strength. Information from the Statewide Assessment and stakeholder interviews indicates that permanency hearings are held in accordance with the required 12-month timeframes and are used to evaluate progress in moving children toward permanency. This item also was rated as a Strength in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the first permanency planning hearing is held within 5 months of the initial foster care review hearing (which is the first periodic review) and within 11 months of the dispositional hearing, which is held within 75 days of the child’s removal from the home. The permanency planning hearing is held to establish a permanent goal for the child, to acknowledge achievement of the permanent goal, or to defer such action through the approval of an interim goal. The Statewide Assessment notes that a second permanency planning hearing is required when a permanency action is not achieved at the first permanency hearing and the court approves an interim goal. The second permanency planning hearing is held within 6 months of the initial permanency planning hearing. As indicated in the Statewide Assessment, subsequent annual permanency hearings are held after a permanency goal has been approved. These are called foster care review hearings.

The Statewide Assessment reports that CASA directors interviewed during the statewide assessment process noted that crowded dockets and scheduling conflicts sometimes result in delays in holding permanency hearings. However, data from the State’s Periodic Timeliness Review report indicate that as of July 1, 2009, permanency hearings were held in accordance with the established timeframes in 97.5 percent (5,114) of the 5,224 cases.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that permanency hearings and foster care review hearings often are held every 6 months but no less frequently than every 12 months. Several stakeholders also expressed the opinion that the hearings are effective and focus on permanency. The following factors were seen as contributing to the timeliness of the hearings:

- The next permanency hearing is scheduled during each permanency hearing.
- Judges do not allow continuances or postponements of the permanency hearing unless there are legitimate reasons.
- Hearings are scheduled early to allow for possible delays.

Item 28. The State provides a process for termination of parental rights proceedings in accordance with the provisions of the Adoption and Safe Families Act

 X **Strength** **Area Needing Improvement**

Item 28 is rated as a Strength. Although the Statewide Assessment did not provide data on the percentage of TPR filings that are occurring in a timely manner, information from the Statewide Assessment and stakeholder interviews indicates that the agency has a process for filing for TPR in accordance with the timeframes established by ASFA and, when the decision is made not to file for TPR, the reasons for this decision are documented in the case file and reviewed by the court. In addition, although during the Onsite Review, case reviewers determined that the ASFA requirements with regard to TPR were met in only 81 percent of applicable cases, in the cases in which ASFA requirements were not met, the key concerns pertained to specific case-practice issues and not systemic problems. This item was rated as an Area Needing Improvement in the State’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, since the 2003 CFSR, Virginia has modified its policy to require that LDSS file a petition to TPR simultaneously with the petition for the initial permanency planning hearing unless a TPR petition was filed prior to the permanency planning hearing. However, the Statewide Assessment also notes that, prior to filing a petition to TPR, LDSS must file a foster care plan for the child with the court documenting that TPR is in the best interests of the child.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the agency generally files for TPR in a timely manner or documents reasons for not filing in the case record. Stakeholders noted that frequent reasons for not filing for TPR include the following:

- The child is 14 or older and says that he/she does not want to be adopted.
- The agency is seeking a relative placement for the child.
- Parents have not been able to receive adequate services to meet their case plan requirements due to lack of availability of the services, particularly substance abuse treatment services.
- The court provides parents with extensions to continue to work towards reunification if there is evidence that the parent is making progress.

Item 29. The State provides a process for foster parents, pre-adoptive parents, and relative caregivers of children in foster care to be notified of, and have an opportunity to be heard in, any review or hearing held with respect to the child

 Strength X Area Needing Improvement

Item 29 is rated as an Area Needing Improvement. Information from the Statewide Assessment and stakeholder interviews indicates that, across the State, caregivers are not being consistently notified about court hearings and case reviews. In addition, information from stakeholder interviews indicates that caregivers are not consistently given the opportunity to be heard at reviews and hearings. This item also was rated as an Area Needing Improvement in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the Code of Virginia requires that foster parents or other care providers are to be notified of all foster care reviews, permanency planning hearings, or annual foster care reviews and are to be given the opportunity to be heard in those reviews. Both the petition for a foster care review hearing and the petition for a permanency planning hearing request that the court provide notice and a copy of the petition to foster parents and other caregivers. The Statewide Assessment reports that, at the conclusion of each hearing by the JDR district court, an order is entered that documents the date, time, and nature of the next required hearing in the case and copies of these court orders are typically distributed to all parties at the conclusion of each hearing. In addition, the Statewide Assessment reports that the foster care plan transmittal form, which must accompany every foster care plan filed with the court, provides the names and addresses of foster parents, relative caregivers, and pre-adoptive parents.

The Statewide Assessment also reports that State policy requires that invitation letters for APRs are to be sent at least 30 days prior to the meeting to parents, previous caregivers, foster and pre-adoptive parents, and any other individuals identified by the child or family as having a significant role in their lives.

As indicated in the Statewide Assessment, in a survey of LDSS, 97 percent of the 98 respondents indicated that foster parents are notified about court hearings. In addition, the Statewide Assessment reports the following concerns expressed by stakeholders participating in the State’s self-assessment process:

- CASA directors indicated that in their experience, relative caregivers and foster parents often are not aware of the hearings and are not clear about what is expected from them if they do attend the hearings.
- A group of attorneys stated that LDSS lack a formal system to notify foster parents, adoptive parents, and relative caregivers about court hearings.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review indicated that the court is responsible for ensuring that caregivers are notified of hearings. However, stakeholders expressed different opinions about whether notification of caregivers is

consistent. While some stakeholders said that caregivers are routinely notified about court reviews and hearings, other stakeholders said that notification is sporadic in that some localities provide notice and some do not. A few stakeholders suggested that sometimes notification is not provided for hearings that occur after TPR. Similarly, stakeholders expressed different opinions regarding the ability of caregivers to be heard in court. Some stakeholders indicated that caregivers usually are provided the opportunity to be heard in court either through speaking in court, submitting a written report to the judge, or providing information to the attorneys. However, other stakeholders said that the ability to be heard in court varies across courtrooms.

III. QUALITY ASSURANCE SYSTEM

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

Status of Quality Assurance System

Virginia is not in substantial conformity with the systemic factor of QA System. The State was in substantial conformity with this factor in its 2003 CFSR and was not required to address the factor in its Program Improvement Plan.

Key Findings of the 2009 CFSR

The findings pertaining to the specific items assessed under QA System are presented and discussed below.

