PERIOD IX MONITORING REPORT

Kenny A. v Perdue
January 1 to June 30, 2010

Accountability Agents:

James T. Dimas and Sarah A. Morrison

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ACRONYMS USED IN THE REPORT

ACF Administration for Children and Families (U.S. Department of Human Services) **AFCARS** Adoption and Foster Care Reporting System **BSW** Bachelor of Social Work CAP Curative Action Plan **CCFA** Comprehensive Child and Family Assessment **CCI** Child Caring Institution **CFSR** Child and Family Service Review **CMF** Centers for Medicare and Medicaid **CPA** Child Placement Agency

CPRS Case Plan Reporting System
CPS Child Protective Services
CRR Case Record Review

DAARE DFCS Data Analysis, Reporting, and Evaluation

Division

DFCS Department of Family and Children Services

DHR Department of Human ResourcesDHS Department of Human Services

DOE Department of Education

E & R Evaluation and Reporting Section

EPSDT Early and Periodic Screening, Diagnosis and

Treatment Program

ETS Education and Training Services

FTM Family Team Meeting

GED Graduate Equivalency Diploma

GSU Georgia State University

HIPAA Health Information Portability and Accountability Act

ICPC Interstate Compact for Placement Children

IDS Internal Data System

IEP Individualized Education Plans
 ILP Independent Living Program
 JCRP Juvenile Court Review Panel
 MDT Multi-Disciplinary Team
 MSW Master of Social Work

OFI Office of Family Independence OPM Office of Provider Management ORCC Office of Residential Child Care

PEAS Program Evaluation and Analysis Section

PCM Permanency Case Manager PIP Program Improvement Plan PRU Provider Relations Unit

PSDS Protective Services Data System

QA Quality Assurance

RBWO Room Board Watchful Oversight
RRTF Reimbursement Rate Task Force
RYDC Regional Youth Detention Center
SAAG Special Assistant Attorney General

SACWIS Statewide Automated Child Welfare Information

System (Georgia SHINES)

SAS Statistical Analysis Software

SPSS Statistical Package for Social Sciences

SSI Supplemental Security Income TPR Termination of Parental Rights

WIG Wildly Important Goal

WTLP Written Transitional Living Plans

Part I INTRODUCTION

Background, Purpose, Scope, and Organization of Report

This is the ninth report prepared by the Accountability Agents for the *Kenny A. v Perdue* Consent Decree. This report reviews the State Defendants' progress from January 1 through June 30, 2010 in achieving improved child welfare outcomes and in meeting its other obligations under the Consent Decree. The *Kenny A. v Perdue* Consent Decree established James T. Dimas and Sarah A. Morrison as independent Accountability Agents with responsibility to produce public reports every six months. This introduction is intended to provide a brief overview of the *Kenny A*. Consent Decree and the Accountability Agent's methods of assessing the State's performance as well as the scope and organization of this report.

A. The Kenny A. v Perdue Consent Decree

Under the terms and conditions of the *Kenny A*. Consent Decree, the State is to achieve and sustain 31 outcomes as well as maintain certain practice standards with respect to the children in the custody of the DeKalb and Fulton County Departments of Family and Children Services (DFCS). These practice standards relate to needs assessment, service planning, placement experience, health care, investigation of maltreatment allegations concerning children in foster care, and court reviews and reporting. Some are new requirements for administrators and case managers and others are existing agency policy and practice requirements receiving heightened attention. In addition, the Consent Decree stipulates various infrastructure requirements for the State and counties. These stipulations relate to data automation, caseload sizes, training, supervision of private providers, foster parent licensing and support, and financing.

For purposes of analysis and reporting, the outcomes have been organized into seven thematic groupings. Exhibit I-1 displays these groupings.

B. Methodology

The methodology and quality assurance protocols applied to data collection and analyses in Period IX are similar to those employed in all previous reporting periods. As in previous periods, several sources of information and data collection methods have been used to produce the analyses presented in this report. These methods include two randomly drawn samples; one of all children in DFCS custody between July 1 and June 30, 2010 and the other of all licensed foster homes active in the same time period. All maltreatment in care investigations completed between January and June 2010 were reviewed. Appendix B has a full description of the methodology for Period IX. The Accountability Agents verified State and County reported data except where otherwise noted in the report. The methodology applied to the measurement of each outcome is noted at the beginning of each measurement discussion throughout this report.

