

# Child and Family Services Reviews

# Statewide Assessment Instrument

**April 2014** 



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## Introduction

The Child and Family Services Reviews (CFSRs), authorized by the 1994 Amendments to the Social Security Act (SSA), are administered by the Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. The goals of the CFSR are to:

- Ensure substantial conformity with title IV-B and IV-E child welfare requirements using a framework focused on assessing seven safety, permanency, and well-being outcomes and seven systemic factors;
- Determine what is happening to children and families as they are engaged in child welfare services; and
- Assist states in helping children and families achieve positive outcomes.

## The CFSR Process

The CFSR is a two-phase process, as described in 45 CFR 1355.33. The first phase is a statewide assessment conducted by staff of the state child welfare agency, representatives selected by the agency who were consulted in the development of the Child and Family Services Plan (CFSP), and other individuals deemed appropriate and agreed upon by the state child welfare agency and the Children's Bureau.

The second phase of the review process is an onsite review. The onsite review process includes case record reviews, case-related interviews for the purpose of determining outcome performance, and, as necessary, stakeholder interviews that further inform the assessment of systemic factors. The onsite review instrument and instructions are used to rate cases, and the stakeholder interview guide is used to conduct stakeholder interviews.

Information from both the statewide assessment and the onsite review is used to determine whether the state is in substantial conformity with the seven outcomes and seven systemic factors. States found to be out of substantial conformity are required to develop a Program Improvement Plan (PIP) to address the identified areas out of substantial conformity. States participate in subsequent reviews at intervals related to their achievement of substantial conformity. (For more information about the CFSRs, see the *Child and Family Services Reviews* at <a href="http://www.acf.hhs.gov/programs/cb">http://www.acf.hhs.gov/programs/cb</a>.)

## Integration of the CFSP/APSR and CFSR Statewide Assessment

The CFSR process is intended to be coordinated with other federal child welfare requirements, such as the planning and monitoring of the CFSP. We are encouraging states to consider the statewide assessment as an update to their performance assessment in the state's most recent CFSP and/or Annual Progress and Services Report (APSR) rather than a separate assessment process and reporting document. Most of the content for the statewide assessment overlaps with the CFSP/APSR and the same expectations for collaboration with external partners and stakeholders exist across all planning processes. States can use the statewide assessment process to re-engage these partners and stakeholders in preparation for the CFSR.

## The Statewide Assessment Instrument

The statewide assessment instrument is a documentation tool for states to use in capturing the most recent assessment information before their scheduled CFSR. Each section, as outlined below, is designed to enable states to gather and document information that is critical to analyzing their capacity and performance during the statewide assessment phase of the CFSR process.

- Section I of the statewide assessment instrument requests general information about the state agency and requires a list of the stakeholders that were involved in developing the statewide assessment.
- Section II contains data profiles for the safety and permanency outcomes. These
  include the data indicators, which are used, in part, to determine substantial conformity.
  The data profiles are developed by the Children's Bureau based on the Adoption and
  Foster Care Analysis and Reporting System (AFCARS) and the National Child Abuse
  and Neglect Data System (NCANDS), or on an alternate source of safety data submitted
  by the state.
- Section III requires an assessment of the seven outcome areas based on the most current information on the state's performance in these areas. The state will include an analysis and explanation of the state's performance in meeting the national standards as presented in section II. States are encouraged to refer to their most recent CFSP or APSR in completing this section.
- Section IV requires an assessment for each of the seven systemic factors. States develop these responses by analyzing data, to the extent that the data are available to the state, and using external stakeholders' and partners' input. States are encouraged to refer to their most recent CFSP or APSR in completing this section.

We encourage the state to use this document "as is" to complete the assessment, but the state may use another format as long as the state provides all required content. The statewide assessment instrument is available electronically on the Children's Bureau website at <a href="http://www.acf.hhs.gov/programs/cb/resource/round3-cfsr-statewide-assessment">http://www.acf.hhs.gov/programs/cb/resource/round3-cfsr-statewide-assessment</a>.

## **Completing the Statewide Assessment**

The statewide assessment must be completed in collaboration with state representatives who are not staff of the state child welfare agency (external partners or stakeholders), pursuant to 45 CFR 1355.33 (b). Those individuals should represent the sources of consultation required of

the state in developing its title IV-B state plan and may include, for example, Tribal representatives; court personnel; youth; staff of other state and social service agencies serving children and families; and birth, foster, and adoptive parents or representatives of foster/adoptive parent associations. States must include a list of the names and affiliations of external representatives participating in the statewide assessment in section I of this instrument.

We encourage states to use the same team of people who participate in the development of the CFSP to respond to the statewide assessment. We also encourage states to use this same team of people in developing the PIP. Members of the team who have the skills should be considered to serve as case reviewers during the onsite review.

## How the Statewide Assessment Is Used

Information about the state child welfare agency compiled and analyzed through the statewide assessment process may be used to support the CFSR process in a range of ways. The statewide assessment is used to:

- Provide an overview of the state child welfare agency's performance for the onsite review team;
- Facilitate identification of issues that need additional clarification before or during the onsite review;
- Serve as a key source of information for rating the CFSR systemic factors; and
- Enable states and their stakeholders to identify early in the CFSR process the areas potentially needing improvement and to begin developing their PIP approach.

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 240 hours for the initial review and 120 hours for subsequent reviews. This estimate includes the time for reviewing instructions, completing the assessment, and reviewing the collection of information.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

## **Statewide Assessment Instrument**

## **Section I: General Information**

Name of State Agency: New York State

## **CFSR Review Period**

CFSR Sample Period: 4/1/15 - 9/30/15

Period of AFCARS Data: 4/1/15 – 9/30/15

Period of NCANDS Data: 4/15/15 - 9/30/15

(Or other approved source; please specify if alternative data source is used):

CFSR State Performance Data

Case Review Period Under Review (PUR): 4/1/15 to date of case record review

## State Agency Contact Person for the Statewide Assessment

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## **Statewide Assessment Participants**

Provide the names and affiliations of the individuals who participated in the statewide assessment process; please also note their roles in the process.

## State Response:

All participants listed below were asked to review proposed data to be included in the Statewide Assessment, and to provide feedback on areas of strengths and concerns. Where applicable their feedback was included.

Melissa Baker, Senior Director, Casey Family Programs;

Angela Barton, Esq. Director, Quality Enhancement for Parental Representation, NYS Office of Indigent Legal Services;

John Befus, Deputy Commissioner, Westchester County DSS;

Wales Brown, Foster Parent;

Kathleen Brady Stepien, Director of Advocacy and Upstate Member Services, Council of Family and Child Caring Agencies;

Karen Buck, Rochester Regional Office Director, OCFS;

Rebecca Colman, Director, Bureau of Research, Evaluation and Performance Analytics, OCFS;

Richard Daley. Assistant Director of Training, OCFS;

Peggy Dewar, Child and Family Services Specialist, Spring Valley Regional Office, OCFS;

Vajeera Dorabawila, Assistant Director, Bureau of Research, Evaluation and Performance Analytics, OCFS;

Julie Farber, Deputy Commissioner, NYC Administration for Children's Services;

Barbara Gavin, Director of Services, Rockland County DSS;

Richard Heyl de Ortiz, Executive Director, Adoptive and Foster Families Coalition;

Christine Kiesel, Coordinator, Court Improvement Project;

Howard Knoll, Senior Director, Casey Family Programs;

Christopher Kus, M.D. NYS Dept. of Health;

Heather LaForme, Native American Specialist, OCFS;

Heather Lane, OMH SPOA Coordinator, Office of Mental Health;
Lee Lounsbury, Executive Director, Welfare Research Inc.;
Glen Metch-Ampel, Attorney for the child;
Mary McCarthy, Social Work Consortium, SUNY Albany
Maureen McLaughlin, Panel Member, Eastern Citizen Review Panel;
Maria Morris, NYS Office of Alcohol and Substance Abuse Services;
Dennis Nowak, Division Administrator, Suffolk County DSS;
Tara Paeglow, Foster parent
Raven Profit, Former Foster Care Youth;
Renee Rider, Assistant Commissioner, NYS Education Department;
Peggy Sheehan, Health Families NY;
John Thompson, Principal Education Specialist, Center for Development in Human Services;
Sara Simon, Syracuse Regional Office Director, OCFS;
Gerald Wallace, Executive Director, Navigator;
Judge Margaret Walsh, Albany Family Court;
Emilie Wright, Program Operations Specialist, OPWDD

## Section II: Safety and Permanency Data

## **State Data Profile**

## (CB-generated state data profile will be inserted here)

Section II data profile deleted in its entirety.

## Section III: Assessment of Child and Family Outcomes and Performance on National Standards

## Instructions

Refer to the section in the state's most recent Child and Family Services Plan (CFSP) or Annual Progress and Services Report (APSR) that provides assessment information on state performance on each of the seven child and family outcomes. Review the information with the statewide assessment team and determine if more recent data are available that can be used to provide an updated assessment of each outcome. If more recent data are not available, simply refer to the most recent CFSP or APSR document by indicating the document name/date and relevant page numbers where the information can be found for each outcome. Analyze and explain the state's performance on the national standards in the context of the outcomes.

## A. Safety

## Safety Outcomes 1 and 2

Safety outcomes include: (A) children are first and foremost, protected from abuse and neglect; and (B) children are safely maintained in their own homes whenever possible and appropriate.

- For each of the two safety outcomes, include the most recent available data demonstrating the state's performance. Data must include state performance on the two federal safety indicators, relevant case record review data, and key available data from the state information system (such as data on timeliness of investigation).
- Based on these data and input from stakeholders, Tribes, and courts, include a brief assessment of strengths and concerns regarding Safety Outcomes 1 and 2, including an analysis of the state's performance on the national standards for the safety indicators.

## State Response:

## Insert state response to Safety Outcomes 1 and 2

New York State assesses Safety Outcome 1 as an area needing improvement. New York State is not in substantial conformity on the two federal measures:

- Recurrence of Maltreatment
- Maltreatment in Foster Care

## **Recurrence of Maltreatment**

State's Observed Performance on National Standard – 17.4% (November 2015) National Standard – 9.1%

Maltreatment in Foster Care State's Observed Performance on National Standard – 14.66% (November 2015) National Standard – 8.5%

## Quantitative and Qualitative Data

Throughout the Statewide Assessment data from case record reviews is included. In 2015, OCFS conducted case record reviews utilizing the Onsite Review Instrument (OSRI) in three counties, Clinton, Chemung and New York City's Administration for Children's Services (ACS). A total of 75 random cases were reviewed; fifteen (five preventive, ten foster care) in Clinton and Chemung, and forty-five (fifteen preventive, thirty foster care) in ACS. No caseworker, parent or child interviews were conducted as part of the reviews.

Additionally in 2015, utilizing the NYS Ongoing Monitoring and Assessment (OMA) a total of 17 counties were reviewed totaling 416 reports. Reviews were done in the following counties: Bronx, Genesee, Orleans, Chenango, Schoharie, Monroe, Niagara, Saratoga, Washington, Steuben, Tompkins, Rockland, Warren, St. Lawrence, Ulster, Orange and Cayuga. Sample sizes are determined by the size of the district, small districts – 10 cases are reviewed, medium districts, 20 cases are reviewed, and in large districts 30 cases are reviewed. No caseworker or parent or child interviews were conducted as part of the OMA reviews.

### **Recurrence of Maltreatment**

NYS Social Services Law does not differentiate between initial and subsequent reports of child maltreatment in any of its CPS investigative or service standards. A determination must be made within 60 days of the receipt of the report; appropriate safety interventions, including inhome and foster care interventions, must occur to keep children safe; and, services may be provided to reduce the risk of future maltreatment. Sometimes, local districts may have to get a family court order to mandate safety interventions and risk reduction services. A research-based Risk Assessment Profile (RAP) is completed by CPS to assess future risk and to assist in determining whether to keep a case open for the provision of services after the determination of the report, whether there is a need to reassess a family's progress toward reducing the risk to children, and whether an open child protective case may appropriately be closed. Certain subsequent reports that occur while a report is under investigation may be consolidated within an open, on-going investigation. According to the administrative directive (03-ADM-OCFS-01) that introduced the possibility of consolidating reports, "In order to provide more accurate data on the rate of repeat maltreatment, to avoid duplication of effort on the part of CPS staff and to support strength-based child welfare practice and the engagement of families, the workgroup recommended that social services districts be allowed to consolidate subsequent investigations into open on-going investigations, when appropriate based on case circumstances." Many. but not all, local districts use the consolidation option.

The differential response program in NYS is Family Assessment and Response (FAR). Although the FAR approach is unlike an investigative approach, FAR is still a child protective response, and caseworkers must always protect child safety first and foremost. The caseworker and family are both constantly assessing safety and risk for the family's children. If, while working with a family, a FAR caseworker has serious concerns about the immediate safety of a child, the child protective service would have to open an investigation and stop using FAR.

## **Relevant Case Review Items**

#### Item 1: Timeliness of Initiating Investigations of Reports of Child Maltreatment

New York State assesses Item 1 as an area of strength as the data from the case reviews conducted in 2015 using the OSRI indicated that in 100 percent (25/25) of the cases there was a timely initiation of the investigation within 24-hours.

All Child Protective Services (CPS) investigations of new or subsequent reports, and those reports assigned to the Family Assessment Response (FAR) must be initiated within 24 hours of the receipt of the report of allegation(s) of child abuse or maltreatment. The initial contact must be sufficient to assess whether any child is in immediate danger of serious harm. The appropriate local district investigates in-home and foster home cases and must determine within 60 days whether the report is indicated or unfounded based on the "some credible evidence" standard. Within the 60 days, caseworkers must see all children named in the report and must assess the safety of all children, as well as the risk of future abuse and maltreatment. Reports alleging child abuse or maltreatment in group homes and congregate care facilities are registered with the Justice Center for investigation, however, in some instances, the Justice Center will assign the investigation to OCFS.

Year	Performance	Percent
2015	25/25	100%

## Safety Outcome 2 – Children are Safely Maintained in Their Homes Whenever Possible and Appropriate

New York State assesses Outcome 2 – an area needing improvement. NYS is not in substantial conformity is needed on the federal Re-entry into Foster Care measure. Improvements are also needed in the following areas:

- Assessment of Service needs
- Provision of Services to prevent removal and re-entry

#### Re-entry into Foster Care State's Observed Performance on National Standard – 10.4% (November 2015) National Standard – 8.3%

Local districts are required to provide or arrange for and coordinate services necessary to safeguard the child(ren)'s well-being and to preserve and stabilize family life whenever appropriate. Assessments of safety, risk and family functioning and service planning tools are used and documented in NYS' computerized case records. Local districts are required to provide appropriate interventions to protect children and services to reduce risk in order to prevent removal whenever possible as well as to prevent re-entry into foster care after discharge. These services are outlined in the State's Protective and Preventive Services Regulations and include day care, counseling and therapy for children and parents, day services for children, parent aide and training services, arranging for financial assistance, emergency shelter and housing services, transportation services, and emergency cash and goods.

Placement decisions in child protective cases are guided by the safety assessment and decision making protocol. Policy is clear that placement is a safety intervention only when nothing else can secure the child's safety in his or her home. Prior to placement, the local district is required to provide appropriate services to prevent the placement, except in certain situations specified in state or federal law. Policy requires the caseworker to document in the Uniform Case Record (UCR) what services were offered and why placement was the only appropriate alternative. This would include the local districts' required attempts to locate safe, alternative living arrangements with a relative or family friend, which would enable the child to avoid foster care.

OCFS has seen a steady reduction in the number of first admissions into foster care, and feel this is a result of the implementation of primary prevention programs. OCFS is looking to expand primary prevention programs, such as Healthy Family NY.

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	Admission Year	Number of First Admissions	Rate/1,000
	2010	9,866	2.3
	2011	8,576	2.0
	2012	8,069	1.9
	2013	7,622	1.8
	2014	7,594	1.8
	2015	6,986	1.6

Statewide: Number and Rate/1,000 pf First Admissions into Foster Care (all ages)

#### **Relevant Case Review Items**

#### Item 2 – Services to Family to Protect Child(ren) in the Home to Prevent Removal or Reentry into Foster Care

NYS assess Item 2 as an area needing improvement. In the 2015 case review utilizing the OSRI, of the 75 cases, there were 28 cases that were applicable, and in 89.3 percent (25/28) of the cases the reviewer found that the agency had made concerted efforts to provide services to the family to prevent the child's entry into foster care or re-entry after a reunification.

#### Data

OSRI Findings – Item 2 Services to Family to Protect Child in Home and Prevent Removal or Re-Entry into Foster Care

Year	Performance	Percent
2015	25/28	89.3%

OMA data indicates that adequate assessments by caseworkers are not being completed, due in part to not contacting appropriate collateral contacts, and interviewing children when appropriate to do so, therefore services to prevent removal or re-entry are not adequate.

#### OMA Findings: Adequate Assessment of Services

Year	Performance	Percent
2015	275/366	75%

#### OMA Findings - All Appropriate Services Were Offered

Year	Performance	Percent
2015	210/338	62%

Listed below is a breakdown of the reports that were indicated and unfounded, and FAR reports, and of those, that received services (protective/preventive or community services).

#### All CPS Reports Closed in 2015 By Report Outcome and Closure Reason

Indicated Reports, ROS	Ν	%
Protective/Preventive Services Opened	9,491	37%
Linked to Community Services	4,996	19%
No Services	11,489	44%
Total	25,976	100%

Indicated Reports, NYC	Ν	%
Protective/Preventive Services Opened	15,236	77%
Linked to Community Services	2,825	14%
No Services	1,615	8%
Total	19,676	100%

Indicated Reports, Statewide	N	%
Protective/Preventive Services Opened	24,727	54%
Linked to Community Services	7,821	17%
No Services	13,104	29%
Total	45,652	100%

4,784 9,946 48,504 63,234 N 8,102 7,534 15,717 31,353 N 12,986	8% 16% 77% 100% 26% 24% 50% 100%
48,504 63,234 N 8,102 7,534 15,717 31,353 N	77% 100% 26% 24% 50% 100%
63,234 N 8,102 7,534 15,717 31,353 N	100% % 26% 24% 50% 100%
N           8,102           7,534           15,717           31,353           N	% 26% 24% 50% 100%
8,102 7,534 15,717 <i>31,353</i> <b>N</b>	26% 24% 50% 100%
8,102 7,534 15,717 <i>31,353</i> <b>N</b>	26% 24% 50% 100%
7,534 15,717 <i>31,353</i> <b>N</b>	24% 50% 100%
15,717 31,353 <b>N</b>	50% 100%
31,353 N	100%
N	
	0/_
	/0
12,000	14%
17,480	18%
	68%
94,587	100%
N	%
240	2%
1,727	16%
8,840	82%
10,807	100%
N	%
	14%
	25%
	61%
	100%
N	%
308	3%
845	16%
9,130	81%
11,283	100%
N	%
	15%
	17%
	69%
	100%
	64,221         94,587         N         240         1,727         8,840         10,807         N         68         118         290         476         N         308         845         9,130         11,283

Child and Family Services Reviews Statewide Assessment Instrument

All Reports, NYC	Ν	%
Protective/Preventive Services Opened	23,406	45%
Linked to Community Services	10,477	20%
No Services	17,622	34%
Total	51,505	100%

All Reports, Statewide	Ν	%
Protective/Preventive Services Opened	37,921	25%
Linked to Community Services	27,146	18%
No Services	86,455	57%
Total	151,522	100%

Data Source: CONNECTIONS data extracted February 2016 Table produced by OCFS Bureau of Research, Evaluation, and Performance Analytics

## Final Risk Ratings for CPS Investigations Closed in 2015

Risk Rating, ROS	Ν	%
Low	52,901	59.3%
Moderate	24,008	26.9%
High	4,539	5.1%
Very High	7,763	8.7%
Missing Value	1	0.0%
Total	89,212	100%

Risk Rating, NYC	Ν	%
Low	31,499	61.7%
Moderate	13,177	25.8%
High	2,407	4.7%
Very High	3,941	7.7%
Missing Value	2	0.0%
Total	51,026	100%

Risk Rating, Statewide	Ν	%
Low	84,400	60.2%
Moderate	37,185	26.5%
High	6,946	5.0%
Very High	11,704	8.3%
Missing Value	3	0.0%
Total	140,238	100%

Data Source: CONNECTIONS data extracted March 2016 Table produced by OCFS Bureau of Research, Evaluation, and Performance Analytics

#### Item 3 – Risk and Safety Assessment and Management

NYS assesses Item 3 as an area needing improvement. Improvement is needed in the following areas:

- Safety and Risk Assessment
- Assessment of Service Needs
- Provision of Services
- Contact with Collateral Sources of Information
- Contact with Others listed in the Report
- Children Interviewed, when appropriate

In the 2015, case review utilizing the OSRI, of the 75 cases, all 75 cases were applicable for this item, and in 85.3 percent (64) of the cases the reviewer found that the agency had made concerted efforts to assess and address the risk and safety concerns related to the child(ren) in their own homes or while in foster care.

#### Data

OSRI Findings - Item 3 Risk and Safety Assessment Management

Year	Performance	Percent
2015	64/75	85.3%

OMA Findings - Adequate Assessment of Immediate Danger within 24 Hours

Year	Performance	Percent
2015	351/416	84%

OMA Findings - Sufficient Information Gathered for 7-day Safety Assessment

Year	Performance	Percent
2015	340/416	82%

OMA Findings - When Sufficient Information Was Gathered, 7-day Assessment Was Appropriate

Year	Performance	Percent
2015	260/340	76%

OMA Findings - Sufficient Information Gathered for Investigation Conclusion Safety Assessment

Year	Performance	Percent
2015	333/414	80%

OMA Findings - When Sufficient Information Was Gathered, Investigation Conclusion Safety Assessment Was Appropriate

Year	Performance	Percent
2015	286/333	86%

OMA Findings - Sufficient Information Was Gathered to Assess Risk

Year	Performance	Percent
2015	168/246	68%

OMA Findings - When Sufficient Information Was Gathered, Risk Assessment Was Appropriate

Year	Performance	Percent
2015	90/168	54%

OMA Findings - All appropriate collaterals contacted during the investigation

Year	Performance	Percent
2015	268/410	65%

OMA Findings - All other persons listed on the report contacted during the investigation

Year	Performance	Percent
2015	144/195	74%

OMA Findings - All children interviewed when appropriate to do so during the investigation

Year	Performance	Percent
2015	326/382	85%

#### Maltreatment in Foster Care

An initial analysis of the data related to maltreatment in foster care indicated that in NYS districts were not entering the incident date when indicating reports of abuse or maltreatment of children who are in foster care. It is felt that there are reports that if the incident date was included, those reports would be excluded from the measure as the incident occurred prior to the child coming into care. On November 23, 2015, OCFS disseminated an Administrative Directive notifying local departments of social services (LDSSs) of the requirement to enter the incident date into CONNECTIONS for every substantiated allegation of child abuse and maltreatment involving a child placed in out-of home care.

OCFS is also aware of the stressors many foster/adoptive families face when caring for children who have abused and maltreated and dealing with trauma. For many foster/adoptive parents additional supports are needed. While training is helpful, additional resources are needed to help them. Through the federal award for Diligent Recruitment and Retention, OCFS has supported the Fostering Futures NY (FFNY) program that recruits and trains teams of volunteers from the community to offer natural and practical supports to foster families. Serving as an "extended family" for foster parents and children, FFNY teams provide stability, enriching experiences, and vital community connections. Team members pitch in when foster parents ask for help, affirming the value of what foster parents do and encouraging them to keep on doing it.

#### Factors Affecting Performance

There are two factors that OCFS has identified that have impacted our performance on the outcome measure of safety: Practice and Training.

## Practice - Related to Safety

There are several key practices that the State needs to focus on related to safety, namely, engaging families, strengthening caregiver capacity to protect and provide for their children, addressing the individual needs through comprehensive family assessments, developing a trauma-informed system, support a racially equitable and culturally competent system, develop organizational effectiveness.

## <u>Training</u>

Key caseworker and supervisor competencies such as, engaging parents and children, interviewing skills, critical thinking, cultural competence, to name a few, are not evident in all child welfare staff.

In order to address these areas of concern, OCFS created a Child Welfare Practice Model which was noted in the 2015-2016 State Plan. The model creates a framework based on values

for the application of a CQI approach to critical analysis, practice change and implementation. OCFS is training state and local staff, with assistance from nationally recognized consultants to:

- Understand and utilize data to identify their unique local challenges and strengths
- Launch local implementation teams (LITs) to manage and institutionalize practice change targeted to address the challenges identified through their data.
- Implement and sustain effective supervisory and coaching practices to cement practice values and approaches that have been shown to impact key safety outcomes.

Additionally, OCFS formed a Training Steering Committee, with the goal of designing a competency model by which all caseworker and supervisory training is developed against. The model will allow for improved evaluation of caseworker/supervisor competence, and will be easily understood by all districts and agencies to guide their staff development plans. The Steering Committee is using the model as the basis in redesigning the Outcome Based Training Model that will be more flexible and nimble, more behavioral based and able to better meet the growing number of staff working in child welfare. The Steering Committee is also devising strategies to expand the capacity of the training program to improve the rate of compliance to include staff serving in all case manager roles. It is anticipated that the outcome of the efforts of this Steering Committee will begin to roll out in the second quarter of 2017, and be fully implemented within the following 12-18 months.

## **B.** Permanency

## Permanency Outcomes 1 and 2

Permanency outcomes include: (A) children have permanency and stability in their living situations; and (B) the continuity of family relationships is preserved for children.

- For each of the two permanency outcomes, include the most recent available data demonstrating the state's performance. Data must include state performance on the four federal permanency indicators and relevant available case record review data.
- Based on these data and input from stakeholders, Tribes, and courts, include a brief assessment of strengths and concerns regarding Permanency Outcomes 1 and 2, including an analysis of the state's performance on the national standards for the permanency indicators.

## State Response:

New York State assesses Permanency Outcome 1 and 2 as an area needing improvement. New York State is not in substantial conformity in the four federal measures.

Permanency in 12 months State's Observed Performance on National Standard – 34.5% (November 2015) National Standard – 40.5%

Permanency in 12 months (12-23 months) State's Observed Performance on National Standard – 27.4% (November 2015) National Standard – 43.6%

Permanency in 12 months (24+ months) State's Observed Performance on National Standard – 27.1% (November 2015) National Standard – 30.3%

Re-entry to care in 12 months State's Observed Performance on National Standard – 10.4% (November 2015) National Standard – 8.3%

Placement Stability State's Observed Performance on National Standard – 2.98% (November 2015) National Standard – 4.12%

## Quantitative and Qualitative Data

Throughout the Statewide Assessment data from case record reviews is included. In 2015, OCFS conducted case record reviews utilizing the Onsite Review Instrument (OSRI) in three counties, Clinton, Chemung and New York City Administration for Children's Services (ACS). A total of 75 random cases were reviewed; fifteen (five preventive, ten foster care) in Clinton and Chemung, and forty-five (fifteen preventive, thirty foster care) in NYC ACS. No caseworker, parent or child interviews were conducted as part of the reviews.

Additionally in 2015, utilizing the NYS Safety and Permanency Assessment (SPA) a total of seven counties were reviewed totaling 150 reports. Reviews were done in the following

counties: Erie, Oneida, Madison, Niagara, Rockland, Chautauqua and Westchester counties. Sample sizes are determined by the size of the district, small districts – 10 cases are reviewed, medium districts - 20 cases are reviewed, and in large districts - 30 cases are reviewed. No caseworker, parent or child interviews were conducted as part of the SPA reviews.

#### Item 4 – Stability of Foster Care Placement

New York State assesses Item 4 an area of strength as OCFS exceeds the national standard. Data from the 2015 case record review utilizing the OSRI indicates that in 96 percent (48/50) of the cases the child had a stable placement at the time of the review. Additionally, the case record reviews conducted in 2015, using the Safety and Permanency Assessment instrument indicated that in 94 percent of the cases (141/150) the child's placement appeared stable.

The movement of a child from one foster care setting to another must be approved by the local district within specified timeframes and documented in an amendment to the service plan. Other than this, OCFS regulations do not specifically address the movement of children into different placement settings while in foster care. Good case practice dictates that children should have stable foster care placements and be moved only when absolutely necessary. This principle is reinforced in training for caseworkers and supervisors. Regulations require that children must be placed in the least restrictive and most family-like setting possible based on the child's needs.

Children must be placed with siblings or reunited with siblings within 30 days, if the siblings are separated at the time of admission into foster care, unless placement together is determined to be detrimental to the best interests of the siblings. When a child's needs change, a different placement setting may be necessary. When circumstances occur in the lives of foster families (i.e., death, illness, etc.) that are beyond anyone's control, it may require a child be moved to another foster home. Caseworkers are expected to identify potential problems during contacts with children and foster care providers and provide supportive services to prevent any unnecessary moves of children.

#### Factors Affecting Performance

Within the Family Assessment and Service Plan are the assessment of foster parent needs and the assessment of the stability of placement. Caseworkers utilize this information in determining what additional supports are needed to prevent disruption of the placement.