Item 30. The State has developed and implemented standards to ensure that children in foster care are provided quality services that protect the safety and health of the children

 X Strength ___ Area Needing Improvement

Item 30 is rated as a Strength. Information from the Statewide Assessment and stakeholder interviews indicates that the State has developed and implemented standards to ensure that children in foster care are provided with quality services that protect their health and safety. This item also was rated as a Strength in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, State policy requires periodic routine medical and dental examinations at least annually for children 4 years of age and older. For children younger than age 4, LDSS are instructed to follow EPSDT guidelines which includes an initial examination within 60 days of placement; immunizations in accordance with the American Committee on Immunizations Practices; developmental testing administered at 9, 18, and 24 months; and dental services beginning at 12 months and continuing every 6 months after age 3 unless medically necessary prior to that time. Children's physical and dental health, examination and treatment information is verified during monitoring visits to LDSS by the Quality Review Unit within DFS.

An additional standard noted in the Statewide Assessment that is intended to ensure that the health and safety of children in foster care is protected is that, as of September 1, 2008, State policy requires that all children in foster care have a monthly face-to-face contact with an approved caseworker.

Stakeholder Interview Information

Various stakeholders commenting on this item during the Onsite Review identified the following as ensuring quality services:

- DOLP staff are required to conduct one announced and one unannounced visit per year for licensed child placing agencies (LCPAs) and residential facilities. During these visits, staff are required to monitor whether minimum standards are in place and whether there is documentation that children's physical and dental health needs were met. If concerns are noted, corrective action plans are created and monitored and the frequency of monitoring visits is increased.
- Caseworkers are required to monitor the safety of children in foster care through a monthly face-to-face contact that must include a private conversation with the child.

Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, evaluates the quality of services, identifies strengths and needs of the service delivery system, provides relevant reports, and evaluates program improvement measures implemented

Strength Area Needing Improvement

Item 31 is rated as an Area Needing Improvement. Information from both the Statewide Assessment and stakeholder interviews indicates that although the State has piloted the implementation of a QA process, it is not yet operating a fully functioning QA system that evaluates the quality of services and program improvement measures that have been implemented. Although there are local QA systems, these are not implemented in every locality and there are areas of the State that do not have an identifiable QA system. This item was rated as a Strength in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the DFS Quality Review Unit, which consists of four monitors and a supervisor, was created in March 2008 and began designing a statewide continuous quality improvement (CQI) process to monitor the performance of LDSS. The Statewide Assessment reports that the CQI pilot began in July 2008 by drawing a stratified random sample of cases at LDSS level that were initially coreviewed by the monitor and regional consultants using an instrument based on the Federal CFSR tool.

As indicated in the Statewide Assessment, the CQI is designed so that monitors complete the case review, and regional consultants analyze the data and work with LDSS on their System Improvement Plans (SIPs). At the end of the review, feedback is given to LDSS directors followed by a written report of the findings, which include trends, compliance with timeframes, and client outcome data. The regional consultant provides formal feedback, negotiates the SIP based on prioritization of the top three Areas Needing Improvement, and monitors compliance with the SIP.

The Statewide Assessment notes that currently, only caseworkers are interviewed as part of the CQI process, and no statewide reports have been produced. The Statewide Assessment also notes that the State is working on the formalization of the feedback template and protocol and has not yet determined the frequency of the monitoring visits.

As indicated in the Statewide Assessment, Virginia is working with the Casey Strategic Consulting Group on the Transformation initiative. The Transformation is currently piloting a CQI approach with a group of 13 LDSS, known as the Council on Reform, or CORE. One of the main components of the Transformation's CQI is teaching the concept of incorporating data into decision making. The Outcome Based Reporting and Analysis Unit has developed reports for the CORE agencies that have helped them to establish the performance targets for various outcomes (e.g. reducing the number of children in congregate care, increasing discharges to permanency, etc). The Statewide Assessment reports that a statewide rollout of the Transformation began in January 2009.

Stakeholder Interview Information

State-level stakeholders commenting on the State's QA system during the Onsite Review reported that the current State CQI system involves a review of 8 cases a year in each region for a total of 40 cases reviewed in a year. They confirmed that the current process uses the Federal CFSR case review instrument, although they noted that at present, only caseworkers are interviewed as part of the case review and case review data is released only to LDSS that was reviewed. State-level stakeholders also reported that LDSS are not required to have their own QA system, but that approximately eight LDSS currently have one.

Fairfax County stakeholders reported that LDSS in that county have implemented a QA system that uses the Federal CFSR model. The model involves conducting interviews with caseworkers and families involved in each case reviewed, using peer reviewers, identifying strengths and areas needing improvement, providing feedback to both caseworkers and supervisors, and using information from the reviews develop a program improvement plan.

Hampton City stakeholders reported that the local LDSS has a staff person who is responsible for QA in that LDSS. In addition, some stakeholders in Hampton City and Tazewell County reported that supervisors in the local LDSS are responsible for reviewing cases and providing feedback to caseworkers on the findings of their case reviews.

IV. STAFF AND PROVIDER TRAINING

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Conformity		In Substantial Conformity	
Rating	1X	2	3	4

Status of Staff and Provider Training

Virginia is not in substantial conformity with the systemic factor of Staff and Provider Training. The State was not in substantial conformity with this factor in its 2003 CFSR and was required to address this factor in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following key concerns were identified in the 2003 CFSR:

- The State did not mandate or provide initial training for all staff that delivered services under titles IV-B and IV-E.
- The State did not consistently provide ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties.
- The State did not mandate training for current or prospective foster parents and adoptive parents who care for foster children that addresses the skills and knowledge base needed to carry out foster care and/or adoption duties.

To address these concerns, the State implemented the following strategies:

- Submitted regulations for approval to the Board of Social Services that would mandate initial training for all child welfare caseworkers that must be completed prior to carrying a caseload and that addresses the skills and knowledge necessary for the performance of their jobs
- Submitted regulations for approval to the Board of Social Services that would mandate in-service training for child welfare caseworkers and supervisors that addressed the skills and knowledge base needed to carry out their duties in working with children and families involved in the child welfare system

- Submitted regulations for approval that would mandate pre-service and ongoing training for resource parents, foster parents and adoptive parents to prepare families to meet the needs of children entering foster care
- Established core training content and objectives to ensure statewide consistency in pre-service training of resource parents, foster parents, and adoptive parents

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the specific items assessed under Staff and Provider Training are presented and discussed below.

Item 32. The State is operating a staff development and training program that supports the goals and objectives in the CFSP, addresses services provided under titles IV-B and IV-E, and provides initial training for all staff who deliver these services.

