

**Child and Family Services Review  
Final Assessment**

**Vermont**

**May, 2001**

**U.S. Department of Health and Human Services  
Administration for Children and Families  
Region I**

*DETAILED SUMMARY OF FINDINGS*

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## I. SAFETY

<b>Outcome S1: Children are, first and foremost, protected from abuse and neglect.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 41</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	15	9	12	36	87.8%
Partially Achieved:	2	0	1	3	7.3%
Not Achieved or Addressed:	2	0	0	2	4.9%
Not Applicable:	3	5	1	9	
<b>Conformity of Statewide data indicators with national standards:</b>					
	<b>National Standard</b>	<b>State's Percentage</b>	<b>Meets Standard</b>	<b>Does Not Meet Standard</b>	
Repeat maltreatment	6.1%	6.58%		X	
Maltreatment of children in foster care	0.57%	0.15%	X		

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

Strength       Area Needing Improvement

#### Basis: Statewide Assessment

The State has a decentralized intake system. Depending on the site, staff either specialize as intake workers or such duties are performed on a rotating schedule. There are distinct criteria for accepting referrals, according to the maltreatment alleged. Casework supervisors review reports and decide whether or not the allegations(s) warrant investigations. Decisions not to investigate are reviewed by a second person. The State's policy specifies that investigations must be commenced (i.e. the child must be interviewed) within 72 hours of accepting a report. No data were provided in the Statewide Assessment reflecting the timeliness of the State's response. However, the State notes that it accepts reports of sexual abuse by non-caretakers and reports alleging risk of harm. Vermont has a statutory "risk of harm" category of child maltreatment. Risk of harm can be substantiated when parents place their children at risk of physical injury of sexual abuse. This means that substantiated victims of harm have NOT suffered child abuse or neglect but are at risk to suffer such harm. The State asserts that these categories of allegations appear to be broader than other states' and may account for disparate substantiation rates when compared to the national rates. The State noted that a significant number of

investigations are not completed in 30 days, as required by state policy, and that it appears this is due to police involvement in sexual abuse investigations.

**Basis: Onsite Review**

**Strengths**

- In 86 percent of the cases reviewed, the Agency responded to reports of abuse and neglect within the 72-hour timeframe; face-to-face contact was made with family members in the timeframe required by Agency policy.
- Many of the stakeholders interviewed indicated that safety is a major focus and a priority for SRS; they believe that investigations are initiated in a timely manner. Stakeholders view the Agency as being very responsive to situations where there is imminent risk to children.
- SRS allows "waivers" to the response time only in cases where there are no safety issues, such as allegations of sexual abuse by a non-caretaker. Waivers are granted, for example, when caseworkers and law enforcement need to collaborate on investigations. Reviewers found appropriate use of waivers to ensure safety of children and to facilitate a coordinated response by SRS and law enforcement.
- As a result of a child death in 1999, SRS engaged many groups and individuals in Vermont in examining the role of SRS and others when maltreatment has not occurred, but there is a "risk of harm" involving children in a family. SRS implemented a policy that expands the agency's role when "risk of harm" is alleged. The State's statutory "risk of harm" category was identified by SRS and many stakeholders as contributing to the increased numbers of reports accepted for investigation. While the expanded role of SRS is a positive step in early identification and treatment for families, the Agency has not received the additional staff necessary to respond to the higher number of reports.

**Areas Needing Improvement**

- Casework documentation was found to be an area needing improvement across all three sites. In most cases it was difficult for reviewers to ascertain what actions SRS took during an investigation, and to locate information regarding final disposition of investigations, because documentation was incomplete in the majority of cases.
- Some SRS staff do not have a clear understanding about the Agency's timeframes for completion of investigations. As a result, there were cases that did not contain any information regarding the investigation process or final results for reports received during the period under review.

## Item 2. Repeat maltreatment

\_\_\_ Strength X Area Needing Improvement

### **Basis: Statewide Assessment**

In FY 1999, the State's rate of repeat maltreatment was 6.58 percent which is a slight decline from FY 1997 which was 7.72 percent; the national standard is 5 percent.\* The State noted that some repeat maltreatment reports may actually refer to incidents predating the "original incident", that came to light after the department got involved with the family. The dates of the incidents are not captured on their system. A review of (**select**) cases of maltreatment determined that the most common type of repeat "maltreatment" are those under their "risk of harm" category. This may reflect a need for greater or different form of intervention in these cases. The State has said that it is not clear if these cases should be counted as maltreatment cases. Further, of the 75 children who had a second substantiation of any kind of maltreatment, 31 (40 percent) of them were taken into custody following the second report and 21 of these cases involved the same perpetrator. The State also found that the repeat maltreatment rate for sexual abuse cases was composed almost entirely of incidents involving different perpetrators, a finding reflective of the State's policy of accepting reports regarding sexual abuse by non-caretakers of any age.

\*The National Standard was revised in June, 2001, to 6.1 percent.

### **Basis: Onsite Review**

#### **Strengths**

- In 90 percent of the cases reviewed, there were no reports of repeat maltreatment during the period under review. In the cases where there were multiple reports during the period under review, they involved the same general abuse/neglect complaint and the same perpetrator.
- SRS recently changed its policy to ensure that concerns of maltreatment received on open cases are accepted as reports and are fully investigated. Prior to this policy change, reports of maltreatment on open cases were taken as "additional information" and not investigated.

#### **Areas Needing Improvement**

- Reviewers identified a lack of comprehensive assessments in cases where there were reports of repeat maltreatment involving the same general abuse/neglect complaint and the same perpetrator.
- One site noted a concern that children's behavior often becomes the focus of the case rather than the parents' and families' needs relating to the abuse and neglect. This is especially seen in cases involving adolescents. When the focus shifted to the family, reviewers saw the child's safety needs then being addressed.

### **Status of Safety Outcome S1 - Not in Substantial Conformity**

<b>Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 32</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	14	7	5	26	81.3%
Partially Achieved:	1	1	1	3	9.4%
Not Achieved or Addressed:	2	0	1	3	9.4%
Not Applicable:	5	6	7	18	

**Item 3. Services to family to protect child(ren) in home and prevent removal**

Strength       Area Needing Improvement

**Basis: Statewide Assessment**

The State has developed a comprehensive system of family support and services designed to assist all families, including those who come to the attention of child welfare services. Many of these services are community-based. The family support system in the state is supported by partners from health, mental health, education, other state departments and private foundations. The State offers an array of services that focus on family preservation and family support. These services are identified in Item #35 and can be found on pages 13-14 of the Statewide Assessment. Also noted, throughout the State there is a serious lack of services, particularly outpatient therapy (due in part to a lack of qualified therapists who take Medicaid) and substance abuse services.

The State has established a risk of harm category to provide services to children who may be at risk of harm but prior to an incidence of abuse and neglect. It could be argued that the inclusion of this category of cases as appropriate for services might help to prevent unnecessary removals of children at risk. The State allows workers to unsubstantiate cases in which risk of harm is apparent but the caretaker demonstrates a commitment to remediate the situation that led to the risk.

**Basis: Onsite Review**

## Strengths

- In 67 percent of the cases reviewed, if appropriate, families received services to protect children prior to removal. There is a vast array of services available to families to reduce risk of harm and to prevent removal. In most cases, the services were appropriate and interventions were commenced timely.
- The Agency was found to have a strong level of community collaboration that is having a positive impact on the services to families. At all three sites, staff and other stakeholders noted that community involvement is an integral part of the SRS system. Stakeholders expressed that children being served by SRS and/or the mental health system are viewed as "our children" and "community children", rather than the Agency's children.
- Communication between SRS and the service providers is done via team meetings on individual cases. These team meetings were described by many as being very productive and offering valuable information on how the family is progressing.

## Areas Needing Improvement

In 33 percent of the cases this indicator was rated as an **area needing improvement**. Reviewers found the following:

- Some cases lacked an ongoing assessment and monitoring of services to children and families, including the absence of a comprehensive family assessment that identified the strengths and needs of families and a gap in assessing the appropriateness of services to families, the length of time services are provided to families, and the effectiveness of services in resolving the issues that brought the family to the agency's attention.
- Case plans were not always developed for in-home CPS cases. Establishing goals and objectives, and identifying specific service needs which would guide expectations for in-home cases and would help workers establish direction were not in place.
- While team meetings were described as a strength in facilitating communication between SRS and service providers, the Agency appears to be relying too heavily on providers for feedback without a system in place to monitor the quality, appropriateness, and effectiveness of services.
- Inadequate case documentation made it difficult for reviewers to ascertain what services were being provided, and what decisions were made in a case. Lack of documentation is a barrier to understanding how the Agency is managing cases and keeping children safe.

#### Item 4. Risk of harm to child

  X   Strength           Area Needing Improvement

##### **Basis: Statewide Assessment**

As described in Item 1, Vermont has a statutory "risk of harm" category of child maltreatment. Risk of Harm can be substantiated when parents have placed their children at risk of physical injury or sexual abuse. Therefore, substantiated victims of harm have not suffered child abuse or neglect but are at risk to suffer such harm.

##### **Basis: Onsite Review**

##### **Strengths**

In 86 percent of the cases reviewed, the risk of harm indicator was rated as a **strength**.

- Based on recent case practice, the decision-making process to identify and reduce risk of harm was based on the child's health and safety. Reviewers saw positive outcomes for children when families were actively participating in services.
- Stakeholders reported that inter-agency team meetings assist the agency in identifying and addressing risk of harm.
- The substantial up-front services provided, teamwork, collaboration and appropriate placements seen in the majority of cases, contributed to the Agency's ability to keep children safe.