Additionally, the implementation of Bridges to Health has had a positive impact on placement stability. Providing the child and foster family the additional services as needed has reduced the need to move the child to a higher levels of care when a crisis occurs.

#### Data

OSRI Findings - Item 4 – Stability of Foster Care Placement

Year	Performance	Percent
2015	48/50	96%

SPA findings - Current placement (or placement prior to discharge) appears stable

Year	Performance	Percent
2015	141/150	94%

### Item 5 – Permanency Goal for Child

New York State assesses Item 5 as an area needing improvement as the data from the case records reviews conducted in 2015, using the OSRI indicated that in 81.6 (40/49) percent of the cases appropriate permanency goals were established for the child in a timely manner. Additionally, the case record reviews conducted in 2015, using the Safety and Permanency Assessment indicated that in 91.5 (119/130) percent of the cases the child's PPG was appropriately matched to the child's individual needs for permanency and stability.

Permanency planning goals must be established within 30 days of a child's placement into foster care. NYS requires that all children in foster care have a permanency goal. The four major goals are: discharge to parents; discharge to relative, adoption, and another planned permanent living arrangement (APPLA) with a permanency resource. Regulations govern the setting of these goals, and special circumstances apply, such as for Native American children, and the universally applicable service planning, delivery, and documentation standards. At the Permanency Hearing, which must occur by the eighth month of placement for most children, a Permanency Hearing Report must be filed with the court, and the court approves or changes the permanency planning goal and documents it in the court order. Permanency planning goals are required to be reviewed at a minimum at every Service Plan Review or Judicial Review and as part of the development of each FASP that is due every six months and changed as case circumstances dictate.

OCFS supports concurrent planning when a case assessment warrants an alternative plan to achieve permanency if there is a lack of confidence that the goal of discharge to parents cannot be safely achieved. State laws, regulations, and policy directives, as well as training for caseworkers, supervisors, and legal and judicial officials reinforce the Adoption and Safe Families Act (ASFA) timeliness standards for permanency, including timely adoption goal setting so that permanency can be achieved expeditiously.

## **Factors Affecting Performance**

A factor that influences the development of appropriate permanency goals is the location and engagement of fathers. As part of OCFS's last Program Improvement Plan, a training was developed on locating and engaging fathers. Many districts and agencies were trained on the importance of locating and engaging fathers, as well as what tools are available to aid in locating fathers. Without the timely identification and location of fathers, the longer it may take to secure permanency for a child. OCFS will continue our training and supports in this area.

#### Data

OSRI Findings - Item 5 – Permanency Goal for Child		
Year	Performance	Percent
2015	40/49	81.6%

SPA findings -The child's PPG is appropriately matched to the child's individual need for permanency and stability

Year	Performance	Percent
2015	90/100	91.5%

Permanency Goal	Frequency	Percent
ADULT CUST. CARE	141	.8
ADOPTION	4543	26.0
RET TO PARENT	9322	53.4
IND. LVNG	1982	11.4
OTHER	1027	5.9
Missing	437	2.5
Total	17,452	100.0

#### Permanency Goal on 12/31/15

## Item 6 – Achieving Reunification, Guardianship, Adoption or Other Planned Permanent Living Arrangement

New York State assesses Item 6 as an area needing improvement as the data from the case records reviews conducted in 2015, using the OSRI indicated that in 70 percent (35/50) of the cases concerted efforts were made, or were being made, during the period under review to achieve reunification, guardianship, adoption or other planned permanent living arrangement. Additionally, the case record reviews conducted in 2015, using the Safety and Permanency Assessment instrument indicated that in 86 percent (48/56) of the cases when the case record indicated a lack of progress towards permanency, appropriate adjustments were made to the service plan.

Services must be provided to children and families to effect reunification, with some exceptions allowed by ASFA. State laws, regulations, policy directives, and training for caseworkers, supervisors, and legal and judicial officials reinforce the importance of efforts to reunify children safely with their families whenever possible within the ASFA timeline standards for permanency. OCFS regulations require the provision of preventive services for a child in foster care, without regard to income, when such additional services would accelerate the child's return home, and it is anticipated that such return home will occur within six months. The local district must plan for and make efforts to facilitate at least biweekly visiting between the child and the parents or caretakers to whom the child is to be discharged except in circumstances defined in regulation.

State laws, regulations, policy directives, and training for caseworkers, supervisors, and legal and judicial officials reinforce the ASFA timeliness standards for permanency, including timely adoption goal setting so that permanency can be achieved expeditiously. Policy guidance supports concurrent planning when a case assessment indicates that there are some factors that may work against reunification but the permanency plan still remains reunification. Under such circumstances, the case planner continues to act diligently to reunite the child with the family of origin, while also exploring possible adoption resources with the family in case the diligent efforts are ultimately unsuccessful.

NYS regulations specify the maximum allowable timeframes between adoption milestones for children once their permanency planning goal has been changed to adoption. For children not legally free for adoption, an action to legally free the child must be initiated within 30 days of the establishment of the permanency planning goal of adoption. The child must be freed within 12 months after the establishment of the permanency planning goal of adoption. If the case does not meet the standard for freeing the child within 12 months, the district will be considered out of compliance with the standard unless the record shows that a petition to terminate parental rights was filed within 120 days of the date the goal of adoption was set and the delay was caused solely by the court and not by the district or agency. Children who are legally free for adoption

should, with some exceptions, be placed in an adoptive home within six months after the children were freed. Children who meet the regulatory definition of "handicapped" or "hard-to-place" should be placed in an adoptive home within 12 months of being freed. For children who are legally free and in an adoptive home, but whose adoptions are not yet final, such adoptions should be finalized within 12 months after the children are placed in an adoptive home.

During 2015, OCFS issued an Administrative Directive to address the implementation of the federal Preventing Sex Trafficking and Strengthening Families Act. Districts and agencies were directed to eliminate the goal of Another Planned Living Arranged with a Permanency Resource (APPLA) as a permanency planning goal (PPG) for children under the age of 16 years of age. As of September 1, 2015, the following took effect:

- No youth under 16 years of age will be allowed to receive the PPG of APPLA; and
- All youth under age 16, who prior to September 1, 2015 have the PPG of APPLA, must have his or her PPG changed by the youth's next permanency hearing following September 1, 2015.

For the youth who had to have his or her PPG changed, the worker must explore alternative permanency goals with the youth, guide the youth through the decision making process and help the youth understand the consequences of the option they choose. After changing the youth's PPG, workers must document in the permanency hearing report the efforts taken to achieve the youth's new PPG in order to present it to the court for approval at the youth's next permanency hearing.

Additionally, children age 16 and older with the goal of APPLA are assisted with their transition to self-sufficiency by connection them to an adult permanency resource, equipping them with life skills, and upon discharge, connecting them with any needed community or specialized services. In addition, NYS policies recognize that to make a successful transition to self-sufficient adulthood, adolescents in foster care need a set of competencies and basic life skills that are supported and enhanced by connections with family or caring adults.

Life skills services (formerly Independent Living Services) and periodic assessments of a youth's progress toward the achievement of independent living skills are required for all youth in foster care 14 years or older regardless of their permanency planning goal. Life skills services are required in the areas of daily living skills, housing and community resources, money management, self-care, social development, and work and study skills.

In addition to casework planning activities and life skills training, each local districts' life skills services for foster care youth must make available vocational training, including academic support services and vocational training, life skills services stipends, and aftercare services. Aftercare services are provided for former foster care youth between the ages of 18 and 21 and include financial, housing, counseling, employment, education and other appropriate support and services. Aftercare services are required for any youth over the age of 16 who is discharged to APPLA. Trial discharge is required for every youth discharged to APPLA. Custody of the youth is retained for at least six months and certain requirements for casework contacts and service provision apply. The trial discharge period may continue until a youth reaches the age of 21. If a youth loses housing during the period of trial discharge, the local districts must assist the youth to find other appropriate housing or re-place the youth in a foster care setting, if necessary. In addition, when custody ceases, the local districts must maintain supervision of the youth until the youth is 21. Supervision includes casework contacts and referral to needed services, including income and housing services, with sufficient follow-up so that the youth has begun to receive the necessary services.

Additionally, the Permanency Law of 2005 now requires Permanency Hearings be held for youth who remain in foster care after age 18.

### **Factors Affecting Performance**

Engagement of parents is key in obtaining permanency for children placed in out-of-home care. Throughout the state various models of Family Meetings have been implemented. Crucial to all of the models is the empowerment of the parents in identifying their strengths and using those strengths to overcome the barriers that have placed their children at risk. As part of NYS's last Program Improvement Plan, OCFS developed and implemented a training on Family Meetings. The training, which also provided coaching recognized that caseworkers were not acknowledging that parents are the experts when it comes to knowing their children, and can be engaged in promoting for their safety, permanency and well-being. Through the use of Family Meetings, parents are encouraged to invite family and friends who can be a resource to them and their children with the goal of preventing placement or hastening their return to the parent, relative or even adoption. In many ways this has been a culture change for caseworkers, and there is still work that needs to be done, especially related to fathers.

As noted previously, the location and engagement of fathers is an area in need of improvement in NYS. Without the timely engagement of fathers, permanency for a child can be delayed. In 2015, OCFS hosted a Fatherhood Summit, bringing together districts and agencies, as well as community service providers. James Rodriquez, CEO and President of Fathers and Families Coalition of America, Inc. presented on the benefits and barriers to engaging fathers as it related to safety, permanency and well-being of their children. Workshops included an overview of the OCFS Fatherhood Toolkit, engaging and utilizing protective factors specifically for fathers, an overview of father engagement as it refers to current considerations for community engagement strategies that takes into account the changing nature of the community, and local departments of social services presenting on how they have adapted their case practice to engage fathers.

Another factor that influences permanency is visitation between the child and parent. OCFS developed and implemented a Coached Visitation Toolkit aimed at coaching parents to enhance their visit with their child. The goal is to promote visits that are purposeful, strategically planned and coached to increase timely permanency. The training is designed to engage a family in the planning and debriefing process while placing a strong emphasis on coaching parents before, during, and following visits in order to achieve reunification.

The need for collaboration between local departments of social services and Family Courts is also a factor that affects achieving permanency. Since 2008, OCFS and the Office of Court Administration (OCA) have been working with local departments of social services and Family Courts to work together in identifying areas of delay in providing permanency for children. OCFS and OCA have been working with 20 districts/courts in providing them with county specific child welfare and Family Court data. Using the data the collaboratives identified areas needing improvement, developed logical models and meet on a regular basis to address barriers to permanency.

Related to adoption, there continues to be a need for timely filing of Termination of Parental Rights petitions. A factor here again, is the timely location of the father. Also court calendars impact timely adoption. OCFS is working with Dutchess County on a LEAN project, LEAN A systematic approach to identifying and eliminating waste through continuous improvement. In

Dutchess County each part of the adoption process post TPR is being reviewed for efficiencies with the goal of reducing the amount of time it takes from TPR to finalization. This initiative is the first of what OCFS hopes to be many by which districts and courts can analyze their individual work processes and communicate with each other how to be more efficient and effective in obtaining permanency for freed children. Very similar projects have been done in Nassau, Suffolk and Westchester counties through their work with Public Catalyst. The use of Public Catalyst is described in detail under the Quality Assurance systemic factor.

### Data

OSRI Findings - Item 6 - Achieving Reunification, Guardianship, Adoption or Other Planned Permanent Living Arrangement

Year	Performance	Percent
2015	35/50	70%

SPA findings - When the case record indicated a lack of progress towards permanency, appropriate adjustments were made to the service plan

Year	Performance	Percent
2015	48/56	86%

#### Item 7 – Placement with Siblings

New York State assesses Item 7 an area of strength as the data from the case records reviews conducted in 2015, using the OSRI indicated that in 96 percent (24/25) of the cases concerted efforts were made to ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the siblings. Additionally, the case record reviews conducted in 2015, using the Safety and Permanency Assessment indicated that in 94 (17/18) percent of the cases concerted efforts were made ensure that siblings in foster care are placed together unless a separation was necessary to meet the needs of one of the needs of one of the siblings.

OCFS regulations require that siblings entering foster care, including half-siblings, cannot be placed separately without a documented assessment indicating why placement together would be contrary to the health, safety, or welfare of one or more of the children as determined by consultation with a professional, such as a psychologist. Factors used by the clinician in making a determination of whether siblings or half-siblings should be placed apart must include, but are not limited to: the age differences among the siblings; the health and developmental differences among the siblings; the emotional relationship of the siblings to one another; the individual service needs; the attachment of the individual siblings to separate families or locations; and the continuity of environment standards. This requirement is applicable whether or not siblings enter foster care at the same time. If siblings must be separated on an emergency basis, they must be reunited within 30 days unless placement together is contrary to the best interests of one or more of the siblings.

## **Factors Affecting Performance**

Keeping siblings together remains a challenge especially when large sibling groups are placed. Efforts to recruit foster families continue to be a focus of many local departments of social services and authorized voluntary agencies. Each district and voluntary agency who license and/or approve foster/adoptive homes is required to develop a recruitment and retention plan which incorporates data on the needs of the children coming into to care, and the availability of foster and adoptive families to meet those needs. Utilizing the data, districts and agencies can

determine the current need and work on developing a plan for meeting those needs. The plan, which must be MEPA compliant, looks at several need factors, such as the ages of children, race and ethnicity of the children, and their developmental needs. While the plans are developed on a three year basis, OCFS Regional Office Permanency Specialists work with districts and agencies on their recruitment efforts on a yearly basis.

## Data

OSRI Findings - Item 7 - Placement with Siblings

Year	Performance	Percent
2015	24/25	96%

SPA findings - Diligent efforts made to place siblings together in foster care

Year	Performance	Percent
2015	17/18	94%

#### Item 8 – Visiting with Parents and Siblings in Foster Care

New York State assesses Item 8 an area needing improvement as the data from the case records reviews conducted in 2015, using the OSRI indicated that in 75 percent (24/32) of the cases concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child's relationship with these close family members. Additionally, the case record reviews conducted using the Safety and Permanency Assessment indicated that in 74 percent (27/35) of the cases diligent efforts were made to promote bi-weekly visits with the discharge resource.

OCFS regulations require that local districts must plan for and make efforts to facilitate biweekly visiting between the child and the parents or discharge resource when the goal is to reunify unless: a court or legal agreement prohibits it; the child is in a facility operated or supervised by Office of Mental Health (OMH) or Office for Persons with Developmental Disabilities (OPWDD); or, the placement makes biweekly visitation impossible (in such circumstances, monthly visits are generally required). The case record must contain a visitation plan and visit plan review, which includes the planned frequency, the location of the visits, and any arrangements necessary to facilitate visiting.

Local districts and contract agencies are required to make diligent efforts to facilitate biweekly visitation or communication between minor siblings and half-siblings that have been placed apart in foster care unless such contact is contrary to the health, safety, or welfare of one or more of the children or geographic proximity precludes visitation. Foster parents must be informed if any child placed with them has siblings or half-siblings and if so, the location of the sibling and half-siblings.

Regulations require that for a foster child who has a permanency goal of discharge to parents or relatives, the district must plan for and make efforts to facilitate at least biweekly visiting between the child and the parents or caretakers to whom the child is to be discharged. Regulations allow this standard to be modified or waived under the following circumstances: if such visiting is specifically prohibited by court order, or by the transfer of custody agreement, or

if the child is placed in a facility operated or supervised by OMH or Office for OPWDD or because the placement that was chosen pursuant to the standards regarding appropriateness of placement makes biweekly visitation an impossibility. In the latter case, the district, at a minimum, must plan for and facilitate monthly visits between the parent and the child. At the time the service plan for discharging the child is developed, appropriate visits between the child and the family must be arranged. The efforts of the districts to facilitate at least biweekly visiting must include:

- provision of financial assistance, transportation or other assistance which is necessary to enable biweekly visiting to occur;
- follow-up with the parent or relative when scheduled visits do not occur in order to ascertain the reasons for missed visits and to make reasonable efforts to prevent similar problems in future visits; and,
- arranging for visits to occur in a location that assures the privacy, safety and comfort of the family members. In no case, except where a family court has ordered supervised visiting, will congregate visits involving members of more than one family satisfy the requirements.

Any act to limit or terminate visiting for children voluntarily placed in foster care must comply with the following requirements: parental visitation shall not be terminated or limited by a social services official having care and custody of the child, or by another authorized agency acting on the district's behalf, except by court order in a proceeding in which the parent or guardian was a party. Visitation is to continue until such a court order is obtained, except in cases of imminent danger to the child's life, health and safety. In cases of imminent danger to the child's life, health and safety. In cases of imminent danger to the child's life, health and safety, the authorized agency may terminate or limit visitation. On the same day visitation is terminated or limited, the authorized agency shall notify a designated employee of the district of such termination or limitation. Upon termination or limitation of visitation, the authorized agency shall commence a court action or, if an action is already before the court, shall seek an order of the court as if the child had been taken into protective custody. The above requirements do not apply if the parent or guardian agrees in writing to the termination or limitation of visiting.

## **Factors Affecting Performance**

Promoting visitation is key to permanency as well as well-being. Factors such as providing transportation are often cited as a challenge. With many foster parents working today, they are not always a resource in helping to facilitate visitation. Likewise, many parents are also working, requiring visits to occur during non-working hours for caseworkers. Additionally, missed visits on a parents part for various reasons, are not able to be easily made up.

Promoting visitation for children who are placed in residential facilities can also be a challenge. Some agencies recommend limiting visitation for the first thirty days to allow for the child to settle in and to allow treatment to begin.

OCFS has developed and disseminated a Bill of Rights for Children and Youth Placed in Foster Care on 12/30/14, which was updated on 9/9/15, to incorporate additional rights added as a result of the enactment of the federal Preventing Sex Trafficking and Strengthening Families Act [the Act] (P.L. 113-183). The rights clearly articulate that as a child or youth in foster care in the State of New York, they have the right to visit with their birth or adoptive parents, unless the court or agency has determined that it is not in the best interest of the child or their parent's rights have been terminated. It also includes a right to live with their brothers or sister unless the court or agency determined it was not in the best interest of the brothers or sisters, and to visit with their brother or sister regularly if they do not live together, unless the court or a caseworker has determined it is not in the best interest of the child or siblings or the distance between them prevents visitation.

## Data

OSRI Findings - Item 8 - Visiting with Parents and Sibling in Foster Care

Year	Performance	Percent
2015	24/32	75%

SPA findings -Diligent efforts made to promote sibling visits

Year	Performance	Percent
2015	27/35	77%

SPA - findings -Diligent efforts made to promote biweekly visits with discharge resource

Year	Performance	Percent
2015	59/87	68%

#### Item 9 – Preserving Connections

New York State assesses Item 9 an area needing improvement as the data from the case records reviews conducted using the OSRI indicated that in 85.1 percent (40/47) of the cases concerted efforts were made to maintain the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school and friends.

OCFS regulations require that, whenever possible, a child shall be placed in a foster care setting that permits the child to retain contact with the persons, groups, and institutions with which the child was involved while living with his or her parents or the discharge resource. Any Native American child who is placed into foster care must be placed in accordance with state and federal regulations that reinforce family and tribal connections.

## Factors Affecting Performance

The recruitment and retention of foster/adoptive parents from the communities from which children are removed is essential to preserving connections. Districts and agencies, through the use of their Recruitment and Retention Plans are focusing on recruitment efforts. Since the implementation of the Diligent Recruitment and Retention award, OCFS worked with Welfare Research, Inc. to develop a guide for caseworkers and homefinders on recruitment efforts. The guide entitle "Revitalizing Recruitment" is aimed at providing practical strategies for finding and keeping foster, adoptive and kinship homes. The guide identifies the use of general, targeted and child specific efforts. Recruiting families from some of the very troubled neighbors from which children come from remains a challenge for many counties.

Additionally, efforts have been put in place by OCFS to train caseworkers on the importance of identifying if the child or youth may be a member of or eligible for membership in a federally recognized Indian Tribe. OCFS Native American Services (NAS) has conducted a number of Indian Child Welfare Act training to Local Social Service Districts across New York State, with the largest training being in New York City with approximately 300 attendees. During this training it was emphasized how important identifying a Native American child is and the strategies that can be used to assist in determining a child's status. The Indian Child Welfare Act desk aid was also disseminated to all participates to assist with the procedure of identification and compliance of the federal mandate. Additionally, NAS developed an "ICWA: What Caseworkers need to Know" training DVD, which is currently available for county use at any time.

In 2015, OCFS NAS worked closely with Erie County Court Improvement Project in addressing barriers to determining tribal nation affiliation. Family Court Judges in this district use a colloquy that was developed with the advisement of NAS, on the bench during hearings to assist with identification of native children and to ensure compliance.

During the October 2015 Tribal consultation meeting, the NAS Specialist conducted a brainstorming activity with Tribal Nations and various State Agency Representatives (OTDA, DOH, DCJS OVS, OCFS) to identify their service needs and the state representative developed a list of funding opportunities, resources and services that their agency could provide to help address the service needs. On February 9, 2016, NAS Specialist held a strategic planning meeting with just the State Agency Representatives and Casey Family Programs to strategize meeting the needs of the tribal nations without infringing on their sovereignty. This strategy and coordination continues to be developed.

In an effort to preserve connections with a child's school, OCFS has engaged a number of local departments of social services to develop and implement educational liaisons in both child welfare and local education agencies. The goal of the liaisons is to increase awareness of the education and emotional needs of children and youth in care but most importantly, when in the child's best interest, to keep the child or youth in their school of origin once they come into care. By developing liaisons in both child welfare and education, both systems become well versed in policies, procedures, and practices of the other system and create common understandings of the needs of youth in care.

## Data

OSRI Findings - Item 9 – Preserving Connections

Year	Performance	Percent
2015	40/47	85.1%

## Item 10 – Relative Placement

New York State assesses Item 10 an area needing improvement as the data from the case records reviews conducted in 2015 using the OSRI indicated that in 71.4 percent (30/42) of the cases concerted efforts were made to place the child with relatives when appropriate. Additionally, the case record reviews conducted in 2015 using the Safety and Permanency Assessment indicated that in 86 percent (100/116) of the cases concerted efforts were made to place the child with relatives when appropriate in 00/116) of the cases concerted efforts were made to place the child with relatives when appropriate. As of 12/15/15, 21.5 percent of children placed in out-of-home foster care settings were placed with relatives.

For children being removed from their homes due to abuse or maltreatment, it is required that the caseworker attempt to locate any non-respondent parents, grandparents, and other suitable relatives identified by the parents or children who have played a significantly positive role in their lives, and inform them of the possibility of placement and the opportunity for such persons to become foster parents or direct custodians of the children. Should a relative choose to become a custodian, as opposed to a foster parent, and the family court judge agrees to the relative's preference and orders such direct custody placement, the child will not be placed in foster care (government custody), although the case will remain open as a child welfare case and there will be ongoing Permanency Hearings in the family court until a permanency plan is implemented. Such a permanency plan could include reuniting the child with her/his family of origin, long term custody/guardianship with the relative, etc. Relatives have a legal right to request the court to have a child placed in their home if the local district does not at first place the child with the relative.

#### **Factors Affecting Performance**

Some counties continue to believe that placing children with relatives creates situations that make working with families more difficult. The believe that the "apple doesn't fall far from the tree" continues to prevail in some counties. Through our efforts to implement family engagement strategies through the use of Family Meetings and Locating and Engaging Fathers we are hopeful that this barrier will be reduced.

A recent survey of caseworkers on the use of Kinship highlighted the need for more targeted training of caseworkers. OCFS, through the use of Regional Office Permanency Specialists, will be providing training and resource materials to districts and agencies on providing families with all their options when a child needs to be removed from the home.

#### Data

 OSRI Findings - Item 10 - Relative Placement

 Year
 Performance

 2015
 30/42

SPA findings - Relatives considered as placement resources

Year	Performance	Percent
2015	100/116	86%

#### Placement Type on 12/31/15

Placement Type	Frequency	Percent
CONGREGATE CARE	2,916	16.7
Foster Boarding Home	10,361	59.4
Approved Relative Home	3,758	21.5
OTHER	417	2.4
Total	17,452	100.0

## Item 11 – Relationship of Child in Care with Parents

New York State assesses Item 11 an area needing improvement as the data from the case records reviews conducted in 2015, using the OSRI indicated that in 64.9 percent (24/37) of the cases concerted efforts were made to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregiver(s) from whom the child had been removed through activities other than just arranging for visitation.

As noted in Item 8, districts and voluntary agencies are required to make diligent efforts to facilitate bi-weekly visitations between the child and parents. Visitation plans are made part of the service plan and are monitored by the caseworker.

#### **Factors Affecting Performance**

Maintaining connections for children with incarcerated parents is a challenge especially when a parent is placed hundreds of miles away from the child. OCFS has been involved in the Children of Incarcerated Parents Initiative. This initiative works in partnership with government agencies and community- and faith-based organizations to advocate for and support policies and practices that meet the needs and respect the rights of children and youth whose parents are involved in the criminal justice system. This project is coordinated by the Osborne

Association. OCFS shared with the Directors of Services in October 2015, the Sesame Street Workshop publication, "Little Children, Big Challenges". The book is designed to:

- support, comfort, and reduce anxiety, sadness, and confusion that young children may experience during the incarceration of a parent
- provide at-home caregivers with strategies, tips, and age-appropriate language they can use to help communicate with their children about incarceration
- inform incarcerated parents themselves that they can parent from anywhere, and provide them with simple parenting tips highlighting the importance of communication

The Directors were encouraged to share the materials with their workers and families in order to help facilitate a better understanding for the need to keep children and incarcerated parents connected, when safe to do so.

As noted previously, locating and engaging fathers is also an area of practice that needs further focus. OCFS will continue to support the training of caseworkers through the use of the Locating and Engaging Fathers toolkit.

## Data

OSRI Findings - Item 11 – Relationship of Child in Care with Parents

Year	Performance	Percent
2015	24/37	64.9%

## C. Well-Being

## Well-Being Outcomes 1, 2, and 3

Well-being outcomes include: (A) families have enhanced capacity to provide for their children's needs; (B) children receive appropriate services to meet their educational needs; and (C) children receive adequate services to meet their physical and mental health needs.

- For each of the three well-being outcomes, include the most recent available data demonstrating the state's performance. Data must include relevant available case record review data and relevant data from the state information system (such as information on caseworker visits with parents and children).
- Based on these data and input from stakeholders, Tribes, and courts, include a brief assessment of strengths and concerns regarding Well-Being Outcomes 1, 2, and 3.

## State Response:

# Well-Being Outcomes 1 – Families Have Enhanced Capacity to Provide for Their Children's Needs

New York State assesses Well-being Outcome 1 an area needing improvement as the data from the case record reviews conducted using the OSRI indicates that in three out of the four relevant case review items, New York State is not in substantial conformity.

## Quantitative and Qualitative Data

Throughout the Statewide Assessment data from case record reviews is included. In 2015, OCFS conducted case record reviews utilizing the Onsite Review Instrument (OSRI) in three counties, Clinton, Chemung and New York City Administration for Children's Services (ACS). A total of 75 random cases were reviewed; fifteen (five preventive, ten foster care) in Clinton and Chemung, and forty-five (fifteen preventive, thirty foster care) in NYC ACS. No caseworker, parent or child interviews were conducted as part of the reviews.

Additionally in 2015, utilizing the NYS Safety and Permanency Assessment (SPA) a total of 7 counties were reviewed totaling 150 reports. Reviews were done in the following counties: Erie, Oneida, Madison, Niagara, Rockland, Chautauqua and Westchester counties. Sample sizes are determined by the size of the district, small districts – 10 cases are reviewed, medium districts, 20 cases are reviewed, and in large districts 30 cases are reviewed. No caseworker or parent or child interviews were conducted as part of the SPA reviews.

## **Relevant Case Review Items**

## Item 12 – Needs and Services of Child, Parents and Foster Parents

New York State assesses Item 12 an area needing improvement as the data from the case record reviews conducted in 2015 using the OSRI, and the state Safety and Permanency Assessment, indicates that the needs of parents are not being assessed nor are services being provided. However for the child and foster parents their needs are being adequately assessed and appropriate services are being offered to them

OCFS regulations require local districts to assess the need for and provide, arrange for, and coordinate rehabilitative (preventive) and foster care services, as appropriate, to the child and family to protect the child, prevent future maltreatment, promote the child's well-being, and stabilize family life. The required electronic uniform case record, with its safety, risk, parent and child needs, and strengths assessments, provides the basis for assessing child and family needs and documents the goals, tasks, and services that the case planner will coordinate to achieve the child's permanency goal. OCFS regulations describe the array of preventive services that local social services districts may use to prevent placement or use during placement to accelerate the child's return home. The services must be provided without regard to income. Each local district must provide, either directly or by purchase of service, the following seven "core services": day care; homemaker services; parent training or parent aide services; transportation; clinical services; respite care and services for families to relieve stress when a family member (parent, child, legal guardian, or caretaker) has an HIV-related illness; and, 24 hour access to emergency services, including cash or the equivalent in services, or goods, or shelter. NYS also provides housing subsidies for up to three years to prevent placement in, or enable discharge of children from foster care. Regulations require in-home conferences with the foster parents at least monthly or whenever necessary to provide services that are responsive to issues and to protect the child's best interests. Monthly casework contacts are required with the foster parents to facilitate the caretaker's role in achieving the service plan.