 Strength X Area Needing Improvement

Item 32 is rated as an Area Needing Improvement. Although, as of July 2008, the State requires initial training for all staff who deliver services provided under titles IV-B and IV-E, information from the Statewide Assessment and stakeholder interviews indicates that the requirement is not consistently and fully implemented, there is no process for determining if all staff has been trained, and there is no process for evaluating whether the training produces gains in knowledge or skills. In addition, there are critical courses that are part of the training program that staff has up to 1 year to complete, and it is not clear that staff receive the necessary training before they are assigned a caseload. This item also was rated as an Area Needing Improvement in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, initial training for caseworkers is provided by the Virginia Institute for Social Services Training Activities (VISSTA) of Virginia Commonwealth University (VCU). The training is delivered at five regional training centers. As noted in the Statewide Assessment, the State training primarily involves classes. Virginia does not have a statewide requirement for a formal mentoring or shadowing program for new caseworkers. The State also has no requirement that caseworkers must complete training prior to carrying a caseload.

The Statewide Assessment reports that during the first 3 months on the job, CPS (investigation and ongoing services) caseworkers are required to take the CPS New Worker Policy Training with OASIS. Within the first year of performing the job function, CPS caseworkers are required to participate in training on the following topics:

- Intake assessment and investigation in CPS
- Sexual abuse

- Sexual abuse investigations
- Ongoing services in CPS (if the caseworker is providing ongoing services)

The Statewide Assessment also reports that during the first 6 months of employment, new foster care and adoption caseworkers are required to participate in training in the following areas:

- Separation and loss issues in human services practice
- Foster care or adoption new caseworker policy training with OASIS
- Assessment and service planning
- Working with children in placement

During the second 6 months of employment, new foster care and adoption caseworkers are required to participate in training in the following areas:

- Permanency planning for teens—creating life-long connections
- Promoting family reunifications
- Case documentation
- Engaging families

The Statewide Assessment reports that new child welfare supervisors are required to take an 18-hour course called Child Welfare Supervision. New foster care and adoption supervisors are encouraged to attend all training sessions that are available to caseworkers as well as the Child Welfare Supervision course.

As indicated in the Statewide Assessment, LDSS are responsible for tracking attendance and providing sanctions for failure to complete the mandated courses. However, caseworkers are not required to take a test upon completion of a course.

The Statewide Assessment reports that the State has established a Training and Best Practice Workgroup as part of the Transformation initiative to provide feedback to VISSTA regarding revisions needed to training curriculum. The workgroup includes representatives from VDSS, LDSS, and VISSTA. Initial findings of the workgroup in the fall of 2008 were that more than 90 percent of new CPS caseworkers completed mandated core training within their first year. Also, members of the workgroup interviewed as part of the Statewide Assessment reported that mandated training is relevant to the job.

The Statewide Assessment also reports the concern that there is no comprehensive process to assess statewide or local needs that would inform the allocation of training resources. It was noted in the Statewide Assessment that the agency plans to establish a Central Steering Committee, which will be composed of LDSS staff involved in training management and LDSS executives and which will provide input to VISSTA regarding training needs.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that new caseworkers are receiving the required initial training on policy and that the State-established timeframes for additional training courses to be completed by the end of the first year are being met. However, stakeholders expressed different opinions regarding whether caseworkers receive a caseload before they complete training. Although some stakeholders said that caseworkers may receive a few cases that are not complex or that do not involve serious concerns before they complete training, other stakeholders suggested that assignment of a caseload prior to completion of training varies across counties.

Local site stakeholders indicated that new caseworkers usually are mentored by or shadow more experienced caseworkers, although this is not a formal part of the State training. Several local site stakeholders reported that supervisors monitor whether caseworkers have completed the training requirements.

Stakeholders also expressed different opinions regarding the extent to which the initial training prepares caseworkers to perform their jobs adequately. Although some stakeholders indicated that the training is effective in this regard, other stakeholders raised concerns that the training focuses primarily on policy and does not focus enough on practice issues, such as working with families in ongoing cases, interviewing children in CPS cases, or understanding why they have to do something that is required in policy. Some Fairfax county stakeholders suggested that the initial mandated training does not include training on how to testify in court. They noted that caseworkers need this type of training to perform their jobs.

Item 33. The State provides for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties with regard to the services included in the CFSP

Strength Area Needing Improvement

Item 33 is rated as an Area Needing Improvement because information in the Statewide Assessment and stakeholder interviews indicates that the State does not adequately provide for ongoing training for staff that addresses the skills and knowledge base needed to carry out their duties. The State has no requirements for ongoing training and opportunities for ongoing training are not consistently available across the State. This item also was rated as an Area Needing Improvement in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, Virginia Code establishes that "Local department foster care and adoption workers and supervisory staff shall attend and complete annual in-service training in accordance with guidance developed by the Department." However, the Statewide Assessment also reports that VDSS has not established minimum ongoing training requirements and that all LDSS are allowed to set training requirements for caseworkers. Ongoing training is provided by the VCU-VISSTA; the Knowledge Center (KC); or community or stakeholder-sponsored events, LDSS trainings, child welfare conferences, and seminars.

The Statewide Assessment reports that LDSS encourage caseworkers to attend training at child welfare conferences and seminars or to participate in locally offered trainings. Information concerning staff participation in ongoing training is maintained at the local level.

All LDSS may access training funds from the Federally funded title IV-E Pass-Through Training Program for child welfare staff if they have submitted a training plan and received advance approval by VDSS. The Statewide Assessment reports that during the first quarter of SFY 2009, 66 LDSS provided ongoing skills trainings to 248 participants. The Statewide Assessment did not report the percentage of staff members receiving annual ongoing training, although it states that the Area Training Center's can now track this information.

Stakeholder Interview Information

Several stakeholders commenting on this item during the Onsite Review indicated that the State does not mandate ongoing training for LDSS staff but instead permits all LDSS to set their own requirements. These stakeholders reported that some local LDSS have established required hours of in-service training for all staff, while other LDSS leave it up to supervisors to decide what is needed by individual caseworkers. At the local sites included in the CFSR, Fairfax County stakeholders reported that LDSS in that county have established minimum annual requirements for in-service training for agency staff and that the requirements are being met. Hampton City and Tazewell County stakeholders reported that, in those locations, LDSS do not have minimum requirements and that supervisors determine whether individual caseworkers need a particular type of training.

Some stakeholders noted that the frequency of VISSTA training offerings was decreased after funding for training was decreased. In addition, a few stakeholders reported that sometimes LDSS do not have sufficient funds to pay for the travel expenses of caseworkers who must travel to and stay in a hotel at the regional training center.