A key component of the methodology continues to be the monthly meetings with State and County leadership and field staff that are referred to as "G2." These meetings employ a recursive learning process that uses operational data to support the development and testing of hypotheses about the potential causes of observed performance problems and the framing of strategies for improvement. This iterative process helps participants identify what works to produce the desired outcomes, and to hold themselves and each other accountable for doing that which works. These meetings foster self-evaluation and have lead the counties to create systems to track, monitor, and share with one another useful information that previously was unavailable or difficult to access.

In all data collection efforts the State and the Counties have been very cooperative.

EXHIBIT I-1: Thematic Grouping of *Kenny A* Outcomes

Safety

- 1. Children in Foster Care are Safe from Maltreatment
 - Consent Decree Outcomes 1, 2, and 3 related to investigations of maltreatment in care.
 - Consent Decree Outcomes 5 and 6 related to the incidents of substantiated maltreatment in care and corporal punishment.

Permanency

- 2. Children in Placements Maintain Family Connections
 - Consent Decree Outcomes 7, 16, and 19 related to keeping children connected to family and community at the time of placement.
 - Consent Decree Outcomes 21 and 23 related to visitation among family members.
- 3. Children Achieve Permanency
 - Consent Decree Outcomes 4 and 14 related to re-entry into care.
 - Consent Decree Outcomes 8a & b, 9, 10, 11, 12, 13, and 15 related to positive permanency exits.
 - Consent Decree Outcomes 27 and 28 related to timely and complete court review of permanency efforts.

Well Being

- 4. Children Experience Stable Placements and Worker Continuity
 - Consent Decree Outcome 17 related to placement stability.
 - Consent Decree Outcomes 18, 20, and 22 relate to worker continuity and contacts with children and caregivers.
- 5. Children and Youth Receive the Services they Need
 - Consent Decree Outcome 24 related to the educational achievement of youth who "age out" of foster care.
 - Consent Decree Outcome 30 related to meeting children's service needs.

Strengthened Infrastructure

- 6. Effective Oversight of Placement Settings
 - Consent Decree Outcomes 25 and 31 related to placement setting conditions.
- 7. Timely and Complete Court Orders
 - Consent Decree Outcomes 26 and 29 related to DFCS authority to assume and maintain custody.

C. Report Scope and Organization

This report describes the State's performance relative to the outcome measures that were to be achieved by the end of Period IX and progress implementing required policies, practices, and infrastructure. Where the information was available, comparisons to previous reporting period performance are cited.

The remainder of the report is organized into the following parts:

Part II, Conclusions and Recommendations summarizes the accomplishments and status of State and County actions taken during Period IX. It offers recommendations believed important to the State and Counties' continued progress.

Part III, Safety of Children in Care includes an assessment of the State's Period IX performance related to Outcomes 1, 2, 3, 5, and 6, focused on keeping children in its care safe from maltreatment and responding to reports of alleged maltreatment.

Part IV, Children Achieving Permanency includes an assessment of the State's Period IX performance related to Outcomes 4, 7, 8, 9, 10, 11, 14, 15, 16, 19, 21, 23, 27 and 28, focused on maintaining and achieving permanent family connections for children in State custody.

Part V, Children's Well Being in Care includes an assessment of the State's Period IX performance related to Outcomes 17, 18, 20, 22, 24 and 30, focused on providing for the well-being of children in custody. This part also includes a summary of the Curative Action for Discharge services.

Part VI, Strengthening the Infrastructure includes an assessment of the State's Period IX progress in achieving Outcomes 25, 26, 29, and 31 and implementing required infrastructure components related to providing services to families and children.

Part VIII, Miscellaneous Provisions provides verified data regarding the re-maltreatment rate of children in DeKalb and Fulton counties and the number and percentage of "diversion" cases in those counties between January 1 and June 30, 2009 that experienced substantiated maltreatment within the subsequent 12 months.