New York State continues to see a decrease in the number and rate of first admissions into care. It is believed that New York State's investment in uncapped preventive spending, as well as state/federally funded programs, has had a positive impact on enhancing the family's capacity to provide their children's needs thereby reducing the number of children coming into care.

Admission Year	Number of First Admissions	Rate/1,000
2010	9,866	2.3
2011	8,576	2.0
2012	8,069	1.9
2013	7,622	1.8
2014	7,594	1.8
2015	6,986	1.6

Statewide: Number and Rate/1,000 pf First Admissions into Foster Care (all ages)

## **Factors Affecting Performance**

The early identification of families who need services in the area of substance abuse, mental health, trauma and domestic violence continues to be a struggle for caseworkers. OCFS has implemented several initiatives aimed at training caseworkers on early identification of these issues.

A computer-based training was developed and made available in 2015, via the following website: <u>https://www.hslcnys.org</u>. Understanding how trauma affects both children and adults is essential for those who work in the child welfare system. After participating in this one hour training, workers will better understand the different types of trauma, the symptoms of traumatic stress, the impact on long term health issues, and the signs of secondary traumatic stress.

With the assistance of a national consultant, DV tools were developed to assist caseworkers and supervisors in engaging families affected by domestic violence safely. The tools addressed a variety of practice areas including: identifying DV, practice considerations for conducting family meetings with families affected by DV, helpful things to say or ask a DV Offender; helpful things to say or ask a non –offending parent. OCFS working with David Mandel in 2015, trained DV advocates on the Safe and Together Model. OCFS is looking to expand training for caseworkers.

The early identification of families within the child welfare system affected by substance and alcohol abuse tends to be underreported in NYS. To assist in the early identification, OCFS has funded fourteen Behavioral Health Specialists to work with local child protective units within the department of social services to identify and refer families affected by substance and alcohol abuse. Additionally, OCFS is working jointly with the Office of Court Administration and the Office of Alcohol and Substance Abuse Services in piloting the UNCOPE screening tool in eight counties. OCFS will look to analyze the data received from these two initiatives to see if more families are being identified appropriately, and referred as needed.

Additionally, the locating and engagement of parents in services, in particular fathers, is an area that needs improvement. OCFS will be revising our Locating and Engaging Fathers training to incorporate the newest information and strategies related to this work.

## Data

## Child

OSRI Findings - Needs assessment of Child

Year	Performance	Percent
2015	70/75	93%

## OSRI Findings – Appropriate Services Provided to the Child

Year	Performance	Percent
2015	66/67	99%

SPA findings: Child is Receiving Services necessary to achieve permanency

Year	Performance	Percent
2015	144/150	96%

## <u>Mother</u>

## OSRI Findings - Needs assessment of Mother

Year	Performance	Percent
2015	44/65	68%

## OSRI Findings - Appropriate Services Provided to the Mother

Year	Performance	Percent
2015	24/32	75%

## <u>Father</u>

OSRI Findings - Needs assessment of Father

Year	Performance	Percent
2015	45/60	75%

OSRI Findings - Appropriate Services Provided to the Father

Year	Performance	Percent
2015	22/51	43%

SPA findings: Parents is Receiving Services necessary to achieve permanency

Year	Performance	Percent
2015	83/91	91%

## Foster Parent

OSRI Findings - Needs assessment of Foster/Adoptive Parent

Year	Performance	Percent
2015	37/37	100%

OSRI Findings – Appropriate Services Provided to the Foster/Adoptive Parent

Year	Performance	Percent
2015	30/33	91%

SPA finding - Foster/Adoptive Parents are Receiving Services necessary to achieve permanency

Year	Performance	Percent
2015	107/109	98%

## Item 13 – Child and Family Involvement in Case Planning

New York State assesses Item 13 an area needing improvement as the data from the case record reviews conducted in 2015 using the OSRI indicates that in 65.6 percent (42/64) of the cases reviewed, the agency made concerted efforts to involve the parents, and children (if developmentally appropriate) in the case planning process on an ongoing basis. This data is significantly different than what NYS data reveals from our Safety and Permanency Assessments conducted in 2015. NYS data indicates that in 96 percent (137/142) of the cases the agency actively involved the parent(s) or guardian and child (if age appropriate) in case planning. It is unclear why there is a discrepancy in the findings of the two reviews.

OCFS regulations require local districts to include a child's parents, guardians, and children over 10, if appropriate, as participants in the development of the Family and Child's Service Plan (FASP). The service plan includes the permanency planning goal; all assessments; and the goals, outcomes, and activities that will lead to enhanced functioning, reduction of risk, and the achievement of permanency. The FASP has a section to complete regarding this involvement and an output may be produced allowing the parents and children over 10 years of age to sign.

Local districts must make efforts to include both the child (over the age of 10) and the child's parents or guardians at the service plan reviews (SPRs). Additionally, as a result of the federal Preventing Sex trafficking and Strengthening Families Act (P.L. 113-183), NYS notified counties and agencies on September 28, 2015, of the requirement that the case plan must be developed

with youth 14 years of age or older, and at the option of the youth, with up to two members of the case planning team who are chosen by the youth and who are not foster parent, case manager, case planner or casework of the youth.

The SPR must occur at 90 days from removal and at least every six months thereafter. These conferences review progress made toward achieving goals and outcomes, past participation of family members, and any problems in service provision. Agreement should be sought on any change to the plan, on the tasks and activities to take place during the upcoming service plan period, and on the anticipated completion dates for goals. Two weeks in advance of the SPR, local districts must give written notice of it to the parents, guardians, and other relevant parties. In the event that the parents or guardians are unable to attend the SPR, every effort must be made to conduct a face-to-face meeting within the next 30 days to outline the goals, outcomes, upcoming tasks and activities, and timeframes. When efforts to make face-to-face contacts are not successful, written notification of the service plan is required.

A case consultation must also be held for each foster child for whom a Permanency Hearing Report must be completed. The purpose of the consultation is to seek input for the report in preparation for each Permanency Hearing. The case consultation activity must be documented in the progress notes and the decisions and outcomes must be incorporated into the Permanency Hearing Report. The case consultation must be conducted no earlier than 60 days prior to the date certain of the Permanency Hearing report at least 14 days before the date certain for the Permanency Hearing. Participants in the case consultation must include: the case planner and/or the child's caseworker; the child's parent(s), unless the parent has had his or her parental rights to the child terminated or unless it can be documented that one or both of them are unwilling to attend, or it can be demonstrated that such attendance would not be in the child's best interests; and the child's foster parent, if the child is in placement in a foster boarding home, or the child's pre-adoptive parent, if the child is in such placement.

## **Factors Affecting Performance**

Engagement of parents is critical to the successful implementation of services and their progress towards meeting goals. OCFS has promulgated guidance to the local districts on the need for, and methods of, locating absent parents, especially fathers, of children in foster care so that the child's permanency and well-being can be achieved more effectively and efficiently. The locating and engagement of parents, in particular, fathers is an area that needs improvement. OCFS will be revising our Locating and Engaging Fathers Training to incorporate the newest information and strategies related to this work.

## Data

OSRI Findings - Item 13 – Child and Family Involvement in Case Planning

Year	Performance	Percent
2015	42/64	65.6%

SPA findings -Agency actively involved the parent/guardian and the child (if age appropriate) in the case planning

Year	Performance	Percent
2015	137/142	96%

## Item 14 – Caseworker Visits with Child

New York State assesses Item 14 an area of strength as the data from the case record reviews conducted in 2015 using the OSRI indicates that in 94.7 percent (71/75) of the cases the frequency and quality of the visits between the caseworker and the child were sufficient to ensure the safety, permanency and well-being of the child and promote achievement of case goals. The Safety and Permanency Assessment case reviews conducted in 2015, also support that caseworkers are meeting with the child as required on a monthly basis in 93 percent (138/149) of the cases.

NYS has different casework contact requirements for preventive, protective, and foster care cases.

Preventive - There must be at least 12 casework contacts with a child and/or family in receipt of preventive services within each six-month period. At least six of the 12 casework contacts must be made by the case planner and two of these contacts must take place in the child's home.

Protective - In cases in which the child protective caseworker is the primary service provider, this caseworker must make at least two separate face-to-face contacts per month with the subjects and other persons named in the report and at least one must take place in the subject's home.

Foster Care - For foster care cases, casework contacts must occur whenever a case planner determines they will best serve the child or family. NYS Regulations require that caseworkers make face-to-face contact twice during the first 30 days of placement and once a month thereafter, as a minimum. The regulation states:

 Casework contacts with the child is defined as individual or group face-to-face contacts between the case planner, or the caseworker assigned to the child, as directed by the case planner, or the case manager, and the child. The purpose of the contacts is to assess the child's current safety and well-being, to evaluate or re-evaluate the child's permanency needs and permanency goal, and to guide the child towards a course of action aimed at resolving problems of a social, emotional or developmental nature that are contributing towards the reason(s) why such child is in foster care.

During the first 30 days of placement, casework contacts are to be held with the child as often as is necessary to implement the services tasks in the family and children's services plan but must occur at least twice. At least one of the two contacts must be held at the child's placement location. The focus of the initial contacts with the child must include, but need not be limited to, determining the child's reaction to the separation and his/her adjustment to the out-of-home placement and arranging for services necessary to meet his/her needs. After the first 30 days of placement, casework contacts are to be held with the child at a minimum of once a month. At least two of the monthly contacts every 90 days must be at the child's placement location. If the youth is age 18 or older and is attending an educational or vocational program 50 miles or more outside the local social services district, the casework contacts may be made by telephone or mail.

## **Factors Affecting Performance**

Casework contact with children and youth in care is an area of strength. Caseworkers make every effort to see children and youth on a monthly basis.

Data

OSRI Findings - Item 14 – Caseworker Visits with Child

Year	Performance	Percent
2015	71/75	94.7%

Safety and Permanency Assessment Case Record Review 2015

Year	Performance	Percent
2015	138/149	93%

#### New York Foster Care Contacts Data - FFY 2015: 10/1/14 – 9/30/15 (data as 11/28/15)

% of In Care Months in which the child was contact at least one time – 95.5 percent % of Visit Months that occurred in the residence of the child – 93.5 percent

#### Item 15: Caseworker Visits with Parents

New York State assesses Item 15 an area needing improvement as the data from the case record reviews conducted in 2015, using the OSRI indicates that in 63.2 percent (36/57) of the cases the frequency and quality of the visits between the caseworker and the parents of the child were sufficient to ensure the safety, permanency and well-being of the child and promote achievement of case goals. The data from the state Safety and Permanency Assessment reviews conducted in 2015, indicates that in 70 percent (63/90) of the cases visits between the caseworker and parents are occurring as required.

NYS regulations require that, during the first 30 days of placement, casework contacts must occur with the parents as often as is necessary, but at least twice unless compelling reasons are documented why such contacts are not possible. Thereafter, contact with the parents must occur at least once a month unless compelling reasons are documented why such contacts are not possible.

For protective and preventive cases there must be at least 12 casework contacts with the children and their families within a six-month period. For protective cases, one contact per month must be in the home and, for preventive cases, two contacts in the six-month period must be in the home.

## Factors Affecting Performance

The location and engaging of fathers is an area that needs continuous enhancement. OCFS will be revising our Locating and Engagement Training to incorporate the newest information and strategies related to this work.

## Data

Year	Performance	Percent
2015	36/57	63.2%

SPA findings -Caseworker \	Visits with Parents
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Year	Performance	Percent
2015	63/90	70%

## Well-Being Outcome 2 – Children Received Appropriate Services to Meet their Education Needs

Well-being outcomes include (b) children receive appropriate services to meet their educational needs

New York State assesses Well-being Outcome 2 as an area needing improvement. The data indicates NYS is not is substantial compliance on this outcome.

## **Quantitative and Qualitative Data**

Throughout the Statewide Assessment data from case record reviews is included. In 2015, OCFS conducted case record reviews utilizing the Onsite Review Instrument (OSRI) in three counties, Clinton, Chemung and New York City Administration for Children's Services (ACS). A total of 75 random cases were reviewed; fifteen (five preventive, ten foster care) in Clinton and Chemung, and forty-five (fifteen preventive, thirty foster care) in NYC ACS. No caseworker, parent or child interviews were conducted as part of the reviews.

## Item 16 – Educational Needs of the Child

New York State assesses Item 16 as an area needing improvement. The data from the case record reviews conducted using the OSRI indicates that in 87.9 percent (51/58) of the cases the agency made concerted efforts to assess the child's educational needs at the initial contact with the child or on an ongoing basis. Additionally, the identified needs were appropriately addressed in the case planning and case management activities.

NYS regulations require that districts and agencies take steps necessary for all children in foster care to receive education appropriate to their needs and in accordance with the requirements of the Education Law. In addition, they are required to maintain an active and direct liaison with any school in which a child in its care is enrolled and make certain that each child receives appropriate educational and vocational guidance. State standards require that the child's case record contain educational and vocational training reports and evaluations indicating the educational and/or vocational needs of each foster child, including school reports and committee on special education evaluations and/or recommendations.

## **Factors Affecting Performance**

OCFS has identified three components to improve educational outcomes:

- Building local child welfare and educational collaborations to ensure educational stability and school success;
- Supporting college opportunities; and
- Improving data collection and analysis.

## Local child welfare and educational collaborations

In 2015, OCFS has engaged NYS ACS, Nassau and Suffolk counties to develop and implement educational liaisons in both child welfare and local education agencies (LEA). The goal of the liaisons is to increase awareness of the educational and emotional needs of youth in care but, most importantly, when in the child's best interest, to keep youth in their school of origin once they come into care. Reducing the number of school moves a child experiences can lead to improved outcomes. However, if it is determined it is in a child's best interest to change schools, the liaisons help with the speedy transfer of records to facilitate a seamless school transition.

Many states have found, once an LEA is aware of the needs of children in care, performance in K-12 education does improve. By developing liaisons in both child welfare and education, both systems become well versed in the policies, procedures, and practices of the other system and create common understandings of the needs of youth in care. Moreover, the liaisons serve as a point of contact and ongoing dialogue between child welfare and education By creating a designated point of contact within the LEA to work with child welfare we have already begun to see improvement in communication between the systems and a new focus upon the supports needed to help children and families. Moreover, this pilot has placed New York State in a good position as we begin to work with the NY State Education Department (SED) to implement the Every Student Succeeds Act (ESSA).

OCFS has developed county educational collaborations comprised of Family Courts, schools, and the child welfare agencies. Having this collaborative trifecta at the local and state level has been instrumental in New York's ability to move the education agenda. Connecting the courts, child welfare, and the education system has raised awareness not only of the supports needed to improve educational outcomes for children in care, but the collaboratives are also examining ways to build supports within the LEA to prevent children from coming into the child welfare system

## **Develop College Supports for Youth in Care**

In the spirit of a public private partnership, OCFS, with technical support from Casey Family Programs, began working with the New York State University (SUNY) and City University (CUNY) systems in 2015, in an effort to build a campus based framework of support for students in foster care. Through our work we have identified the top needs as:

- Financial aid
- Housing assistance
- Mentoring
- Peer support (club or organization where foster youth can bond and support one another)
- Time management skills
- Academic and career counseling
- Support transitioning from high school to college and college to career

It is our expectation that we will develop a model of support that can be implemented on any of the two or four year colleges within the state university system.

## **Data Collection and Analysis**

OCFS and the State Education Department (SED) have entered into a Memorandum of Understanding (MOU) in 2015, which enables data sharing of student educational information for foster care and juvenile justice youth. As part of the MOU, OCFS is now able to obtain education data for children in foster care. This data will be utilized for effective case

management to arrive at better outcomes for children in foster care and examine education outcomes of children while in care.

While not currently developed, the following data will be made available to districts in the summer of 2016:

- Basic Demographics of Children In Foster Care and School Aged
  - Age Group
  - Gender
- Education Related Disabilities
- Limited English Proficiency (LEP) Needs
- Percent of Student Transfers and Other Exits from School
  - Transfer and Other Exits by Age Group
- In-school and Out-of School Suspensions
- Student Achievement
  - Determined Grade Levels by Age
  - Assessments and Performance: ELA and Math
    - ELA Assessment, Grades 3 8 and High School
    - Math Assessment, Grades 3-8 and High School
- Percent of Classes Passed per Unique Student by Grade Group
- Class Level All Pass, Fail or Non-complete

## New York State Higher Education Services Corporation

In 2010 until present, the New York State Higher Education Services Corporation (HESC) has awarded OCFS with the grant titled, College Access Challenge Grant (CACG). The intended outcome of this grant is to increase the number of youth in care to be prepared to enter and succeed in college. OCFS partnered with the SUNY Albany Professional Development Program to develop a three pronged approach which targeted youth, caseworkers and college residential life staff. Strategies included the following approaches and resources:

#### Pathways to College

Youth Ambassadors- Youth who previously lived or currently live in out-of-home care conduct workshops for foster and juvenile justice youth around the state on college preparation educating youth on how to make college a reality.

#### Do You Want to go to College

College Visits- Youth in care have the opportunity to visit college campuses and learn first-hand about college life. College tours are dedicated to youth in care and specific to their needs. The tours are intended to motivate youth to pursue a post-secondary education as well as equip them with information that will assist them in applying and paying for college.

#### Youth in Care Corner

OCFS developed the Youth in Care Corner on the HESC Go College NY page. The Youth in Care Corner is designed to give students at risk, including foster youth, the information needed to pursue a college degree. The site provides information on preparing and applying for higher education and features videos and posters. It can be found at www.youthincare.org.

#### Education Resource Directory

The NYS Higher Education Resource Directory contains statewide resources in a variety of service types and in multiple areas of the state. This directory can easily be accessed on your mobile device. The directory can be found at the Youth in Care Corner on HESC Go College NY website at: www.youthincare.org.

## Handbook for Staff

The handbook titled "Youth Belong Here: A Guide to Assist Workers Helping Youth in Care Achieve Academic Success," is for all staff who work with youth in care, to provide them with the information they need to help youth advance their educational goals. This handbook contains information on the importance of beginning to talk to youth about college as early as Middle School, and how staff can continue to help youth prepare for college throughout high school. handbook can be found on the HESC Go College NY website This at: http://www.youthincare.org/resources-and-links.

In October 2015, OCFS finalized a MOU with Higher Education Services Corporation in an effort to maximize the financial aid available to all eligible students. HESC analyzed data and identified that many youth indicate that they are or were in foster care but then do not follow through with the process to verify their foster care history by providing the necessary documentation. The MOU established a process by which HESC gains consent from students applying for financial aid to then share their identifying information with OCFS. Upon receiving the list, OCFS verifies and provides documentation directly to HESC to add to the student's financial aid record. This process allows for improved access for students who may struggle with obtaining the required documentation from previous caseworkers.

## The Education and Training Voucher Program

The Education and Training Voucher Program helps youth aging out of foster care to make the transition to self-sufficiency and receive the education, training and services necessary to obtain employment. This program is designed to help youth who were in foster care pay for post-secondary education or training. ETV gives students up to \$5000 a year for qualified school related expenses. Funding is limited and available on a first-come, first-served basis to eligible students. Applicants must complete the ETV application which includes documentation each semester that is sent directly from the school confirming enrollment, the cost of attendance and unmet need.

In academic year 2014-2015, all eligible New York youth who completed their applications and attended school were funded. Applications are reviewed to make certain those youth with the greatest need were fully funded, Those that cannot be funded included: those youth not in foster care, did not attend the college or was not making progress, first time applicants over the age of 21, and previous recipients who are older than 23.

## Data

#### ETV Funded Students

Type of Student	Number	Percent
New Students	357	41%
Returning Students	520	59%
Total	877	100%

#### Age of Funded Students

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Age	Number	Percent
18	252	26%
19	231	26%
20	185	21%
21	128	15%
22	80	9%

OSRI Findings – Item 16 -Educational Needs of the Child Are Being Met

Year	Performance	Percent
2015	51/58	87.9%

## Well-Being Outcome 3 – Physical Health and Behavioral Health of the Child

# Well-being outcomes include (c) children receive adequate services to meet their physical and mental health needs.

NYS assesses Well-Being Outcome 3 as an area of strength as the data from the case records reviews conducted using the OSRI indicates that in both of the relevant case review items, New York was meeting in substantial conformity.

## **Quantitative and Qualitative Data**

Throughout the Statewide Assessment data from case record reviews is included. In 2015, OCFS conducted case record reviews utilizing the Onsite Review Instrument (OSRI) in three counties, Clinton, Chemung and New York City Administration for Children's Services (ACS). A total of 75 random cases were reviewed; fifteen (five preventive, ten foster care) in Clinton and Chemung, and forty-five (fifteen preventive, thirty foster care) in NYC ACS. No caseworker, parent or child interviews were conducted as part of the reviews.

## **Relevant Case Review Items**

## Item 17 – Physical Health of the Child

## Item 18 – Mental/Behavior Health of the Child

NYS assesses Well-Being Outcome 3 as an area of strength as the data from the case records reviews conducted using the OSRI indicates that in 95 percent (56/59) of the cases the agency addressed the physical health needs of the child, including dental, and in 90.6 percent (48/53) of the cases the agency addressed the mental/behavioral health needs of the child.

OCFS requires, for each child admitted into foster care, a comprehensive medical examination within 30 days after admission unless records are available to document that such an exam was completed within 90 days prior to admission. The initial examination must be in accordance with current recommended medical practice as it applies to the child's age, development and environmental background. A child's periodic medical exams must include immunizations as needed and vision assessments. Foster parents are to receive the child's comprehensive health history at the time of placement. All children in foster care age three years and older must be examined by a dentist annually and must be provided with any needed dental care. All medical information on each child is be maintained in the case record.

## **Factors Affecting Performance**

The Federal Fostering Connections to Success and Increasing Adoptions Act of 2008 (P.L. 110-351) amended the section 422(b)(15) of the Act which previously required an update regarding ongoing efforts by the state agency to actively involve and consult physicians or other appropriate medical professionals in assessing the health and well-being of foster children and determining appropriate medical treatment. The law now requires states and Tribes, in coordination with the State title XIX (Medicaid) agency, and in consultation with pediatricians and other experts in health care, and experts in and recipients of child welfare services, to develop a plan for ongoing oversight and coordination of health care services for children in foster care. States are required to submit a copy of the Health Care Services Plan with their CFSP.

New York State has a state-supervised, locally administered system of foster care. As such, provision and oversight of the medical care received by these children is the responsibility of the social services districts, that are the legal custodians and case managers, and the authorized foster care agencies with which these departments contract to provide foster care services. Over 80 percent of New York State children in foster care are cared for by non-public foster care agencies (voluntary authorized agencies) rather than local departments of social services. OCFS routinely conducts site visits and provides technical assistance to departments and agencies to monitor the quality of services provided.

The models of delivery for health care services to children in foster care vary significantly across New York State. Some authorized foster care agencies deliver primary health care directly through on-site clinics. Some agencies have contractual agreements with health care providers; for example, an agency may contract with one psychologist in the community to conduct mental health evaluations on all new admissions. Most agencies have medical staff that provide some tracking and oversight of routine and specialty health services. Children residing in foster homes often use community health providers.

While OCFS does not provide direct clinical services to children in foster care, OCFS promulgated regulations regarding appropriate medical care [18 NYCRR 441.22]. OCFS regulation 18 NYCRR 441.22 sets forth the schedule for initial and follow-up health screenings for children in foster care. OCFS has developed draft regulations to 18 NYCRR 441.22 so that the periodicity schedule will match the most current version of the American Academy of Pediatrics: Recommendations for Preventive Pediatric Care. The proposed draft regulations are still pending approval in the required administrative process. New York State Social Services Law (SSL) provides the statutory authority for OCFS to supervise social services districts and promulgate regulations. OCFS regulations require that licensed medical professionals assess the health and well-being of children in foster care and determine appropriate medical treatment. OCFS has also provided practice guidance on necessary and optimal health services for children in Foster Care". This manual was developed in close collaboration with our medical director (a pediatrician), and a representative group of foster care agency and social services staff that included medical professionals in 2009.

The Coordinated Children's Services Initiative (CCSI) legislation requires that counties employ a collaborative approach to children with intensive cross-system needs. These collaborations vary in accordance with local government and community resources, and typically include representatives from social services, mental health, developmental disabilities, substance abuse services, schools, and community providers. The goal is to implement a comprehensive, coordinated, individualized service plan for each child. In 2002, the Center for Governmental Research, Inc. (CGR) concluded that CCSI is a viable model that should be continued and strengthened, and presented a number of recommendations designed to strengthen the state-local partnership. Many of the recommendations in the report were subsequently implemented. In addition, a coordinated children's services statute that amended state Executive Law went into effect subsequent to the report and incorporated a number of issues raised in the report.

At the state level, the OCFS medical director is involved in any regulatory or guidance documents disseminated on health issues. OCFS employs a chief treatment officer, chief

psychiatrist and psychologists. OCFS routinely engages local and national experts, including psychiatrists, physicians, pharmacists, and psychologists, to assist in health-related initiatives.

## Bridges to Health (B2H)

Bridges to Health (B2H) continues to assess for service needs and plan for goals; B2H utilizes the Childhood Adolescent Needs and Strengths Assessment (CANS). OCFS and the Office of Mental Health collaborated to update the CANS for use across both systems, entitled CANS-NY. The CANS-NY includes a wider range of domains to better identify and address the multi-system needs of children. The CANS-NY is currently being used by the New York City Administration for Children's Services as part of their participation in the Title IV-E Waiver.

## Data

In 2015, 924 children (803 Serious Emotional Disturbance (ED), 96 Developmental Disability (DD), and 25 Medically Fragile (MedF)) were newly enrolled in the B2H program, with approximately 3,100 children enrolled on any given day. Additionally, 245 children who were enrolled in B2H reached their permanency goal of adoption in 2015, making the overall number of children enrolled in B2H finding permanency 2,195 since 2008. Over 900 adopted children continue to receive B2H services in 2015.

Beginning in 2016, OCFS will begin to track those children who "graduate" from B2H, meaning they no longer need the services due to significant improvement in their overall health and well-being.

## Medicaid Managed Care Transition

The New York Medicaid Redesign Team (MRT) was created to further the vision of restructuring New York's Medicaid program. The MRT has developed a multi-year action plan to improve patient experience of care, improve health of the population, and control costs. This includes the foster care population, whose medical needs, and therefore Medicaid expenditures, are *exponentially higher than the general pediatric Medicaid population*. Evidence suggests that children who have been placed in foster care have significantly higher rates of unmet health needs compared to children in the general population, and use of inpatient and outpatient mental health services at a rate of 15-20 times higher than the general pediatric Medicaid population – therefore this is a small, discrete population of children with high needs.

The NYS Medicaid Redesign impacts children in foster care in two key ways:

- Direct Care Foster Care: Children placed in foster homes licensed by the LDSS, which includes approximately 3,500 children, moved into Managed Care between April 1, 2013 – September 2013. OCFS and DOH created a Policy Paper that outlines the following guidance: Enrollment and Dis-enrollments, Access to Care, Complaints and Appeals, as well as a Summary of Critical Policy Changes. OCFS held a series of conference calls with LDSS and Managed Care Organizations (MCOs) to review the contents of the Policy Paper.
- 2. Children placed with Voluntary Foster Care Agencies are intended to move into Managed Care in January 2017: The Children's Health Subcommittee of the MRT Behavioral Health Workgroup, which includes representatives from DOH, OCFS, OMH and OASAS, and is charged with transforming care for children and redesigning health and behavioral health services for children. This includes approximately 16,500 children who are served by Voluntary Foster Care Agencies. This group of children represents a significantly more complex set of health and behavioral health care needs. Voluntary Foster Care Agencies have a long standing proven track record of being responsive to the multi-faceted needs of children, their families and the regulatory mandates of local and state

governments. The NYS Child Welfare system is a highly complex set of relationships that includes LDSS, Voluntary Foster Care Agencies Family Courts and the health care system. This set of relationships requires a highly coordinated approach to achieve desired outcomes. NYS recognizes that the movement of children in foster care into Managed Care represents an opportunity to improve the current system and outcomes for children, and that this must be done in a highly orchestrated fashion.

OCFS is working in tandem with DOH to design a system of care for Children in Voluntary Foster Care Agencies. OCFS and DOH envision a system that builds on the strengths and expertise of Voluntary Foster Care Agencies, Health Homes and Managed Care Organizations. The following activities are currently underway:

- Voluntary Foster Care Agencies are proposed to receive and operate with a "Residual Medicaid Per Diem" to include services that are vital to the Voluntary Agencies infrastructure: examples include Nursing and Social Work.
- Health Homes Care Coordination: Health homes will be integrated into current Managed Care provider networks and will be a permanent fixture of the state's care management strategy. Health home networks will always include community based organizations because they are uniquely positioned to meet the social needs of patients that often transcend health care needs. DOH and OCFS agree that Voluntary Foster Care Agencies will be the Health Homes for the foster care population.
- Managed Care Organizations (MCO) contract for clinical services, such as: behavioral health, primary care, specialty health care, pharmacy and lab care, and dental services. OCFS and DOH are working to define the MCO Per Member Monthly premium to account for the high needs, high costs of children in foster care. In addition, OCFS and DOH are updating the model contract between DOH and the MCOs to take into account the unique needs of children in foster care.