Various stakeholders expressed the following opinions about ongoing training opportunities:

- Budget cuts have decreased the array and availability of ongoing training opportunities.
- More advanced training is needed on issues relevant to job performance such as forensic interviewing, “cross-pollination” types of training with other agencies, engaging families, etc.

Item 34. The State provides training for current or prospective foster parents, adoptive parents, and staff of State licensed or approved facilities that care for children receiving foster care or adoption assistance under title IV-E that addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children

 Strength X Area Needing Improvement

Item 34 is rated as an Area Needing Improvement. Although the State mandates training for staff of State-licensed child care facilities, at the time of the Onsite Review, there was no statewide mandated pre-service or ongoing training for foster and adoptive parents.

Since the Onsite Review, the State has issued new regulations requiring that all LDSS-approved resource parents receive both pre-service and ongoing annual training. This item also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, current Virginia regulations do not mandate pre-service or ongoing training for foster parents or adoptive parents that are approved by either an LCPA or LDSS. However, the Statewide Assessment reports that many LDSS mandate both pre-service and in-service training for their foster and adoptive parents, although the extent of training varies among LDSS due to the vast differences in department sizes and operations. The Statewide Assessment also reports that LDSS use various training curricula including Parent Resources for Information, Development, and Education (PRIDE); Group Preparation and Selection/Model Approach to Partnerships in Parenting; and PATH.

As indicated in the Statewide Assessment, VDSS has developed a new set of regulations for resource parents that will require both pre-service and ongoing annual training. The Statewide Assessment also indicates that the regulations will require the training to address specific core competencies, but will not specify a particular training curriculum. The same core competencies will be required for resource families approved by an LCPA and LDSS. Also, the number of hours required for training will not be specified, only that the core competencies be addressed. The regulations applying to LDSS-approved homes were approved on September 2, 2009. The regulations applying to LCPA homes were released for public comment on September 14, 2009.

Stakeholder Interview Information

Many stakeholders commenting on foster parent pre-service and ongoing training for LDSS foster parents noted that training requirements vary among LDSS. Although some LDSS require that foster parents participate in training prior to approval, other LDSS do not have this requirement. Similarly, some LDSS require ongoing training for foster parents to maintain their approval status, but other LDSS do not have this requirement.

As indicated by several stakeholders, all three sites included in the Onsite Review require that foster and adoptive parents complete the PRIDE training prior to approval of the foster or adoptive home and placement of a child in the home. In addition, Fairfax County and Hampton City have requirements for ongoing training for foster and pre-adoptive parents to maintain approval status.

One stakeholder reported that foster parents approved by an LCPA must complete at least 20 to 40 hours of pre-service training. This stakeholder noted that most LCPAs use the PRIDE training curriculum. The stakeholder also reported that LCPAs require foster parents to participate in 10-40 hours per year of ongoing training.

V. SERVICE ARRAY AND RESOURCE DEVELOPMENT

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

Status of Service Array and Resource Development

Virginia is not in substantial conformity with the systemic factor of Service Array and Resource Development. The State was not in substantial conformity with this factor in its 2003 CFSR and was required to address this factor in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following key concerns were identified in the 2003 CFSR:

- There were critical service gaps with regard to services that address the needs of families, enable children to remain safely with their parents when reasonable, and help children in foster placements achieve permanency.
- Many programs were not available on a statewide basis, particularly sexual offender treatment programs; preventive services; and psychiatrists, physicians, and dentists who accept Medicaid.
- There were waiting lists for services such as dental care and substance abuse evaluation and treatment in some areas of the State.

To address these concerns Virginia implemented the following strategies in its PROGRAM IMPROVEMENT PLAN:

- Collaborated with public and private agencies to increase access to mental health, dental and medical services
- Increased substance abuse services availability and accessibility for families and children
- Collaborated with public and private partners to increase access to services for juveniles displaying sexually aggressive or reactive behaviors
- Expanded partnerships with local offices, other government agencies, and community organizations to improve the accessibility, availability and delivery of services to older youth transitioning out of foster care

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Service Array and Resource Development are presented and discussed below.

Item 35. The State has in place an array of services that assess the strengths and needs of children and families and determine other service needs, address the needs of families in addition to individual children in order to create a safe home environment, enable children to remain safely with their parents when reasonable, and help children in foster and adoptive placements achieve permanency

 X Strength Area Needing Improvement

Item 35 is rated as a Strength. Although concerns were identified during the Onsite Review about the accessibility of services (as indicated in item 36) and about caseworker practice with regard to assessing and meeting the service needs of children and families (as indicated in item 17), information from the Statewide Assessment and stakeholder interviews indicates that the State has the appropriate array of key services to meet the needs of children and families. This item was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

The Statewide Assessment reports that CPS investigations, foster care and adoption services, CPS family assessments, case management services, placement services, mental and physical health services, family support services, family preservation services, time-limited reunification services, IL services, and access to education in a child's community are mandated services in all 120 LDSS. The Statewide Assessment also reports, however, that in some LDSS, there is a need for respite care, wrap-around services, substance abuse treatment (intensive), transportation services, psychiatric services, and after-school programs.

Virginia's Statewide Assessment notes that as a result of the 2003 CFSR and Program Improvement Plan, much progress was made in creating dental providers accepting Medicaid for children in ongoing CPS cases and in foster care. DMAS information on the Smiles for Children dental program was sent to all LDSS. Representatives from DMAS provided training across the State and met with social work supervisors at regional meetings. DMAS data indicates that as of FY 2008, the number of Medicaid dental providers increased 80 percent statewide. The number of children ages 0 to 20 using Medicaid dental services increased from 219,968 in State FY (SFY) 2007 to 240,973 in SFY 2008.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review primarily addressed the issue of the variation in service availability across localities and the scarcity of services in many areas that results in waiting lists for children and families to access services. This

is discussed in the Stakeholder Interview Information section under item 36. There was no indication by stakeholders that a key service is missing in the State's service array.

Item 36. The services in item 35 are accessible to families and children in all political jurisdictions covered in the State's CFSP

 Strength X Area Needing Improvement

Item 36 is rated as an Area Needing Improvement. Although improvements in service accessibility have been made since the 2003 CFSR, information from the Statewide Assessment and stakeholder interviews indicates that several key services are not available in rural areas of the State; lack of transportation is a barrier to accessing services in both rural and urban areas; and there are waiting lists for services, particularly mental health and substance abuse services, in both rural and urban areas. This item also was rated as an Area Needing Improvement in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, all available statewide services are not equally accessible. It was noted that in those localities lacking public transportation or local services, families may have to forego services or travel long distances to obtain services and that fuel costs and unemployment make travel to services difficult. The Statewide Assessment also notes that Virginia has recently experienced an influx of Latino populations, and the provision of culturally sensitive services is limited in the more rural areas such as Southwest Virginia and jurisdictions in the Northern, Central, and Tidewater areas of Virginia where agriculture is the major industry. In addition, localities most affected by the current economic downturn are also the localities where outdated industries and coal mining have disappeared. As a result, development of new, culturally diverse services is limited.