Appendix A provides the full wording for all 31 outcomes. Appendix B has a detailed description of the data collection and analysis methods employed to produce this report. Appendix C provides selected information about all children in the custody of DeKalb and Fulton Counties on June 30, 2010. Appendix D is a special supplemental report to Period VIII providing the measurement of Outcome 7, Diligent Search, and a picture of assessments and services to children in their first 60 days in foster care.

Part II CONCLUSIONS AND RECOMMENDATIONS

During the January 1 to June 30, 2010 period covered by this report, the State's overall performance, for the most part, continued the trend of steady improvement observed over the last several periods. For most of the outcomes measured in Period IX (19 of 29), the State's performance was similar to or surpassed its best previous achievement. In addition, in three other areas (Outcomes 5, 9 and 11) the State demonstrated improved performance from Period VIII, though falling short of their best ever performance over all reporting periods. In particular, the State demonstrated marked improvement in the maltreatment in care rate. However, the State appears to have lost ground in some areas, most notably in maintaining case manager continuity for foster children and in the rate of foster care re-entry.

The remainder of this chapter highlights the State's performance trends, major accomplishments, opportunities for improvement, and the Accountability Agents' recommendations. Table II-1 at the end of this chapter provides the performance standard for each outcome, summarizes the State's actual performance by outcome, and offers a comparison to Period VIII performance.

A. Positive Trends and Major Accomplishments

Safety Performance

• Maltreatment in Care Declined Substantially. (Outcome 5)

Although the State failed to attain the Outcome 5 standard of 0.57 percent, the Period IX maltreatment in care rate dropped by nearly half; from 1.17 percent in Period VIII to 0.63 percent in Period IX. In Period IX, maltreatment in care was at its lowest level since Period VI. Maltreatment in congregate care settings continued to have a disproportionate impact on the overall maltreatment in care rate; in Period IX, congregate care facilities accounted for about 18 percent of placements but 75 percent of maltreatment in care victims.

• Timely Initiation of Maltreatment in Care Investigations Continues. (Outcomes 1 and 3)

The State commenced 99 percent of maltreatment in care investigations within 24 hours of report receipt (Outcome 1) and 99 percent of all alleged victims were interviewed within 24 hours by trained CPS investigators (Outcome 3). This was the fourth consecutive reporting period that compliance with these standards has been maintained at a rate of 97 percent or better, and the first period in which the Outcome 3 threshold of 99 percent was attained. Furthermore, 90 percent or more of the maltreatment in care investigations completed in Period IX had documented compliance with 11 of 13 essential policy requirements.

• Foster Parents are Not Using Corporal Punishment. (Outcome 6)

For the ninth consecutive reporting period, the State met the Consent Decree standard related to the use of corporal punishment in foster homes (Outcome 6). Of the 161 foster homes sampled, 161 (100%) did not have a confirmed instance of the use of corporal punishment in the previous 12 months. The standard for Outcome 6 requires that 98 percent of foster homes be without an incident of corporal punishment within the previous 12 months.

Permanency Performance

• A Majority of Children are Achieving Permanency with Their Families or New Families.

Although the State fell short of the Consent Decree's performance thresholds for certain groups of children who had been in care a long time, its Period IX performance was an improvement over past periods and by the end of Period IX, 61 percent of the children entering custody since the advent of the Consent Decree (October 27, 2005) had exited to reunification or to another family-connected permanency within 24 months, however, it still fell short of the goal of 74 percent. Seventy-one percent overall had exited to permanency since the effective date of the Consent Decree.

For the longest staying children (those in foster care prior to October 27, 2005 for as little as one day to as many as seven or more years), the State had its best performance since Period II. Seventy-two percent of these longest staying children had exited to reunification or to another family-connected permanency by the end of June 2010, approximately four and half years since the Consent Decree's advent. Six percent of the children in custody before the Consent Decree remained in custody on June 30, 2010.

• Over Half the Children Who Entered Foster Care Since the Consent Decree Achieved Permanency in 12 Months or Less. (Outcome 8a)

For the eighth consecutive reporting period (since July 2006), the State's performance surpassed the Outcome 8a threshold. Outcome 8a establishes the expectation of permanency within 12 months for at least 40 percent of the children who enter foster care on or after October 27, 2005. As of the end of Period IX (June 30, 2010), 54 percent of the children who entered foster care since the Consent Decree's advent achieved permanency within 12 months.