As per the expectation of the Health Services Plan, this provides further direction in securing Medicaid for transitioning youth and continuity of health care coordination.

Effective January 1, 2014, the Affordable Care Act (ACA) required states to provide Medicaid coverage to eligible Former Foster Care Youth (FFC), if otherwise eligible, through the end of the month of their 26th birthday without regard to income. FFC Youth are those youth who were under the responsibility of the State (in the care and custody of the commissioner of a LDSS or the commissioner of OCFS) on the date of attaining 18 years of age or higher *and* who were in receipt of Medicaid while in foster care (P.L. 111-148 §§ 2004 and 10201; 42 U.S.C. § 1396a, see also SSL § 366(1) (c) (9)).

OCFS has collaborated with New York State Department of Health (DOH) and the Office of Temporary Disability Assistance (OTDA) in creating processes and comprehensive system support whereby youth can enroll per ACA. This involved outreach to youth that are eligible but may have been discharged. OCFS collaborated with the Schuyler Center for Advocacy in creating website announcements of the developed process for enrollment, video vignettes of FFC speaking to the advantage of ACA and how to enroll, and a list of potential eligible youth was provided to DOH to cross reference any youth that may emerge and request enrollment in LDSS.

These efforts by OCFS with active collaboration and coordination with sister agencies resulted in our continuous development and improvement of a health care services plan for coordination and oversight of health care for children in foster care.

## **CPS/Behavioral Health Consultant**

In 2015, OCFS made available to local departments of social services funding for CPS/Behavioral Health consultants. Districts were able to apply for up to \$75,000 for the salary and fringe of a Behavioral Health Consultant to work alongside child protective services caseworkers in order to identify and support the behavioral health needs of both the adults and children in families involved in child protective services. A total of fourteen districts were funded for two years with the \$1.2 million allocated for this initiative. The following is data on the number of adults and children served in the first three quarters of the funding.

CPS Behavior Health Co	onsultant Activities
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	Screened for Mental Health	Screened for Substance Abuse Disorder	Brief Interventions Provided	Referrals made for assessment	Psychoeducational sessions Held
Adults	393	270	574	320	492
Children	178	81	210	152	150

## Data

OSRI Findings -Item 17: Physical Health of the Child

Year	Performance	Percent
2015	56/59	95%

OSRI Findings - Item 18: Mental/ Behavioral Health of the Child

Year	Performance	Percent
2015	48/53	90.6%

# Section IV: Assessment of Systemic Factors

## Instructions

The statewide assessment information for systemic factors is used in determining ratings for substantial conformity. Therefore, it is imperative that the statewide assessment team ensures that information in this section speaks to how well each systemic factor requirement functions across the state. To complete the assessment for each systemic factor, state agencies should:

- 1. Review the *CFSR Procedures Manual* (available on the Children's Bureau Web site at <u>http://www.acf.hhs.gov/programs/cb</u>), which elaborates on key concepts and provides examples of data that are relevant to the assessment of systemic factor requirements.
- 2. Respond to each assessment question using the requested data and/or information for each systemic factor item. Relevant data can be qualitative and/or quantitative. Refer to the section in the state's most recent Child and Family Services Plan (CFSP) or Annual Progress and Services Report (APSR) that provides assessment information on state performance for each of the seven systemic factors. Review the information with the statewide assessment team and determine if more recent data is available that can be used to provide an updated assessment of each item. If more recent data are not available, refer to the most recent CFSP or APSR document by indicating the document name/date and relevant page numbers where the information can be found for each systemic factor item.
- Emphasize how well the data and/or information characterizes the statewide functioning of the systemic factor requirement. In other words, describe the strengths and limitations in using the data and/or information to characterize how well the systemic factor item functions statewide (e.g., strengths/limitations of data quality and/or methods used to collect/analyze data).
- 4. Include the sources of data and/or information used to respond to each item-specific assessment question.
- 5. Indicate appropriate time frames to ground the systemic factor data and/or information. The systemic factor data and/or information should be current or the most recent (e.g., within the last year).

The systemic factor items begin with #19 instead of #1 because items #1 through 18 are outcome-related items covered in the onsite review instrument used during the onsite review. Items related to the systemic factors are items #19 through 36.

## A. Statewide Information System

## Item 19: Statewide Information System

How well is the statewide information system functioning statewide to ensure that, at a minimum, the state 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?

Please provide relevant quantitative/qualitative data or information that show the statewide information system requirements are being met statewide.

## State Response:

NYS assesses Item 19 an area needing improvement. While users of the NYS system of record, CONNECTIONS, can readily identify the status, demographic characteristics, location and placement goals for every child, OCFS does not routinely monitor the system to ensure accuracy of the data entered on the local level.

With the implementation of the CONNECTIONS Activities window in October 2014, New York now operates a single statewide information system that enables users to readily identify a child's location, in addition to the previously incorporated functions of status, demographic characteristics, and goals for children placed in foster care. Prior to achieving that milestone, foster child placement tracking (location) had been performed in the legacy Child Care Review Services (CCRS).

CONNECTIONS is the statewide automated child welfare information system. Casework staff who have the appropriate security, such as having a designated role in a case, or administrators who have case search rights, have ready access to CONNECTIONS windows on which casespecific information, such as the aforementioned data elements, are entered or displayed. Moreover, the user interface in CONNECTIONS is far more intuitive and user friendly than the former CCRS input screens. For example, common English replaced codes for various movement activities such as new placement, discharge, missing from care, etc.

Recognizing that data is not always entered in a timely manner, which can affect NYS's performance on the key outcome measures, OCFS sent an Administrative Director to the local departments of social services and voluntary agencies, requiring them to enter all key foster care activities into CONNECTIONS within 30 days of the activities. OCFS makes available to local districts and voluntary agencies through the Data Warehouse several reports that assist them in managing their workloads to promote timely data entry. These reports include the following:

Permanency Hearing Reports (PHR)

PHR coming due in a three month time period

## **Child Protective Reports**

CPS reports (determinations and safety assessments) that are currently overdue and/or overdue as of the date of the prompt

**FASP Reports** 

The number and percentage of Initial, Comprehensive and Reassessment FASPs that are overdue or coming due within 90 days of the current date

Other ad hoc reports can be created per the request of a district, agency or OCFS staff to help reduce the number of cases with missing elements. One such report that was created was a report that lists cases missing clinical diagnosis for a child. Other reports that have been created have reports on children who have a missing race/ethnicity code.

OCFS does not have an automated process in place to determine the accuracy of the data entered, and therefore OCFS will look to monitor accuracy of the data entered during future case record reviews.

Recently, OCFS signed a Memorandum of Understanding (MOU) with the New York State Education Department (NYSED) to obtain education data for children in foster care. In the most recent round of matches (December 2015), using basic demographic information, such as date of birth, name, address, sex, and ethnicity, OCFS was able to match 90 percent of the school age children in foster care with NYSED databases utilizing an automated data matching procedure. This indicates that these elements are captured correctly for these children.

A review of AFCARS data for New York was conducted in 2011. There were no issues found with the data related to the status, location, and goals of the children. Issues that were noted were that 32 records out of 32,000 had date of birth issues; and race/ethnicity was missing for large percentage of children. An Improvement Plan was developed by OCFS, and both of these issues have been addressed. Listed below are the frequencies for key child characteristics using the FFY 2015 AFCARS file.

## Data on key child characteristics

## Table 1: Age Distribution ofAll Children Served in FFY 2015

AGE	Number of Children	%
0	2,800	9.3
1	1,840	6.1
2	1,728	5.7
3	1,700	5.6
4	1,526	5.0
5	1,451	4.8
6	1,345	4.4
7	1,226	4.1
8	1,187	3.9
9	1,029	3.4
10	997	3.3
11	1,001	3.3
12	1,066	3.5
13	1,297	4.3
14	1,679	5.5
15	2,182	7.2
16	2,212	7.3

AGE	Number of Children	%
17	1,774	5.9
18	935	3.1
19	723	2.4
20	532	1.8
21	27	0.1
TOTAL	30,257	100.0

Source: AFCARS FFY 2015 file of all children served in FFY 2015.

Prepared by OCFS Bureau of Research Evaluation and Performance Analytics

# Table 2: Sex Distribution of AllChildren Served in FFY 2015

SEX	Number of Children	%
Male	15,658	51.8
Female	14,599	48.2
TOTAL	30,257	100.0

Source: AFCARS FFY 2015 file of all children served in FFY 2015

Prepared by OCFS Bureau of Research Evaluation and Performance Analytics

## Table 3: Race Distribution of All Children Served in FFY 2015

	Number of	
RACE	Children	%
American Indian or Alaska Native	101	0.3
Asian	391	1.3
Black or African American	15,150	50.1
Native Hawaiian or Other Pacific Islander	12	0.0
White	10,019	33.1
Unable to Determine/Unknown	<mark>4,584</mark>	<mark>15.2</mark>
TOTAL	30,257	100.0

Source: AFCARS FFY 2015 file of all children served in FFY 2015. Prepared by OCFS Bureau of Research Evaluation and Performance Analytics

# Table 4: County Distribution of AllChildren Served in FFY 2015

COUNTY	Number of	%	
	Children		
Albany	342	1.1	
Allegany	146	0.5	
Broome	399	1.3	
Cattaraugus	168	0.6	
Cayuga	118	0.4	
Chautauqua	228	0.8	
Chemung	158	0.5	
Chenango	84	0.3	
Clinton	164	0.5	
Columbia	152	0.5	
Cortland	120	0.4	
Delaware	132	0.4	
Dutchess	514	1.7	
Erie	1,499	5.0	
Essex	47	0.2	
Franklin	183	0.6	
Fulton	75	0.2	
Genesee	134	0.4	
Greene	133	0.4	
Hamilton	1	0.0	
Herkimer	143	0.5	
Jefferson	182	0.6	
Lewis	20	0.0	
Livingston	77	0.3	
Madison	74	0.2	
Monroe	779	2.6	
Montgomery	79	0.3	
Nassau	379	1.3	
New York City	17,054	56.4	
Niagara	301	1.0	
Oneida	454	1.5	
Onondaga	634	2.1	
Ontario	129	0.4	
Orange	570	1.9	
Orleans	58	0.2	
Oswego	73	0.2	
Otsego	50	0.2	
Putnam	35	0.1	
Rensselaer	223	0.7	
Rockland	121	0.4	
Saint			
Lawrence	276	0.9	
Saratoga	94	0.3	
Schenectady	385	1.3	

Child and Family Services Reviews Statewide Assessment Instrument

COUNTY	Number of Children	%
Schoharie	58	0.2
Schuyler	33	0.1
Seneca	72	0.2
Steuben	138	0.5
Suffolk	1,162	3.8
Sullivan	127	0.4
Tioga	40	0.1
Tompkins	209	0.7
Ulster	211	0.7
Warren	107	0.4
Washington	69	0.2
Wayne	68	0.2
Westchester	848	2.8
Wyoming	85	0.3
Yates	43	0.1
TOTAL	30,257	100.0

## Table 6 Placement Type on 12/31/15

Placement Type	Frequency	Percent
CONGREGATE CARE	2,916	16.7
Foster Boarding Home	10,361	59.4
Approved Relative Home	3,758	21.5
OTHER	417	2.4
Total	17,452	100.0

## Table 7 – Permanency Goal on 12/31/15

Permanency Goal	Frequency	Percent
ADULT CUST. CARE	141	.8
ADOPTION	4543	26.0
RET TO PARENT	9322	53.4
IND. LVNG	1982	11.4
OTHER	1027	5.9
Missing	<mark>437</mark>	<mark>2.5</mark>
Total	17,452	100.0

## Table 8 – Legal Status as of 12/31/15

¥			
Legal Status	Freed	Freed	Total
Legal Status	Yes	No	
ADULT CUST. CARE	109	32	141
ADOPTION	2486	2057	4543
RET TO PARENT	9220	102	9322
IND. LVNG	1659	323	1982
OTHER	1014	13	1027
Total	14488	2527	17015

## **B. Case Review System**

## Item 20: Written Case Plan

How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

Please provide relevant quantitative/qualitative data or information that shows each child has a written case plan as required that is developed jointly with the child's parent(s) that includes the required provisions.

## State Response:

New York State assesses Item 20 an area of strength as OCFS has a well-functioning system to ensure written case plans for each child that is developed jointly with the child's parent(s) and those plans can be found in the case record. Data from the 2015 SPA case record reviews shows that in 99 percent of the cases all required FASPs were in the record, with 96 percent of the cases involving the parent/guardian in case planning activities (parental involvement is determined through progress notes, and through documentation in the FASP).

NYS requires that local districts develop written Family Assessments and Service Plans (FASP) and maintain these plans as part of the standard Uniform Case Record (UCR) since 1981. A UCR must be created for all families receiving child protective services, preventive services, or foster care services. For a child legally freed for adoption, there is a required child-specific assessment and service plan. Since 2005, the Family (and child) Assessments and Service Plans are documented electronically as part of NYS' CONNECTIONS system. The FASP documents each child's permanency planning goal, as well as specific assessments of safety, risk, strengths, needs, and the service plan, which includes descriptions of the activities and services that will address the circumstances or conditions that need to change in order to achieve permanency, enhance well-being, and reduce risk. OCFS regulations require local districts to include, among others, a child's parents, guardians. OCFS monitors compliance as part of the Safety and Permanency Assessments case record review.

The initial FASP is required within seven days of a determination of a CPS report of abuse or maltreatment if the case will be opened for child welfare services, or within 30 days of a foster care placement, a court order, or receipt of an application for services, whichever is earliest. A comprehensive FASP is required within 90 days of the case opening and the first reassessment FASP within seven months of case opening and continuing reassessment FASPs every six months thereafter. Within these timeframes, all case plans must be approved by the case manager, the local district representative who has the authority to authorize service provision and determine eligibility. Plan amendments are required at points of significant change in the case and on-going progress notes are also required. The FASPs serve not only as the official source of documentation for the case, but also as tools to help support and guide caseworker and supervisory decision making.

## Data OCFS SPA Case Record Reviews

## All required FASPS present in the case record

Year	Performance	Percent
2015	148/150	99%

#### Agency involved parent/guardian in case planning activities

Year	Performance	Percent
2015	137/142	96%

OCFS provides data management reports to local districts and voluntary agencies so they can monitor when FASP are coming due, and overdue. It is felt that these reports aid supervisors in managing workloads. Here are reports available to districts through the Data Warehouse.

## FASP Reports

Reports about the processing and completion of Family Assessment and Service Plans

FASP Status Summary	Provides Local Districts with the number and percentage of Initial, Comprehensive, and Reassessment FASPs and their respective statuses for a specific month. This report is for Districts only.
FASPs Due	Provides Local Districts with the number and percentage of FASPs that are currently overdue or coming due within 60 days of the current date. This report is for Districts only.
FASPs Due Detail Organized by Worker	Provides a detailed list of FASPs that are currently overdue or coming due within 90 days of the current date. This report is organized by worker name. There are VA and LDSS versions of this report.
Overdue FASP Activities	Provides the number of submissions, rejections, and approvals for FASPs overdue on a specified date. Also includes the length of time the FASPs have been in the submittal-approval process. This report contains a link to a detailed list of submission, rejection, and approval activities for a selected FASP. There are VA and LDSS versions of this report.
FASPs Due Calendar	Provides a chronological list of FASPs in "Not Launched", "In Process," and "Pending" statuses that are due during a specified date range. There are VA and LDSS versions of this report.

## Item 21: Periodic Reviews

How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Please provide relevant quantitative/qualitative data or information that show a periodic review occurs as required for each child no less frequently than once every 6 months, either by a court or by administrative review.

## State Response:

New York State assesses Item 21 an area needing improvement as OCFS, while having a process in place, has noted through case record reviews that service plan reviews are not occurring as required. The data indicates that in 81percent of the cases, a service plan review was held. One barrier is that a meeting is taking place, but the third party reviewer is not present, therefore, it cannot be considered a service plan review.

NYS regulation requires periodic reviews of the family service plans for foster care cases and other out-of-home placement cases (i.e. when a child is directly placed by the court with a relative or other suitable person as a result of an abuse or neglect petition) and makes such reviews optional in non-placement cases. These administrative reviews, known as Service Plan Reviews (SPR), must be held no later than 90 days from the date the child was removed from the home. Subsequent SPRs must be held every six months thereafter. These reviews are conducted by a case conference that by regulation must include the case planner and a third party reviewer (a third party reviewer can be any administrator or other person not directly responsible for the case management or delivery of services to that case) and must allow for notification to and participation of the parents, guardians, any foster child over 10 years of age, the child's foster parents, and service providers, among others. Two weeks in advance of the conference, the parents, guardians, and other relevant parties must be given written notice of the date, time, and location and informing the parent(s) that they may be accompanied by a person(s) of their choice. A Permanency Hearing, described in Item 22, may in some instances, serve as an SPR. OCFS monitors compliance on the timely completion of service plan reviews through the Safety and Permanency Assessment case record review.

The SPR and its resulting recommendations must be documented and made available to all service plan review participants. The SPRs consider the previous service plan, progress made toward achieving goals and outcomes, past participation of family members, and any problems in service provision. Agreement is sought on any change to the plan, on the tasks and activities to take place during the upcoming service plan period, and on the anticipated completion dates for goals.

## Data

SPA Findings - A Service Plan Review Was Held For the Child

Year	Performance	Percent
2015	114/140	81%

## Item 22: Permanency Hearings

How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Please provide relevant quantitative/qualitative data or information that show a permanency hearing as required for each child in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter.

## State Response:

New York State assesses Item 22 a strength as OCFS has a well-functioning system statewide to ensure for each child a permanency hearing occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter. The data reveals that in 93 percent of the cases reviewed in 2015, a Permanency Hearing was held within the NYS prescribed guidelines. While we are not able to get 2015 data from the Office of Court Administration (OCA) (data cannot be pulled until sufficient time has passed in 2016), 2014 data indicates that in 85 percent of the cases, an initial permanency hearing was held and completed with nine months from the date the entry into out-of-home care on behalf of children who remained in out-of-home care for at least nine months. OCFS and OCA work closely on this measure, with each agency sharing data in order to promote timely permanency.

The passage of the Permanency Legislation in 2005 created a schedule for Permanency Hearings that exceeds the federal requirements.

Permanency Hearings apply to the following children:

- Children who have entered foster care as abused or neglected children (FCA Article 10);
- Children who have entered foster care through a voluntary placement agreement (SSL §384-a);
- Children in foster care who have been surrendered for adoption (SSL §383-c) and are completely legally free;
- Children who have been surrendered for adoption (SSL §384);
- Foster children determined by a court to be completely legally free for adoption, whether in foster care pursuant to FCA Articles 3 (juvenile delinquent), 7 (PINS), or 10 (abused/neglected), or by voluntary placement or surrender; and
- Children placed by the court directly with a relative or other suitable person as an outcome of a FCA Article 10 proceeding.

Each Permanency Hearing for children has a date certain established. Petitions for extension of placement and/or Permanency Hearings are no longer filed as a means to calendar the Permanency Hearing for the above population. The term date certain means a specific day set by the court when a Permanency Hearing will be held. The date certain for the initial Permanency Hearing is set at the first removal hearing, or the hearing under section 358-a of the SSL approving the voluntary placement agreement or surrender. The date for each subsequent Permanency Hearing is set at the completion of the previous Permanency Hearing. The actual timing of the date certain is based on the standards set forth in section 1089 of the FCA:

 Initial Permanency Hearing (Non-freed Child): Date of removal from home plus 60 days plus 6 months = no later than 8 months;

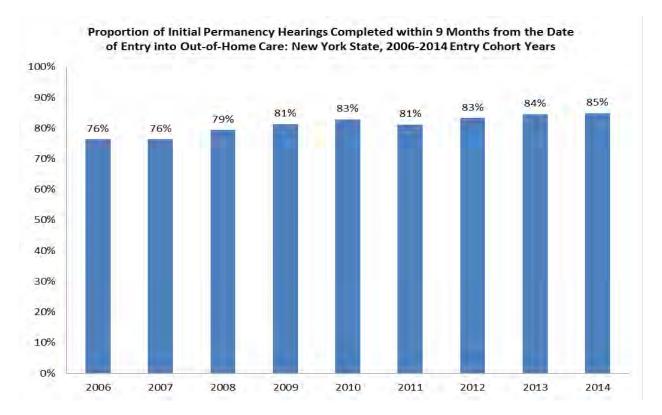
- Initial Permanency Hearing (Completely Freed Child): Immediately following an approval of a surrender or termination of parental rights disposition; or no later than 30 days after the court hearing completely freeing the child;
- Subsequent Permanency Hearings Freed and Non-freed Child: No later than six months following the preceding Permanency Hearing.

## Data

SPA Findings - Permanence	y Hearing Held Timely
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Year	Performance	Percent
2015	109/117	93%

OCA Child Welfare Court Metrics 2014\* (2015 data is not currently available)



\*This metric represents the proportion of initial permanency hearings held and completed within nine months from the date of entry into out-of-home care on behalf of children who remained in out-of-home care for least nine months. This timeliness metric computes the number of days from the date of entry into out-of-home care to the date of the completed initial permanency hearing for each unique child.

## Item 23: Termination of Parental Rights

How well is the case review system functioning statewide to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Please provide relevant quantitative/qualitative data or information showing that filing of TPR proceedings occurs in accordance with the law.

## State Response:

New York State assesses Item 23 an area needing improvement as OCFS has noted through case record reviews that the filing of petitions for the termination of parental rights are not occurring within the prescribed timeframes. In 54.5 percent of the cases reviewed in 2015, the petition to terminate the mother's parental rights was filed in a timely manner, and for fathers, timely petitions were filed in 61 percent of the cases. One underlying condition noted in 2015 during the case record reviews that were noted was the backlog in the county attorney's office in getting the petitions filed. Another factor that has been sited delay in the location and engagement of fathers. A training was developed specific to engaging and locating fathers, and it appears a continued focus is needed in this area.

NYS requires, except as described below, that a petition to terminate parental rights (TPR) must be filed when a child has been in foster care for 15 of the most recent 22 months, a court has determined the child to be an abandoned child; or a court has made a determination that the parent has committed murder of another child of the parent; committed voluntary manslaughter of another child of the parent; aided or abetted, attempted, conspired or solicited to commit such murder or voluntary manslaughter; or committed a felony assault that has resulted in serious bodily injury to the child or another child of the parent.

A TPR petition is not required when:

- The child is being cared for by a relative (although a TPR may be filed in such cases); or
- The family has not been provided, consistent with the time period in the case plan, such services necessary for the safe return of the child to the child's home, if reasonable efforts required to be made with respect to the child; or
- The district/agency has documented a compelling reason for determining that filing such a petition would not be in the best interests of the child.

OCFS has developed guidance for districts and agencies around what may constitute compelling reason for not filing a TPR. This list is not considered all inclusive. Compelling reasons may include:

- The child is 14 years old or older and does not want to be adopted;
- A family setting will not currently meet the child's needs because of the child's severe emotional, behavioral or psychiatric problems;
- At least one parent is actively being considered as a discharge resource for the child, and it is anticipated that such discharge is likely to occur within six months;
- The child is in placement with a sibling(s) and the sibling(s) is not being freed for adoption;
- The parent makes regular contact with the child and maintaining their relationship benefits the child;
- The child is in foster care for a child-related problem, at least in part, and there would be little or no benefit to the child in ending the child's relationship with the child's parent(s);

- The parent's death in imminent;
- There are insufficient legal grounds for TPR;
- The child's best/most likely permanency option is something other than adoption;
- The child was placed into foster care pursuant to Article 3 or Article 7 of the FCA and a review of the specific facts and circumstances of the child's placement demonstrate that the appropriate permanency goal for the child is either return to his or her parent or guardian, or discharge to APPLA;
- The child is a subject of a pending disposition under Article 10 of the FCA, (except where such child is already in the custody of the commissioner of social services as a result of a proceeding other than the pending Article 10 proceeding) and a review of the specific facts and circumstances of the child's placement demonstrates that the appropriate permanency goal for the child is discharge to his or her parent or guardian.

The guidance has also been placed in the CONNECTIONS system help feature. Existence of an exception must be determined on a case-by-case basis and the case specific determination documented in each periodic FASP that is part of the NYS statewide information system, CONNECTIONS. While the FASP is part of CONNECTIONS data related to exceptions and compelling reasons cannot be pulled from the FASP. Findings from the cases reviewed in 2015 listed the most common exception to filing a TPR was it was not in the best interest of the child, and the most common compelling reasons noted was that the parent was having regular contact with the child and maintain their relations benefitted the child; and the child was placed in foster care pursuant to Article 3 or 7 of the Family Court Act and a review of the specific facts and circumstances demonstrate that the appropriate PPG for the child is return home or discharge to independent living.

In relation to the above "compelling reasons," every case (i.e., child and family) must receive ongoing individualized assessments. The factors that might constitute compelling reason must be weighed along with other known child and family circumstances.

## Data

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	TPR Filed	TPR Filed	% Timely	TPR Not	Filing TPR	Total
	within 15	after 15	-	Filed	not	
	months	months			applicable	
Mother	12	10	54.5%	37	91	150
Father	11	7	61%	36	96	150

SPA Findings - Filing of Termination of Parental Rights

SPA Findings - When the filing was not completed was an exception/compelling reason noted:

	Performance	Percent
Mother	27/37	73%
Father	17/36	47%

SPA Findings - The exception/compelling reason was appropriate given the case circumstances

	Performance	Percent
Mother	26/27	96%
Father	14/17	82%

## Item 24: Notice of Hearings and Reviews to Caregivers

How well is the case review system functioning statewide to ensure that foster parents, preadoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

Please provide relevant quantitative/qualitative data or information that show foster parents, pre-adoptive parents, and relative caregivers of children in foster care (1) are receiving notification of any review or hearing held with respect to the child and (2) have a right to be heard in any review or hearing held with respect to the child.

## State Response:

New York State assesses Item 24 an area needing improvement. OCFS conducted a statewide survey of 3000 foster/adoptive parents of. At the time of the survey, there were 8,326 active foster homes. The survey was distributed to a random sample of 3,063 foster/adoptive homes that represented households from all six regions. OCFS received 500 responses which included participation from foster/adoptive parents from 53 counties and New York City.

Of the respondents, 51 percent identified as being certified via a local department of social services, while the remaining 49 percent approved through a voluntary agency to as foster parents. The majority, 68 percent are a two- adult parenting household, while 31 percent are single mothers and less than two percent are single fathers.

When asked how often they were notified about hearings, 89.2 percent stated they are always or sometimes notified ahead of time, with 71.2 percent of respondents indicating that they always or sometimes attend court hearings. Only 52.2 percent, however, feel engaged and involved in court hearings. The foster/adoptive parents surveyed noted that they are informed about decisions made in court 85.1 percent of the time.

In addition to the survey, focus groups with 27 foster/adoptive parents from 12 counties gleaned consistent responses to the survey. No specific data was obtained from the focus groups, but rather themes emerged that included varied experiences with regard to receiving notice of hearings. Some attendees reported that they go to all hearings and reviews, while others cited a challenge of scheduling and stated that they would be interested in attending but cannot due to conflict with their work hours.

NYS law requires that foster parents, pre-adoptive parents and relatives caring for a foster child be notified of each Permanency Hearing and that they have a right to be heard at the hearing. Chapter 327 of the Laws of 2007 amended statute because formerly there was only an "opportunity" to be heard. Fourteen days prior to the Permanency Hearing, foster parents, preadoptive parents and relatives caring for a child (among others) are provided with a Permanency Hearing Report (PHR) by the caseworker, which contains specific information regarding a child's well-being, including health, educational progress, and current placement; visitation plans; parent status and progress; services offered to the parent and any barriers to the delivery of appropriate services; and reasonable efforts made by the local district to effectuate the permanency plan. Additionally, a case consultation is required in conjunction with the development of the child's Permanency Hearing Report to seek input from those persons. Compliance with this requirement is monitored as part of the SPA case record review, and in 2015 foster parents were notified of the hearing and provided a copy of the Permanency Hearing Report in 85 percent (77/91) of the cases, with relatives being informed of the hearing and getting a copy of the Permanency Hearing Report in 50 percent (9/10) of the cases.

In the case of Person in Need of Supervision (PINS) and Juvenile Delinquents (JDs), notice is provided in the form of a petition and summons. The right to be heard applies equally to foster parents, pre-adoptive parents, and relatives caring for a foster child.

Currently, at the foster child's fact finding and dispositional hearing, there is no provision for notice and a right to be heard.

With regard to a Termination of Parental Rights (TPR) hearing, in addition to the child's parents and certain prescribed others, such other persons as the court may in its discretion prescribe, are sent notice. Once a termination order is issued, NYS law requires that notice is served on people who have been approved as adoptive parents for the child regarding the entry of the termination order and the fact that an adoption proceeding can be commenced. Furthermore, the court must hold a Permanency Hearing no later than 30 days after the child is freed, and the above noted notice and hearing rights for Permanency Hearings apply.