The Statewide Assessment also reports that three surveys conducted during SFY 2008 focused on service availability, access, effectiveness, and/or satisfaction. The following themes were noted in the Statewide Assessment as emerging from all three surveys:

- Only 77 percent of consumers receiving mental health services through Community Service Boards (CSBs) reported they had adequate access to mental health services. However, a VDSS survey showed that 89 percent of respondents believed that mental health services are accessible in their communities.
- From 2004 to 2007, the number of community-based services provided to CSA youth increased from 5,906 to 9,755. In 2007, 81 percent of all CSA-funded services were provided to youth and families in their communities.
- Despite increases in service availability, gaps and barriers to services continue to exist including, but not limited to, wraparound services, regular and therapeutic foster care, crisis intervention, respite, psychiatric assessment, transportation, supervised independent living, family assessment, and parenting skills education.
- More than 80 percent of respondents to the VDSS survey on access reported that for families involved in ongoing CPS cases, in-home services are accessible in their communities (such as mentoring, parent education, etc.).
- Dental providers accepting Medicaid continues to be a service access problem mostly in the rural areas.

- Access to regular foster homes has improved. LDSS experienced a 4 percent increase in the placement of children in community-based family settings in 12 months.
- Although mental, medical, and dental health services were generally ranked as available, respondents noted that a dearth of providers (e.g. Medicaid providers for dental care) and waiting lists to access mental health services affected the accessibility of obtaining such services.

As noted in the Statewide Assessment, VDSS conducted the Inventory of Community Services, Gaps, and Needs from October 2007 through July 2008 and found the following with regard to gaps in services.

- There were gaps (i.e., services were available but inadequate to meet the needs of children and families) in the provision of several “fundamental” services (e.g., transportation, housing, and substance abuse counseling) that would allow parents to be able to partake in other parenting and family services.
- Sixty-three Community Policy and Management Teams (CPMTs), self-identified as rural, named substance abuse counseling as the primary service gap.

In addition, the Statewide Assessment reports that the Office of Comprehensive Services (OCS) 2008 annual service gap assessment summary identified the following significant gaps:

- Central region: Alternative education day programs and transportation
- Eastern region: Parenting/family skills training and after-school programs
- Northern region: Crisis intervention and emergency shelter care
- Piedmont region: Respite and crisis intervention
- Southwest region: Intensive substance abuse services, residential treatment, and regular foster care

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that there is extensive variation in service accessibility across localities. This was attributed to the fact that the State provides a great deal of autonomy to localities with regard to service provision. Stakeholders noted that even accessibility to mandated services varies across localities either because the quantity of services is insufficient to meet the need, so that there are waiting lists, or because the service is so far away that families cannot access them. Stakeholders noted that transportation services in both the rural and urban areas of the State are insufficient to ensure that families can access the services they need.

A few stakeholders indicated that even when a service is available in all localities, the allocation of the service or the way it is provided tends to differ across localities because of available funding resources or funding decisions made at the local levels. Some stakeholders suggested that the delivery of IL services is inconsistent across LDSS because of variations in funding resources.

Stakeholders identified the following as the most problematic in regard to availability and accessibility:

- Substance abuse services (both assessment and treatment), particularly in Tazewell County
- Mental health services, including psychiatric services
- Dentists who will accept Medicaid
- Foster family homes, particularly those that will accept adolescents (Fairfax County)
- Treatment services for sex offenders
- Additional housing for youth transitioning from foster care to independent living

Despite the concerns raised by many stakeholders regarding accessibility of services, almost all Hampton City stakeholders expressed the opinion that there are no service gaps in that locality because of concerted efforts on the part of the entire service community to ensure that any service needed by children or families is provided. As one stakeholder noted, “If there is a gap, we all work together to fill that gap. We make it work. We recruit funding. We sponsor children.”

Item 37. The services in item 35 can be individualized to meet the unique needs of children and families served by the agency

 Strength **X** **Area Needing Improvement**

Item 37 is rated as an Area Needing Improvement. Although as noted in the Statewide Assessment, CSA funding allows communities the flexibility to meet the needs of individual children and families, information from stakeholder interviews indicates that the flexibility of CSA funding tends to differ across localities because of the requirement for a local match. In addition, information from the Statewide Assessment and stakeholder interviews indicates that there are insufficient resources to meet the unique needs of non-English-speaking families. This item was rated as a Strength in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, Virginia has a family-focused and community-based approach to serving children and families, mandated by the CSA, administered by the OCS. The CSA uses eight sources to create one CSA-administered pool of funds to provide services to citizens of each locality. Combined State and local funding allows communities the flexibility to meet the needs of their individual citizens, to identify and intervene with families and children who are at risk, and to collaborate in the process of service delivery.

The Statewide Assessment reports that when a client is referred to the local FAPT, the FAPT has the responsibility for assessing the needs of individual children and their families, determining the services needed, and documenting these in an IFSP. If the services needed are beyond what is available in the participating agencies and there are no other family or community resources available, the FAPT may authorize purchasing the services with local and State CSA funds.

The Statewide Assessment identifies the following as potential barriers to individualizing services:

- The lack of transportation for parents to participate in planning and to access services
- The lack of service providers in some areas of the State
- The lack of sufficient funding to ensure that the individualized needs of children and families can be met
- The lack of culturally and linguistically-relevant services in all areas of the State
- The lack of Latino and African-American foster/adoptive parents to meet the needs of the children in foster care

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review expressed different opinions regarding the capacity of the State to individualize services to meet the unique needs of children and families. Although some stakeholders suggested that the State has the capacity to individualize services, particularly through the FAPT and CSA processes, most stakeholders indicated that the lack of key services in many areas makes it difficult for some localities to have the capacity to meet the needs of children and families. In addition, some stakeholders indicated that the requirement of a local match for CSA funds has resulted in that process not being as flexible as it needs to be in some localities. Several stakeholders also noted that there is a lack of service providers in the State who speak the same language as the clients and that this restricts the types of services that can be offered to non-English-speaking families.