• Children Continued to be Placed in Care Settings Close To Their Homes. (Outcome 19)

For the eighth consecutive reporting period (since July 2006), the county placement process has met or surpassed the placement proximity requirements for 95 percent or more of the children in foster care. Outcome 19 requires that 90 percent of the children in custody be placed within the county or within 50 miles of the home from which they were removed or meet certain

exceptions to the proximity requirement. In Period IX, the State placed **95 percent** of the children in the sample of foster care cases reviewed within the proximity guidelines.

• Children With the Goal of Reunification Had Appropriate Visitation with Their Parents. (Outcome 21)

Outcome 21 seeks to facilitate the goal of reunification by requiring 85 percent of the children with a goal of reunification to have appropriate visitation with their parents. For the third consecutive period, the State surpassed the Outcome 21 threshold. **Eighty-seven percent** of the children with the goal of reunification in the sample of foster care case records reviewed had visited appropriately with their parents.

• Sibling Connections are Maintained Through Placement Together (Outcome 16) and Increasingly Frequent Visits Together. (Outcome 23)

In Period IX, 233 children entered foster care with one or more siblings who did not need special separate placements. The State placed together **84 percent** of the 233 children, exceeding the Outcome 16 threshold of 80 percent. This is the fourth consecutive reporting period in which the State has been able to place together 79 percent or more of the siblings entering custody. An additional 35 children (15%), from sibling groups ranging in size from five to 11 children, were placed with some of their siblings until discharged or the end of the period.

For those siblings who are in separate placements, Outcome 23 requires that at least 80 percent visit with each other, each and every month for 12 consecutive months prior to the end of the reporting period or date of their discharge. In Period IX, **52 percent** of the children separated from siblings in the sample of foster care cases reviewed met the full visitation requirement. This is the third consecutive reporting period that 50 percent or more of the separated siblings have experienced such continuity in visitation with each other. Another 25 percent appear to have missed only one monthly visit.

This is the last reporting period the Accountability Agents will be reporting Outcome 23 performance in this way. Beginning in Period 10, the Accountability Agents will be applying a different standard and methodology based on a revised agreement between the Parties. That agreement creates a slightly higher visitation standard (90% rather than 80%) and replaces the current methodology (based on file review data for the last 12 months for a sample of the children in care; counting as "successes" only children that had visits each and every month they were in care of the last 12 months) with a methodology based on the Counties' monthly visitation data for the entire universe of separated siblings for the reporting period only. The new approach will produce more timely data that more closely reflects actual monthly State performance.¹

¹ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, effective November 22, 1010.

• Timely Efforts to Identify and Contact Extended Family Members Who Can Be Permanency Resources for Children. (Outcome 7)

The Consent Decree, in Outcome 7, requires the diligent search for parents and relatives to be undertaken and documented within 60 days of entry for at least 95 percent of all foster children entering care. Measurement of Outcome 7 lags behind the measurement of most other outcomes because it requires a sample of children in care who enter and remain in care at least 60 days. As a result, the performance reported here reflects the Period VIII activity, not Period IX. The file documentation indicated that a diligent search was undertaken and documented for 122 (94%) of the 130 children in the sample. This performance is a substantial improvement from the previous measurement of 80 percent made for Period VI.

• Permanency Options for Children in Custody 15 of the Last 22 Months are Timely Evaluated. (Outcome 15)

For the fourth consecutive reporting period (since July 2008), the State met or surpassed the Outcome 15 threshold.² Among the 884 children who, during Period IX, reached or had surpassed their 15th month in custody out of the last 22 months and were not living with relatives, **100 percent** were either legally free to be adopted or the State had filed to terminate parental rights or documented compelling reasons why it had not taken such action.

Well-being Performance

• More Children are Experiencing Stability in Their Living Arrangements. (Outcome 17)

After two periods of apparent decline, the proportion of children experiencing two or fewer placement moves in 12 months was once again over 90 percent in Period IX. Outcome 17 requires that 95 percent of the children in foster care experience no more than two moves among placements in 12 months. In the sample of foster care cases reviewed, **92 percent** of the children experienced two or fewer placement moves in the 12 months preceding June 30, 2010 or their last date in custody.