Foster parents, pre-adoptive parents, and relatives caring for the child are encouraged to participate as members of each Service Plan Review (SPR), conducted at 60 and 90 days of a child's removal (or placement in foster care for PINS and juvenile delinquency) and every six months thereafter. Caseworkers provide a written invitation, which can be system generated if the county chooses, or done manually. Letter of invitation are required to be sent two weeks in advance of the Service Plan Review. As part of the SPA case record review, OCFS monitors compliance with this item.

When asked about participation in service planning, 84 percent of foster/adoptive parents responded that they are always or sometimes asked for input regarding child's well-being as part of the service or permanency plan. Those who feel welcomed to attend service planning reviews always or sometimes are 85.1 percent. The percent of caregivers who feel engaged and involved in service plan reviews always or sometimes is 82.2 percent. Additionally, 82.5 percent responded that they are always or sometimes provided with a copy of the child's service plan.

Answer Options, Always	N	%
I am notified ahead of time of upcoming court dates.	307	69.0%
I attend court hearings.	211	47.8%
The judge asks for my input at the hearing.	92	21.3%
Overall, I feel very engaged and involved in court hearings.	106	24.5%
I am informed about court decisions affecting the child(ren) in my care.	284	64.1%
The caseworker asks for and incorporates my input regarding the child's well-being as part of the Service Plan or Permanency Plan.	273	61.3%
I feel welcomed to attend service planning meetings.	303	68.4%
Overall, I feel very engaged and involved in reviews.	240	54.2%
I am provided with a copy of the child's service plan.	286	65.0%

#### Please indicate how often over the past year you were involved in court hearings.

Answer Options, Sometimes	Ν	%
I am notified ahead of time of upcoming court dates.	90	20.2%
I attend court hearings.	103	23.4%
The judge asks for my input at the hearing.	105	24.3%
Overall, I feel very engaged and involved in court hearings.	120	27.7%
I am informed about court decisions affecting the child(ren) in my care.	93	21.0%
The caseworker asks for and incorporates my input regarding the child's well- being as part of the Service Plan or Permanency Plan.	101	22.7%
I feel welcomed to attend service planning meetings.	74	16.7%
Overall, I feel very engaged and involved in reviews.	124	28.0%
I am provided with a copy of the child's service plan.	77	17.5%

Answer Options, Rarely	Ν	%
I am notified ahead of time of upcoming court dates.	29	6.5%
I attend court hearings.	45	10.2%
The judge asks for my input at the hearing.	81	18.8%
Overall, I feel very engaged and involved in court hearings.	92	21.2%
I am informed about court decisions affecting the child(ren) in my care.	39	8.8%
The caseworker asks for and incorporates my input regarding the child's well- being as part of the Service Plan or Permanency Plan.	51	11.5%
I feel welcomed to attend service planning meetings.	38	8.6%
Overall, I feel very engaged and involved in reviews.	49	11.1%
I am provided with a copy of the child's service plan.	33	7.5%

Answer Options, Never	Ν	%
I am notified ahead of time of upcoming court dates.	19	4.3%
I attend court hearings.	82	18.6%
The judge asks for my input at the hearing.	154	35.6%
Overall, I feel very engaged and involved in court hearings.	115	26.6%
I am informed about court decisions affecting the child(ren) in my care.	27	6.1%
The caseworker asks for and incorporates my input regarding the child's well- being as part of the Service Plan or Permanency Plan.	20	4.5%
I feel welcomed to attend service planning meetings.	28	6.3%
Overall, I feel very engaged and involved in reviews.	30	6.8%
I am provided with a copy of the child's service plan.	44	10.0%

Answer Options, Total	Ν
I am notified ahead of time of upcoming court dates.	445
I attend court hearings.	441
The judge asks for my input at the hearing.	432
Overall, I feel very engaged and involved in court hearings.	433
I am informed about court decisions affecting the child(ren) in my care.	443
The caseworker asks for and incorporates my input regarding the child's well-	445
being as part of the Service Plan or Permanency Plan.	440
I feel welcomed to attend service planning meetings.	443
Overall, I feel very engaged and involved in reviews.	443
I am provided with a copy of the child's service plan.	440

## Data

SPA Findings - Hearing notice provided to foster adoptive parent along with a copy of the Permanency Hearing Report

Year	Performance	Percent
2015	77/91	85%

SPA Findings - Hearing notice provided to relative caring for child along with a copy of the Permanency Hearing Report

Year	Performance	Percent
2015	9/18	50%

## C. Quality Assurance System

## Item 25: Quality Assurance System

How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the CFSP are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

Please provide relevant quantitative/qualitative data or information showing that the specified quality assurance requirements are occurring statewide.

## State Response:

New York State assesses Item 25 as an area of needing improvement. The Quality Assurance (QA)/Continuance Quality Improvement system is currently functioning within New York State. However, there continues to be areas needing improvement.

OCFS participated in 2013 in a CQI assessment conducted by the federal Children's Bureau. While many areas of strength were noted, several areas for improvement were also identified. OCFS has worked over the last several years to enhance our CQI system to help us better assess our implementation of the Child Welfare Practice Model. OCFS's CQI system is aligned with the federal Information Memorandum issued in 2012. In NYS, our CQI system includes Foundational Requirements, Quality Data Collection, Case Record Review and Process, Feedback and Adjustment. The following summary details the ways in which New York State's CQI system is currently functioning:

# 1) The CQI system is operating in the jurisdictions where the services included in the CFSP are provided.

## Foundational Requirement

NY Social Services Law gives OCFS the authority to oversee and monitor the performance of local departments of social services and authorized voluntary agencies. OCFS does this through the distribution of consistent performance data for, the review of case records, fatalities, and complaints. This information is used to assess compliance with state and federal regulations, and case practice related to safety, permanency and well-being. It is also used to inform training and technical assistance needs, as well as to evaluate the effectiveness of implemented strategies. On the district and agency level, the feedback provided is used to determine underlying conditions for their performance and in the development of corrective action plans, if warranted, which can include the implementation of new or enhanced strategies.

Monitoring of districts and agencies is done through the Regional Offices with support from home office. Regional and Home Office staff review performance data, complaints, and fatalities for the purpose of analyzing trends and identifying areas of strength and areas needing improvement. Additionally, case record reviews are performed to review compliance with regulations and to promote quality case work practice. A description of each of the reviews is included at the end of this section. In 2015, the following case reviews were conducted:

County LDSS	Fatality Reviews	OMA Reviews	FAR	SPA	CFSR OSRI	PRT
Albany	8					
Bronx	30					
Broome	5					12
Cattaraugus	1					12
Cayuga	2	14	6			
Chautauqua				20		
Chemung	5				15	
Chenango		15				
Clinton	2				15	
Cortland	1					
Columbia	1					
Delaware	3					
Dutchess	3					12
Erie	10			30		10
Franklin	1					
Fulton	2					14
Greene	1					
Jefferson	3					
Kings	33					
Livingston	1					
Madison	1			10		
Monroe	20	30				
Montgomery	1					
Nassau	4					
New York	18					
Niagara	3	20		20		
NYC (ACS)					30	
NYC Regional Office	1					
Office of Special Investigations	1					
Oneida	3			30		
Onondaga	8					
Ontario	3					
Orange	7	20	10			
Oswego	3					
Putnam	1					
Queens	30					
Rensselaer	6					
Richmond	5					

## 2015 Number of Cases Reviewed, by Type of Case Review and Jurisdiction

Child and Family Services Reviews Statewide Assessment Instrument

County LDSS	Fatality Reviews	OMA Reviews	FAR	SPA	CFSR OSRI	PRT
Rockland	4	14	6	10		
Saratoga	1	20				
Schenectady	10					15
Schoharie		15				
Seneca						12
St. Lawrence	2	14	6			
Steuben	1	20				12
Suffolk	21					
Sullivan	1					
Tompkins		15				
Ulster	3	14	6		15	
Warren		15				
Washington	1	20				
Wayne	5					
Westchester	14			30		
Wyoming	1					

Additionally, all state staff who participate in case record reviews or Permanency Roundtables are trained on each of the instruments or components of the process.

Onsite Training is provided to state, local and voluntary agency staff related on the use of data. The chart below shows the training focus and the number of staff who participated from each jurisdiction; attendees may be counted more than once if they attended multiple trainings.

Overview CFSR, Performance & CQI/Pivot Tables	Regional Office Staff	LDSS Staff	Home Office Staff
Regional Directors of Services Meetings	5	9	5
Home Office Manager & Staff Meetings	6	0	45
Multi-Systems	17	25	16
Albany	5	7	2
Allegany	3	7	1
Cattaraugus	3	4	1
Chautauqua	3	0	1
Chemung	11	8	1
Columbia	1	6	3
Erie	8	8	2
Genesee	3	3	1
Livingston	5	4	1
Monroe	8	0	0
Nassau	0	0	2
Niagara	3	5	1

## Total Participants in 2015 On-Site Data Training: By Topic and Audience

Overview CFSR, Performance & CQI/Pivot Tables	Regional Office Staff	LDSS Staff	Home Office Staff
Onondaga	9	3	2
Orange	2	3	3
Orleans	3	2	1
Rockland	3	6	1
Seneca	3	5	1
St Lawrence	1	5	0
Steuben	5	6	1
Suffolk	0	0	2
Wyoming	3	1	1
Multi-Systems	7	16	10
RO Staff	39	0	7
VA Staff	3	0	0

FCDA Overview	Regional Office Staff	LDSS Staff	Home Office Staff
ACS	3	7	1
OCFS Home Office	0	0	12

In-Depth Instruction	Regional Office Staff	LDSS Staff	Home Office Staff
	18		1
Total	180	140	125

## Quality Data Collection

NYS has a robust data collection system known as CONNECTIONS. Information from the CONNECTIONS system can used to monitor compliance with federal and state regulations. In additional, OCFS collects data through case records reviews, fatality reviews, and complaints. This data is made available to districts and agencies.

In order to improve on data quality issues OCFS has worked with districts on improvements by sending various child specific lists to them when data reports indicated there is a high percent of information missing such as race/ethnicity, or improperly coded elements.

OCFS is continuing to work on our system of data collection related to training of staff. Local districts and agencies are encouraged to enter all new staff into the training system (HSLC) in order to track and monitor compliance with required training.

## Case Review Process

OCFS has written guidance documents for case record reviews and PRTs. The Case Record Review process provides basic expectations for uniformity in the implementation of those

activities through training and written procedures. The number of cases reviewed is determined by the size of the county (10 cases for small counties, 20 cases for medium counties and 30 for large counties).

## Analysis and Dissemination of Quality Data

NYS provides access to a multitude of pre-defined reports via the OCFS Data Warehouse and through participation in Chapin Hall Center for Children's Multi-State Foster Care Data Archive database. In addition to the availability of core pre-defined, there is an ability to create ad-hoc data reports. Electronic access to these data, including the ability to create reports, is available to external partners (LDSS, voluntary agencies). Additionally, key data reports are updated weekly and are accessible through the "Commissioner's Dashboard". This Dashboard contains a full range of management reports, including child welfare, child care, and public assistance – related data.

#### Feedback to Stakeholders

New York State has a variety of opportunities to develop feedback, including through the Regional Office (RO) quarterly meetings with each LDSS and VA, court collaboratives, and through the LDSS plan-development process.

As noted above, data and case review results are used by the RO and LDSS to inform planning, monitoring, and adjustment at the local level with the primary focus on practice. One primary method of feedback and adjustment is through the development and implementation of a local Improvement Plan. In 2016, OCFS began utilizing a new Implementation Plan format which consolidates and streamlines the previously utilized Corrective Action Plan (CAP) format. The previous CAP template was used with each separate review type, and resulted in a jurisdiction having multiple CAPs at one time. This created a barrier to the consistent documentation of the implementation of best practices. This new Improvement Plan also requires the documentation of underlying factors that contributed to findings, agreed upon outcomes being sought, and progress updates. Below are the headings included in the Improvement Plan template:

- 1. Topic/Finding
- 2. Statute/Regulation/Policy reference if applicable
- 3. How and when was topic/finding identified? (Case review/VAR, Justice Center-related, fatality review, data, discussion, etc.)
- 4. What underlying factors are contributing to the finding?
- 5. Given the underlying factors, what strategies/actions will be implemented? (Include what is to be done, by who and timeframes)
- 6. How will implementation be monitored and measured?
- 7. Status update and completion date (at least quarterly until complete).

## 2). Standards to evaluate the quality of services

NYS CQI system has standards in place to evaluate the quality of services, including standards to promote that children in foster care are provided with quality services that protect their health and well-being. Within the Safety and Permanency Assessment (SPA) case record reviews questions are included to assess the districts performance on the provision of services to the child and their family. The SPA includes the following questions related to service provision:

- 1. Does the care record indicate that the parents/discharge resource are being provided with the services necessary to achieve permanency for the child?
- 2. Does the care record indicate that the foster parents are being provided with the services necessary to achieve permanency for the child?

- 3. Does the care record indicate that the child is being provided with the services necessary to achieve permanency?
- 4. Additionally, questions are included to assess the safety of the child:
- 5. Do any safety issues exist for this child?
- 6. Does the case record document that the child is safe in relationship to foster care setting?

In addition, through the use of the OSRI, similar questions are asked. Data for these SPA and OSRI related questions can be found under Safety Outcome 2 and Well-Being Outcome 1.

NYS also has standards related to monthly caseworker visits to ensure that children in foster care are visited and monitored on a monthly basis. Through the federal Every Child Every Month Program, the expectation is 90 percent compliance with month caseworker visits. In FFY 2015, (10/1/14 - 9/30/15) (data as 11/28/15)), NYS achieved 95.5 percent compliance with this standard.

#### 3). Identifies strengths and needs of the service delivery system

NYS's CQI system identifies both the strengths and needs of the service delivery system through the review of each counties Child and Family Services Plan. All NYS counties are required to submit a single comprehensive five –year county plan, with annual updates that includes the following program areas: child protective services, child preventive services, foster care, adoption, youth development, domestic violence, child care, detention, runaway/homeless youth, persons in need of supervision, and adult protective services. The plan narrative is built upon the following tenants of CQI:

- 1. Assessment of Strengths and Needs:
  - a. Identification of strengths/needs and
  - b. Understanding of underlying factors that impact performance;
- 2. Planning for and Implementation of Strategies:
  - a. Selecting and/or designing a solution and
  - b. Implementation of the solution as planned; and
- 3. Testing and understanding the effectiveness of the solution.

#### 4) Provides Relevant Reports

NYS's CQI system makes available to local districts and voluntary agencies reports through the Data Warehouse as well as those distributed on monthly, quarterly, and semi-annually. Data from case reviews are provided to the district and agency detailing the findings, and noting strengths and areas needing improvement. Aggregate data from case record reviews are shared with Senior Managers as we continue to assess the overall state training and technical assistance plan, and where additional funding may be needed to provide additional services.

CFSR performance data is also provided to districts for their use with staff and stakeholders (Family Court, Attorneys for Children and Attorneys for Parents, and service providers). OCFS also shares state aggregate data with state stakeholders such as advocacy groups, Casey Family Programs, Citizen Review Panels and our training partners.

#### 5) Evaluates implemented program improvement measures

This is one area in which OCFS needs to further develop. While OCFS has begun the implementation of a Practice Model, measuring its effectiveness in improving the outcomes of safety, permanency and well-being is just starting to take root. During 2015, OCFS realized that we have encouraged districts to implement key strategies aimed at improving the practices as outlined in our Practice Model. Developing additional tools to assess the impact of those strategies is still needed.

Additionally, we have started to see some differences in the skill level and understanding of the role of Regional Office staff in case record reviews. During 2016, OCFS will look to enhance the training of case reviewers in order to promote consistency among case record reviews.

# D. Staff and Provider Training

# Item 26: Initial Staff Training

How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the CFSP that includes the basic skills and knowledge required for their positions?

Staff, for purposes of assessing this item, includes all contracted/non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Please provide relevant quantitative/qualitative data or information that show:

- staff receive training pursuant to the established curriculum and time frames for the provision of initial training; and
- how well the initial training addresses basic skills and knowledge needed by staff to carry out their duties.

# State Response:

NYS assesses Item 26 as an area needing improvement. NYS mandates that both Child Protective Services caseworkers and their supervisors complete the NYS approved program and meet the annual in-service training requirements. However, NYS does not have the same requirement for all other designated child welfare staff. This is an area that OCFS is currently looking to enhance.

#### Training of local district Child Protective Services Caseworkers

New York State Social Services Law Article 6 Title 6 Sec 421 (5b) includes the following language specific to initial training for Local Departments of Social Services staff within Child Protective Services (CPS). Child Protective Services are defined as both investigative and differential response, which in NYS is called Family Assessment Response.

(b) promulgate regulations setting forth training requirements which shall specify, among other things, that all persons hired by a child protective service on or after April first, nineteen hundred eighty-six shall have satisfactorily completed a course approved by the department within the first three months of employment, in the fundamentals of child protection. Such course shall include at least basic training in the principles and techniques of investigations, including relationships with other investigative bodies, legal issues in child protection, and methods of remediation, diagnosis, treatment and prevention. Such regulations shall also specify that all person employed by a child protective services on or after December first, two thousand six shall satisfactorily complete six hour of annual in service training shall include, but is not limited to,, but is not limited to, review of the protocols for identification and investigation of child abuse and maltreatment and developments in legal, treatment and prevention issues in child protection, and review and analysis of field experiences of child protective services workers.

The cornerstone of OCFS' child welfare training program is The Child Welfare/Child Protective Services Outcome Based Training (OBT) System. This comprehensive training is designed to provide CPS caseworkers and supervisors with the knowledge and skill set needed to achieve safety, permanency and well-being for the families they serve. The training includes skills-based simulations, role playing, and on-the-job training. The required training has two components to be completed within 90 days of hire, the first is "Common Core for New Caseworkers" or "Core Essentials Skills for Experienced Caseworkers". The second component is "Child Protective Response Training". Each course is described as follows:

- "Child Welfare/Child Protective Services Common Core for New Caseworkers" is a 17 day training spread over eight weeks. This course provides an overview of the Child Welfare Practice Model, foundation information about the child protective structure and process including topics like assessing safety and risk, making safety decisions, legal process within child welfare, interviewing and engagement skills as well as other skills practice components.
- 2. "Core Essentials Skills for Experienced Caseworkers" is an eight day training designed for workers who come to the role of child protective services with previous child welfare experience. This course also contains topics to support New York State's Child Welfare Practice Model with more focus on the specific process of child protective services, and builds on the worker's previous experience with interviewing and engagement skills. Staff Development Coordinators review the previous experience of the worker to determine which foundational course best matches each new hire.
- 3. Regardless of which foundational course Child Protective Services Workers attend, once completed, staff are eligible to attend the "Child Protective Services Response Training". This eight day training is the core training required by law for CPS Investigative and Family Assessment Response (FAR) staff. This course builds on safety and risk and critical thinking skills acquired via the foundation courses and applying them to CPS. It focuses on the principles and techniques of investigation, determination of allegations, relationships with other investigative bodies, and legal issues.
- 4. In 2015, New York City ACS invested \$10 million to establish the Workforce Institute. The goal of the Institute is to improve the training and development of its own CPS casework staff as well as their contracted foster care agencies. In partnership with an advisory committee, ACS developed their competency model for casework roles (CPS, Preventive, Foster Care, etc.). The model includes Phases I and II, both required to be completed within 90 days of hire. As a result of this redesign, the Workforce Institute successfully trained all new hires within the mandated timeframe.

OCFS developed and maintains, through contractual agreement with the City University of New York School of Professional Studies, a Learning Content Management System that functions as the pre-registration, attendance, and evaluation tracking system called Human Services Learning Center (HSLC) for training offered by OCFS. HSLC replaced a previous system called STARS. HSLC allows users to search a course catalog, register for classes, complete evaluations, build training plans, and track their continuing education. Additionally, comprehensive training plans can be designed and tracked for each user. The system also is used as the front door for accessing all computer-based asynchronous training courses, and acts as a repository for training related materials to be accessed by trainees following completion of a course. Organizations using the system include state agencies, local districts, not-for-profit agencies, day care providers, individuals who are mandated reporters, foster and

adoptive parents. Use of the system is necessary to take any training classes offered by OCFS and it may be used to manage training data for other classes. Local district Staff Development Coordinators track training attendance for sessions that are not courses funded by OCFS and therefore not captured within HSLC. For example, local district might send staff to a training session sponsored by a local mental health provider. Coordinators are able to then manually add this information to their employees' training record within HSLC.

Data collected in HSLC by OCFS is accessed through a front end system called VISTA (Virtual Information and Statistics Tracking Application). This application was developed as a reporting system that OCFS staff use to monitor progress for each of its training contracts, capture data on trainees, course, and classes that align with the identified deliverables listed with each annual training contract. A variety of training related data is entered into HSLC by training providers under contract with OCFS, and OCFS then retrieves that data through VISTA. The numerical data that follows was captured through VISTA:

Training Course	Purpose	Target Population	# Staff Required to Attend	#Trained	Rate of Compliance
Upstate	Required as	New	405	343	85%
Child Protective	pre-requisite	Caseworkers			
Services Common Core	to CPSRT	serving as			
for New Workers		CPS or CPS			
*Required as		on-call			
prerequisite for CPSRT					
Statewide	Made	Experienced	N/A	153	N/A
Core Essential Skills for	available as	caseworkers			
Experienced	compliment	hired pre-			
Caseworkers	product to	2003, staff			
*Can be used to satisfy	"Common	from voluntary			
prerequisite for CPSRT	Core" for non-	agencies and			
	mandated	non- CPS			
	audience	LDSS			
Upstate	Required for	New	496	291	59%
Child Protective	CPS and CPS	Caseworkers			
Response Training	on-call LDSS	serving as			
(CPSRT)	caseworkers	CPS or CPS			
*Required within 90		on-call			
days per regulation					

Training Course	Purpose	Target	# Staff Required	#Trained	Rate of
		Population	to Attend	within 90 days	Compliance
NYC	Required	New	209	209	100%
Child Protective Practice	for CPS	Caseworker			
Core – Phase I	and CPS	s serving as			
*Required within 90	on-call	CPS or CPS			
days per regulation		on-call			
NYC Child Protective	Required	New	209	209	100%
Practice Core – Phase II	for CPS	Caseworker			
*Required within 90	and CPS	s serving as			
days per regulation	on-call	CPS or CPS			
		on-call			

Throughout 2015, counties experienced a high rate of turnover within their child protective units, resulting in higher demand for training for new CPS caseworkers. In an effort to better meet the demand for more training within upstate counties and to improve the compliance rate of meeting the 90 day timeframe, OCFS piloted a new format to the OBT system titled "CPS Foundations Parts 1 and 2." in September 2015.

In essence, the Common Core curriculum was divided into two parts, with the foundational concepts needed for working with families and children included Part 1. Upon completion of Part 1, caseworkers return within two weeks for the CPRT training. After three to six months of field experience CPS caseworkers return to the classroom to attend "Part 2" which builds on their developing competencies.

This method allows workers to meet the 90-day CPS training mandate, decreases the front loading of training, and is responsive to the feedback from focus groups that the learning process for a new CPS worker takes the full first year of their employment. The focus group participants highlighted the value of staff staggering the timeframes of learning in the classroom with field experience to improve the transfer of learning. The data from the pilot sessions is as follows:

Training Course	Purpose	Target Population	# Staff Required to Attend	#Trained within 90 days	Rate of Compliance
Upstate Child Protective Services Foundations <i>Part 1</i> *Required within 90 days per regulation	Required as pre- requisite to CPSRT	New Caseworkers serving as CPS or CPS on-call	202	152	75%
Upstate Child Protective Response Training (CPSRT) *Required within 90 days per regulation	Required for CPS and CPS on-call LDSS caseworkers	New Caseworkers serving as CPS or CPS on-call	152	152	100%
Upstate Child Protective Services Foundations <i>Part 2</i>	Required as follow-up from Part 1 and CPRT <u>within 6 months</u>	New Caseworkers serving as CPS or CPS on-call	152	*delivery to begin 2016	*delivery to begin 2016

The OCFS Bureau of Training and Development (BTD) measures project and course effectiveness to ensure resources are appropriately allocated. The evaluation is conducted under the framework of the Kirkpatrick 4-level model, known as "The Four Levels of Learning Evaluation".

#### Level 1 – Reaction

This level of evaluation measures how the participants reacted to the training -i.e., what they thought about the quality of the training program. This is the most basic level of evaluation; it measures participant satisfaction with the training.

#### Level 2 – Learning

The evaluation of learning measures the extent to which participants acquired knowledge or improved skills as a result of the training program.

Level 3 – Behavior

The evaluation of behavior examines the extent to which improvement in job performance occurred because the participant attended the training program. This level of evaluation is designed to measure transfer of learning to the workplace.

Level 4 – Results The fourth level of evaluation assesses the organizational outcomes that occurred because of the training program.

The training program outlined above is evaluated using two of the four levels: (1) Reaction, and (2) Learning; Level 1 using the OCFS Participant Reaction Form and at Level 2 by a Pre-/Post-Test of trainee knowledge. Results are reported by our training partners quarterly and summarized annually.

#### Factors Affecting Performance:

The Office of Children and Family Services 2015 Training Plan included \$32 million dollars to support all Child Welfare related training, including the implementation of the mandated annual CPS in-service and supervisory training.

Through online courses and web-based interfacing, OCFS has expanded training opportunities to staff. Thereby reducing travel costs to attend training, reducing the time staff need to be out of the office for training, reduced delivery costs, and providing programs that effectively provide knowledge to trainees. Continued use of a variety of distance learning technologies facilitates participation in training that would otherwise be denied. The use of iLinc technologies, web based training applications, and teleconferences enable staff to remain at their worksites, thus reducing travel expenses and time away from family.

The current New York State Statute requires only that Child Protective Services staff attend a training course approved by OCFS within 90 days of hire. This statute does not include language that would bring New York State into compliance with the federal standard to include the above mentioned case management staff. Because of the increase in the number of CPS staff hired throughout NYS and the flat resources available to provide the initial training for Child Welfare caseworkers, the current Outcome Based Training Model's structure and inflexibility is unable to meet demand. Until staff are trained, they do not carry a caseload, they shadow other trained caseworkers.

OCFS has undertaken strategies to improve compliance with the federal standard and to assess other ways in which the training program should improve. A steering committee of 25 people representing local districts and OCFS staff was formed to explore revising the organization and structure of the outcome based training programs. The goals of this group include developing a competency model that all caseworker training is developed against, which will allow for improved evaluation of caseworker competence, and can be easily understood by all organizations to guide their staff development plans. The Steering committee is using that model as a basis to redesign the Outcome Based Training Model to be more flexible and nimble, more behavioral based and able to better meet the growing number of staff who work across the Child Welfare spectrum of programs. This group is also devising strategies to expand the capacity of the training program to improve the rate of compliance to include staff serving in all case manager roles. It is anticipated that the outcome of the efforts of this Steering Committee will begin to roll out in the second quarter of 2017, and be fully implemented within the following 12-18 months.

# Item 27: Ongoing Staff Training

How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

Staff, for purposes of assessing this item, includes all contracted/non-contracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Staff, for purposes of assessing this item, also include direct supervisors of all contracted/noncontracted staff who have case management responsibilities in the areas of child protection services, family preservation and support services, foster care services, adoption services, and independent living services pursuant to the state's CFSP.

Please provide relevant quantitative/qualitative data or information that show:

- that staff receive training pursuant to the established annual/bi-annual hour/continuing education requirement and time frames for the provision of ongoing training; and
- how well the ongoing training addresses skills and knowledge needed by staff to carry out their duties with regard to the services included in the CFSP.

# State Response:

NYS assesses Item 27 as an area needing improvement. NYS mandates on-going training for CPS staff. Both CPS caseworkers and CPS supervisors are required to satisfactorily complete the NYS approved program and meet the annual in-service training requirements. However, NYS does not have the same requirement for all child welfare staff.

New York State Social Services Law Article 6 Title 6 Sec 421 (5b) includes the following language specific to training for Local Departments of Social Services staff within Child Protective Services (CPS).

(b) Such regulations shall also specify that all persons employed by a child protective service after December first, two thousand on or six shall satisfactorily complete six hours of annual In-service training, beginning in their second year of employment. Such annual in service training shall include, but is not limited review for identification and investigation to. of the protocols of child abuse and maltreatment, any developments in legal, treatment and prevention issues in child protection, and review and analysis of field experiences of child protective services workers.

In 2015, OCFS offered 394 different courses, which were attended by 19,483 local district and voluntary agency staff (8,542 and 10,941 respectively). In addition, ACS provided 16 mandatory in-service training courses, with 4,284 trainees attending. Many of these courses meet the mandatory six hour annual requirement for CPS staff as they provide information that helps in increase their knowledge and skill set.. OCFS does not however, track that CPS staff have met the annual requirement, this is done at the local level.