##### **Areas Needing Improvement**

In the cases in which this indicator was rated as an **area needing improvement**, the following issues were identified:

- Reviewers cited concerns that on-going risk of harm is not being addressed adequately in all cases. Workers appear unsure how to proceed with the case if the parent is not engaged in services and there is not a level of harm that requires the case to remain open. Also, reviewers noted a lack of a comprehensive assessment of family needs and services to manage the risk of harm.
- Reviewers saw a focus on the child's behaviors, despite ongoing family issues involving parental substance abuse, domestic violence, and sexual abuse.

##### **Status of Outcome S2 - Not in Substantial Conformity**

## II. PERMANENCY

<b>Outcome P1: Children have permanency and stability in their living situations.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 42</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	9	11	10	30	71.4%
Partially Achieved:	8	1	2	11	26.2%
Not Achieved or Addressed:	1	0	0	1	2.4%
Not Applicable:	4	2	2	8	
<b>Conformity of Statewide data indicators with national standards:</b>					
	<b>National Standard</b>	<b>State's Percentage</b>	<b>Meets Standard</b>	<b>Does Not Meet Standard</b>	
Foster care re-entries	8.6%	8.0%	X		
Length of time to achieve reunification	76.2%	64.91%		X	
Length of time to achieve adoption	32.0%	23.01%		X	
Stability of foster care placements	86.7%	69.96%		X	
Length of stay in foster care*					

\*Not used to determine substantial conformity.

### Item 5. Foster care re-entries

  X   Strength           Area Needing Improvement

#### Basis: Statewide Assessment

Foster Care re-entry is a complex issue in Vermont because the system serves abuse and neglected children, children beyond their parents' control and delinquent youth. In FY 1999, 60 children (8 percent) re-entered foster care within 12 months of a prior foster care episode. This is above the national standard of 6 percent.\* According to the Statewide Assessment, a high percentage of re-entries are in the Juvenile Services System and not into the child protection system. Also, 8 percent is an improvement from the previous two years in which the percentage of re-entry was 10.56 percent and 11.75 percent, in FY 1997 and FY 1998 respectively.

\*The National Standard was revised in June, 2001, to 8.6 percent.

**Basis: Onsite Review**

**Strengths**

In 100 percent of the cases reviewed this indicator was cited as a **strength**. While a few cases had more than one entry into foster care, these re-entries were determined to be appropriate.

**Area Needing Improvement**

No areas needing improvement were identified.

**Item 6. Stability of foster care placement**

\_\_\_\_ Strength        X   Area Needing Improvement

**Basis: Statewide Assessment**

In FY 1999, 587 children (69.96 percent) who had been in foster care less than 12 months had no more than two placement settings. The national standard is 89 percent.\* The State has identified this as an area in which they need to improve.

Vermont analyzed their data to find out the number of placements for children by age and adjudication. The State found that children who enter custody before the age of five are least likely to move. 57 percent of these children have one or two placements, regardless of length of stay in foster care. It is clear from their data that the time children tend to move is not as often during the first twelve months they are in foster care. It appears that it is children who stay in care for longer periods - and are not pre-school age - that tend to move. In trying to determine if one age group is more stable than another, the State found that they do their best job with young children entering custody: 77 percent of children 0-5 had no more than two placements in 12 months. However, this is still below the national standard. The State has identified the need to develop strategies that will lead to improvement.

The State has attempted to address this issue in a variety of ways. The Agency re-administered the Juvenile Services Risk Assessment in January 2000 (refer to Item 23), it had not been done since 1984. The information obtained from this assessment clearly identified the youth being served now demonstrate more difficult behavior and face more serious challenges. The State conducted focus groups with state staff and stakeholders during the Statewide Assessment and many areas were identified which need further analysis. Some of these are: the State needs to develop a more systematic assessment process; improve the way the State matches children/youth with foster homes; address the needs of older adolescents and the State needs to improve the support and training of foster parents.

\*The National Standard was revised in June, 2001, to 86.7 percent.

## **Basis: Onsite Review**

### **Strengths**

In 73 percent of the cases reviewed, *stability of foster care placement* was determined to be a **strength**.

- At all three sites, in cases where the placement was identified as a strength, SRS staff appeared to devote much effort to locating a good match between the child's needs and the skills and experience of the placement resource. For most of these cases, reviewers also noted that services and support were being provided to the foster family to maintain the placement.
- Reviewers noted that to further support the stability of placements, one site formed a substitute care committee that meets twice a month to discuss difficult placement issues. This committee discusses placement options available, overall placement needs, and systems issues related to the substitute care system. The committee also gathers feedback from consumers and providers and reviews and evaluates the effectiveness of various contracts.

### **Areas Needing Improvement**

Stakeholders and agency staff expressed concern regarding the number of moves experienced by some of the children in foster care. In 27 percent of cases reviewed, the *stability of foster care placement* was found to be an **area needing improvement**.

The following were identified as the major reasons for placement disruptions:

- A high percentage of older children are entering care because they have exhausted the community services available to them or they have intensive needs that cannot be met through in-home services. Thus, meeting the increasingly more challenging needs of these older foster children is placing additional burdens on Vermont's substitute care system.
- Insufficient or lack of timely assessment of children's needs at the time of entry into care result in some children being placed in settings that fail to meet their needs. For example, stakeholders reported that children are sometimes placed in foster homes when a higher-level placement resource would be more appropriate. Reviewers found that once children received thorough assessments and were matched to the appropriate placement resource, stability and permanency goals were more likely to be achieved.
- All three sites described older youth in foster care as having more complex needs, such as behavioral problems, substance abuse issues, and/or severe mental health needs that are difficult for foster parents and group home staff to manage. Many foster parents reported that they struggle to meet the specialized needs of these children, often without supportive services to assist them. In addition, foster parents articulated a need for more information regarding children's special needs at the time of placement. Finally, foster parents indicated some confusion about the protocol for accessing services to assist them in coping with children's behaviors and issues. They sometimes found that they were "bounced" between SRS and the mental health provider. Foster parents saw a need for SRS staff to be more actively engaged with them and the children in their home to better assist them in addressing the children's problems.

- Across all three sites, it was found that the State lacks sufficient services and/or specific resources that were viewed as important to placement stability. These include: more residential treatment options; specialized services for children with difficult to control behaviors - particularly for juvenile females; additional therapeutic foster homes; and more specialized services for teens with severe mental health issues.
- At one site, the infrequency of SRS worker contact with children and foster parents was cited as contributing to a lack of stability in the foster care settings.

An analysis of the 11 cases in which the stability of the placement was found to be an issue showed that:

- The number of placement moves in the review period ranged from 2 to 13;
- The typical ages of children being moved was 16 -18;
- The youngest child experiencing instability in placement was age 11;
- Lack of assessment of the child's needs was found to be a common reason for disruption; in a few of these cases, the Agency did not identify and/or address the child's needs despite numerous disruptions for the same general reason.

#### **Item 7. Permanency goal for child**

Strength       Area Needing Improvement

#### **Basis: Statewide Assessment**

Vermont has a special challenge in the area of permanency planning as many of their children in custody enter during adolescence. The State's percentage of children with reunification is 50 percent. In FY 1999, 64.91 percent of children in care were reunified with their parents or caretakers in less that 12 months from the time of the latest removal from home. The national standard is 78 percent.\* The data shows that children who enter custody before age 5 are most likely to achieve early reunification. The data also shows that delinquents in custody are the least likely to achieve early reunification.

The State has focused on the issue of permanency for adolescents in many different ways. Item #35 lists the efforts that the state has done in the area of permanency planning for their older youth in care.

\*The National Standard was revised in June, 2001, to 76.2 percent.

## **Basis: Onsite Review**

In 49 percent of the cases reviewed, *permanency goal for the child* was rated as a **strength**.

### **Strengths**

Reviewers found that the State is using a number of strategies to achieve permanency for foster children. These include:

- The provision of adequate and appropriate services to children and families when the child's goal is reunification.
- Use of kinship care as the preferred placement option, when appropriate.
- Implementation of concurrent case planning approaches including early identification of children for whom return home is not likely and increased use of legal risk foster care placements.
- Recognition that legal guardianship is an appropriate option for some children. While the State legislature recently authorized legal guardianships, currently there are no federal or State funds to support guardianships. Stakeholders expressed hope that in the future subsidized guardianships will be another viable option for children for whom adoption may not be appropriate.

In addition, in the majority of cases reviewed, the agency is filing petitions to Terminate Parental Rights (TPR) in a timely manner and the ASFA requirement for a 12-month Permanency Hearing is being met.

Finally, reviewers heard that a Permanency Planning Committee has been formed at one site. The committee meets twice monthly and focuses on TPR decisions and the availability of permanency resources. The committee also meets quarterly to review and make recommendations for longer-term objectives for developing additional resources for children, meeting office and staffing needs, and other activities to promote permanence for children. This committee was identified as being helpful in ensuring timely permanency for children.

### **Areas Needing Improvement**

In 51 percent of the cases reviewed, this indicator was rated as an **area needing improvement**.

Reviewers and stakeholders identified the following barriers to achieving timely permanency for some of the children in foster care:

- Permanency goals for children are not always set in a planned, thoughtful manner. Reviewers often saw goals driven by case circumstances, rather than the needs of the child. The lack of a thorough assessment process appears to affect the Agency's ability to determine the most appropriate permanency goal and the services required to support or to re-assess this goal.