• Nearly Two-thirds of the Children in Foster Care Consistently Visited Twice Every Month with their Case Managers. (Outcome 20)

Outcome 20 requires that 95 percent of the children in care visit with their case managers twice per month, each and every month for 12 consecutive months prior to the end of the reporting period or the date of discharge. In addition, at least one of these two monthly visits is to be in

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² Outcome 15 achievement requires at least 95% of all children in care who have been in state custody for 15 of the prior 22 months to have had either: (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed.

the child's placement and include an opportunity for the child to speak privately with the case manager. For the second consecutive period, **64 percent** of the children in the foster care sample visited with their case managers according to this standard over the previous 12 months. The Accountability Agents know of no other child welfare agency in the country maintaining such a consistent frequency of case manager visits with children.

This is the last reporting period the Accountability Agents will be reporting Outcome 20 performance in this way. Beginning in Period 10, the Accountability Agents will be applying a different standard and methodology based on a revised agreement between the Parties. That agreement creates a slightly higher visitation standard (96.5% rather than 95%), and replaces the current methodology (based on file review data for the last 12 months for a sample of the children in care; counting as "successes" only children that received two visits each and every month they were in care of the last 12 months) with a methodology based on the Counties' monthly visitation data for the entire universe of children in care for the reporting period only. The new approach will produce more timely data that more closely reflects actual monthly State performance.³

• Case Managers Frequently and Consistently Visited Substitute Caregivers. (Outcome 22)

Outcome 22 expects at least 90 percent of the substitute caregivers to receive a monthly visit from the child's case manager each and every month of the previous 12 months or the date of the child's discharge. In Period IX, **80 percent** of the substitute care givers received the required visits from case managers over the previous 12 months. This is similar to the Period VIII performance and is the third consecutive reporting period that the State's performance has been 75 percent or better.

This is the last reporting period the Accountability Agents will be reporting Outcome 22 performance in this way. Beginning in Period 10, the Accountability Agents will be applying a different standard and methodology based on a revised agreement between the Parties. That agreement creates a slightly higher visitation standard (95% rather than 90%), and replaces the current methodology (based on file review data for the last 12 months for a sample of the children in care; counting as "successes" only caretakers that received visits each and every month a child was in their care of the last 12 months) with a methodology based on the Counties' monthly visitation data for the entire universe of children in care for the reporting period only. The new approach will produce more timely data that more closely reflects actual monthly State performance.⁴

⁴ Ibid.

³ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, effective November 22, 1010.

Infrastructure Strengthening

• Nearly All Children are in Fully Approved Placements. (Outcome 25)

Outcome 25 requires that 98 percent of children in out-of-home care be in placements that are in "full approval and/or licensure status." The State met or exceeded this standard for the third consecutive time during Period IX, with **98 percent** of children in out-of-home care in placements that were in "full approval and/or licensure status." This was the fifth consecutive period that the State's performance has been at 96 percent or better. Period IX also marked the third consecutive period in which the documented compliance rate for each of the 16 foster home approval and licensing standards exceeded 90 percent.

• Foster Homes are Not Overcrowded. (Outcome 31)

Outcome 31 specifies foster home capacity standards that apply to all DFCS-supervised and provider-supervised foster homes. For the eighth consecutive reporting period, the State surpassed the Outcome 31 threshold. The Outcome 31 standard stipulates that less than 10 percent of the children in foster homes shall be placed in homes in which their placement results in more than three foster children, or six total children in the home, unless they are part of a sibling group and there are no other children in the home. **None (0%)** of the children in the Period IX sample of children in foster care were placed in homes that exceeded these standards.

• The State Continues to Maintain Legal Custodial Authority with Few Lapses. (Outcome 29)

For the sixth consecutive reporting period, the State met or surpassed the Outcome 29 threshold. Outcome 29 stipulates that no more than 5 percent of all children in custody of DHS/DFCS for 12 months or more shall have a lapse of legal custody within the prior 13 months. In Period IX, **three percent** of the children in the foster care sample of 180 children appear to have had a lapse of legal custody within the prior 13 months.