OCFS has many other trainings and programs to support preventive and foster care workers but none of these are mandated by law. Each LDSS chooses an appropriate staff development path for their workers based on their specific role or work assignment. These paths do not need to be approved by OCFS. Some smaller counties cross train their workers to meet multiple needs while other, larger counties focus more on specialty areas. The OCFS supported system provides the access and tracking to support the necessary local decision making regarding the training needs of staff. OCFS supports these on-going training projects specifically designed to meet individualized local district performance improvement initiatives. OCFS funded training resources are used to provide on-site training and/or consultant services and technical assistance. Examples of the training and technical assistance provided includes, but is not limited,

- Child Welfare Case Documentation
- Child Welfare Eligibility Training
- Foster / Adoptive Parent Training
- Targeted Training To Support LDSS Permanency Planning
- Forensic Interviewing Best Practices
- Sexual Abuse Dynamics and Intervention
- Interviewing Children: A Skills Clinic
- Family Assessment and Response (FAR) Training
- Assessing Safety and Risk in FAR
- Domestic Violence Training for Child Welfare Workers
- Safetyville: Personal Safety Skills for Child Welfare Workers
- Engaging Fathers
- Psychotropic Medications
- Working with Alcohol and Substance Affected Families
- Family Meetings and Coached Family Visits

In addition to providing training for local social services district and voluntary agency staff, OCFS provides training, consultation, and technical assistance support for supervisors and administrators to build and sustain implementation of New York State's Child Welfare Practice Model.

OCFS works directly with New York's Council on Family and Child Care Agencies (COFCCA) to assess the training needs of caseworkers in voluntary agencies statewide through formal written needs assessments. As a result, a competency based training on case planning is provided to downstate voluntary agency caseworkers by COFCCA. In 2015, COFFCA provided 43 training sessions, in which 874 voluntary agency staff attended. The COFCCA training consortium of voluntary agencies also assesses, develops and shares training resources. COFCCA provides training to build the capacity of foster care and preventive agency child welfare caseworkers to assume case management responsibilities. OCFS does not monitor this training.

There is also initial training required for local district Child Protective Services Supervisors. They are required to attend the course "Supervising CPS" following their completion of a new initial supervisory course, Supervising KEYS. Local district child welfare supervisors and administrators are provided the opportunity to gain and build their supervisory skills through a multi-component training, skill clinics, coaching, and consultation system to implement the "Keys to Excellence in Your Supervision (KEYS)" model of supervision. This program focuses on the needs of new supervisors and the competencies they most need within the first six months of

assuming a supervisory position. Transitioning from worker to supervisor, the process of supervision, and case consultation are some topics included in the program. In addition, "KEYS" provides new supervisors with the knowledge and skills necessary to effectively support, develop, and supervise child-centered, family-based, and strengths-based child welfare practice. In 2015, 93 trainees from upstate counties completed "Supervising KEYS" and 45 completed Supervising CPS. Of the 45, 27 had also taken "Supervising KEYS." OCFS does not have data that indicates the number of supervisors. In NYC, ACS had 63 trainees complete their Supervisory Common Core, an 11 day program they offered five times in 2015.

Focus groups were conducted with 14 caseworkers from each of the program focus areas (CPS, FAR, Prevention, Foster Care, and Adoption), 14 supervisors of the participating caseworkers, and 5 Directors of Services from five upstate counties. In addition, six focus groups were held, one in each region that included 75 voluntary agency staff from 29 agencies statewide to collect input about current training design and effectiveness and to identify gaps that could improve. Focus group participants agreed that the amount of training available within the current structure is abundant and there are no barriers to meeting the requirement of their staff attending six hours of annual training.

OCFS developed and maintains, through contractual agreement with the City University of New York School of Professional Studies, a Learning Content Management System that functions as the pre-registration, attendance, and evaluation tracking system for training offered by OCFS Named the Human Services Learning Center (HSLC), which replaced a previous system called STARS, it allows users to search a Course Catalog, register for classes, complete evaluations, building training plans, and track their continuing education. Additionally, comprehensive training plans can be designed and tracked for each user. The system also is used as the front door for accessing all computer-based asynchronous training courses, and acts as a repository for training related materials to be accessed by trainees following completion of a course. Organizations using the system include state agencies, local districts, not-for-profit agencies, day care providers, individuals who are mandated reporters, foster and adoptive parents.

Data collected in HSLC by OCFS is accessed through a front end system called VISTA (Virtual Information and Statistics Tracking Application). This application was developed as a reporting system that OCFS staff use to monitor progress for each of its training contracts, capture data on trainees, course, and classes that align with the defined parameters of each training contract. A variety of training related data is entered into HSLC by training providers under contract with OCFS, and OCFS then retrieves that data through VISTA. The numerical data in this report was captured through VISTA. Staff Development Coordinators designated at each local district track the compliance of staff with the mandatory six hour in-service requirement.

#### **Factors Affecting Performance**

Unlike the attendance for the initial training required only of Child Protective Services staff, staff in voluntary agencies accounted for 56 percent of all trainees in the on-going optional courses in 2015. OCFS does not have a way to determine the number of non-CPS staff hired by districts and voluntary agencies, and there is no requirement for on-going training for non-CPS staff.

Many challenges have been captured through focused groups and steering committees. OCFS also has a mechanism to collected feedback from the Staff Development Coordinators at an annual meeting. The following is a subset of the challenges identified from these sources:

- Return on investment; does the time spent in training equate to prepared worker.
- Create a training menu that allows staff development path versus a prescriptive path.

- Improve critical thinking especially in regards to the assessment and the multiple decisions in Child Welfare.
- Create a more nimble and inclusive training system. Be sensitive to differing county size and how this relates to training needs
- Create life-long learners. Be conscious of adult learning and the best way to develop skills and values.
- Assign more responsibility to the Counties and Agencies for training to provide support and coaching essential to the transfer of learning. Provide more structure for on-the-job training.

When asked for ideas about topics for on-going training for caseworkers, the groups agreed on the following:

- Relatives as resources through life of case
- Prioritizing, organizing, time management
- Effective and efficient documentation
- Quickly assessing the home environment
- Forensic interviewing expand the opportunity
- Self-Care and Secondary Traumatic Stress
- Closing the case when it should happen, how to do it in a positive way
- Legal training specific to role (CPS vs. Foster Care)
- Cross training for different roles would help to understand different pieces within the whole system and how they fit together
- Mental health issues recognizing and engaging
- Working with caregivers who are developmentally delayed

OCFS has conducted an environmental scan for examples of statewide child welfare training models. A team visited with the training provider for New Jersey to explore the ways in which their training design might meet the needs in New York. Key to the design is the use of a centralized training center that includes practice simulation laboratories. OCFS is exploring the viability of adjusting the current training structure to move towards a more centralized framework and system of training delivery. One primary concept for a centralized training structure would be to re-organize content into foundational training topics that better reflect implementation of New York State's Child Welfare Practice Model. Workers would then be expected to attend training focused on separate "specialty" areas that build on the common foundation.

It is also important to recognize as a county-run, state administered system much of the staff development coordination comes from each county's appointed staff development coordinator. It is the responsibility of each of the staff developers to coordinate and manage the staff in their own district's training path. When resources are not available at the state level, counties acquire and develop training to meet their needs. It is an expectation of the state that these trainings be entered into the HSLC system, however not required. OCFS is working with its training partners and through the work of the training committee described in Item 26 to review monitoring and evaluation efforts as part of any redesign planning.

The Steering Committee has identified the areas for development specific to a functional role (CPS, Adoption, Foster Care, Preventive) as well as specialty areas for further development that include, but are not limited to mental health, substance abuse, domestic violence, developmental disabilities, and child sexual abuse. OCFS will use the information generated by

the Steering Committee to further improve upon a robust course catalog of both initial and ongoing training opportunities. The training center will also be used by OCFS staff in improving their knowledge and skill sets related to their oversight and monitoring role.

# Item 28: Foster and Adoptive Parent Training

How well is the staff and provider training system functioning to ensure that training is occurring statewide 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?

Please provide relevant quantitative/qualitative data or information with respect to the above-referenced current and prospective caregivers and staff of state licensed or approved facilities, that care for children receiving foster care or adoption assistance under title IV-E, that show:

- that they receive training pursuant to the established annual/bi-annual hourly/continuing education requirement and time frames for the provision of initial and ongoing training.
- how well the initial and ongoing training addresses the skills and knowledge base needed to carry out their duties with regard to foster and adopted children.

# State Response:

New York State assesses Item 28 an areas of strength as ample training is provided to prospective foster and adoptive parents, and staff of state licensed or approved facilities. A statewide survey was conducted of 500 foster parents to garner information about their experiences with the current training system. At the time of the survey, there were 8,326 active foster homes that had a child residing in their home. The survey was distributed to a random sample of foster/adoptive homes that represented households from all six regions. The 500 responses included participation from 53 counties and New York City. Not every foster parent answered every question.

When asked about the quality of the initial training received, of the 460 respondents, 86 percent (395) answered that they would rate the training as Excellent or Good, 11 percent (53) rated as "fair" and three percent (12) rate as "poor". More than half of the respondents indicated that they were trained by their Local Department of Social Services (53.6 percent) while the remainder (46.4 percent) by a private agency. The survey included questions about the outcome or effectiveness of current performance of the training structure. Respondents were asked about their knowledge related to specific topics included in the training system.

In addition, two focus groups were conducted with foster parents from across the State. In total, 27 foster parents participated in the groups, representing twelve counties. Foster parents from the focus groups most commonly identified topics they need training about were Reactive Attachment Disorder (RAD) and teen-specific topics and behaviors. These coincide with the responses from the survey. Other topics that were identified as training needs included: grief, disappointment and loss; medical diagnoses; Attention Deficit Hyperactivity Disorder (ADHD); Traumatic Brain Injury (TBI); and Posttraumatic Stress Disorder (PTSD). As indicated by data below for on-going training, OCFS provides ample resources for training of special topics as they are identified by foster parents.

To gage the perception of residential child care staff in state licensed facilities who work directly with children, focus groups were held with residential child care workers around the state to discuss initial training, ongoing training service availability and the individualization of services at each agency. In total, six focus groups were conducted; one in each Region of the State. The six groups included a total of 75 child care workers representing 29 agencies statewide. In addition to the required training, 34 staff noted that they received additional trainings when they first began employment at their agency. Some of the most commonly reported training on sexual orientation and gender identity issues and agency specific trainings such as worker roles, policy and procedures and documenting progress notes. Participants in the focus groups reported one to two weeks of classroom training when hired at the agency. Additionally, almost all staff reported on-the-job training or shadowing time prior to working on their own with the youth, ranging from three days to 30 days. Focus group participants reported that they gain of a lot experiences and knowledge from on-the-job trainings that help to prepare them for their role.

#### **Upstate Training Requirements**

Authorized agencies must provide training to each certified or approved foster parent in a training program approved by OCFS which will prepare foster parents to meet the needs of children in their care so that the best interests of the children placed by the certifying or approving agency will be met. [(443.2 (e)]

The following applies to *training requirements for foster parents who take foster children assessed to have special/exceptional needs*: foster parents must have demonstrated their ability to care for foster children with special or exceptional conditions through past training and experience in nursing, special education, child care or the completion of or participation in special training provided by an authorized agency or other relevant training and experience; and actively participate in agency training for foster parents of not less than four hours per year in the case of providers of special foster care services and not less than five hours per year in the case of providers of exceptional foster care services. [427.6(e)(3)].

446.5(b) applies to *"designated emergency foster boarding homes."* These homes are not the same as certified emergency homes and approved emergency homes defined in Part 443. The training requirements for designated emergency foster boarding homes is that for foster parents providing this type of care they must complete 15 hours of specialized training and a minimum of six hours of follow-up training each year (446.5).

New York State Social Services Law Section 441.17 specifies that staff working in residential child care settings receive specific training about the procedures and use of restraint. All staff involved in the use of restraint must complete at least six hours of training in the agency's policy concerning: preventive methods and procedures for situations which might lead to the use of restraint, appropriate alternatives to restraint, the circumstances when restraint might be necessary; methods of applying restraint and the rules which must be observed in so doing. In addition, staff are required to complete and annual update.

**The NYS training program** for foster/adoptive parent leader certification includes multiple components including Group Preparation and Selection II/Model Approaches to Partnerships in Parenting (GPSII/MAPP), Caring for Our Own, Shared Parenting, and Deciding Together. These training programs prepare local district and voluntary agency staff and foster/adoptive parents to lead training groups in their areas on the topics above.

A description of components follows:

 GPSII/MAPP: A 30-hour preparation and selection program delivered over a period of 10 weeks by districts and agencies to prospective foster and adoptive parents to assess, develop, and strengthen the attitudes, skills, and knowledge needed by parents intending to foster or adopt children.

- Caring For Our Own: A preparation program specifically for relative caregivers given over a period of nine weeks.
- Shared Parenting: An eight-week program focusing on relationship building between foster parents and birth parents for best outcome of children in care.
- Mini-MAPP: Provides an overview of the basic concepts in the GPSII/MAPP training program to child welfare staff and foster and adoptive care staff within the agencies.
- Deciding Together: Seven consultations are provided in this model to individual families to prepare them to foster or adopt.
- COMPASS, the in-service (post-certification) portion of this training program, includes firstyear basic and advanced courses for subsequent years in such topics as Loss and Separation, Preparing Children for Adoption, Managing Difficult Behaviors, Sexual Abuse, Child Development and Discipline among others. There is also a leader certification component to this training similar to the preparation trainings listed above.
- Special Topics and use of the iLinc electronic training platform are other trainings available to foster/adoptive parents, local district staff, and voluntary agency staff statewide.

PROGRAM	Pre-Service	Pre Service Completion Date	Mandatory annual In-Service training hours	Recommended additional In- Service training hours
RFBH	MAPP	Before certification and placement	6 (delivered by agency)	6 (delivered by agency or community)
Emergency RFBH	Caring for Our Own or mini- MAPP	Within 150 days of placement	6 (delivered by agency)	6 (delivered by agency or community)

New York City Requirements:

PROGRAM	Pre-Service	Pre Service Completion Date	Mandatory annual In Service training hours	Child Specific training hours WITHIN, not in addition to, total training hours
TFFC (Converted from RFBH)	MAPP or mini-MAPP + PST	Before TFFC certification and placement	Minimum of 12 (delivered by agency or community, including professionals treating the child)	Minimum of 6 (delivered by agency or community, including professionals treating the child)
TFFC (Recruited directly to TFFC program)	mini-MAPP* + PST	Before TFFC certification and placement	Minimum of 12 (delivered by agency or community, including professionas treating the child)	Minimum of 6 (delivered by agency or community, including professionals treating the child)

Adjustable Rate Category*	Pre-Service	Pre Service Completion Date	Mandatory annual In Service training hours	Child Specific training hours WITHIN, not in addition to, total training hours
Special	MAPP or mini-MAPP + PST (if TFFC) + Child Specific Training (6hrs)	Within 6 months of special needs determination	12 (delivered by agency or community, including professionals treating the child)	Minimum of 6 (delivered by agency or community, including professionals treating the child)
Exceptional	MAPP or mini-MAPP + PST (if TFFC) + Child Specific Training (9hrs)	Within 6 months of exceptional needs determination	15 (delivered by agency or community, including professionals treating the child)	Minimum of 9 (delivered by agency or community, including professionals treating the child)

#### Data

In 2015, the quantity of both training days and expected number of foster and adoptive parents in attendance exceeded the number planned.

Year	Trainees	Training Days
2015 (proposed)	3873	425
2015 (actual)	4338	510

#### Therapeutic Foster Boarding Home (TFBH) and Residential Child Care Training

TFBH provides training and technical assistance in a set of core problem-solving and intervention skills for foster parents, OCFS licensed agency workers, and trainers in therapeutic foster boarding home programs. All training days were scheduled and planned for this contract, however, due to limited enrollment; four training days were not delivered.

Year	Trainees	Training Days
2015 (proposed)	1220	90
2015 (actual)	435	86

OCFS provides a comprehensive system of initial, specialty, and advanced in-service training that allows residential foster care staff to meet the mandates. In 2015, 2245 foster care agency trainees completed courses specifically geared toward this trainee population. OCFS does not know the total number of staff hired by each voluntary agency.

Topics of interest to Foster/Adoptive Parents:

Topics of interest to Foster/Adoptive Parents: Very	N	%
Roles, Rights and Responsibilities of Foster Parents	323	71.5%
New York State Child Welfare System	155	34.5%
Adoption and Safe Families Act (ASFA) Timeframes	167	37.1%
Permanency Options for Youth in Care	208	46.2%
Child Development	346	77.4%
Sexual Orientation and Gender Identity Expression	224	49.9%
Managing Challenging Behaviors	286	63.6%
Effective Discipline Techniques	319	71.5%
The Impact of Trauma on Children in Foster Care	306	68.0%
Separation and Loss	327	72.8%
Reactive Attachment Disorder	211	47.4%
Attention Deficit Hyperactivity Disorder (ADHD) / Attention Deficit Disorder (ADD)	270	60.4%

Topics of interest to Foster/Adoptive Parents: Somewhat	N	%
Roles, Rights and Responsibilities of Foster Parents	120	26.5%
New York State Child Welfare System	239	53.2%
Adoption and Safe Families Act (ASFA) Timeframes	208	46.2%
Permanency Options for Youth in Care	201	44.7%
Child Development	92	20.6%
Sexual Orientation and Gender Identity Expression	193	43.0%
Managing Challenging Behaviors	156	34.7%
Effective Discipline Techniques	121	27.1%
The Impact of Trauma on Children in Foster Care	135	30.0%
Separation and Loss	116	25.8%
Reactive Attachment Disorder	181	40.7%
Attention Deficit Hyperactivity Disorder (ADHD) / Attention Deficit Disorder (ADD)	147	32.9%

Topics of interest to Foster/Adoptive Parents: Not at All	N	%
Roles, Rights and Responsibilities of Foster Parents	9	2.0%
New York State Child Welfare System	55	12.2%
Adoption and Safe Families Act (ASFA) Timeframes	75	16.7%
Permanency Options for Youth in Care	41	9.1%
Child Development	9	2.0%
Sexual Orientation and Gender Identity Expression	32	7.1%
Managing Challenging Behaviors	8	1.8%
Effective Discipline Techniques	6	1.3%
The Impact of Trauma on Children in Foster Care	9	2.0%
Separation and Loss	6	1.3%
Reactive Attachment Disorder	53	11.9%
Attention Deficit Hyperactivity Disorder (ADHD) / Attention Deficit Disorder (ADD)	30	6.7%

#### Topics of interest to residential foster care staff

Staff who attended the focus groups identified areas in which they wish more training could be provided. Topics included working with families; learning more about court processes and court; working with youth at different stages developmentally; cultural competence; more crisis and trauma training; and more training on the topics they see most such as gang involvement, substance abuse and gender identity and sexual orientation.

The training mandated for residential foster care and child care workers is to enable them to create a safe environment for the children and youth in care. OCFS provides a comprehensive system of initial, specialty, and advanced in-service training that allows staff to meet the mandates. OCFS tracks the delivery of the quantity and content of the training via quarterly and annual reports from the training partner vendors. OCFS monitors the compliance with this standard via its licensing and review process with voluntary agencies., however no quantitative data is available.

Training topics specifically targeted to staff at residential foster care agency staff include the following:

- Therapeutic Crisis Intervention
- Therapeutic Crisis Intervention Train the Trainer
- Boundaries: Where to Draw the Line
- Working with LGBTQ Youth In Care
- Bullying: Spot It, Stop It
- Constructive Confrontation
- Cultural Competence and Adolescents
- Developing Life Books and LifePaks with Youth In Care
- Motivating Kids in Care: The Challenge of Change

#### **Factors Affecting Performance:**

The quantity of training days and expected number of trainees is a direct result of the structure of the network of these providers. OCFS oversees the conducting of quarterly Regional Meetings with home finders, caseworkers and foster parents to identify issues, training needs and to market the training.

#### **On-Going Training Availability**

# Please indicate how much you agree with the following statements about ongoing trainings.

Strongly Agree	Ν	%
I am regularly informed about opportunities to participate in ongoing trainings.	230	50.9%
I attend ongoing trainings.	125	28.6%
The ongoing trainings I attended helped me meet the needs of the child(ren) in my care.	128	29.2%

Agree	N	%
I am regularly informed about opportunities to participate in ongoing trainings.	169	37.4%
I attend ongoing trainings.	243	55.6%
The ongoing trainings I attended helped me meet the needs of the child(ren) in my care.	215	49.1%

Disagree	N	%
I am regularly informed about opportunities to participate in ongoing trainings.	38	8.4%
I attend ongoing trainings.	52	11.9%
The ongoing trainings I attended helped me meet the needs of the child(ren) in my care.	74	16.9%

Total	Ν
I am regularly informed about opportunities to participate in ongoing trainings.	452
I attend ongoing trainings.	437
The ongoing trainings I attended helped me meet the needs of the child(ren) in my care.	438

# E. Service Array and Resource Development

# Item 29: Array of Services

How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the CFSP?

- Services that assess the strengths and needs of children and families and determine other service needs;
- Services that address the needs of families in addition to individual children in order to create a safe home environment;
- Services that enable children to remain safely with their parents when reasonable; and
- Services that help children in foster and adoptive placements achieve permanency.

Please provide relevant quantitative/qualitative data or information that show:

- The state has all the above-referenced services in each political jurisdiction covered by the CFSP;
- Any gaps in the above-referenced array of services in terms of accessibility of such services across all political jurisdictions covered by the CFSP.

# State Response:

New York State assesses Item 29 an area needing improvement. In New York State, services to meet the needs of children and families are determined by the local department of social services (LDSS). Through the use of data and collaborations with key stakeholders as noted in their county plans, LDSS determine how they will use their funds to obtain needed services. Likewise on the state level, OCFS in collaboration with key stakeholders, districts (including reviewing their county plans) and agencies, and the use of data determine how we will use state and federal funds to compliment the services offered on the local level. A common concern expressed by the 460 foster parent survey respondents from 53 counties and New York City, and feedback from attorneys for the parent (this feedback was provided by Angela Burton via a survey she did statewide of attorneys for parents) is that there are not a sufficient number of services to meet the needs of all children and families who interact with the child welfare system.

Local districts may provide services directly to families, may contract with not-for-profit agencies to provide in-home and foster care services, or may utilize other public services (such as county mental health services) often with a written administrative agreement for appropriate availability. The required electronic service plan, with its safety, risk, family, and child assessments, provides the basis for assessing individualized child and family needs and documents the goals, tasks, and services that the case planner will coordinate to achieve the child's permanency goal. State regulations specify the array of preventive services that every local district must have available to prevent placement or for use during placement to accelerate the child's return. Each local district must provide, either directly or by purchase of service, the following seven "core services": day care; homemaker services; parent training or parent aide services; transportation; clinical services; respite care and services for families to relieve stress when a family member (parent, child, legal guardian, or caretaker) has an HIV-related illness; and, twenty-four hour access to emergency services, including cash or the equivalent in services.

goods, or shelter. Regulations and policies support the placing of services where there is a high need for services to prevent child abuse and maltreatment; and, the development of services, including pre-placement preventive services, to meet needs in areas of high foster care placements. NYS also provides housing subsidies for up to three years to prevent placement in, or enable discharge of children from, foster care. OCFS reviews and approves each district's service matrix as part of the county plan, to make sure they have listed all the required services.

Through its Home and Regional Offices, OCFS provides training resources and technical assistance to local districts and monitors compliance with state policies, including service availability and delivery. This is done through the Safety and Permanency Assessments and data pertaining to service delivery is noted in the Permanency Outcomes section of this Statewide Assessment.

#### Factors Affecting Performance

Feedback from attorneys for parents indicate that they feel that there is a lack of concerted efforts to provide appropriate services for parents with developmental disabilities, for children with mental health/behavior health issues and housing assistance in cases where necessary to prevent placement of a child in foster care. This feedback was provided through a survey done by Angela Burton, Director – Quality Enhancement for Parent Representation, NYS Office of Indigent Legal Services. It is unknown how many attorneys responded to her survey, as she only forwarded their comments to Statewide Assessment in narrative format. Through the Cross Systems Collaboration, OCFS along with other sister state agencies, parent advocates and other stakeholders, have had discussions related to enhancing services to all families in need, and formulating strategies on how to work together to do so.

#### Services Funded by State and/or Federal Dollars

Listed below is the continuum of services available beginning prenatally and through adulthood, and range from primary prevention to permanency. Included is a brief description of some the significant services on the continuum.

# Services available in all local departments of social services – OCFS does not have reports related to utilization or wait lists.

- Prevention Services mandated and optional Preventive services offered directly by the Local Department of Social Services and/or through a purchase of service agreement are designed to prevent child abuse and maltreatment and prevent out of home placements. Supportive and rehabilitative services for children and adults include, but are not limited to; day care, homemaker services, parenting training, transportation, clinical services, respite and 24-hour access to emergency services.
- Protective Services for Children investigation, assessment, counseling, therapy, training for adults, emergency shelter, rehabilitation services, case management and other support services as needed for children named in a report of child abuse and/or maltreatment.
- Foster Care assessing needs and providing placement and services to children under 18 in a foster home or group care facility; medical services, alternatives to placement, counseling, independent living services, therapeutic services, after-care services and support for youth up to age 21.

- Bridges to Health Home and Community-Based Waiver program provides expanded services to children with serious emotional disturbance, development disability and/or who are medically fragile.
- Adoption Support Services assistance in securing an adoptive home and the provision of legal services, recruitment and training of adoptive parents, pre-placement planning, counseling, information and referral, respite and crisis services.
- Post-Adoption Services provided directly by Local Departments of Social Services (LDSS) and through purchase of service agreements, these services address the unique needs of adoptive families and include respite, parenting support, support groups and counseling.
- Independent Living Services the Independent Living Program for current and former foster care youth is offered directly by the LDSS or through a purchase of service agreement. The program provides youth in facilities with assessment services, counseling, educational, vocational and life skills services and other supports as needed.
- Aftercare Services assisting children, youth and families to reduce the likelihood of those children or youth returning to either child welfare or juvenile justice placement. Aftercare consists of an array of supervision and support services.
- Youth Development programs are designed to prevent juvenile delinquency and promote positive youth development though programs which provide general development, recreational and youth services for the young people under 21 years of age.

# Services supported through State and Federal Funds (not funded statewide due limited resources. Through the use of data, such as poverty rates, recurrence, Medicaid spending, high need areas are identified.)

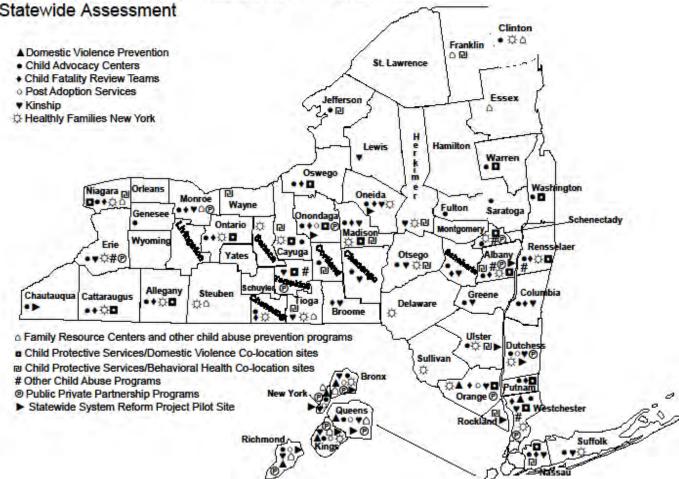
- Family Resource Centers (child abuse prevention programs) Through state Children and Family Trust Fund dollars and the federal Community-Based Child Abuse Prevention fund, OCFS supports thirteen Family Resource Centers (FRCs) upstate and two in New York City. FRCs offer evidence-based parenting training and other formal and informal supports to families. FRCs focus on families with children under five years of age aimed at improving parent resiliency, parenting skills, social connections and child development.
- Healthy Families NY Home Visiting Program (HFNY) HFNY is an evidence-based prevention program which offers systematic assessments for pregnant women and new parents. Trained paraprofessionals from the community served provide home visiting services weekly for the first six months and less frequently until the child enters kindergarten or Head Start. Services include parenting, family support and linkages to community supports. HFNY programs are in place in 27 counties, and will through a Request for Proposals being offered this spring be expanded to additional sites in 2016.
- Domestic Violence Services emergency shelter and supportive services including shelter, hotline assistance, information and referral, advocacy, counseling, community education/outreach, children's services, support groups, medical support, transportation,

and translation. OCFS licenses 159 domestic violence residential programs, and 86 approved non-residential domestic violence programs. Federal Family Violence Prevention and Services Act funds support 73 residential and non-residential programs to support evidence informed program models as well as general operating expenses, health and safety improvements, and/or program enhancements. Additionally, TANF funds are also used to support the provision on non-residential domestic violence services provided through the local departments of social services.