- Reviewers expressed a concern that in some cases the Agency is not making a concerted effort to re-assess the permanency goal in a timely manner. In 8 of the 21 cases where this area was identified as needing improvement, the permanency goal was changed to adoption after the child had been in foster care for 2 years or more.
- There was some indication of the mis-use of Long Term Foster Care as a permanency goal. In some cases, once this goal was set, the child's permanency needs were no longer given careful and close scrutiny. In fact, a few stakeholders questioned the need for permanency hearings when the child was considered to be in a stable, long-term foster care placement even if the placement was not viewed as a placement with a permanent foster family.
- Reviewers found that in some cases, the child's permanency goal was not clear to everyone involved with the case. Family members, service providers, and workers sometimes cited a goal different from the one documented in the case plan. The lack of direct contact between the SRS worker and the child and/or family appeared to be one of the reasons for this lack of clarity.
- Court delays were reported in all three sites. These delays were identified as follows:
  - Courts often do not schedule merit hearings early on in the case. Long delays, sometimes up to six months, before the trial on merits was held were not uncommon. At one site, the average time from filing the first petition to the merits hearings was 45 days. The state statute requires merit hearings within 15 days.
  - In the Family Court, TPR hearings and/or decisions are often not done in a timely manner. Significant delays - often up to one year - were reported. Stakeholders noted that the lack of available resources, i.e. judges, attorneys, and lack of courtrooms, contributed to these delays. In one site, a backlog of 40 TPR petitions were pending trial; however, it was acknowledged by both the Courts and the Agency that efforts were being made to address this backlog by working with the Court Improvement Project.

**Item 8. Independent living services**

  X   Strength             Area Needing Improvement

**Basis: Not addressed in Statewide Assessment**

Vermont's Independent Living Program is the Transitional Services Program. This program is administered centrally through a Residential Services Coordinator who is responsible of the overall administration of the program. The department currently has 12 contracted transitional services coordinators located in each of the 12 district offices. Each coordinator serves approximately 30-35 youth. The Department requires that all youth between the ages of 15 and 21 who are in out of home placement have a written transitional independent living plan. The State has identified a need for additional resources, especially in the area of housing for their older youth. This will be an area in which they focus many of their efforts.

**Basis: Onsite Review**

**Strengths**

- The agency was found to be identifying and addressing Independent Living services in 9 out of the 12 cases reviewed.
- At all three sites, reviewers found that for the most part, the Agency was assessing the life skills/independent living needs of youth and providing appropriate services to these youth. When a copy of the Independent Living (IL) was included in the case record, reviewers noted that all significant parties were aware of plan and that services provided were more likely to be consistent with the overall goals of case plan.
- The Transitional Living Coordinator established and maintains close coordination between SRS and services providers. Stakeholders and agency staff described this coordinator as a strong advocate for teens who are currently in care as well as for those who have transitioned out of the system.
- Generally, reviewers heard that the Transitional Living workers develop a strong, supportive connection with the older youth.

**Area Needing Improvement**

- A few cases reviewed did not contain an Independent Living (written) plan. In these cases, it appeared that IL needs might not be getting fully identified and/or appropriately addressed.

**Item 9 Adoption**

\_\_\_ Strength  X  Area Needing Improvement

**Basis: Statewide Assessment**

In FY 1999 the percent of adoptions that occurred in 24 months of a child entering foster care was 23 percent. The Agency did not meet the national standard of 36 percent\* and they attribute this to the concerted effort they made in FY 1999 to address the backlog of adoptions.

Vermont has focused much effort on improving the process and timeliness of finalizations for several years. They are currently in the process of centralizing supervision of their six Regional Adoption Social Workers and they have formed "permanency teams" that review cases of children who appear to be headed towards adoption.

\*The National Standard was revised in June, 2001, to 32.0%.

The State identified the family court system as one of the barriers they have in meeting recommended timeframes. Final court dispositions can be delayed over a year, and the scheduling of TPR hearings can be delayed 6-9 months after the agency has filed the petition. Vermont's Supreme Court and Probate Courts are doing well with time frames. The State's Court Improvement Project (Permanency Planning Implementation Project) has been working on a variety of projects to improve the court's management of TPRs and adoption.

**Basis: Onsite Review**

**Strengths**

This indicator was rated a **strength** in 60 percent of the cases reviewed.

- Although there were delays in achieving adoption in some of the cases reviewed, a number of these children were successfully adopted. At one site it was noted that in a significant number of these cases, children – particularly, younger children - were adopted/being adopted by the foster parents with whom they were initially placed.
- Acknowledging the growing number of children waiting to be adopted, SRS has assigned additional staff to their adoption program area.
- At one site, it was noted that there were a high number of relinquishments (of parental rights.) The Agency was found to have a process in place that allows birth parents to see that their children will be properly cared for and for some, to be a part of the decision-making around permanency for their children.
- Foster parents said that they received excellent training to help them understand parents' rights in legal risk placement cases. They also report good communication with workers regarding the status of these cases.
- Stakeholders praised SRS for the work that they have done in partnerships with other agencies in establishing a strong network of post-adoption services to support adoptive families and children. At all three sites, the Agency is providing or leveraging strong supports, including medical and developmental services, for adoptive placements.

## Areas Needing Improvement

*Adoption* was rated as an **area needing improvement** in 40 percent of the cases.

- All three sites identified delays in terminating parental rights in the Family Court. One site described delays up to a year from filing of the petition to the TPR hearing. Stakeholders attributed many of these delays to the lack of attorneys for children and parents, inadequate number of courtrooms, and other court related court resource problems. Item 7, *Permanency Goal for Child*, also lists these and other delays in court proceedings as being an issue in achieving permanency.
- Stakeholder interviews and case reviewers identified a need for additional recruitment activity by the Agency. The Agency does not appear to have a comprehensive, on-going statewide strategy for recruiting and developing new resources for either foster or adoptive placements. Staff and other stakeholders expressed concerns about a lack of resources for the growing number of children awaiting adoptive homes, particularly for children with special needs.
- Across all three sites, reviewers and some stakeholders expressed concern regarding the reluctance of SRS staff to consider cross-jurisdictional placements for children who are legally free for adoption. While this concern is related to the Permanency outcomes of this review, it also raises questions regarding the State's compliance with Section 471(a)(23)(A) and Section 422(b)(12) of the Social Security Act. Although there has been some use of cross-jurisdictional resources identified for adoption, there appears to be some resistance across the system to placing children outside of Vermont or, in some cases, outside of a District's catchment area. Some Agency and provider staff expressed doubts about arranging and supporting cross-jurisdictional adoptions and the capacity of the Agency to monitor the progress of the child who is placed in another the state. The commitment to care for Vermont children in the state and in their own communities was described by one stakeholder as part of the Vermont "culture" and impacts the availability of placement resources even though the child is legally free for adoption and an adoptive home is not readily available in Vermont. Acknowledging this issue, the Agency is planning to provide additional training and or technical assistance on cross-jurisdictional placement policy and issues.
- Across all three sites, reviewers heard that some foster parents were not completing the required paperwork for adoption in a timely manner. Reviewers also found that in some cases, foster parents were taking a lengthy period to commit to the adoption of the child in their home.
- A lack of adoption planning and recruitment of prospective parents for older children was identified as an issue in all three sites. Caseworkers spoke about the difficulty of achieving permanency for this population. Stakeholders, however, acknowledged that the Agency is making efforts to address this issue and increase permanency options for older youth, e.g. via legal guardianships.

## Item 10. Permanency goal of other planned permanent living arrangement

  X   Strength             Area Needing Improvement

### **Basis: Statewide Assessment**

In FY 1999, 15.9 percent of children in care had a permanency goal of other planned living arrangement. Most of the children with this goal are in the adolescent age group. This is the age group that remains a challenge for the State to serve. Most of these children come from families that previously have received community services but many problems remain and many have severe emotional disturbance.

The assessment shows that as of 12/99, 19 percent of children ages 12-17 have "other planned permanent living arrangement" as their goal; 11 percent of children ages 6-11 have this goal; and 1 percent of children ages 0-5 have this goal.

### **Basis: Onsite Review**

#### **Strengths**

This indicator was rated a **strength** in 77 percent of the cases reviewed.

- In the majority of cases, this goal was used appropriately and there was sufficient information to support this decision.

#### **Area Needing Improvement**

In 23 percent of the cases reviewed, this item was rated as **an area needing improvement**.

- In the cases in which this was identified as an area needing improvement, the major concern was that this goal was set without careful and thorough exploration of other permanency options.

### **Status of Permanency Outcome P1 - Not in Substantial Conformity**

<b>Outcome P2: The continuity of family relationships and connections is preserved for children.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 43</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	14	11	12	37	86.0%
Partially Achieved:	3	2	0	5	11.6%
Not Achieved or Addressed:	1	0	0	1	2.3%
Not Applicable:	4	1	2	7	

**Item 11. Proximity of foster care placement**

  X   Strength             Area Needing Improvement

**Basis: Not addressed in the Statewide Assessment**

Vermont State Policy #125, Permanency Planning for Children in Custody describes the areas which the caseworker should focus on when finding placement. If appropriate, the policy states that a setting should be family like; in close proximity to family; within child's school district; with siblings and it should be a setting that is consistent with the child's cultural background.

**Basis: Onsite Review**

**Strengths**

This area was rated as a **strength** in 100 percent of the cases reviewed.

- In all of the foster care cases reviewed, the Agency was found to place children in their own communities whenever possible and appropriate. Staff and other stakeholders spoke highly about the Agency's commitment to place children close to their parent(s) home and, when possible, within the same school district.
- Reviewers noted that, for any the placements outside the child's community, the decision to do so was based on locating a setting that would best be able to meet the child's particular needs.

**Areas Needing Improvement**

No areas needing improvement were noted.

**Item 12. Placement with siblings**

Strength       Area Needing Improvement

**Basis: Not addressed in the Statewide Assessment**

Vermont State Policy #125 described in Item 11 addresses placement with siblings.