• Required Court Order Documentation to Support Federal Reimbursement Claims Appears to Have Improved. (Outcome 26)

Outcome 26 relates to DFCS having the proper documentation in a child's file to support an appropriate claim for Federal reimbursement under the Title IV-E program.⁵ For Outcome 26, 144 children (80%) of the 180 children in the Period IX placement sample had the required court orders with all the required language necessary to assess current eligibility for federal funding under Title IV-E. The threshold for this outcome is 95 percent. The Period IX performance is the State's best performance to date.

⁵ See pp 36-37, Outcome 26 of the Consent Decree

B. Setbacks and Continued Challenges

Setbacks: Declines in Performance

• Permanency Success Continues to be Tempered by an Increasing Proportion Returning to Foster Care. (Outcome 4)

The rate of foster-care re-entries within 12 months once again increased in Period IX. It rose from 9.7 percent in Period VIII to 11.1 percent in Period IX. This is the State's poorest performance on this outcome to date. The State is challenged, as are all child welfare systems, to strike an effective balance between discharging children from care as quickly as is safely possible, and minimizing the re-entries to care that result when efforts to provide permanency prove unsuccessful. With increasing State efforts to shorten foster care stays for children and to safely return them to their families, some re-entry is to be expected, as reflected in the Consent Decree's stipulation that no more than 8.6 percent of the children who experience a foster care episode will be returned to the State's custody within 12 months of exiting care. However, the trauma of repeated separation and foster care placement is detrimental to children's healthy development.

DeKalb and Fulton Counties each recently conducted studies of their re-entry populations to help them develop strategies that may reduce re-entries. As with the Accountability Agent's analysis of Period VIII re-entries, a large proportion (69% to 81%) of the children remained under court-ordered DFCS supervision through protective orders when they exited custody to their parents or relatives. The children returned to custody primarily because families were considered noncompliant with the requirements of the case plan and/or protective orders. Teenagers with dual involvement with the Department of Juvenile Justice accounted for another trend among the re-entries. These youth often pass from a foster care episode to a juvenile detention episode and upon being discharged from juvenile detention, are returned to foster care when family members decline to take them in. Finally, the initial foster care episode for most children was less than six months.⁶ This trend suggests that some children may have been discharged before their behaviors or family circumstances changed sufficiently to enable them to find permanency in the home to which they were discharged. The county analysis also showed that the homes to which the children were discharged were not always the homes from which they were initially removed. To try to minimize the number of re-entries, both counties are developing and implementing strategies that focus on improved assessment of needs when children first enter custody, transitional supports for children exiting custody under continued DFCS supervision, strengthening discharge planning, and coordination with the Department of Juvenile Justice.

⁶ See Dimas, J. T. and Morrison, S. A. Period VIII Monitoring Report, *Kenny A. v. Perdue*, July 2010, for an analysis of children who re-entered custody in Period VIII.

• Foster Care Case Manager Continuity Slipped. (Outcome 18)

Outcome 18 requires that at least 90 percent of the children in care experience no more than two case managers in a 12-month period. During Period IX, the State met the case manager continuity requirement for **84 percent** of the children in custody on June 30, 2010. This was the first period in seven that the State has not met or surpassed the outcome threshold. This slippage appears to be, in part, the result of case manager resignations and redistributions of caseloads.

• A Declining Proportion of Children Appear to be Receiving Timely Six-Month Case Plan Reviews (Outcome 27)

For the third consecutive reporting period, the proportion of children with documented timely six-month case plan reviews declined. In Period IX, 71 percent appeared to have had timely reviews compared to the State's best performance on this outcome of 81 percent in Period VI. The performance threshold for Outcome 27 is 95 percent. Timely six-month reviews are important to ensure that children are "on track" to achieve the designated permanency goal or that necessary plan modifications are made and implemented expeditiously to help prevent lengthy stays in foster care.

Continued Challenges to Improving Performance

 Worker Caseloads Decreased Slightly Between January and June 2010 but Many Workers Still Exceeded the Stipulated Caseload Caps by the end of Period IX.