- Kinship Services OCFS directly funds 19 Kinship support programs which address the multiple needs of Kinship caregivers including financial stability, respite, parenting education, family support, and legal information and support groups.
- Post- Adoption Services OCFS administers TANF funds directly to three communitybased programs to provide services to pre and post-adoptive families to support adoption finalizations and reduce disruptions. OCFS will be making available additional monies in 2016 to fund statewide Permanency Resource Centers (PRCs) that will provide a myriad of services to post-adoption and post kinship families. The services from the PRCs will be available to all families who have adopted a child both from child welfare and was privately.
- Parenting Programs In partnership with New York State Parent Education Partnership (NYSPEP), the OCFS Children and Family Trust Fund will continue efforts to improve the quality and access to parenting education and to promote skill development for parenting educators. Dissemination of resources and information on the impact of evidence-based and evidence-informed parenting programs to local districts, community-based programs, and other key partners remains a priority.
- Substance/ Alcohol and Mental Health Services Identification of families in need of services is the focus of the CPS/Behavior Health project. A total of fourteen counties were funded in 2015 for two years to employ or contract with a Behavioral Health Specialist to help screen parents and children to determine if further assessment is needed. Additionally, OCFS is collaborating with the Office of Court Administration and the Office of Alcohol and Substance Abuse Services on a grant from OJJDP called Statewide System Reform Project. Eight counties have been selected to pilot the use of the UNCOPE+ screening tool, that will be used to screen families who will benefit from a Family Treatment Court or an Infusion Court along with evidence based services related to their addiction. Lessons learned from the eight pilot counties will be used to inform future infusion of the model in statewide.
- Multidisciplinary Investigation Team (MDT), Child Advocacy Center (CAC) and Child Fatality Review Team (CFRT) – Local community coordination of the investigation, prosecution and treatment of child abuse and neglect cases is support through the federal Children's Justice Act Program Grant. The goal of these funded programs is to reduce additional trauma to child victims after they disclose, improve handling of cases for all agencies involved, and improve the skills and knowledge of all professionals involved.
- Public Private Partnerships OCFS funds collaboration projects in nine counties and New York City. The projects are required to include local partnerships with private, non-profit entities working alongside local county entities to achieve mutually identified

objectives. Some examples of funded project include: supporting children who have been terminated from or are at risk of being terminated from child care programs due to challenging behaviors; working with disconnected youth at risk of out-of-home placement; providing funding for at-risk families with children ages 0-3 to provided home visits by teachers and family development specialists; providing trauma informed training to entire county based cross system team; piloting the use of evidence based intervention with families with children ages 0-3.

 Safe Harbour: NY – OCFS funds anti-trafficking collaboratives in 28 counties and New York City. These collaboratives are provided technical assistance from OCFS to build and sustain a child-welfare centered county-wide response to youth who have been victims of or who are at risk of being Commercially Sexually Exploited (CSEC) or trafficked for either labor or sex. These collaboratives, headed by the local social service district or the youth bureau, include local, state, federal, and tribal law enforcement (where appropriate), probation, runaway and homeless youth providers, youth bureaus, mental health, health, immigrant service providers, service providers for lesbian, gay, bisexual and transgender community, among others. Safe Harbour supports counties in building a system to raise awareness, identify youth, and provide services and responses to youth and their non-offending families. Revision 03/2016



# New York State Office of Children and Family Services Statewide Assessment

# Item 30: Individualizing Services

How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?

Please provide relevant quantitative/qualitative data or information that show whether the services in item 29 are individualized to meet the unique needs of children and families served by the agency.

• Services that are developmentally and/or culturally appropriate (including linguistically competent), responsive to disability and special needs, or accessed through flexible funding are examples of how the unique needs of children and families are met by the agency.

### State Response:

New York State assesses Item 30 an area needing improvement. While NYS has an array of services that are provided by local districts and the voluntary agencies that they contract with, services cannot always be made available or tailored to meet the unique needs of the children and families served by local districts and agencies. This is especially true for children who are have dual diagnosis. Feedback from the attorneys for the parents has indicated that parents are offered formulaic services that do not take into account the complex needs of the family. The array of services are seen as a "boiler-plate set of services" that are often over-broad and/ or vague. The feedback was obtained by Angela Burton, Director of Quality Enhancement for Parental Representation, NYS Office of Indigent Legal Services, who conducted a survey of attorneys of parents cross New York State. It is unknown exact number of attorneys is unknown.

NYS requires local districts to provide, arrange for, and coordinate appropriate rehabilitative and foster care services to the child and family to protect the child, prevent future maltreatment, promote the child's well-being, and stabilize family life. State law requires that the safety and permanency standards are documented and considered in all case assessments, planning, and service delivery. NYS requires that local districts develop and review written Family Assessment and Service Plans (FASP) that assess the strengths and needs of children and families. These plans must be monitored as part of the standard Uniform Case Record (UCR). The FASP serves not only as the official source of documentation for the case, but also as a tool to help support and guide caseworker and supervisory decision-making. The FASP is completed according to the following timeframes – Initial – within 30 days of the case initiation date (CID), within 90 days of the CID, at six months of the CID, and every six months thereafter. Additionally, Regulations require in-home conferences with the foster parents at least monthly or whenever necessary to provide services that are responsive to issues and to protect the child's best interests. The individualizing of services is monitored by OCFS through case record reviews.

A statewide survey was conducted of 500 foster parents to garner information about their experiences with the current training system. At the time of the survey, there were 8,326 active foster homes that had a child residing in their home. The survey was distributed to a random sample of foster/adoptive homes that represented households from all six regions. The 500 responses included participation from 53 counties and New York City. Not every foster parent answered every question. Listed below are the results of the 2015 survey of foster parents when asked if they felt the services listed meet the needs of the child(ren) in their care. Foster Parents strongly agree/agree (90.7 percent) that medical services are meeting the needs of the children in their care, with substance abuse services ranking the lowest (60.9 percent). Services for girls (86.2 percent) are slightly more appropriate than those for boys (83.8 percent), and services for younger children (13 and younger) more appropriate than those for teens and young adults.

#### Data from Foster Parent Survey conducted in 2015

Think of any children who were in your care at some point during the past year and the services they received. Please indicate how much you agree that the services addressed the child(ren)'s needs. If a child needed the service listed, but the service was unavailable, please select "Service Not Available." If you have not had a child in your care who required the type of service listed, please select "N/A, Service Not Needed."

Answer Options: Strongly Agree	Ν	%
Early Intervention	133	51.0%
Behavioral Health	99	35.0%
Medical/Health	206	54.5%
Substance Abuse	29	33.3%
Sexual Abuse	42	30.2%
Trauma-specific	60	30.5%
Crisis	63	35.6%
Answer Options: Agree	Ν	%
Early Intervention	86	33.0%
Behavioral Health	105	37.1%
Medical/Health	137	36.2%
Substance Abuse	24	27.6%
Sexual Abuse	58	41.7%
Trauma-specific	71	36.0%
Crisis	56	31.6%
<b>Answer Options: Disagree</b>	Ν	%
Early Intervention	14	5.4%
Behavioral Health	34	12.0%
Medical/Health	20	5.3%
Substance Abuse	17	19.5%
Sexual Abuse	23	16.5%
Trauma-specific	32	16.2%
Crisis	25	14.1%

Answer Options: Strongly Disagree	Ν	%
Early Intervention	13	5.0%
Behavioral Health	33	11.7%
Medical/Health	13	3.4%
Substance Abuse	12	13.8%
Sexual Abuse	12	8.6%
Trauma-specific	18	9.1%
Crisis	21	11.9%
Answer Options: Service Not Available	Ν	%
Early Intervention	15	5.7%
Behavioral Health	12	4.2%
Medical/Health	2	0.5%
Substance Abuse	5	5.7%
Sexual Abuse	4	2.9%
Trauma-specific	16	8.1%
Crisis	12	6.8%
Answer Options:	Total	Total for percent
Early Intervention	443	261
Behavioral Health	441	283
Medical/Health	441	378
Substance Abuse	438	87
Sexual Abuse	439	139

#### answered question: 445

197

177

skipped question: 55

\* Percentages were calculated after removing the N/A column from the total column

In general, during the past year, have you found that services are appropriate for the following children? If you did not have one of these children in your care in the past year, select "N/A."

442

441

Answer Options: No	No.	%
Ages 0 to 5	45	16.5%
Ages 6 to 13	43	20.0%
Ages 14 to 18	30	22.9%
Ages 18 and older	24	32.4%
Girls	36	13.8%
Boys	51	16.2%
Gay	19	50.0%
Gender non-conforming	20	60.6%
With disabilities	34	21.5%
Primary language is not English	28	51.9%

Trauma-specific

Crisis

Answer Options: Yes	No.	0⁄0
Ages 0 to 5	228	83.5%
Ages 6 to 13	172	80.0%
Ages 14 to 18	101	77.1%
Ages 18 and older	50	67.6%
Girls	224	86.2%
Boys	263	83.8%
Gay	19	50.0%
Gender non-conforming	13	39.4%
With disabilities	124	78.5%
Primary language is not English	26	48.1%
Primary language is not English	26	48.1%

Answer Options: N/A	No.
Ages 0 to 5	153
Ages 6 to 13	206
Ages 14 to 18	283
Ages 18 and older	325
Girls	156
Boys	106
Gay	365
Gender non-conforming	373
With disabilities	254
Primary language is not English	353

Answer Options:	Total	<b>Total for Percent</b>
Ages 0 to 5	426	273
Ages 6 to 13	421	215
Ages 14 to 18	414	131
Ages 18 and older	399	74
Girls	416	260
Boys	420	314
Gay	403	38
Gender non-conforming	406	33
With disabilities	412	158
Primary language is not English	407	54

#### answered question: 445 skipped question: 55

A statewide survey of foster care youth was conducted in 2015. Youth were informed of the survey via annual foster care youth events hosted via the OCFS Adolescent Services Resource Network and though a link shared with foster parents and local district commissioners and directors of services. The survey resulted in 1371 youth responses from 52 counties and New York City. As noted in the responses, core services, such as medical needs, dental needs, mental health needs, school needs are being met for 80 percent or more of the youth taking the survey. Additional work is needed to improve independent living, such as teaching youth essential job skills, career planning, budgeting and personal finances, and understanding health insurance.

#### Data from Foster Care Youth Survey

Check "Yes" if you agree or "No" if you don't agree with the following statements about needs and services. If you really aren't sure of the answer, check "Not Sure."

Answer Options	No	Yes	Not Sure	Response Count	%
My medical needs are being properly met.	114	1019	116	1249	81.6
I understand the benefits of health insurance and how it works.	197	787	262	1246	63.2
My dental needs are being properly met.	147	1011	84	1242	81.4
My mental health needs are being properly met.	103	1035	99	1237	83.7
My school needs are being properly met.	145	1000	97	1242	80.5
I have received help in planning for college or vocational school.	325	714	204	1243	57.4
I have received help in career planning and/or finding a job.	279	832	133	1244	66.9
I have gained skills that will help me with getting a job after I am done with school.	213	877	157	1247	70.3
I have helpful information about finding housing and supports (food, clothing) once I am out of foster care.	251	775	217	1243	62.3
I have helpful information about personal finances and budgeting.	265	770	207	1242	62.0
I have received helpful information on sex education and pregnancy prevention.	117	1046	82	1245	84.0
I have gained skills that will help me address my health needs.	124	984	132	1240	79.4
I have gained skills in how to get along well with other people.	110	1038	88	1236	84.0
I am able to practice my chosen faith (or no faith) as I would like.	101	986	151	1238	79.6
I received a copy of the New York State Bill of Rights for Children and Youth in Foster Care.	370	647	221	1238	52.3
I know and understand my rights as a youth in foster care.	164	901	174	1239	72.7
I know how to stand up or advocate for my rights.	90	1011	136	1237	81.7
			answered	question: 1251	

skipped question: 120

# F. Agency Responsiveness to the Community

# Item 31: State Engagement and Consultation With Stakeholders Pursuant to CFSP and APSR

How well is the agency responsiveness to the community system functioning statewide to ensure that in implementing the provisions of the CFSP and developing related APSRs, 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, objectives, and annual updates of the CFSP?

Please provide relevant quantitative/qualitative data or information that show that in implementing the provisions of the CFSP and related APSRs, 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, objectives, and annual updates of the CFSP.

# State Response:

New York State assesses Item 31 an area of strength as OCFS engages many stakeholder groups throughout the year in ongoing consultation to gather major concerns and strengths related to New York State's performance on key goals, objectives and strategies for improvement. Listed below are various groups OCFS met with during 2015.

#### **Advocacy Groups**

The Deputy Commissioner for child welfare has also met with several advocacy agencies during 2015 to address their concerns related to various topics such as post adoption services, and kinship services. The information shared by advocates from the Navigator Program, and NYS Citizen's Coalition for Children has help formulate a soon to be released Request for Proposals related to post-adoption and post-kinship services.

#### **Citizen Review Panel**

Citizen Review Panel Chairs met with the Acting Commissioner and Deputy Commissioner on June 11, 2015, to discuss the annual New York State Citizen Review Panels for Child Protective Services 2014 Annual Report and Recommendations. Many of the recommendations align with the work OCFS in implementing, and many of the recommendations are aimed at funding and legislation that is not within OCFS's authority to authorize.

OCFS appreciates the opportunity to meet with the three panels (Eastern, Western and New York City) throughout the year, as this provides an opportunity to share ideas and get feedback on the initiatives OCFS is implementing.

#### **Courts and Judicial Staff**

Additionally, OCFS meets frequently with the New York State Office of Court Administration (OCA) on three levels. There is the OCFS/OCA Leadership Team, which consists of high level staff from OCA and OCFS; Specifically, from OCA: Deputy Chief Administrative Judge for

outside of New York City, the Administrative Judge for New York City, and the Supervising Judge of Family Court in the Ninth District, the coordinator for the Court Improvement Project; and from OCFS: the Deputy Commissioner for Child Welfare, the Deputy Counsel for Legal, the Associate Commissioner for Prevention, Permanency and Program Support, the Associate Counsel for Legislation and Special Projects, and the Assistant Commissioner for Regional Operations and Practice Improvement. This group oversees the implementation of New York State's collaborative efforts to improve safety, permanency, and well-being at the state level and at the local level through the work of county multidisciplinary collaboration teams. The OCFS/OCA Leadership Team contributes to improved child safety, permanency and well-being by identifying systemic obstacles to improving child welfare outcomes and engaging in joint planning to address these concerns.

The second level is the Statewide Multidisciplinary Child Welfare Work-group – this work group consists of selected commissioners of local departments of social services or their designees, Family Court judges, Court Attorney Referee, attorneys for the parents, attorneys for children, Executive Directors, county attorneys, and coordinators from the counties with the highest foster care populations. Work group members are selected based on their reputation for excellent work and depth of knowledge. The group operates as a "think tank" and strategic planning body, providing information to the Leadership team, as well as to the local collaborative teams, pertaining to improving collaboration between Family Court, local departments of social services, attorneys for children and parents, and other stakeholders. The work-group identifies systemic issues that need to be resolved at the leadership level and programmatic issues that need to be resolved at the leadership level and programmatic issues that need to be resolved at the leadership level and programmatic issues that need to be resolved.

The third level is the Regional Collaborative Work that groups representatives from county collaborative teams and composed of administrators and staff from local departments of social services, Family Court Judges, attorneys for children and parents and any other local entity that supports the work of the local collaborative from a particular region. Training is often offered at the regional level and includes opportunities for networking with peers from nearby counties. Regional meetings allow county teams to learn from each other and share successes and challenges. The Regional collaborative meetings/events are supported by OCFS and OCA staff relative to training, data, and technical assistance.

The OCFS/OCA Leadership Team met on March 16, 2015, to discuss the following issues: trauma training, CFSR data, Court data, the use of trial discharge, the proposed Raise the Age legislation, assessing our current Safety and Risk model, the Statewide System Reform Program (SSRP) Award, LEAN, Public Law 113-183, Preventing Sex Trafficking, Permanency Hearing Reports, JD/PINS Permanency Bill. The Statewide Multidisciplinary Chile Welfare Group met on three occasions, April 20, 2015, September 21, 2015, and December 14, 2015. The topics included upcoming trainings, the Child Welfare Practice Model, Indigent Legal Services Conference, the CFSR, the use of data from the courts and child welfare, Person-centered Planning for Transition from Foster Care, the SSRP project, the use of APPLA, Trauma Training and Child Safety Training, and enhanced permanency for infants. The discussions from these meetings are used to help frame work that is needed by both the child welfare and court systems.

#### **Foster/Adoptive Parents**

OCFS conducted a survey in 2015, of foster/adoptive parents and held two focus groups from 12 districts to get feedback on the training they receive both initially and ongoing, their involvement in service planning for the youth entrusted to their care, and their invitation to and attendance at service plan reviews and permanency hearings, their agreement with the services

being provided to the foster child/youth, and supports they receive while caring for these children. Over 450 foster/adoptive parents responded to the survey. The information provided has been used to help tailor future trainings, and to address needed services and supports.

#### Local District Staff

At each session of the NY Public Welfare Association conference (held twice a year), Acting Commissioner Poole meets with the local commissioners to discuss current issues facing social service districts, and to raise topics of concern on the state level. These sessions were held on January 28, 2015, and July 20, 2015. The exchange of concerns and issues is used in developing trainings, policies, and other supports to the districts. Acting Commissioner Poole and Deputy Commissioner Laura Velez also participated in the NYPWA Policy Forum on October 7, 2015, that included topics on foster parent recruitment and training, Family Assessment Response, and the Medicaid Transition and Redesign.

Additionally, in 2015, Acting Commissioner Poole held a two and a half-day (May 6-8, 2015) forum with Commissioners whereby the following topics were discussed: CFSR outcomes, the urgency for achieving permanency, and LEAN a systemic way to identify and eliminate waste from a process and create a continuous process for improvement) and its use within child welfare. Several districts expressed interest in participating in a LEAN project related to improving permanency for children in foster care.

Regional Office staff meet at a minimum quarterly with local districts staff. At these meetings, issues and concerns are discussed, focusing on improving practice to enhance outcomes for children and families. During these meetings the following areas are addressed:

- Local district/agency data is reviewed with a focus on several key areas:
  - making sure the data is accurate;
  - the timely entry of data; and
  - the analysis of data in determining strategies
- The implementation of key strategies that workers have been trained on
- Progress made on any corrective actions that resulted from case record reviews and complaints
- Review of currently released policy directives

Issues raised at these meetings are used to inform what additional resources are needed by workers, which includes trainings, services and funding.

#### OCFS Advisory Board

The creation of OCFS was accompanied by a statutorily created Child and Family Services Advisory Board comprised of 24 members. The Board's purpose is to help OCFS construct a better system of services for New York's children, families and individuals. The Governor appoints twelve members, and the State Senate and Assembly each appoint six members. Its duties broadly include consideration of matters related to the improvement of children and family services, review of rules and regulations of OCFS prior to their adoption, advocacy for OCFS programs, and liaisons with local stakeholders.

In 2015, the Advisory Board met twice, July 31, 2015, and December 8, 2015. The board was briefed on the transition of children in foster care to Medicaid Managed Care that is expected to occur in 2017, with Health Home Implementation scheduled to occur in 2016. Updates were also provided on the following topics: collaboration between OCFS and DOH on the safe sleep

initiative aimed at reducing the number of infant sleep deaths; the implementation of the Preventing Sex Trafficking and Strengthening Families Act - noting that Strategic Policy and Planning Development will be distributing directives to the field by the end of September 2015, and the follow-up training that will be necessary; the work that is being supported by Casey Family Programs related to the piloting of educational liaisons within schools and departments of social services; the continued implementation of FAR and the evaluation of the program; and LEAN.

#### **Sister State Agencies**

Since December 2007, a meeting of state agency commissioners (or their designee) serving children is held to discuss the need for cross system collaborations for children with service needs that involve more than one service delivery system. Commissioners/designees from the following agencies attended: OCFS, the Office of Mental Health (OMH), the Office for Persons with Developmental Disabilities (OPWDD), the Office of Alcohol and Substance Abuse Services (OASAS), the Department of Health (DOH), the Division of Probation and Correctional Alternatives (DPCA), the State Education Department (SED). The Commissioners or their designee meet quarterly to continue the discussion and to develop and implement joint solutions to improve the lives of children, youth, and families. One accomplishment of this process is the Regional interagency Technical Assistance Teams (RiTATs). RTATs are teams that are comprised of representatives from many different systems and are crucial to New York's cross-systems work. Currently there are five RTATs in New York State in the regions of Central New York, Hudson River, Long Island, New York City, and Western New York.

In 2015, meetings were held on the following dates: 1/8/15, 2/5/15, 4/2/15, 5/7/15, 6/4/15, 8/6/15, 9/3/15, 10/1/15, 11/5/15, and 12/3/15. Topics that impact the NYS state plan included: trauma informed care, reducing the reliance on restraints and seclusion, updates on the use of RiTATs, Children's Manage Care, and child welfare response to child trafficking and commercial sexual exploitation.

The NYS DOH and OCFS have continued to work collaboratively on prevention of child deaths, and to promote multidisciplinary review of child fatalities. DOH, as lead agency in the National Institute for Children's Health Quality Collaborative Improvement & Innovation Network to Reduce Infant Mortality (CoIIN), has invited OCFS to participate and to co-chair the subcommittee to address unsafe sleep deaths of infants across NYS. Meetings held on March 21, 2015, and May 13, 2015, focused on the need for a collaborative effort to address unsafe sleeping environments. Information gathered at these meetings has been used to put together an initiative to share information with parents on the dangers of unsafe sleep environments/ Additionally, OCFS purchased 1700 pack and play cribs for local districts to be distributed to families in need.

OCFS continued its collaboration with other sister state agencies, in particular the DOH, OASAS, and OMH around the development and implementation of Medicaid Managed Care. This work includes three primary areas, Health Homes, new Medicaid services, and the transition of children in foster care into a Medicaid Managed Care environment. This work will be detailed more in Item 29: Array of Services.

#### **Tribal Nations**

The OCFS Native American Services (NAS) unit actively interacts with the Indian Tribes/Nations Leaders to offer general forums that are held twice a year for discussions of issues, as well as to address specific child/family circumstances and consult with the Tribal/Nation communities. All Tribal Nations are invited to the forums

Quarterly meetings with Tribal representatives, which typically are caseworkers and supervisors, provide the opportunity for ongoing dialogue related to the work of the tribal nations on the Indian Child Welfare Act. NAS is active in supporting and sharing feedback from the Tribes/Nations and with OCFS Home Office. These meetings also serve to identify training needs for the Tribes and in the development of training initiatives; provide input into the CFSP Title IV-B plan; and to strengthen service delivery to Native American children and families. These meetings also provide an excellent forum to introduce other OCFS-supported initiatives such as court collaboration, Protective Services for Adults, Chaffee Independent Living Services to Tribal and agency staff who need program support to serve their respective Tribal and urban Native American Communities.

In 2015, the NAS conducted three of the four quarterly meetings (the fourth was canceled due to a lack of participation from the tribal representatives) that assisted in identifying the tribal needs and issues in regards to the Indian Child Welfare Act (ICWA). Several of the needs directly related to child welfare and included: Native foster parents/homes, transportation assistance, domestic violence/women's shelter, youth programs, and parenting workshops. OCFS will be working with the Tribes to identify resources to help address some of their needs.

Also, in 2015 OCFS collaborated with ACS, the Shinnecock and Unkechaug Indian nations to provide an ICWA Training at ACS' Leadership Forum, which consisted of approximately 300 ACS employees. The goal of the training was to assist staff in better identification of children and families with tribal affiliation.

#### **Voluntary Agencies**

Staff also attended meetings in 2015 with voluntary agencies facilitated by Council of Family and Child Caring Agencies. During 2015, many of the meetings focused on the development of the Medicaid Manage Care initiative and its impact on voluntary agencies and what steps voluntary agencies need to take to become ready for the transition. Input from the voluntary agencies has been helpful in developing training sessions and resource materials.

#### Youth

OCFS is also committed to hearing the voice of youth impacted by service systems. To that end, OCFS has supported the development and growth of Youth in Progress (YIP), a statewide foster care youth leadership advisory board. This group of young people, accompanied by adult mentors, has provided ongoing input related to a wide range of topics that impact their experience in foster care and beyond. In addition, OCFS has expanded opportunities for youth voice by establishing relationships with the statewide organization, Youth Empowerment, and with the Bravehearts, a youth led association with chapters in Westchester County and other localities.

In 2015, Acting Commissioner Poole met with the NYS Youth in Progress group on June 15, 2015 and Senior Staff meet with youth at four of the Youth Speak Outs that were held on July 8, 2015, July 14, 2015, August 4, 2015, and August 13, 2015. Concerns noted at these meetings are considered towards improving practice, policies and trainings as noted in our state plan.

The Youth in Progress also meet with staff from O/FS on a monthly basis, dates include: 1/13/15, 2/10/15, 3/10/15, 4/14/15, 5/12/15, 6/9/15, 7/14/15, 8/11/15, 9/8/15, 10/13/15. 11/10/15, 12/8/15. During these meeting updates are provided to the members of YIP with an opportunity for feedback. Topics have included Human Trafficking, Teen Dating Violence, Normative

Experiences for Youth in Foster Care, National Youth in Transition Database, The Affordable Health Care Act, and Educational Stability.

Youth in foster care were also encouraged to take the on-line survey (paper copies were also made available to youth should they not have accessible to a computer) that asked them to provide input on the following topic areas: Connections with Family and Extended Family; Visitation with their Siblings and Parents; Knowledge of who is their caseworker and frequency and quality of visits with their caseworker; their needs, and if they are being met; their permanency goal and their involvement in the goal and service planning. Data from their responses helps inform OCFS polices, practices, and the State Plan.

# Item 32: Coordination of CFSP Services With Other Federal Programs

How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

Please provide relevant quantitative/qualitative data or information that show the state's services under the CFSP are coordinated with services or benefits of other federal or federally assisted programs serving the same population.

## State Response:

NYS assesses Item 32 an area of strength. OCFS coordinates services and benefits of other federal or federally assisted programs serving the same population in a variety ways, including participating in various statewide councils, committees, and advisory boards. Additionally OCFS convenes meetings with stakeholders to assess needs and service provision with an eye on reducing duplication of resources.

Listed below are several entities that OCFS meets with consistently to discuss child welfare issues and solutions:

#### The Office of Court Administration (OCA)

Across New York State, the foster care population of very young children has been rising due to the pervasiveness of the use of heroin. A coordinated response from child welfare, family court and the chemical dependency system was formed to address some of the difficult challenges of assisting these families and moving children placed into foster to permanency faster.

Staff from OCA, OCFS, and the Office of Alcoholism and Substance Abuse Services have been collaborating on the Statewide System Reform Project aimed at three areas:

- improving the identification and referral of families from child welfare affected by substance abuse as reported through child protective services;
- the implementation of evidenced based services for these child welfare families; and
- the infusion of the principles of the Family Treatment Courts into all Family Courts, thereby reaching even more child welfare families.

A pilot with eight counties is currently underway (see map included in item 29 for location of counties with this pilot in place). Local districts participating in the pilot will be using the UNCOPE+ to aid in the early identification of child welfare families who are experiencing chemical dependencies issues, referring them to appropriate substance abuse treatment, and having them monitored through Family Court in an effort to reduce the amount of time children are spending in foster care.

#### New York State Department of Health

Collaboration with the New York State Department of Health (DOH) continues in an effort to promote child safety and the prevention of Shaken Baby Syndrome. In 2015, OCFS continued its efforts to improve infant safe sleep practices and reduce the number of child fatalities due to unsafe sleep by providing free cribs to low income families in need. These cribs were distributed to local departments of social services, Voluntary Agencies and select community-based organizations that provide home visiting and/or parenting programs. Counties and

agencies can request these cribs on behalf of families who need them to keep their babies safe. Over the past three years, OCFS has given away nearly 4,000 cribs to families in need in New York State. In an ongoing effort to enhance public education around critical child safety issues, OCFS has distributed publications and videos to local departments of social services, health agencies, child care agencies and community programs. These materials include tip sheets, brochures, DVDs, magnets and other items with information about safe sleep environments, coping with crying and additional topics. Helpful Tips to Keep Your Baby Safe are posted on the OCFS website and available in six languages. Other materials developed include Personalized Safety Tips and Emergency Contact Sheet for Caregivers, a Helpful Strategies for Keeping Infants and Young Children Safe video, and a Keeping Sleeping Babies Safer brochure. These are both available in English and Spanish. In 2015, 69,255 publications and videos were provided, reaching families in 51 counties throughout New York State. In addition, a bookmark highlighting the five Protective Factors, was rolled out in April during Child Abuse Prevention Month and is now available for distribution. Publications can be ordered or downloaded from the OCFS website.