**Basis: Onsite Review**

**Strengths**

This indicator was rated as a **strength** in 84 percent of the cases reviewed.

- The case reviewers and the stakeholders found that the agency puts a high priority on placing siblings together when appropriate.
- For the most part, when siblings were placed apart, reviewers noted that the circumstances of the case or the particular needs of the children necessitated the separation.

**Areas Needing Improvement**

In a few cases, reviewers found siblings placed apart with no documentation or other information regarding the Agency's efforts to place them together.

**Item 13. Visiting with parents and siblings in foster care**

Strength       Area Needing Improvement

**Basis: Not addressed in the Statewide Assessment**

Vermont State Policy (Policy No. 124) does address family visiting. The policy states that visits between parents and children in care should be frequent enough so that the relationship can be maintained. The younger the child, the more frequent the visits should be. The policy also states that the social worker should take the initiative in developing a plan for family contact and family members should be actively involved in this planning.

**Basis: Onsite Review**

**Strengths**

In 86 percent of cases reviewed this indicator was rated a **strength**.

- In the majority of cases reviewed, the Agency was providing frequent opportunities for visits between the parents and children. For example, staff and other stakeholders at one site talked about foster parents who supervised visits in the homes of birth parents and/or visits occurring in foster parents' homes. All the parties involved in these visits noted that flexibility and cooperation were essential to arranging these visits.
- While the Agency does not have a policy on visitation, the case plan does address visitation. Stakeholders agreed that addressing visitation in the case plan facilitates the development of an individualized visitation plan for each family.

**Areas Needing Improvement**

- In a few cases, the reviewers noted a concern that the Agency was allowing visitation by parent to continue when it appeared that this was not in the best interests of the child.
- There were a few cases in which the Agency did not make efforts for visitation between siblings. The foster parents were attempting to coordinate and encourage visits when possible.

**Item 14. Preserving connections**

  X   Strength             Area Needing Improvement

**Basis: Not addressed in the Statewide Assessment**

Vermont addresses this in their state policy. Their policy states that visits between parents and children should be frequent enough so that the relationship is maintained. The policy provides specific considerations that should be made by casework staff when considering family visiting and contact.

**Basis: Onsite Review**

**Strengths**

In 89 percent of cases reviewed, the Agency was found to be preserving connections for children and youth.

- The case reviewers and the stakeholders noted the Agency's commitment in preserving the connections for children. Stakeholders viewed the Agency as very pro-active in its efforts with the foster parents, the schools and other community providers in establishing and maintaining connections for children in foster care.
- Parents and children reported that in cases where parental rights had been terminated, the Agency was fostering a connection between pre-adoptive parents, the child, and birth families when appropriate and beneficial to the child.
- Reviewers identified that in the absence of a family relationship, the Agency encourages significant people in their lives of older youth, including service providers and/or treatment team members, to maintain connections with these youth.

**Areas Needing Improvement**

While a strength, some stakeholders acknowledged that there are youth aging out of the system with no place to call home and no relationship or connection to a family. These stakeholders agreed that it was important for the Agency and its partners to continue to search for creative ways to ensure that children are connected to family, friends, and/or the community.

**Item 15. Relative placement**

  X   Strength           Area Needing Improvement

**Basis: Statewide Assessment**

The use of Kinship care has doubled from 6.8 percent to 13.6 percent since 1997 when the state began encouraging identification and consideration of kinship resources. Vermont does not have a subsidized guardianship program; most children in kinship care are reunified or adopted by kin.

**Basis: Onsite Review**

**Strengths**

- In 95 percent of the cases reviewed, the Agency was found to prioritize relatives as placement resources when children enter out-of-home care. Through stakeholder interviews and case reviews it was found that the agency is making significant efforts to assess relatives' ability to care for children.

- All three sites recognized the efforts the Agency has made to identify and consider relative and kinship care as having a very positive outcome for children and families. It was noted that when a child was not placed with relatives, relative placement was given first consideration and appropriately ruled out as an option.
- At one smaller office, the caseworkers know many of the families in the community so identifying relatives is very timely and is often successful.

**Areas Needing Improvement**

- There were no identified areas needing improvement.

**Item 16. Relationship of child in care with parents**

Strength       Area Needing Improvement

**Basis: Not addressed in Statewide Assessment**

As described in Items 13 and 14 above, Vermont's policy on visits between child and family provides the casework staff with guidelines on how to maintain this relationship through visits. Their policy provides a general outline of how to proceed with visits depending on what "phase " the case is in. Three phases are listed, Initial, Central and Reunification.

**Basis: Onsite Review**

**Strengths:**

This indicator was rated a **strength** in 81 percent of the cases reviewed.

- At all three sites the Agency was found to facilitate visits between children and parents in many of the cases. One site noted an extensive effort on the part of the workers to ensure these visits were taking place by providing transportation if needed.
- A good working relationship was identified between foster parents and birth parents regarding visitation. Foster parents were clearly informed of the importance of maintaining bonds between biological parents and their children and foster parents made every effort to be supportive of these connections.

## **Areas Needing Improvement**

In 19 percent of the cases this was coded as an **area needing improvement**.

- The case review identified instances at two sites in which workers appeared to struggle with making appropriate decisions on how and when to maintain and support the relationship between parent and child.

## **Status of Permanency Outcome P2 - Not in Substantial Conformity**

### III. CHILD AND FAMILY WELL-BEING

<b>Outcome WB1: Families have enhanced capacity to provide for their children's needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 50</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	16	12	11	39	78%
Partially Achieved:	4	1	1	6	12%
Not Achieved or Addressed:	2	1	2	5	10%
Not Applicable:	0	0	0	0	

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

Strength       Area Needing Improvement

#### Basis: Statewide Assessment

Vermont cites an impressive array of services available not only to families known to the child welfare system, but to all families. Family support services are planned, funded, coordinated and supported through a system of partnerships with the state departments of SRS, Development and Mental Health and Education. Services are available in all districts of the State and encompass prevention as well as intervention. This system is seen as particularly effective in meeting the needs of children at risk for abuse/neglect, and maintaining them at home when this is safe. The Statewide Assessment asserts that Vermont brings children into care as a last resort, using a variety of community based intensive interventions to avoid placement if at all possible. A need is seen for more systematic assessments of children coming into care to identify needs and enhance placement stability. The case plan for children in out-of-home care is extensive, and includes services needed by foster parents to support the provision of quality care. Most children in custody have a treatment team that meets monthly to coordinate and monitor the case plan and delivery of services. Community services are rated as being of high quality, but waiting lists for outpatient services exist statewide, and there is a lack of qualified therapists who will accept Medicaid. Additionally, substance abuse treatment is not sufficiently available. Recent attention has been focused on the need for substance abuse treatment, particularly for adolescents.

## **Basis: Onsite Review**

### **Strengths**

The needs and services of children, parents and foster parents were identified and addressed in 76 percent of the cases reviewed. The State has a broad array of services available to children and families. Stakeholders and agency staff agreed that the agency has developed strong community collaborations throughout the State. Treatment teams meet regularly to coordinate services. Open communication and a lack of “turf issues” result in creative and individualized services to meet the unique needs of children and their families. Services were noted to be particularly effective when social workers took an active role in linking families to community services

Stakeholder interviews and case reviews revealed a generally positive relationship between the state and its foster and adoptive providers. A supportive relationship with out-of-home care providers and a strong network of post-adoption services were noted as enhancing outcomes for children.

### **Areas Needing Improvement**

In 24 percent of the cases reviewed, this item was rated as **an area needing improvement**. All three sites found cases where the failure to thoroughly assess both the child's and the family's needs at case opening impaired progress to permanency. Examples include:

- For children in out-of-home care, particularly in juvenile cases, a tendency was noted to focus primarily on the child's behaviors and service needs. When this occurred, parents' needs were not assessed and the treatment and services necessary to implement reunification were not in place. In some cases where services providers had been identified, the lack of active, hands on support by the social worker in assisting parents to access treatment impaired reunification efforts.
- Occasionally when issues had been identified, services were not engaged. At two sites, children with sexually reactive behaviors were not in treatment.
- A need was seen for formal, comprehensive initial evaluations of children and families and periodic review of the efficacy of the services in place in moving children to permanency.

## Item 18. Child and family involvement in case planning

  X   Strength             Area Needing Improvement

### **Basis: Statewide Assessment**

Most children in custody have treatment teams, which meet monthly, and parents often participate in these teams. Case planning is most often a function of these treatment team meetings. Parents do not always connect their participation in team meetings with an opportunity for input into the case plan, since they are not usually formally informed that team meetings result in case planning. Foster parents report variable consistency in case plan involvement. Participation in case planning by children/youth is not specifically addressed in the Statewide Assessment.

### **Basis: Onsite Review**

#### **Strengths**

The agency is actively involving both parents and children in case planning. This was cited as a **strength** in 85 percent of the cases reviewed. Many stakeholders and agency staff described the case planning process as inclusive of parents, children/ youth (as appropriate) out-of home care providers, treatment providers and other important case participants.

#### **Areas Needing Improvement**

In 15 percent of the cases, this item was rated as an **area needing improvement**.

Two sites raised specific concerns related to family court:

- Case plans negotiated in model court put parents under pressure to agree or risk losing their children. This undermines the collaborative process.
- Disputed cases with protracted dispositions result in an inability to engage parents until legal issues are resolved.
- One site stakeholder who experienced many case plan reviews described the process as a formality in which families sometimes have limited participation. This results in a lack of investment and compliance.