On June 30, 2010, **69 percent** of all case managers in DeKalb and Fulton Counties had caseloads that were at or under designated caps. This is a slight overall improvement from the end of December 2009 when 66 percent of the case managers had caseloads at or under the designated caps. The greatest improvement occurred among the Child Protective Services Investigative staff (27 percentage points) and the Specialized Foster Care case managers (13 percentage points). However, the proportion of Family Preservation and Permanency case managers with caseloads under the caseload caps decreased by 11 and eight percentage points, respectively.

According to case managers and supervisors interviewed in September and October 2010, the caseload sizes started to decrease in late June and July as more newly hired staff began receiving provisional caseloads and then achieved full certification status. In addition, DFCS historically receives fewer referrals after the close of the school year so Investigators had more time to devote to completing and safely closing investigations that had been delayed in favor of timely initiating investigations into new reports. Furthermore, both counties initiated new strategies to maintain more equal case distribution among investigators. Existing cases have been and continue to be reassigned among all case managers to achieve better balance. This is an on-going activity as staff turn-over remains a challenge. However, as of October 2010, the

staff interviewed acknowledged having caseloads that were more compliant with the Consent Decree standards than they had experienced in the spring of 2010. As a result, the Accountability Agents anticipate that State performance in this area will continue to improve in Period 10.

• Performance in Meeting Children's Individual Service Needs Continues to Fall Short. (Outcome 30)

Meeting *all* the service needs identified in children's case plans (Outcome 30) continues to be a challenge for the State. The State's Period IX performance on Outcome 30 was 69 percent, compared to 68 percent in Period VIII. However, Outcome 30 requires that at least 85 percent of the children have *all* the needs identified in their case plans met. Timely well-child health check-ups and regular dental care would help to improve this performance.

The State reported strengthening or initiating several activities since June 2010 that are designed to ensure children's needs are appropriately and timely identified and that they receive the services they need. Among other things, these activities include a 100 percent case record review of all children in care to determine gaps in assessments and to schedule needed screenings; fully implementing the SHINES capability to produce a report of children with near due or overdue health checks (medical, dental, mental health, and/or developmental); and staff training on the schedule and components of Early and Periodic, Screening, Diagnosis, and Treatment (EPSDT) Health Check Program. The counties are also working to identify other action steps to obtain timely assessments and timely response to needs, and to ensure the activities are appropriately and timely documented in the files.

• The Proportion of Children who are Legally Free for Adoption and are Without a Permanent Home has Grown.

The Consent Decree encourages expeditious adoptions with Outcome 11 requiring that 80 percent of the children whose parents have their parental rights terminated be adopted within 12 months. The State's performance in this area had been declining for several periods but there was a modest improvement with a performance of **54 percent** in Period IX. This is an area that remains a challenge and the State has redoubled its efforts on behalf of these children with more intensive monitoring and elimination of permanency barriers.

Permanency for those children for whom parental rights have been terminated requires focused attention as the pool of children who are legally free for adoption and in custody 15 months or more has grown from 190 at the end of Period VIII to 265 at the end of Period IX, or 39 percent. At the end of Period IX, 35 percent of the children who had spent 15 months or more in foster care were legally free for adoption, compared to 25 percent of all children who had reached this milestone and remained in care at the end of Period VIII. At the end of Period VII the proportion was 31 percent.

C. Recommended Priorities for State Attention

The State is to be commended for the positive trends and accomplishments evident in Period IX. However, as identified, there remain some important challenges. Based on the overall trends and issues facing the State, the Accountability Agents commend three previously identified priorities and one new one to the State's attention.

• Continue to Reduce and Stabilize Caseloads.

Although Period IX saw substantial improvements in CPS and Specialized caseloads, these were almost entirely offset by slippage in Family Preservation and Permanency caseloads. While the Accountability Agents anticipate that a larger proportion of caseloads will meet the required caps by the end of December 2010, sustaining theses improvements has proven to be the challenge. Meeting this challenge is likely to require effective recruitment and retention of individuals who have the knowledge, skills, and commitment to work with the families and children that DFCS serves. Effective supervision is often linked to higher retention rates, and the State is urged to provide frontline supervisors with the additional support, training, and coaching they need to be effective. Also, as caseloads are rebalanced and redistributed, thoughtful decision making will be required to avoid further slippage of case manager continuity that might impede case progress.