VI. AGENCY RESPONSIVENESS TO THE COMMUNITY

Rating of Review Team Regarding Substantial Conformity				
	Not in Substantial Conformity		In Substantial Conformity	
Rating	1	2	3	4X

Status of Agency Responsiveness to the Community

Virginia is in substantial conformity with the systemic factor of Agency Responsiveness to the Community. The State was in substantial conformity with this systemic factor in its 2003 CFSR and was not required to address the factor in its Program Improvement Plan.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Agency Responsiveness to the Community are presented and discussed below.

Item 38. In implementing the provisions of the CFSP, the State engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals and objectives of the CFSP

 X Strength Area Needing Improvement

Item 38 is rated as a Strength because information in the Statewide Assessment and stakeholder interviews indicates that the child welfare agency engages in ongoing consultation with a wide range of stakeholders to develop the CFSP. This item also was rated as a Strength in Virginia’s 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, VDSS includes the major concerns of the following stakeholders in developing the goals and objectives of the CFSP: the Child Welfare Advisory Committee (CWAC), the CPS Policy Advisory Committee, and the Permanency Advisory Committee (PAC). Additionally, in developing the goals and objectives of the CFSP, VDSS seeks input from CSA meetings, and meetings with the State Executive Council (SEC), State and Local Advisory Team (SLAT), CPMT, and FAPTs.

The Statewide Assessment reports that CWAC obtains information from stakeholders on the effectiveness and efficiency of the services provided and identifies areas where additional services are needed. The Statewide Assessment reports that CWAC reviews the State CFSP prior to submission to the Federal Government. Members of CWAC include representatives of the following: LDSS; CSAs; courts; Family Advocacy, Collaboration, Empowerment and Support (FACES); other State agencies; VISSTA; and VDSS.

The Statewide Assessment also reports that the CPS Policy Advisory Committee and PAC give the State information to identify issues related to CPS, foster care, and adoption that should be considered for the CFSP. In addition, the following groups were identified as having input into the CFSP:

- Virginia’s CIP, which directs and coordinates efforts to improve court processes and practices in child dependency cases using a collaborative, cross-disciplinary approach
- FACES, a foster, adoption and kinship association that identifies issues related to caregivers
- The Virginia Youth Advisory Council, which identifies issues of interest to older youth in foster care

In addition to the consultation provided by the groups identified above, the Statewide Assessment reports that VDSS established CORE, which is chaired by the Special Advisor for Children’s Services. Thirteen LDSS serve on CORE, which has an Executive Steering Committee and a number of workgroups. The steering committee and workgroups include membership from VDSS, LDSS, CIP, Department of Education (DOE), DJJ, Department of Mental Health, Mental Retardation, and Substance Abuse Services (DMHMRSAS), OCS, CSB, private providers, and foster/adoptive parents. Most of these groups meet monthly and have provided input regarding managing by data, resource family development, training, CSA best practices, and family engagement.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review indicated that CWAC is the primary State-level committee that provides input into the CFSP. Stakeholders noted that the CWAC reviews the CFSP and provides both written and verbal input. Stakeholders also identified CORE, SEC, and SLAT as other groups that contribute to the State's CFSP and/or to the general operations of the child welfare system. However, a few stakeholders reported that not all LDSS administrators have input into either CFSPs or Annual Progress and Services Reports (APSRs).

Item 39. The Agency develops, in consultation with these representatives, Annual Progress and Services Reports pursuant to the CFSP

Strength **Area Needing Improvement**

Item 39 is rated as a Strength because information from the Statewide Assessment and stakeholder interviews indicates that the State consults with community stakeholders to develop the APSR. This item also was rated as a Strength in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, VDSS uses the information obtained through the workgroups and committees identified in item 38 to develop the APSR pursuant to the CFSP.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review indicated that the CWAC reviews the annual reports and provides feedback to the agency.

Item 40. The State's services under the CFSP are coordinated with services or benefits of other Federal or federally assisted programs serving the same population

Strength **Area Needing Improvement**

Item 40 is rated as a Strength because information from the Statewide Assessment and stakeholder interviews indicates that the State's child welfare agency services are coordinated with the services and benefits of other Federal or federally assisted programs. This item also was rated as a Strength in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, Virginia's CSA requires integrated services to children and families and is a model for collaborative work in the delivery of child welfare services. CSA has several provisions that assure a collaborative approach in

program and fiscal policy development, and administrative oversight. To implement and monitor CSA provisions, the State established the SEC, which is chaired by the Secretary of Health and Human Resources. Members include agency heads and representatives from agencies including VDSS; the departments of Health (DOH), Education, Medical Assistance Services, and Juvenile Justice; and DMHMRSAS. The SEC also has a representative from the Office of the Executive Secretary, Supreme Court of Virginia; local governments; private providers; the State House of Delegates and the State Senate; and clients. The purpose of the SEC is to oversee policies and implementation of the CSA.

The Statewide Assessment also notes that the State also established SLAT, which is composed of representatives from VDSS, DOE, DOH, DMHMRSAS, DMAS, and DJJ. SLAT also includes a parent representative, a representative of a private provider of children’s or family services, a local CSA coordinator, a JDR court judge, and one member from each of the five geographical areas. SLAT addresses issues related to the State program, fiscal policies, and the impact of these issues on CSA service delivery.

In addition, as indicated in the Statewide Assessment, State agency staff meet regularly with staff from the Division of Benefit Programs, DOE, Division of Early Childhood Development, Department of State Police, Infant and Toddler Connection Program, and Division of Child Support Enforcement to coordinate services and benefits to CPS clients.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that the VDSS is effective in coordinating services with other Federal or federally assisted programs through local CPMT structures and workgroups. (See Item 36 for additional details.) Some stakeholders identified local collaborations with Temporary Assistance for Needy Families and Head Start programs as examples of coordination of services.

VII. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION

Rating of Review Team Regarding Substantial Conformity				
Rating	Not in Substantial Conformity		In Substantial Conformity	
	1	2X	3	4

Status of Foster and Adoptive Parent Licensing, Recruitment, and Retention

Virginia is not in substantial conformity with this systemic factor. The State was not in substantial conformity with this factor in its 2003 CFSR and was required to address this factor in its Program Improvement Plan.

Key Concerns From the 2003 CFSR

The following key concerns were identified in the 2003 CFSR:

- Although the State had standards for foster family homes and child care institutions these standards did not include essential requirements such as foster parent training.
- State standards were not applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds.
- The State did not have a recruitment process in place for ensuring the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed.