## Item 19. Worker visits with child

\_\_\_\_ Strength       X  Area Needing Improvement

### **Basis: Statewide Assessment**

Vermont does not have data on the frequency of contact between caseworkers and the children and families they are assigned to. Contact standards in policy are based on the level of risk to the child, and have been lowered to reflect excessive workload demands caused by diminished staffing levels. To manage workload, the department has increasingly relied on contracted case management services through community providers. Contact between workers, families and children occur most frequently at team meetings and case plan reviews.

### **Basis: Onsite Review**

#### **Strengths**

In 71 percent of the cases reviewed, this indicator was rated as a **strength**. Because of high caseloads, SRS social workers manage many cases indirectly. Service providers are contracted to meet regularly with children, parents and out-of-home caretakers. Regular meetings of treatment teams provide social workers with information on children's well-being and progress reports on services and treatment efforts.

At one site where staff turnover was quite low, seasoned social workers visited more frequently and were thus able to establish positive personal relationships with the children in their caseloads. One site found visitation more likely with children in care.

#### **Areas Needing Improvement:**

In 29 percent of the cases this was rated as an **area as needing improvement**, 5 were in-home and 9 were custody cases. All three sites identified the lack of direct contact between social workers and children as having a deleterious effect on case outcomes.

- Both agency and community stakeholders expressed the belief that face to face contact by the agency social worker is essential to assessing behaviors, treatment needs and well-being of children. Through direct contact, social workers can identify issues that might lead to placement disruption or become barriers to reunification.
- Visitation with the social worker was noted to be the vehicle through which the child and family would be reminded of the case goals and timeframes for permanency.
- There was, in general, an over-reliance providers to perform key assessment and monitoring tasks, and in 14 cases, there was little or no documentation of the frequency and nature of provider contacts in the case record.
- Stakeholder interviews with staff and community members cited high caseloads as the chief impediment to increased contact between social workers and the children they are responsible for.

## Item 20. Worker visits with parents

\_\_\_ Strength      X Area Needing Improvement

**Basis: Statewide assessment:** See Item 19 above

**Basis: Onsite Review**

### Strengths

This indicator was rated a **strength** in 76 percent of the cases reviewed. Where strengths were noted for this item, they were similar to those in Item 19 above. The same site, which achieved success in worker/child visitations also, stood out for more frequent worker/parent contacts. The long-standing relationships of this site's social workers to families in the community resulted in more direct communication with parents.

### Areas Needing Improvement

In 24 percent of the cases, this item was found to be **an area needing improvement**. The same overall concerns were identified for worker/parent contacts as in Item 19 above.

- Some stakeholders referred to the tendency to rely on provider reports and team meetings as “case management” which was not equally balanced by hands on “social work”.
- In some cases, parents believed that lack of face-to-face contact with the social worker left them unsure about the progress they were making toward goals. Phone and e-mail exchanges with parents were found to be infrequent.

**Status of Well-Being Outcome WB1 - Not in Substantial Conformity**

<b>Outcome WB2: Children receive appropriate services to meet their educational needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 44</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	18	13	11	42	95.5%
Partially Achieved:	2	0	0	2	4.5%
Not Achieved or Addressed:	0	0	0	0	0
Not Applicable:	2	1	3	6	

**Item 21. Educational needs of the child**

Strength       Area Needing Improvement

**Basis: Statewide Assessment**

Educational needs for children in custody are addressed in the case plan. Each child in need of or receiving special educational services has an educational surrogate (who may be the foster parent) to advocate for appropriate educational services. SRS and The Department of Education (DOE) are working to improve the exchange of information so that SRS can better evaluate how well children in custody are performing in school. In the future, this exchange will be facilitated by a new database under development by DOE.

**Basis: Onsite Review**

**Strengths**

Educational needs of children are a major focus for SRS. The agency was found to be identifying and addressing the educational needs of children in the majority of the cases reviewed. All three sites described this as an area in which the Agency is providing strong support to children and is making many efforts to improve educational opportunities for children. Treatment teams advocate for educational services for children if needs are not being met by the school.

The agency has developed a strong collaboration with the Department of Education. There is an initiative underway to improve the exchange of information between SRS social workers and community schools, which will assist in the evaluation of classroom performance and the identification of educational needs for children in custody.

When Individual Education Plans have been developed for children with special educational needs, regular updates on classroom progress are included in the case plans.

**Areas Needing Improvement**

Although in only 2 percent of cases reviewed was this item rated as an **area needing improvement**, it is worth noting the following concerns:

- It was noted that some schools are labeling foster children as being “troubled.”
- Foster parents must be assertive in advocating for children’s needs to be met.

**Status of Well-Being Outcome WB2 - Substantial Conformity**

<b>Outcome WB3: Children receive adequate services to meet their physical and mental health needs.</b>					
<b>Number of cases reviewed by the team according to degree of outcome achievement:</b>					
<b>Total Cases Reviewed = 50</b>		<b>Total Cases to which Outcome Applies = 48</b>			
	<b>Team 1</b>	<b>Team 2</b>	<b>Team 3</b>	<b>Total Number</b>	<b>Total Percentage</b>
Substantially Achieved:	19	11	12	42	87.5%
Partially Achieved:	3	2	0	5	10.4%
Not Achieved or Addressed:	0	1	0	1	2.1%
Not Applicable:	0	0	2	2	

**Item 22. Physical health of the child**

  X   Strength             Area Needing Improvement

**Basis: Statewide Assessment**

Although addressed in the case plan, current policy does not require routine physical or dental check-ups for all children entering custody. SRS is in the process of developing this policy. However, SRS has a long-standing Memorandum of Agreement with the Department of Health to provide EPSDT services. Under a program called Fostering Healthy Families, new custody entrants are referred for an initial health evaluation. Outreach workers from the Health Department are available to assist foster parents with the coordination of services.

Currently, health services are provided through a "managed-fee-for-service" Medicaid program, with no special provisions for children in custody. A prior arrangement with two private companies to provide managed care services for Medicaid clients allowed SRS to negotiate a higher capitation rate for children in custody, which resulted in a higher level of services. Later this year, SRS will be discussing their concern about the reduction in the level of health services to foster children with the Office of Health Administration.

### **Basis: Onsite Review**

#### **Strengths**

The agency identified and addressed the health needs of children in 98 percent of the cases reviewed. Services to provide preventive health care, immunizations and special medical conditions are in place. Early Intervention services are appropriately accessed for pre-school children. Foster parents report that they are given medical records for the children in their homes.

One site established a position for a Public Health Nurse with grant funding from the Department of Public Health. This nurse was reported to greatly enhance the Department's ability to meet the unique health needs of children. In addition to education and support for staff and foster care providers, the Public Health Nurse made home visits, consulted on cases with health issues, and assisted teens with dietary and hygiene issues. The district is seeking funds to continue this innovative approach.

#### **Areas Needing Improvement**

Although this item was overwhelmingly rated as **a strength**, it is worth noting the following concerns, which were observed or expressed by stakeholders:

- In several cases where adolescents were on psychotropic medications, no description or documentation noting dosages and routine follow up was found.
- A routine physical health assessment was not always done following placement.

### **Item 23. Mental health of the child**

Strength       Area Needing Improvement

#### **Basis: Statewide Assessment**

While mental health needs of children in care are routinely addressed in each child's case plan, SRS currently has no across-the-board data available on the mental health needs of all children in custody. In January of 2000, SRS re-administered a Risk Assessment of the mental health needs of its Juvenile population. The results were compared with 1994 scores on items such as: more substance abuse, more school issues, poorer parental control, etc. On almost every item, youth rated in 2000 were shown to demonstrate more difficult behaviors and to face more serious challenges. SRS is working on a response to these changes with adjustments to their system of care. For example, SRS is currently contracting for an additional residential substance abuse program for adolescent males.

In addition, a State Interagency Team meets on a regular basis to address system issues and to oversee the development and monitoring of the state's system of care plan for children's mental health services. In spite of this coordination, SRS still faces significant challenges in assuring that children in custody receive quality mental health services. SRS notes that arranging and paying for mental health evaluations and providing longer-term therapy in a managed-care environment are particularly difficult.

#### **Basis: Onsite Review**

##### **Strengths**

The review determined that the Agency was identifying and addressing the mental health needs of children in 89 percent of the cases. Vermont's commitment to claiming SRS involved children as a community results in shared responsibility for meeting their treatment needs.

At one site the Agency has developed a strong collaboration with the Washington County Mental Health Service, which enhances the delivery of mental health services. This collaborative model is being replicated in other districts throughout the state.

##### **Areas Needing Improvement**

In eleven percent of the cases reviewed, the identification and treatment of mental health needs was inadequate. Despite the treatment team approach, there are gaps in services noted. Of particular concern is the lack of thorough assessments to guide treatment and placement decisions.

- It was clearly identified at all sites and from all stakeholders that the State is in need of additional mental health services in general particularly for the severely emotionally disturbed and for juvenile sex offenders.
- A lack of skilled child psychiatrists and an over-reliance on medication were noted.

- There are limited service options for youth with severe and chronic mental health issues.
- For children needing out-of-home placement, the lack of a thorough assessment sometimes led to children being under or inappropriately placed resulting in avoidable placement disruptions.
- Funding shortages were noted to effect the availability of needed services through waiting lists or truncated treatment sessions.

**Status of Well-Being Outcome WB3 - Not in Substantial Conformity**

**IV. STATEWIDE INFORMATION SYSTEM**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
Rating	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
	1	2	3 X	4

**Item 24. 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.**

  X   Strength           Area Needing Improvement

**Basis: Statewide Assessment**

Since 1983, the State has operated a statewide information system that records the status, location, demographics, location and goals for all children in foster care. This is a single, integrated system that handles child protective, foster care, adoption and juvenile justice system, as well as payments to substitute care and other service providers. The State was one of the first states to submit AFCARS data, and voluntarily meets NCANDS requirements.