OCFS also collaborates with DOH on the Bridges to Health Home and Community- Based Waiver Program. Through the waiver, services are provided to children in foster care with serious emotional disturbance, developmental disabilities and/or medically fragile. Approximately 3,300 children are enrolled in the waiver program. Children in foster care get access to the following fourteen services:

- 1. Health Care Integration
- 2. Family/Caregiver Supports and Services
- 3. Skill Building
- 4. Day Habilitation
- 5. Special Needs Community Advocacy and Support
- 6. Pre-vocational Services
- 7. Supported Employment
- 8. Planned Respite
- 9. Crisis Avoidance, Management and Training
- 10. Immediate Crisis Response Services
- 11. Intensive In-home Supports
- 12. Crisis Respite
- 13. Adaptive and Assistive Equipment
- 14. Accessibility Modifications

In 2015, 245 children enrolled in the Bridges to Health program reached their permanency goal of adoption, making the overall number of children enrolled in the Bridges to Health program finding permanency through adoption at 2,195.

#### **Workforce**

Providing youth in foster care with employment opportunities to enhance their independent living skills is a priority for OCFS. OCFS is working with the NYS Department of Labor to identify ways in which youth in foster care can be prioritized or better served through the Workforce Innovation and Opportunity Act. NYS has prioritized youth in foster care for eligibility for the urban youth jobs program which provides tax credits to businesses to hire youth in their communities. Youth must be part of a family that is receiving SNAP, SSI or TANF or must receiving it themselves or be in foster care.

#### State Education Department (SED)

OCFS and the State Education Department (SED) have entered a Memorandum of Understanding (MOU) in 2015, which enables data sharing of student educational information for foster care and juvenile justice youth. As part of the MOU, OCFS is now able to obtain education data for children in foster care. This data will be utilized for effective case management to arrive at better educational outcomes for children in foster care. Caseworkers can see if the child is on grade level, is in receipt of special education services, assessments, attendance and grades in each class with teacher comments.

#### **Temporary Assistance For Needy Families**

OCFS in collaboration with Office of Temporary and Disability Assistance (OTDA) worked together to provide assistance to kinship caregivers. Many kinship caregivers are caring for children who would have otherwise entered foster care. Providing support and fiscal resources to prevent disruption of these placements has been a priority with OCFS. During 2015, OCFS and OTDA worked together on materials used to train child welfare caseworkers when working with kinship caregivers. The training focused on assisting kinship caregivers on how to apply for the Temporary Assistance for Needy Families Non-Parent Caregiver (NPC) Child-Only grants. NPC Child-Only grants are federally funded dollars that state may access for helping kinship families. These grants, while small can have a great impact on keeping children with their relatives.

#### **Child Care Subsidies**

Child care subsidies are provided for families through local departments of social services, including families who are caring for foster children. Foster parents can apply for a child care subsidy if they are working or participating in educational activities, such as college. Financial eligibility is based solely on the child's income, not the foster parents, thereby making the child eligible. These children can receive child care subsidies to the extent that funds are available.

# G. Foster and Adoptive Parent Licensing, Recruitment, and Retention

# Item 33: Standards Applied Equally

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds?

Please provide relevant quantitative/qualitative data or information that show the state's standards are applied equally to all licensed or approved foster family homes or child care institutions receiving title IV-B or IV-E funds.

## State Response:

NYS assess Item 33 as an area needing improvement. While OCFS reviews and monitors that the child care institutions are applying state standards equally through our voluntary agency review process, we are do not review approved family foster homes licensed by the local departments of social services.

NYS regulations provide that local district staff and authorized voluntary agencies may not fully certify or approve foster and adoptive homes until all regulatory requirements have been met. However, there is a process for temporary emergency certification or approval of foster homes in limited circumstances where the home only needs to meet some of the requirements prior meeting all regulatory requirements and full certification or approval. Full certification is required within 90 days of the child's placement, however the agency has the ability to extend the period if the agency is waiting for the results of the SCR, SEL or criminal history check. OCFS has not been able to pull the data to determine if the full certification within 90 days is occurring.

All steps in the certification or approval process are tracked through the statewide CONNECTIONS computer system from which the certificate is generated. The CONNECTIONS system also alerts local district staff and authorized voluntary agencies when the certification or approval is about to expire and recertification or re-approval of foster homes needs to occur. Re-approval does not apply to adoptive homes. The same standards are used for certified (non-relative) and approved (relative) foster boarding homes. State Regional Office staff is available to districts and agencies to assist with compliance issues that may arise. Additionally, as part of the Voluntary Agency Reviews on Foster Boarding Homes conducted by OCFS in 2015, 91 cases were reviewed to determine if the agency addressed all requirements. Data on the number that were in compliance is not readily available.

OCFS licenses all congregate care facilities. OCFS Regional Office staff perform program reviews of all congregate care facilities on a three-year cycle, with fire safety inspections being conducted annually. Violations of regulation are cited, and corrective action plans are required and monitored. In 2015, 207 safety inspections were done, with 80 percent (166) noting violations ranging from housing keeping issues, emergency lights or exit signs not illuminating when tested, issues with fire extinguishers, kitchen exhaust hoods needing cleaning, fire alarm not working properly. The agency is provided a deadline to respond with a plan of correction (typically 30 days). The fire safety staff will conduct a follow up visit to verify corrections were completed and then send a letter indicating the issues have been resolved. Similar reviews of local district foster homes are not completed by OCFS.

Included in the program review is the monitoring of the agency's adherence of state standards to ensure that each agency is applying them equally. Corrective action plans are tailored to the identified issues and have required of agencies to focus on training initiatives, increased monitoring of staff activities, procedural changes, and clarifications and enhancements to agency policies and procedures. Of the agencies reviewed in 2015,

#### **Factors Affecting Performance**

OCFS requires that standards are applied equally throughout the State. The Voluntary Agency Review process conducted by OCFS looks at policies and practices of all voluntary agencies on a regular, recurring basis. In June 2010, as part of OCFS's Program Improvement Plan, the Regulations for Certified and Approved Foster Family Boarding Homes & Regulations for Designated Emergency Foster Family Boarding Homes Guide was updated and re-issued to the field. It is available on the OCFS website at:

http://ocfs.ny.gov/main/publications/Pub5032.pdf

In preparation for the 2015 Title IV-E Foster Care Eligibility Review, OCFS provided training to all caseworkers and supervisor on foster care certification/approval and safety requirements that was accessible on the OCFS website. http://ocfs.ny.gov/main/fostercare/titleiv-e/assets/index.html.

The positive findings of the 2015 Title IV-E Foster Care Eligibility Review supports that the standards for certification/approval and safety are adequately applied. While there were two error cases out the 80 cases reviewed, only one case was there an error as the result of the foster home not being fully licensed at the time of the child's placement into the foster home, however the foster home was fully licensed within four months.

Recently, OCFS shared with each of the voluntary agency a self- assessment tool intended to support their on-going initiatives to prevent abuse or neglect of youth in their program/facility and assist them in determining which area to focus on in their program/facility's performance improvement projects. The tool, The *Self-Assessment for an Abuse Free Environment,* can be used on an agency level, or can be specific to an individual program.

# Item 34: Requirements for Criminal Background Checks

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that 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?

Please provide relevant quantitative/qualitative data or information that show the state is complying 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.

## State Response:

New York State assesses Item 34 a strength as there is a well-functioning system that ensures compliance with federal criminal background clearances for approving foster and adoptive placements.

NYS law [Social Services Law §378-a(2)] and regulations [18 NYCRR Parts 421 and 443] for criminal background checks relating to foster and adoptive homes exceed federal standards, as, in addition to the applicants for certification or approval, they require that any person over the age of 18 residing in the home of prospective foster or adoptive parents submit to a national and state criminal history record. Local districts and voluntary child care agencies must provide a Notice Regarding Fingerprinting Requirements to prospective foster and adoptive parents and must set up tracking controls to be certain that each person in the household over the age of 18 has been fingerprinted. Districts and agencies use controls that include checklists placed in each foster/ adoptive parent or child care worker's record to verify that all fingerprints were requested and received. Fingerprinting is now done electronically and no longer relies of the less efficient ink and roll method. The fingerprints are placed on "search and retain" to enable notification of any future arrest for a crime in New York, as long as the foster or adoptive home remains open. In 2015, OCFS was notified that there 174 discretionary arrests made, and 34 potential mandatory arrests made on active foster/adoptive parents. This information was shared with the licensing district/agency for their required action. OCFS does not require that they inform OCFS of the action they take. For certain categories of crimes, as prescribed by federal and state law, an application for certification or approval as a foster or adoptive parent must be mandatorily denied. Safety assessments are required by regulation whenever a criminal history is identified. The CONNECTIONS system supports a template for documenting the safety assessment. A justification is required if a person is hired having a criminal history, such as the incident is not related to their ability to care for a child. Agencies, however do not hire individuals whose criminal history would require a safety plan. Should the criminal history be on an individual who is not the prospective foster/adoptive parent, but living in the home, the plan would include not allowing that individual to be left unsupervised with any child.

OCFS has issued several administrative directives to the field describing the criminal background clearance process. In order to be in compliance with state law and regulations, each prospective and certified foster and adoptive parent and adult household member must also be cleared against the Statewide Central Register for Child Abuse and Maltreatment in

NYS. In addition, such person must be cleared through the central register of any other state where they have living the five years prior to applying for certification or approval.

OCFS monitors the safety of the child while in foster care as part of the Safety and Permanency Assessment. Utilizing the SPA the findings indicate that in 98 percent (117/119) of the cases reviewed, the child was safe in their foster care setting.

#### Factors Affecting Practice:

In 2007, OCFS issued an administrative directive (07-OCFS-ADM-01) to the field in 2007 explaining new requirements relating to conducting of both state and national criminal history record checks of applicants for certification or approval as foster or adoptive parents and other adult household members. In 2008, OCFS issued another administrative directive (08-OCS-ADM-06) notifying social services district, the St. Regis Mohawk Tribe, voluntary agencies and in-state and out-of-state adoption agencies of the provisions of Chapter 623 of the Laws of 2008 regarding criminal history checks for foster parents, adoptive parents and other adult household members. Effective October 1, 2008, certain crimes committed by applicants to be foster or adoptive parents would mandatorily disqualify them from becoming foster or adoptive parents. It also noted that if already certified or approved foster or adoptive parents are convicted of these crimes after October 1, 2008, they must have their certification or approval revoked Over the last three years a total of 19,761 applicants had no criminal history, 2003 had a ASFA discretionary criminal history, and 181 had a ASFA mandatory criminal history.

The findings from the 2015 Title IV-E eligibility review did not find any issues related to the completion of the criminal history review for foster/adoptive parents or child care workers in any of the 80 cases that were reviewed. Additional monitoring of agencies in performing criminal background checks are included in our oversight and monitoring of the voluntary agencies as part of the Voluntary Agency Review process.

#### Data

SPA Findings: Child is safe in relationship to the foster care setting

Year	Performance	Percent
2015	117/119	98%

# Item 35: Diligent Recruitment of Foster and Adoptive Homes

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

Please provide relevant quantitative/qualitative data or information that show the state's process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide.

## State Response:

NYS regulations require that agencies have a comprehensive recruitment strategy/plan for establishing a pool of waiting foster and adoptive parents that reflects the racial and ethnic diversity of the children in foster care. Permanency Specialists in the OCFS Regional Offices monitor local district and voluntary agency implementation of foster and adoptive Comprehensive Recruitment Plan requirements and provide technical assistance to local districts and voluntary agencies to determine their compliance with the Multi-ethnic Placement Act of 1994 (MEPA) as amended by the Interactive Adoption Provisions of 1996 and state regulations. Recruitment efforts in each county of the State are tailored to meet the specific needs in that county. In some counties, foster and adoptive parents are trained to be recruiters and use their experience to provide guidance, direction, and consultation to new foster parents. OCFS takes an active role in disseminating information on foster care and adoption through the use of the media.

To support the diligent recruitment of foster and adoptive families who reflect the ethnic and racial diversity of children needing out of home care, OCFS actively guides recruitment and retention across the state in several ways. First of all, OCFS requires counties and voluntary agencies to create a multi-year Foster and Adoptive Parent Recruitment and Retention Plan. While voluntary agencies may serve multiple counties, their plan is reflect of the children entrusted to their care. These comprehensive plans, submitted by counties and agencies to OCFS every three years, detail the racial and ethnic diversity of available homes, and project the number of needed homes to fill any gaps. The plans must be in compliance with the federal Multiethnic Placement Act of 1994 (MEPA) and its subsequent amendments. The OCFS regional offices review each submission, and as needed, ask counties to clarify and strengthen their recruitment strategies before then approving each plan. Permanency Specialists within the state regional offices review with the districts and agencies progress they are making or challenges they face in their recruitment efforts on a periodic basis.

OCFS provides detailed instructions to counties and agencies for developing their Recruitment and Retention Plan. The guidance for the recruitment plan was modified since the last Statewide Assessment to be increasingly rigorous. The instructions specify that agencies review available data related to demographics of children needing foster/adoptive homes, and determine unmet needs by comparing these demographics to the current pool of homes. The data collected includes the following:

## I. GATHER THE FOLLOWING LDSS/AGENCY DEMOGRAPHIC INFORMATION:

Total number of children in LDSS/agency's care: Total number of children in residential/congregate care: Total number children in therapeutic foster care

Ages of children in Foster Care	Total # in Foster Homes	Total # in Higher Level of Care	Total # of Freed Children with a Goal of Adoption and placed	Total # of Freed Children with Goal of Adoption and not placed
# 0-2 years				
# 3-5 years				
# 6-9 years				
# 10-13 years				
# 14-17years				
# 18 years and older				

Race/Ethnicity of Children in Care	Total # in Foster Homes	Total # in Higher Level Care	Total # Freed Children with a Goal of Adoption and placed	Total # Freed Children with a Goal of Adoption and not placed
African				
American/Black				
Caucasian/White				
Asian				
Hispanic				
Native American				
Other				

Foster Home: Race/Ethnicity	Number of Available Foster Homes	Number of Available Foster/Adoption Homes	Number of Available Adoption Homes
African			
American/Black			
Caucasian/White			
Asian			
Hispanic			
Native American			
Other			

#### II. Please address the recruitment needs:

Total number of homes needed: <u>Continuous Recruiting</u> Goal: Foster: <u>Continuous</u> <u>Recruiting</u> Adoptive: <u>Continuous Recruiting</u>

Homes Needed For:	African American/ Black	Asian	Cauca sian/ White	Hispanic	Native American	Other
Infant/ Toddlers						
Teens						
Sibling groups						
JD/PINS						
Behavioral Needs						
Emotional Needs						
Respite						
Emergency						

Agencies are asked to examine vacancy and utilization rates to support their analysis of needed homes. Then, agencies document the number of children currently in different levels of foster care (e.g. foster homes, therapeutic and residential care), as well as those with the goal of adoption. This data is broken down by race and ethnicity. From these numbers, the agencies project targeted recruitment needs for the next three years by race and ethnicity, as well as by age and special needs (such as sibling groups, behavioral issues, etc.).

As a result of these comprehensive plans, every county and agency in the state sets specific targets for recruiting a diverse pool of foster and adoptive parents and is working towards measurable outcomes in this area. When developing the plans, counties and agencies assess their current opportunities and challenges in recruitment and retention, considering what worked and didn't work in past efforts, and deciding how to build on past successes. In addition, the plans are to include targeted and child-specific recruitment strategies to support the recruitment of foster and adoptive homes which reflect the ethnic and racial diversity of children needing care. OCFS recommends using targeted recruitment strategies to address gaps, including community partnerships and involving current foster and adoptive families in the efforts. As part of the recruitment planning process, counties and agencies are directed to evaluate the extent to which their objectives were met, document results, and identify opportunities for continuous improvement.

The next Recruitment and Retention plans are due to be submitted at the end of December 2016, and OCFS is in the process of refining its instructions for counties and agencies once again. These improvements will further align the plans with the latest research and best practice in diligent recruitment, as well as increase comparability of data from the plans across the state's counties and agencies.

#### **Factors Affecting Practice**

Further strengthening efforts in the state, OCFS was awarded a five year federal diligent recruitment grant from the Children's Bureau, Administration of Children and Families. The grant objectives include addressing the ongoing needs for the recruitment of foster and adoptive families that reflect the ethnic and racial diversity of children in need of foster care. The grant, implemented from 2013 to 2018 by Welfare Research, Inc. (WRI), is designed for statewide impact. Communications between the grant project staff and the federal project officer have been very helpful and productive, strengthening the implementation of the project.

The federal diligent recruitment project provides several new tools for counties and agencies to increase the diversity of their pool of foster and adoptive homes. The first tool, a best practices guide released in the fall of 2015, *Revitalizing Recruitment: Practical strategies for finding and keeping foster, adoptive, and kinship families*, emphasizes strategies to recruit an ethnically and racially diverse pool of foster and adoptive parents. Upcoming tools include a web-based recruitment tracking system that allows agencies to see trends in characteristics of the families they are recruiting and certifying, including race and ethnicity. This data system will help agencies examine recruitment trends over time, for example, has a county's or agency's pool of Latino foster homes increased or decreased as compared to one year ago? Additional tools from the diligent recruitment project will include a step-by-step Blueprint for agencies to examine their data and better target recruitment of homes needed to meet the characteristics of children in care, and foster parent satisfaction surveys and "closed home" surveys to measure retention, including retention of diverse families over time.

The grant project staff began working intensively with three implementation counties to look carefully at available data, develop and implement strategic action plans to address local priority areas and to support the counties' work. The project expanded to a fourth county and will add at least two more in 2016. The lessons learned from this work are being documented in the Blueprint that will help other counties and agencies statewide to undertake this process themselves.

The OCFS regional offices support counties and agencies in the challenging work of building a diverse pool of foster and adoptive homes in additional ways. The regional offices provide technical assistance to counties and agencies, and OCFS' training contracts support counties and agencies to access additional expertise and training, with approval from the regional offices. These training contracts include the Foster Parents as Recruiters program, which allows counties and agencies to contract and partner with an experienced foster parent in implementing recruitment and retention activities. This program is based on the well-founded principle that foster parents are the best recruiters, and is an important way that OCFS supports innovative recruitment strategies.

OCFS was awarded a federal diligent recruitment grant from the Children's Bureau, Administration of Children and Families. The work plan, implemented from 2013 to 2018 by Welfare Research, Inc. (WRI), is designed for regional and statewide impact.

Current activities include ongoing work with three implementation counties in Regions IV and V: Albany, Schenectady and Nassau (and additionally Ulster County). Guided by project staff, each county developed and now is implementing a strategic action plan based on needs identified from their local data. Although each county's action plan is unique, common strategies include: recruitment data tracking, administration of a foster/adoptive parent survey, strengthening targeted and child-specific recruitment strategies, and enhancing supports for foster parents to improve retention. Details on these strategies are outlined below:

- Systematic tracking and improvement of recruitment process steps and outcomes. Currently, counties are piloting a tracking tool from AdoptUSKids called the Family Intake Tracking Tool (FITT).
- Administration of a foster/adoptive parent survey in the three implementation counties. The survey results will be used to make improvements in recruitment and retention. The survey is developed and analyzed by the project's evaluation partner, Child Trends. Targeted recruitment by partnering with diverse community-based organizations
- Child-specific recruitment through implementation of the Wendy's Wonderful Kids program in two out of the three counties. Wendy's Wonderful Kids is an evidence-based, childfocused recruitment approach developed by the Dave Thomas Foundation for Adoption, especially effective with older youth. Wendy's Wonderful Kids recruiters, stationed at the local offices of Albany and Schenectady counties, find permanent homes for children.
- In two of the three counties, ongoing partnership with Fostering Futures NY, an innovative program that recruits and trains teams of volunteers from the community to provide natural and practical supports to foster families.

This year, the project is expanding into Region III, where project staff will work with at least two additional implementation counties. Plans are underway to establish and strengthen cross-county and regional recruitment strategies, to avoid duplication at the local level and leverage regional strengths.

Additionally, the project is developing and distributing a "Blueprint," a how-to-guide on using data to drive recruitment efforts. Lessons learned from the work with implementation counties, along with national research, will be documented in the Blueprint, so that other counties and agencies may undertake this process themselves. This tool will complement the best practices guide developed and disseminated by the project team last year, *Revitalizing Recruitment: Practical strategies for finding and keeping foster, adoptive, and kinship homes.* 

Building off this knowledge, the project team is refining the template of the Recruitment and Retention plan which counties submit to OCFS every three years in order to further align with the latest research and best practice in diligent recruitment.

The project also includes ongoing engagement in evaluation activities with Child Trends, such as annual site visits, to learn how the grant activities affect recruitment and retention practices, as well as the pool of foster/adoptive families. Initial feedback indicates that the grant activities are viewed positively by the implementation counties. While impacts and outcomes are still in the process of being measured, it is known that one implementation county has increased their number of certified homes by 33 percent as a result of their engagement with the grant. As far as the racial/ethnic composition of the pool, and whether that is changing to better meet the needs of children in care, this data is not easily accessed by the counties from existing SACWIS reports. The grant activities highlight the need to increase SACWIS reporting on the characteristics of foster homes. In the short term, a recruitment data tracking system, such as FITT, described above, will help counties assess the racial/ethnic breakdown of homes. In 2016-2017, Child Trends' evaluation will include analysis of administrative (SACWIS) data to measure if the pool of homes in the three implementation counties has increased, as well as the pool's racial/ethnic breakdown.

All diligent recruitment activities are detailed in semi-annual reports to the Children's Bureau and quarterly calls with the Federal Project Officer.

During 2016 – 2017, grant activities will include ongoing work with six counties in Regions III, IV and V. Each county will continue to implement their strategic action plan for recruitment and

retention. Ongoing strategies are expected to include: recruitment data tracking, readministration of a foster/adoptive parent survey, strengthening targeted and child-specific recruitment strategies, and enhancing supports for foster parents to improve retention (details in the previous section).

Next year, the project will continue to strengthen cross-county and regional recruitment strategies, and distribute the "Blueprint" through a series of regional forums. Currently under development, the Blueprint is a how-to guide on using data to drive recruitment and retention efforts, and complements the best practices guide developed earlier in the project, *Revitalizing Recruitment: Practical strategies for finding and keeping foster, adoptive, and kinship homes.* 

# Item 36: State Use of Cross-Jurisdictional Resources for Permanent Placements

How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Please provide relevant quantitative/qualitative data or information that show the state's process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide.

Please include quantitative data that specify what percentage of all home studies received from another state to facilitate a permanent foster or adoptive care placement is completed within 60 days.

# State Response:

NYS regulations address ASFA requirements and state that authorized agencies may not delay or deny the placement of a child freed for adoption with an approved adoptive parent on the basis that the approved adoptive parent resides in a state or county different from the agency with jurisdiction of the child. NYS regulations also address the importance of concurrent planning in order to permit efforts to place a child for adoption or with a legal guardian concurrently with efforts to make it possible for a child to safely return home. The Safe and Timely Interstate Placement of Foster Children Act of 2006 issued regulations that require timely home studies for cross-state placements. Additionally, OCFS required the same timeframe for cross-county home studies, as was required by the federal law for cross-state home studies. In April of 2011, recognizing the critical role relatives play as resources for children, OCFS implemented the Kinship Guardianship Assistance Program (KinGAP) in order for a foster child to achieve a permanent placement with a relative who has been the child's foster parent for at least six months. OCFS regulations require authorized agencies develop a comprehensive recruitment strategy/plan for establishing a pool of waiting foster and adoptive parents that reflect the racial and ethnic diversity of the children in foster care. OCFS Regional Office staff monitor agency progress in implementation of the Comprehensive Recruitment Plans including reviewing a sample of cases of children waiting for adoption in each agency. The OCFS Child Welfare Practice Model identifies multiple strategies for agencies to use in order to facilitate safe out-of-home placements and rapid permanency including, but not limited to; Permanency Roundtables, Family Finding, Heart Galleries, KinGAP, kinship support, and post adoption education.

OCFS directly supports cross jurisdictional recruitment through administration of the New York State (NYS) Adoption Album and the Interstate Compact on the Placement of Children (ICPC). The Adoption Album is the NYS electronic database which includes both child photo listing and the family adoption registry. OCFS directly supports the provision of medical assistance for children who have achieved permanency and have been adopted with an adoption subsidy agreement in place through administration of the Interstate Compact on Adoption and Medical Assistance (ICAMA). Further description of these programs including data is provided below.

The Adoption Album and Family Registry

Children who are legally freed for adoption and not in an adoptive placement are featured on either the internet or intranet version of The Adoption Album. For children photo listed on the internet, a photo and brief narrative of the child is available to the public. The public is also provided a photo listing contact to email or call if they identify a child they are interested in adopting. Families with a favorable adoptive home study, whether they reside in-state or out-of-state, can register on-line in the Family Adoption Registry. By registering in the registry, the family may be matched by a NYS caseworker who will use the Album to conduct searches for families that match the characteristics of the child for whom they are seeking placement. OCFS expanded efforts to heighten awareness of children waiting for adoptive families during Adoption Month (November 2015) by featuring a child each day, for a total of 30 children, on social media. Four children featured early in the month received over 1,000 Facebook views during November with one child receiving 2,400 views. OCFS continues to track the status of all 30 children to identify placement success based on the use of social media. In 2015, 92 children who had been photo listed in the Adoption Album were adoptively placed.

Adoption Photo listing and Family Registry Data (2015)

Total New Children Photo listed - 127

Total New Families Registered – 27

#### **Factors Affecting Performance**

As of December 31, 2014, there were a reported 780 children freed but not adoptively placed. That number provides the broad base of children who might be eligible for photo listing in 2015. However, there are circumstances whereby a **waiver of referral** or **waiver of photo listing** is appropriate. Waivers decrease the number of children who are to be photo listed. Social services districts are to enter coding into CONNECTIONS to reflect the circumstance that qualifies the child for the waiver. If coding is not timely, it makes it difficult to track whether a child should be photo listed. OCFS Regional Office (RO) Permanency Specialists have access to the Adoption Album and are available to provide technical assistance and work with social services districts to confirm children are appropriately photo listed. As of December 31, 2015 there were 247 children photo listed on the Internet with a total of 291 photo listed on the Intranet.

#### Interstate Compact on the Placement of Children (ICPC)

OCFS has been working on development of a new electronic ICPC database with an anticipated "go live" date in 2016. This database will allow NYS local district and authorized voluntary agency staff to electronically submit ICPC requests and supporting documentation directly to the OCFS ICPC Unit. The database is designed to assist users in submitting complete ICPC packets thereby reducing the number of returns and expediting the review process to the benefit of the children awaiting placement across state lines. The database will also allow the OCFS ICPC Unit to submit placement requests received from other states electronically to our local district and authorized voluntary agency staff reducing the valuable days lost to mailing requests. It will also have the capacity to send automated alerts to NYS caseworkers when home studies and supervision reports are coming due. Since 2013, OCFS ICPC staff have continued to support local district and agency staff with the front-end submission process by regularly updating checklists and forms on the OCFS ICPC website. The database will also provide notifications to local district staff and to ICPC staff when home studies and progress reports are due.

#### Factors Affecting Performance

The overall timeliness of ICPC requests is difficult to track. The current OCFS ICPC database is older and has often required significant technical support as its platform is outdated. In 2015, based on data provided by ITS staff, NYS processed 1,438 requests for children into NYS and 2,052 requests for children to be placed outside of NYS. These numbers reflect the total number of cases processed by the ICPC Unit in 2015 and include foster, relative, adoptive and residential placement. This is not a reflection of permanent placements only. Data on the total number of permanent placement requests received including public and private adoption and parental placements is provided in a table below. The current ICPC process is paper heavy and requests received from other states are reviewed and then forwarded by mail to the appropriate local department of social services. The local department of social service will review the packet and begin the home study process. There currently is no automated report to provide accurate data on the number of home studies completed within a 60 day requirement for incoming or outgoing requests. ICPC staff will email or contact the sending state when inquiries for status updates are requested and the home study results have not yet been received.

In 2015, the OCFS ICPC Unit made significant efforts in verifying finalization for children adoptively placed in other states. OCFS contacted 47 ICPC state offices, 10 adoption agencies and a small number of private attorney offices for follow up on 1,200 cases. The ICPC Unit also provided the OCFS Regional Office Permanency Specialists with regional lists of NYS children placed through the ICPC where the ICPC unit was never notified of adoption finalization. This does not mean that the adoption did not finalize only that the OCFS ICPC unit had not received formal notification of finalization. Specialists were asked to address these cases with the appropriate agencies in their region. By October of 2015, over 450 responses were returned meaning verification of the adoption finalization was received or there was a status update of the case. This effort continues as responses continue to be received by the Unit.

ICPC Adoption and Parental Placement Requests Data	2015
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ICPC 2015	INCOMING	OUTGOING
PUBLIC ADOPTION REQUESTS	61	23
PRIVATE ADOPTION REQUESTS	221	56
PARENTAL REQUESTS	179	331

#### Interstate Compact on Adoption and Medical Assistance (ICAMA)

Cross jurisdictional adoptive placements are also supported by this office through the Interstate Compact on Adoption and Medical Assistance (ICAMA). In 2015, the Bureau of Permanency Services processed 191 ICAMA requests for children moving into NYS and 319 ICAMA requests for children moving outside of NYS. This represents the total number of requests received by OCFS for children moving into or out of state with an adoption subsidy agreement in place. These cases are processed generally processed within one week and forwarded to the appropriate state ICAMA office or NYS local department of social services notifying the office of the need to open medical assistance upon the child's arrival in their new state of residence.