To address these concerns, the State implemented the following core strategies in its Program Improvement Plan:

- Established standards for resource parents, foster parents, and adoptive parents that are consistent between LDSS and LCPAs and in reasonable accord with Child Welfare League of America standards
- Submitted regulations on the minimum standards for LCPAs to the State Board in August 2005 (however, the Secretary of Health and Human Resources pulled the regulations in November 2005)
- Implemented dual approval of resource parents, foster parents, and adoptive parents
- Developed and implemented a statewide recruitment plan in collaboration with LDSS and private agencies to ensure the diligent recruitment of potential resource parents, foster parents, and adoptive parents that reflected the ethnic and racial diversity of children in foster care

The State met its goals for this systemic factor by the end of its Program Improvement Plan implementation period.

Key Findings of the 2009 CFSR

The findings pertaining to the items assessed under Foster and Adoptive Parent Licensing, Recruitment, and Retention are presented and discussed below.

Item 41. The State has implemented standards for foster family homes and child care institutions that are reasonably in accord with recommended national standards

Strength Area Needing Improvement

Item 41 is rated as an Area Needing Improvement. Information from the Statewide Assessment and stakeholder interviews indicates that at the time of the onsite review, the standards for approval of foster family homes did not include essential requirements such as foster parent training. However, as of September 2009, new standards were established that will require foster parent training of

LDSS-approved foster homes, and these new standards will be considered during development of the State's Program Improvement Plan. This item also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, DOLP licenses and monitors requirements for residential facilities and LCPAs. LCPAs, in turn, establish and monitor standards for the foster family homes that they approve. DFS establishes and monitors standards for the foster family homes approved by LDSS.

The Statewide Assessment notes that for private foster homes approved by LCPAs, the State (prior to September 2009) was operating under minimum standards established in 1989 and specified in two regulations. As reported in the Statewide Assessment, neither of these regulations requires training for foster care providers. The Statewide Assessment also notes that DOLP is in the process of revising these regulations and that the new regulations will include a requirement of training for foster care providers.

For foster homes approved by LDSS, the Statewide Assessment reports that, at the time of the Statewide Assessment, standards for foster homes included the following requirements:

- Interviews with the family and references
- Criminal record checks
- Medical records
- Standards for the home environment
- Standards for discipline

The Statewide Assessment also reports that current DFS regulations do not require pre-service training prior to certification of a foster family home.

As indicated in the Statewide Assessment, at the time of preparation of the Statewide Assessment, DFS was in the process of promulgating a new regulation that would establish minimum standards for foster and adoptive homes approved by LDSS that would include provisions for background checks, medical checks, and Department of Motor Vehicle checks. The Statewide Assessment reports that the new standards for homes approved by LDSS received final approval by the State Board of Social Services in April 2009 and were expected to be in effect by September 1, 2009.

With regard to standards for residential child care facilities, the Statewide Assessment reports that new standards for licensed children's residential facilities were put into effect in January 2009. The Statewide Assessment indicates that a regular license is issued when activities, services, facilities, and the applicant's financial responsibility substantially meet the requirements for a license that are set forth under the regulations adopted by the State Board of Social Services. Each license and renewal thereof may be issued for a period up to 3 successive years, with the period of licensure based on the compliance history of the facility. According to the

Statewide Assessment, a provisional license is issued when the facility is temporarily unable to comply with the requirements and may cover a period not to exceed 6 months.

Stakeholder Interview Information

Stakeholders commenting on this item addressed standards for both child care facilities and child placing agencies. With regard to child care facilities and LCPAs, stakeholders indicated that although all child care facilities must be licensed, a new facility may be issued a provisional license until all requirements are met. Stakeholders noted that monitoring child care facilities and child placing agencies is done through two inspections each year, one announced and one unannounced. A facility or LCPA can be licensed for periods of 1 to 3 years, depending on their monitoring status.

Stakeholder comments also suggest that standards vary across localities, although some minimum standards are established by the State. Some stakeholders indicated that in some localities, foster parents must complete training as a condition of licensure but that this is not a statewide requirement. According to a few stakeholders, reapproval of foster home licenses currently occurs every 2 years, and provisional licenses are not offered for foster family homes.

Item 42. The standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-E or IV-B funds

 Strength **X** Area Needing Improvement

Item 42 is rated as an Area Needing Improvement. Information from the Statewide Assessment and stakeholder interviews indicates that at the time of the Onsite Review, the standards that apply to foster homes approved by LCPAs were not the same as those applied to foster homes approved by LDSS. This item also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the regulations governing foster family homes approved by LCPAs are similar to the regulations governing foster family homes approved by LDSS; however, they are not consistent. There are differences in the timeframes for reapproval, the number of children that can be placed in the home, the number of visits to the home for the home study process, and others. Proposed new regulations have been developed for both groups, and DOLP and DFS have worked together in an attempt to write consistent proposed regulations. As stated above, the regulations governing LDSS homes were approved in September 2009 and regulations that apply to LCPAs were in the final comment stage. Although there are differences in standards for the LCPA and LDSS foster homes, within those agencies, the same licensing standards apply to relative foster homes and non-relative foster homes.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review addressed both the application of standards to child care facilities and to foster family homes. With regard to child care facilities, State-level stakeholders indicated that waivers may be used for child care facilities that pertain to standards that do not relate to health or safety concerns. With regard to foster families, a few stakeholders noted that waivers are not used for foster families and that relative homes that are approved must meet the same requirements as other foster families. It was noted, however, that Virginia can place a child in a foster home for up to 60 days before the home is fully approved, although the family is not eligible for board payments from title IV-E funds until full approval.

With regard to foster family homes, stakeholder comments suggest that there are two sets of standards; one for those that are approved by LDSS and another for those that are approved by LCPAs. One stakeholder noted that although these standards use the same language, they can be interpreted differently, and this results in inconsistency in implementing the standards.

Item 43. The State complies with Federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children

Strength **Area Needing Improvement**

Item 43 is rated as a Strength. Information from the Statewide Assessment and stakeholder interviews indicates that the State complies with Federal requirements for criminal background clearances. In addition, the most recent IV-E secondary review in March 2007 found that in 3 out of 31 cases the State did not meet the Federal requirements for criminal background clearances. The State did not provide more recent data relevant to criminal background clearances. This item also was rated as a Strength in the State's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, the Code of Virginia 63.2-901.1 requires criminal history record checks from the Central Criminal Records Exchange and the FBI, and a search of the child abuse and neglect central registry on all individuals with whom LDSS or LCPAs are considering placing a child on an emergency, temporary, or permanent basis. The Statewide Assessment also notes that the Code of Virginia also allows for background checks to be performed on all adult members of the home where the child is to be placed and requires that background checks comply with the provisions of the Adam Walsh Child Protection and Safety Act of 2006, Public Law 109-248. In addition, LDSS or LCPAs cannot approve a foster or adoptive home if any individual in the home has a record of an offense that is set out in the Code of Virginia in 63.2-1719 (known as barrier crimes) or if there is a founded complaint of abuse or neglect in the child abuse and neglect registry. There currently is no waiver process for relatives who have a barrier crime in their history but appear to pose no threat of harm to children.