The State does not operate a SACWIS system; case records are not automated. All field staff has access to the statewide database for query and update purposes. The database gives social work staff access to historical information in order to assess current risks and needs. In general, the data are considered accurate and reasonably up to date. Data entry is mostly done by clerical and supervisory staff, therefore there is some lag time in the updating of databases.

A wide variety of routine reports are run that support management, supervisory and casework needs. Managers and supervisors routinely use these reports in their day-to-day work. At the present time, Vermont's Division of Planning and Evaluation must generate all ad hoc reports. The State hopes to transition to a graphical interface to their database over the next few years, starting this year with an intake logging system. They also hope to transition to a "SACWIS-like system" if resources are available. The Department has had query access to public assistance databases for over five years and is currently working on an agreement with the Department of Corrections to access their client database and automated case records.

## **Basis: Onsite Review**

### **Strengths**

- For the most part, the information system has the capacity to track the status, demographic characteristics, location and goals for each child, including those in the juvenile justice population.
- Management and casework staff uses ticklers and generated reports to track timeliness of case planning and administrative review activities.
- The information system links with the Medicaid system, expediting eligibility determinations.
- Automated case narrative and intake log formats have been developed and will soon be implemented statewide.
- Stakeholders seem to feel the system meets minimal requirements.
- The system has the capacity to generate reports, both standing and per request, for trend analysis, although stakeholders opinions varied on the number and usefulness of the reports available.

### **Areas Needing Improvement**

- Stakeholders generally observe that the information system does not readily support ongoing case practice.
- Data entry is done by clerical and supervisory staff, resulting in some lag time in updating databases.
- Some inconsistencies between paper and electronic records were noted.
- Some staff do not feel adequately trained to understand and maximize their use of the IS.
- The system presently records limited information on intakes, investigations, and children legally free for adoption.

**V. CASE REVIEW SYSTEM**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
Rating	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
	1	2	3X	4

**Item 25. 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.**

  X   Strength             Area Needing Improvement

**Basis: Statewide Assessment**

Currently, the Department has a single case plan format that includes all the federally required elements and is used both for initial and on-going case planning for all children in custody. However, it appears that the staff is having difficulty meeting the 60-day time frame for completing the initial case plan. The two reasons most often cited are the plan's comprehensive format and the reluctance of families to cooperate in case planning prior to adjudication of the a/n petition.

The Department is re-designing the format of the initial case plan to focus on child safety issues and other initial case planning activities such as family contact and assessments.

The Department requires case plans to be mailed to parents two weeks prior to the treatment team meeting and monitors the district offices' compliance with this requirement on an on-going basis. Social work staff reported that most often on-going case planning is done in the context of the monthly treatment team meeting, however, parents and foster parents indicated that they do not always see the connection between these meetings and the updating of the plan.

**Basis: Onsite Review**

**Strengths**

- Generally, case plans are written and revised in a timely manner and include required provisions. Often case plan contents are generated from treatment team meetings, in which all providers and case participants take part.
- Parents, children (as appropriate) and care providers have input into case planning.

### **Areas Needing Improvement**

- For non-custody (in-home situations), reviewers did not see formal case planning being given priority.
- The case plan document does not work well in sibling situations and can encourage a formulaic approach to writing required updates.
- Stakeholders noted that more attention should be paid to the cultural needs of families participating in case plan review process.
- Each of the following concerns was raised at one site:
  - One site noted that the prolonged disposition of cases generated an adversarial process that resulted in difficulty engaging families and timely development of the initial plan.
  - One site noted that the mediation of case plan requirements in model court proceedings put pressure on parents to accept case planning decisions or risk removal of child.
  - One site was identified as lacking the physical facility to promote meaningful case plan development and review.

**Item 26. 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.**

  X   Strength           Area Needing Improvement

### **Basis: Statewide Assessment**

Case reviews, facilitated by contracted case reviewers, are being held on a timely basis. While staff, foster parents, and parents indicate that they are generally satisfied with reviewers, the content and quality of these reviews may vary. The Department intends to develop a quality assurance process for these reviews.

### **Basis: Onsite Review**

#### **Strengths**

- The automatic scheduling of reviews leads to timely 6 and 11 month hearings.
- Generally, parents, youth as appropriate, GALs, care providers and treatment providers are present at case plan reviews.
- Overall the administrative case reviews were seen as meaningful and inclusive.

### **Areas Needing Improvement**

- Some stakeholders noted that the reviews were more meaningful when they were conducted by State Unit staff, who had more expertise than the newly contracted reviewers.

**Item 27. 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

**Basis: Statewide Assessment**

Permanency hearings are generally held on time. For the majority of cases, these hearings facilitate movement towards permanency. However, in a minority of cases, permanency hearings are being held prior to adjudication. In some cases, adjudication takes more than 12 months because of multiple attempts to get agreement about stipulated findings of fact, high turnover of court appointed attorneys for parents, and inadequate staffing of the family court. Therefore, children require permanency hearings before the adjudication is completely resolved. In addition, recently there is a trend among family court judges to hold a Permanency Review only in cases where there is a disagreement about the case plan goal. Finally, some family court judges do not seem to share the Department's sense of urgency for child protective cases or the Department's concerns that these prolonged time frames negatively impact children.

**Basis: Onsite Review**

**Strengths**

- Permanency hearings at all three sites were held in a timely fashion.
- Involved parties including parents, care providers and youth as appropriate participate.

**Areas Needing Improvement**

- Judges saw permanency hearings in two sites as consuming too much time when issues were not contested.
- Each of the following concerns was raised at one site only:
  - One site noted that some rotating judges had little child welfare experience.
  - One site noted that unresolved disposition of cases hampered the ability of permanency hearings to effect decision-making.

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

\_\_\_ Strength       X  Area Needing Improvement

**Basis: Statewide Assessment**

Vermont has shown a decline in the percent of children who have been in out-of-home care 17 of the last 22 months (refer to the state's addendum, Permanency Data, "Footnotes"). The assessment notes that part of this may be due to the emphasis on adoption finalization described in the assessment. Also, due to ASFA, the state developed weekly reports to district office listing children who have been in out of home care for at least nine months who do not have a TPR petition filed or a compelling reason not to file. The assessment shows a chart that lists the percentage of children by age group that have a compelling reason not to file a TPR. The data shows that 34 percent of children under age 5 have a compelling reason and for the age group of 6-11 it increases to 65 percent. Vermont does not track specific compelling reasons but does note in the Assessment that for young children the reason centers on the expectation that children will be reunified in the near future.

Also cited in the assessment is the delay some courts have in scheduling hearings once a TPR petition has been filed. An example used was in November 2000 there were 48 TPR petitions pending in Chittenden court which the state's largest Court.

**Basis: Onsite Review**

**Strengths**

- All three sites found that TPR's were being filed in a timely manner and filings have increased since ASFA.
- Decisions to file are made after consultation with permanency planning specialists and Assistant Attorneys General.
- Compelling reasons for not filing were most often associated with kinship placements, long term treatment needs of children, and significant bonds between children, youth and their parents.

**Areas Needing Improvement**

- Compelling reasons for not filing were considered at Administrative Reviews and Permanency Hearings, although not always formally documented in the case record.
- Stakeholders generally note that there are significant court backlogs that prevent the timely hearing of TPR petitions, although efforts to alleviate the delays are being undertaken through the Court Improvement Process.
- One site noted that findings are sometimes not rendered for months following the completion of TPR proceedings.
- Legal representation for some participants is lacking.

**Item 29. Provides a process for foster parents, preadoptive 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.**

  X   Strength           Area Needing Improvement

**Basis: Statewide Assessment**

The Department has a centralized system for inviting foster parents, pre-adoptive parents, and relative caregivers in reviews and hearings. Foster parents routinely attend case reviews; however, practice regarding their involvement in court hearings varies.

**Basis: Onsite Review**

**Strengths**

- Notice of Administrative Review Hearings and Court Reviews are routinely and systematically conveyed to all involved parties.
- Generally, all parties felt they had the opportunity to be heard at hearings and reviews, although this varied slightly where foster parents were concerned.

**Areas Needing Improvement**

- None identified

**VI. QUALITY ASSURANCE SYSTEM**

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

**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        X   Area Needing Improvement

**Basis: Statewide Assessment**

Vermont's foster and kinship homes are governed by comprehensive licensing regulations and division policy, both address a wide range of issues related to the placement and supervision of children in foster care.

The policy for the level of contact with children and families is consistent with the level of risk. This policy was revised in 1995 due to the increased workload and inability to hire new staff. Also, due to this increase in workload and lack of staff, the Department increased its contracts with community agencies to provide case management. These case managers deliver many services formerly provided directly by the Department. In many cases, these contracts are the only assurance that children and families are seen regularly. (See Item #19)

**Basis: Onsite Review**

**Strengths**

- Licensing standards are in place for children in foster care.
- Stakeholders report a low incidence of abuse in foster care.
- The State has reformed its licensing process to ensure more timely licensing. Foster family homes are now consistently licensed before children are placed in them.

**Area Needing Improvement**

- There is a lack of clear practice standards with regard to the quality of casework and supervision.
- There are not clear standards or review of contracted case management service providers.
- While there are contact standards between workers and children in care, standards may be compromised as workloads increase. It appears workers rely too heavily on treatment team meetings and contracted providers to monitor the safety and health of children in foster care.

**Item 31. The State is operating an identifiable quality assurance system that is in place in the jurisdictions where the services included in the 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

**Basis: Statewide Assessment**

Vermont has not had a formal QC system since 1996 due to mandatory position cuts. There are several monitoring activities that the State has established relating to the quality of the service delivery system. These activities include: Contracted Case Reviewers facilitating case plan reviews and doing some case record audits focusing on compliance issues; increased reliance on automated ticklers and management reports which focus on ASFA related changes such as time frames, reasonable efforts and other related IV-E issues; a three level appeal system for substantiation decisions and case planning issues.

**Basis: Onsite Review**

**Strengths**

- Numerous community teams and task groups composed of various service providers offer ongoing consultation and feedback to the agency on strengths and needs of the service delivery system.
- The agency uses reports from its information system to monitor the timeliness of case planning activities and status of foster care cases.
- The State has begun implementing outcomes-based contracting.

**Area Needing Improvement**

- The State does not have a statewide quality assurance system. There are plans to establish one. Stakeholders recognize the need to develop such a system, including review of a random sampling of cases. In the interim, some district directors have developed ad hoc methods to monitor the quality of practices and services in their areas.

- Stakeholders reported that the previous full quality assurance case reviews produced discussion and thought about the status of cases; the current "case review" does not. Since the loss of the case review unit, there is greater reliance on supervisory review of cases.
- The type of outcome data collected and returned to the Districts to help in the management decision making process is not useful to the Districts and their stakeholders.
- Adequate data is not available to assist with quality assurance activities.
- The case review facilitator in one district was not involved in quality assurance activities, with the exception of ensuring the presence of certain required documentation in case plans.
- One district reported no quality review of services offered.

**VII. TRAINING**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
Rating	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
	1	2	3	4 X

**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.**

  X   Strength           Area Needing Improvement

**Basis: Statewide Assessment**

The state has a 60 hour Early Service Training (NEST). This training is required to be completed within 6 months of hire. There is 13-course core training required for social work staff during their first 18 months. The staff was asked to evaluate the training and gave it high marks. They said that the NEST training was very thorough and informative and they also found the in-service training to be of high quality and appreciated the opportunities to attend conferences and other outside training.

**Basis: Onsite Review:**

**Strengths**

- Stakeholders made positive comments about the State Training Unit.
- New employee training (NEST) is seen as being appropriate and helpful to new workers in orienting new workers to their role and responsibilities.
- New workers are provided with job shadowing and opportunities to consult with more seasoned colleagues.
- Follow up training for new workers is mandatory in the first 18 months of employment.

**Areas Needing Improvement**

- NEST training is given twice each year, thus some new workers are carrying full caseloads before experiencing orientation training.

**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.**

X  Strength          Area Needing Improvement

**Basis: Statewide Assessment**

An individualized learning plan for each employee is submitted annually. These plans are used to determine the new trainings that are needed. There is not a requirement for specialized training, however there are a wide variety of trainings offered to both state staff and community providers. The state established a partnership with the University of Vermont (UVM) in 1993 to provide social work education and training to their employees. This has been a very successful program for the state and the university and continues to expand and provide quality education to state staff.

**Basis: Onsite Review**

**Strengths**

- Ongoing training for basic, relevant skills and subjects is routinely offered.
- Training for current topics are developed as they emerge or are identified by staff.
- Cross training opportunities between community providers, the courts and SRS staff are seen as available and beneficial.
- A good balance between child and family focuses is noted in training.
- Substance abuse certification training and advanced investigative training are seen as standouts.
- The collaboration between UVM and SRS, which promotes matriculation in the MSW program, is seen as excellent in developing dedicated, energized professionals.

**Areas Needing Improvement**

- High caseloads limit participation in training opportunities for staff.
- There is a need for training to enhance supervisory skills.
- There is a need for additional training for caseworkers on the management of children and youth with complex needs.

**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.**

  X   Strength             Area Needing Improvement

**Basis: Statewide Assessment**

All newly licensed foster parents are required to attend an 8 session training curriculum. Foster parents and others preparing to adopt attend a 3 session Adoptive Parent Preparation that focuses on the transition from foster care to adoption and on post-adoptive issues. The Department is in the second year of a partnership with UVM Social Work Department that focuses on foster and adoptive training. Vermont has purchased the Foster Pride Curriculum developed by the Child Welfare League of America; this will begin in the spring of 2001.

**Basis: Onsite Review**

**Strengths**

- Vermont has implemented a uniform pre-service training (PRIDE) statewide.
- Foster parents training conferences are well attended and well regarded.
- Ongoing topical trainings are available to foster parents.
- One district has the capacity to tailor one-on-one trainings on special topics, or designed for specific children in foster homes.
- The level system of licensing homes is an incentive for foster parents to seek additional training.

**Areas Needing Improvement**

- Foster Parents should complete pre-service training before taking placement of a child.
- PRIDE does not fully address the needs of pre-adoptive candidates.
- Stakeholders reported concerns about the newly implemented PRIDE training such as: it is too child protective focussed (vs. family centered), it does not adequately address the issues of adolescents, it stresses a theoretical rather than a practical approach to foster parenting.
- Stakeholders expressed a need for more advanced training on special needs children who have been diagnosed as SED or display manipulative behaviors.

**VIII. SERVICE ARRAY**

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

**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

**Basis: Statewide Assessment**

The Department does a case plan and an action plan for children placed in out-of-home care. The action plan identifies the needs of the children and the foster parents and describes the specific services that are needed. This action plan also describes the responsibilities of all the parties involved with the case including the agency and the service providers. The Department contracts with community agencies to provide services that supplement casework services delivered by workers. These services are part of a statewide network of both family support and family preservation services and reunification services. The statewide assessment lists four major services: Parent Educators; Intensive Family Based Services (IFBS); Sexual Abuse Victim and Offender and Treatment Services; Post-adoption Services and other district-specific services.

The state has developed an extensive array of services, which has been done in partnership with various other agencies such as the State Team of Children, Families and Individuals; Department of Developmental and Mental Health; Department of Education and others. These services address both the family and individual needs. The Statewide Assessment describes 17 programs that provide this support. Some listed are: Success by Six; Families First; Children's Upstream Services; 8 Runaway Programs and Early Education Programs.

Permanency planning is an area in which the state has been focusing much of their effort. Over half of the children entering into custody after age 12 have a goal of reunification; over half of the children entering care before age 12 have a goal of adoption. The permanency options for children vary greatly by age group. The state has a Permanency Planning Task force that was established due to the new ASFA regulations in 1998, this task force focuses on the issue of permanency planning had there have been various trainings conducted on this issue. One area in which the state has identified as a special problem is trying to train staff on how to support adolescents by providing them with meaningful permanency options and help them develop and strengthen relationships with families. The Department has six regional adoption social workers and six adoption assistants. The state has a successful foster parent adoption program, however timeliness of adoption remains a problem (refer to Item 9)

### **Basis: Onsite Review**

#### **Strengths**

- A broad array of services are available, including intensive home-based services, parent-child centers, wrap-around services, post-adoption services, foster child support services, domestic violence prevention programs, delinquency diversion programs, independent living programs, juvenile sex offender treatment and partnerships with child care and Head Start.
- SRS has collaborative relationships with service providers and an absence of turf issues allows everyone to work together in the best interests of the family.
- The "street checkers" outreach and tracking collaboration between SRS and police in Burlington is seen as a successful pilot program that should be expanded.

#### **Area Needing Improvement**

- Service gaps were most frequently identified for mental health services, psychiatric evaluations, substance abuse treatment; residential treatment for seriously emotionally disturbed children, sex offender treatment and culturally relevant services for the growing refugee population. Some waiting lists for intensive family-based services and respite care were also cited.
- More comprehensive initial assessments of adolescents and their and families would improve placement matching and selection of appropriate services for adolescents and parents.
- Stakeholders reported that additional services for adolescents were needed, including supervised transitional living facilities, emergency shelters for youth picked up after business hours, foster care placement providers for youth, and substance abuse treatment for adolescent girls.
- Families with complex needs may be matched with less intensive services until more appropriate services become available.
- SRS should monitor the effectiveness of services as they relate to progress toward meeting case plan goals.

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

Strength       Area Needing Improvement

**Basis: Statewide Assessment**

All the services listed in the previous sections are accessible to all families and children. Staff in general indicated that community services are of high quality however they identified the lack of availability of services such as substance abuse services and qualified therapists as a problem.

**Basis: Onsite Review**

**Strengths**

- Districts with service gaps offer transportation to access needed services or find creative ways to make the services available.
- Residential programs and intensive family-based programs are available statewide.

**Area Needing Improvement**

- Some regional gaps were identified in transitional living facilities, specialized mental health services, and therapeutic foster homes.
- Some facilities and SRS offices are not accessible by public transportation.

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

Strength       Area Needing Improvement

**Basis: Statewide Assessment**

The services listed above do address individual needs of children and families. Many of the services are home and/or school-based which increases the accessibility of services to rural families. As stated above, there is a need for more services and the Department has been working with the Office of Drug and Alcohol programs to address some of these needs.

**Basis: Onsite Review**

**Strengths**

- Vermont's collaborative treatment team approach involving community providers ensures that child and family needs are assessed and individualized services are delivered creatively to meet those needs.
- Some flexible funding is available to create unique services to families and children who are at risk of involvement with the agency or who are receiving services.

**Area Needing Improvement**

- None identified.

**IX. AGENCY RESPONSIVENESS TO THE COMMUNITY**

<b>Rating of Review Team Regarding Substantial Conformity</b>				
Rating	<b>Not in Substantial Conformity</b>		<b>Substantial Conformity</b>	
	1	2	3	4X

**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

**Basis: Statewide Assessment**

The Department has a strong system of collaborative planning that successfully integrates other state agencies and community providers into the process. Included in the CFSP planning process is the State Interagency team that was established in the 1980s, which includes many state agencies and local community participants. The Department has added two additional external community stakeholders to this planning structure. One is The Citizen Advisory Board that is comprised of representatives from a wide range of public and private agencies. Also, the Department collaborates with the four consumer advisory boards that include parents of children in custody. Both of these external stakeholders provide valuable information that directly relate to the delivery of services to children and families.