As noted in the Statewide Assessment, residential facilities for children and group homes are required to have national criminal background checks and checks of the child abuse and neglect central registry on employees, potential employees, volunteers, or persons providing services on a regular basis. Employees of LCPAs must have background checks in accordance with 63.2-1720 of the Code of Virginia, which also prohibits hiring an individual who has committed a barrier crime.

The Statewide Assessment notes, however, that in an emergency placement, LDSS may obtain criminal history information from a criminal justice agency. However, within 3 days, the emergency caregiver must submit fingerprints to the Central Criminal Records Exchange. A central registry check is required prior to the emergency placement.

The Statewide Assessment reports that due to the complexity of the criminal background check requirements, one unit, the Background Investigation Unit (BIU) in VDSS, manages all background checks submitted on prospective foster and adoptive parents from the 120 LDSS, and interprets results received from the FBI by comparing them to the barrier crimes list in the Code of Virginia. The BIU provides documentation to LDSS as to whether individuals are eligible to be approved as foster or adoptive parents based on passing the fingerprint check.

The Statewide Assessment indicates that many LDSS also conduct new background checks and CPS central registry searches when a foster or adoptive home is reapproved. It was noted that when a proposed new legislation is enacted, this will be a requirement.

Stakeholder Interview Information

Stakeholders commenting on this item during the Onsite Review stated that criminal backgrounds checks and central registry checks are completed prior to the placement of a child.

Item 44. The State has in place a process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the State for whom foster and adoptive homes are needed

 Strength X Area Needing Improvement

Item 44 is rated as an Area Needing Improvement. Although many LDSS conduct targeted recruitment, information from the Statewide Assessment and stakeholder interviews indicates that the State does not require LDSS to recruit foster and adoptive homes that reflect the ethnic and racial diversity of the children for whom foster and adoptive homes are needed. This item also was rated as an Area Needing Improvement in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, DFS created a Resource Family Team (RFT) composed of one manager and five regional Resource Family Specialists (RFSs) whose purpose includes promotion of recruitment statewide. The unit had one RFS in each region

as of March 2009. LDSS are able to obtain free assistance from this team in evaluating their current recruitment and retention practices with subsequent assistance in identifying, developing, revising, and implementing focused foster home recruitment and retention activities.

The Statewide Assessment reports that the RFT is working with Casey Strategic Consulting to develop a recruitment plan for all LDSS at the local and regional levels that will support general, targeted, and child-specific recruitment strategies.

The Statewide Assessment reports that 98 LDSS responded to a recent survey question that asked: “Does your agency have enough foster homes for the following populations?” Sixty percent or more of the respondents answered “No” to this question for homes that will accept the following populations:

- Racially diverse
- Ethnically diverse
- Teenagers
- Children with medical or emotional problems
- Sibling groups

The Statewide Assessment also notes that there continues to be a lack of Latino and African-American foster and adoptive parents to meet the needs of the children in foster care.

As reported in the Statewide Assessment, a recent LDSS survey collected information regarding LDSS targeted recruitment efforts. Of the 98 LDSS that responded to the survey, 77 percent reported they have targeted recruitment efforts for foster homes for teenagers and 70 percent reported having targeted recruitment for foster homes for sibling groups. According to the Statewide Assessment, these are two of the hardest populations for whom to find foster family homes at this time. In addition, 63 percent reported targeted recruitment for children with emotional problems, and 52 percent reported targeted recruitment for children with medical problems. Sixty percent of LDSS reported having targeted recruitment for racially diverse populations.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review discussed the recruitment efforts in their localities. Several stakeholders reported that Fairfax County has a full-time recruiter and a recruitment plan that is revised yearly based on statistical data regarding children who need homes. However, these stakeholders also noted that the county does not have enough foster homes, especially for Latino and African-American children, teenagers, babies, large sibling groups, children transitioning out of residential care, and non-English-speaking children.

Hampton City stakeholders also noted that they have statistical reports identifying races of children in foster care and of foster family homes that are reviewed weekly, and that there is a good match of race/ethnicity of foster homes and race/ethnicity of children in

foster care. Some Tazewell County stakeholders reported that there is a shortage of foster homes in that county and that although they had a foster parent recruitment month in May, they were not able to recruit enough parents to meet the need.

Item 45. The State has in place a process for the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children

 Strength X Area Needing Improvement

Item 45 is rated as an Area Needing Improvement because information in the Statewide Assessment indicates that some LDSS are unwilling to place waiting children in adoptive homes in other LDSS because they are concerned that the other LDSS would have less stringent adoptive home requirements. This was seen as a barrier to the inter-jurisdictional adoption of waiting children. This item was rated as a Strength in Virginia's 2003 CFSR.

Statewide Assessment Information

According to the Statewide Assessment, cross-jurisdictional resources used to facilitate timely adoptive or permanent placements for waiting children include the Adoption Resource Exchange of Virginia (AREVA), which provides photo listings of waiting children and waiting adoptive families; the Heart Gallery, which is in place in some LDSS; and Wednesday's Child.

The Statewide Assessment also reports that Virginia had a Federal adoption opportunities grant under the Rural Adoption Family Initiative (RAFI) from October 2003 to September 2008. The Statewide Assessment reports that two findings from the RAFI grant were that the expectations and experiences of prospective adoptive families were vastly different depending on the jurisdiction in which they lived, and inter-jurisdictional barriers to the adoption of waiting children were more difficult to overcome than the mental health or education barriers that RAFI was designed to address. As reported in the Statewide Assessment, many LDSS had concerns that neighboring LDSS had less stringent adoptive home requirements and different practice models. To address this concern, the State has tasked the RFT to create regional collaboratives for LDSS to learn best practices and collaborate with one another in placing children for adoption.

Stakeholder Interview Information

Most stakeholders commenting on this item during the Onsite Review expressed the opinion that cross-State adoptions and permanent placements are hampered by the extensive delays involved in the Interstate Compact on the Placement of Children process, particularly the difficulty of securing responses to requests for information and home studies from other States in a timely manner. A few stakeholders noted, however, that inter-jurisdictional adoptions are facilitated by the requirement that all LDSS must register children for AREVA after TPR is finalized, and that this action automatically registers the child on the national adoption exchange, **AdoptUSKids**. A few stakeholders also noted that the Heart Gallery and Wednesday's Child are other efforts that promote cross-jurisdictional adoptions.