The state does not have a federally recognized American Indian Tribe.

**Basis: Onsite Review**

**Strengths**

- In all three sites community collaboration is a dominant theme, with the best interests of the child as the central focus.
- SRS is seen as a leader in crafting the approach to reaching out and addressing the needs of “the community’s” children and their families.
- SRS is seen as leading the way in resolving the issues of the growing population of refugees resettled in Vermont.
- SRS Collaborations include the Departments of Developmental Disabilities, Mental Health, Education, law enforcement and the courts.

**Areas Needing Improvement**

- None identified

**Item 39. The agency develops, in consultation with these representatives, annual reports of progress and services delivered pursuant to the CFSP.**

  X   Strength             Area Needing Improvement

**Basis: Statewide Assessment**

This is addressed in Item 38. The agency does conduct extensive consultation with many representatives in developing their annual reports.

**Basis: Onsite Review**

**Strengths**

- SRS maintains collaborative relationships with the community on state and local levels, and includes community partners in assessment, evaluation, planning and implementation activities for the CFSP.
- There is strong parent participation on interagency teams looking at statewide issues and trends.

**Areas Needing Improvement**

- None identified

**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.**

  X   Strength             Area Needing Improvement

**Basis: Statewide Assessment**

Vermont has an infrastructure in place that supports the coordination of services and benefits which has been described in this section. The Department also has inter-departmental agreements that facilitate coordination between agencies. On a case level, the Treatment Teams (refer to Item 17-18) are responsible for the coordination of service delivery for children and families. Also, there is a statewide network of Child Protection Teams that meet regularly to discuss the coordination of services to families who are at risk but not being served by the Department.

**Basis: Onsite Review**

**Strengths**

- There is generally excellent coordination of services and benefits, including funding of prevention efforts in the community.
- Interagency teams put aside turf and funding issues to address the needs of children most effectively.
- SRS coordinates well with the Health Department in the provision of Medicaid services.
- Collaboration with law enforcement and the courts is increasing, and the Chittendon County Unit for Special Investigations (CUSI) is singled out for high praise.

**Areas Needing Improvement**

- Decisions made by Central Office for fiscal reasons may negatively impact the ability of community collaborative to continue meeting families’ needs.
- Increasingly, children previously involved in the Mental Health system are entering SRS custody to access high-end residential treatment services.

**X. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT, AND RETENTION**

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

**Item 41. The State has implemented standards for foster family homes and childcare institutions, which are reasonably in accord with recommended national standards.**

  X   Strength           Area Needing Improvement

**Basis: Statewide Assessment**

Vermont's standards for licensing of foster family homes and child care institutions were recently revised in response to the ASFA regulations. Changes also drew from other states regulations and CWLA standards. All foster family homes, both those of the public and private sector must meet Vermont regulations as their minimum standard. The new licensing process expedites licensure while maintaining a focus on safety. In Vermont, a license remains in force if the foster parent has submitted an application for re-licensure. During the past six months, the agency has made strides toward eliminating licensing backlogs, and has completed background checks on all families overdue for re-licensure.

**Basis: Onsite Review**

**Strengths**

- Licensing standards are widely recognized as reasonable and consistently applied.
- Stakeholders' report the new licensing process has shortened the time required for foster parents to become licensed thereby reducing the number of homes where children are placed in homes, which are not fully licensed.
- Assessments of kinship homes are more thorough now than in the past.
- The resource coordinator completes assessments and makes recommendations regarding foster parent licensure.

**Area Needing Improvement**

- Despite improvements in the licensing process, there did not appear to be monitoring to ensure compliance with pre-service training requirements.

**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.**

  X   Strength             Area Needing Improvement

**Basis: Statewide Assessment**

According to the Assessment, the standards are applied to all licensed foster family homes and childcare institutions uniformly.

**Basis: Onsite Review**

**Strengths**

- Stakeholders reported that standards are equally applied to all licensed or approved homes.

**Area Needing Improvement**

- None identified

**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.**

  X   Strength           Area Needing Improvement

**Basis: Statewide Assessment**

The assessment notes a thorough and exhaustive set of state clearances for all foster and adoptive applicants. In addition, candidates for licensing as adoptive resources are fingerprinted for a FBI (national) criminal check. SRS has a policy for contact with children and families, which requires a level of contact consistent with the level of risk. Due to staffing shortages and subsequent high workloads, however, the minimum required contacts between social worker and child are unable to be met, and SRS increasingly relies on contracts with community agencies to provide regular contact with children and families. The Statewide Assessment sites the provision of supports to foster parents as contributing to the state's low rate of child maltreatment by foster parents.

**Basis: Onsite Review**

**Strengths**

- Stakeholders reported that criminal background checks are consistently completed in a timely manner for all foster and adoptive providers.
- FBI fingerprint checks are completed for new foster care and adoptive parents.

**Area Needing Improvement**

None identified

**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.**

Strength       Area Needing Improvement

**Basis: Statewide Assessment**

Staff note the need for more foster homes, especially those in which one parent is in the home full time. The agency does not make special efforts to recruit minority families, noting that the African American population in custody is 1.77 percent and all other minorities in custody total 1.08 percent. The Statewide Assessment does note that recent efforts are underway to develop resources for older children and youth. In the past two years, new recruitment materials have been produced, including a web page, which consolidates information on adoption of waiting children. Also, a partnership with the University of Vermont has been formed to generate resources for Abenaki children within the Abenaki community. The Adoption Opportunities Grant initiated in October 2000 will focus on establishing permanency for 90-150 waiting children. The grant will create a statewide system for recruitment, training and maintenance of adoptive families for older children in foster care.

**Basis: Onsite Review**

**Strengths**

- Stakeholders commended the three-year Lund family grant for recruiting adoptive homes for children legally free for adoption.
- Collaborative recruitment efforts using multiple media approaches were reported.
- District offices have supplemented centralized recruitment efforts through public service announcements, civic organizations, and church resources.
- Some inter-jurisdictional recruitment activities were reported, such as listing children with adoption exchanges and on the Internet, as well as in national magazines.

**Area Needing Improvement**

- There is a need for more State-level planning and activities to recruit foster and adoptive families. There are not enough therapeutic homes or foster homes to best serve the growing Bosnian and Vietnamese population brought to Vermont by the refugee resettlement program.
- The single recruitment coordinator in each district office is responsible for the recruitment, retention, placement matching, support, and some training and licensing activities for large numbers of foster and adoptive homes. There is concern that a single coordinator cannot effectively manage this broad set of responsibilities, and that this impairs the State's recruitment and retention efforts.

**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       Area Needing Improvement

**Basis: Statewide Assessment**

Recent efforts to place children for adoption both in-state and cross-jurisdictional include gathering and distribution of home studies from out-of-state families, listing of children on national and New England exchanges, newsletters and conference materials. A web page for recruitment, which will feature waiting children, is in development.

**Basis: Onsite Review**

**Strengths**

- The State has a process for listing waiting children cross-jurisdictionally and a grant focused on locating homes for waiting children (the Lund Family Adoption Grant).
- Stakeholders report the use of the New England Adoption Exchange.

**Area Needing Improvement**

- While Vermont has a strong community-based approach to out-of-home care, this orientation inhibits the full consideration of potential pre-adoptive resources outside of the child's community.
- Despite the State's use of certain resources to identify cross-jurisdictional pre-adoptive homes, overall efforts in this area are impaired by staff's reluctance to make inter-jurisdictional placements based on their concern about accessing continued care for children in those placements, such as medical and therapeutic care. Staff are also concerned that they would be unable to monitor children in cross-jurisdictional placements to determine whether the children's needs are being met.
- Concerns were reported in one site regarding difficulty placing children across District boundaries due to turf issues. For example, efforts to make one pre-adoptive placement in another District's foster home was initially opposed by the receiving District, which viewed the placement as taking away their foster home.

## DETERMINATION OF SUBSTANTIAL CONFORMITY

For each outcome and systemic factor listed below, mark “Y” where the State is determined to be in substantial conformity and “N” where the State is determined not to be in substantial conformity. For each outcome or systemic factor marked “N,” place a check beside the performance indicator, listed by item number in this form, that has been determined to be an area needing improvement.

### Safety

  N   Outcome S1

  X   Item 1  
  X   Item 2

  N   Outcome S2

  X   Item 3  
       Item 4

### Permanency

  N   Outcome P1

       Item 5  
  X   Item 6  
  X   Item 7  
       Item 8  
  X   Item 9  
       Item 10

  N   Outcome P2

       Item 11  
       Item 12  
       Item 13  
       Item 14  
       Item 15  
  X   Item 16

### Child and Family Well-Being

  N   Outcome WB1

  X   Item 17  
       Item 18  
  X   Item 19  
  X   Item 20

  Y   Outcome WB2

       Item 21

  N   Outcome WB3

       Item 22  
  X   Item 23

### Systemic Factors

  Y   Statewide Information System

       Item 24

  Y   Case Review System

       Item 25  
       Item 26  
       Item 27  
  X   Item 28  
       Item 29

  N   Quality Assurance System

  X   Item 30  
  X   Item 31

  Y   Training

       Item 32  
       Item 33  
       Item 34

  Y   Service Array

       Item 35  
       Item 36  
       Item 37

  Y   Agency Responsiveness to the Community

       Item 38  
       Item 39  
       Item 40

  N   Foster and Adoptive Parent Licensing, Recruitment, and Retention

       Item 41  
       Item 42  
       Item 43  
  X   Item 44  
  X   Item 45