• Continue to Address the Rate of Re-entry.

Since June 2010, the counties have initiated some promising strategies to improve the chances that children who are reunified with their families or become the custodial responsibility of a relative achieve sustained permanency through those arrangements. Over the next few periods, these efforts may reduce the proportion of children experiencing re-entry from the current high of 11.1 percent to the Consent Decree stipulated goal of 8.6 percent. However, these efforts need to be effectively implemented and tracked; to be given time to work; and to be modified if they do not produce the desired results.

• Continue to Improve Timeliness of Assessment and Responsiveness to Children's Needs.

Again, State strategies initiated since June 2010 to improve assessment and responsiveness have promise because they build intentional follow-up into the daily practice of case managers. Ensuring that children's service needs are properly identified and met requires follow-up and constant supervisory vigilance. Case managers are urged to use their regular visits with children and caretakers to ensure all assessment findings are thoroughly discussed and appropriate services are timely initiated in response to identified needs. Program administrators and supervisory staff are urged to use the tools available to them in SHINES,

county protocols, or that they may have created for themselves to encourage case management staff to follow-through on assessment findings and to hold them accountable for doing so.

Intensify Recruitment of Permanent Families for the Children Who are Legally Free for Adoption

The State has already begun to move more expeditiously on behalf of the children who are recently "freed" for adoption but there is still a pool of children who have been waiting a long time for a permanent family. There is no single or easy strategy for these children, many of whom face multiple barriers to permanency. However, over the last five years, State and County staff have celebrated many success stories of older youth and children with numerous special needs achieving permanency when the odds against such success may have initially seemed overwhelming. The State is urged to continue its efforts to act expeditiously when parental rights are first terminated and to creatively problem-solve around the permanency barriers of children who have been waiting several years for adoption or guardianship.

Table II-1 Kenny A. Outcomes: Progress as of June 30, 2010

Safety Outcomes Children in Foster Care are Safe From Maltreatment in Care	Period IX Performance	Comparison to Period VIII ⁷
Outcome 1: At least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.	99%	Similar
Outcome 2: At least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.	55%	Declined
Outcome 3: At least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.	99%	Similar
Outcome 5: No more than 0.57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.	0.63%	Improved
Outcome 6: 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.	100%	Same
Permanency Outcomes		
Children in Placements Maintain Family Connections Outcome 7: At least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.	94%	Improved
Outcome 16: At least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.	84%	Improved
Outcome 19: 90% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b (ii) and (iii).	95%	Declined within the Margin of Error

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⁷The characterization of differences between Period IX and Period VIII is based on the following criteria for Outcomes measured using the entire population (numbered 1,2,3,4,5,8a,8b,9,10,11,14,15,16,18, and 24): similar=change up to +/- 2%; improve/decline= change +/- 3% or more; Outcomes measured using a sample each period (numbered 6,7,17,18,19,20,21,22,23,25,26,27,28,29,30, and 31) employed a statistical test that measured the differences between the results between the two periods that accounted for the margin of error of each sample. For these outcomes similar=change up to +/- 2%; improved/declined= change greater than the margin of error; improved/declined within margin of error= change +/- 3% or more but still within the margin of error.

Permanency Outcomes Children in Placements Maintain Family Connections	Period IX Performance	Comparison to Period VIII
Outcome 21: At least 85 % of all children with the goal of reunification shall have appropriate visitation with their parents to progress toward reunification.	87%	Declined within Margin of Error
Outcome 23: At least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month during the prior 12 months in custody, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placement is more than 50 miles and the child is placed with a relative.	52%	Declined within Margin of Error
Permanency Outcomes		
Children Achieve Permanency		
Outcome 4: No more than 8.6% of all foster children entering custody shall have re-entered care within 12 months of the prior placement episode.	11.1%	Declined
Outcome 8a : Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	54%	Similar
Outcome 8b: Of all the children entering custody following the entry of the Consent Decree, at least 74% shall have had one of the following permanency outcomes within 12 months or less after entry: reunification, permanent placement with relatives, or shall have had one of the following permanency outcomes within 24 months or less after entering: adoption, permanent legal custody, or guardianship.	61%	Similar
Outcome 9: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the "24 backlog pool"): For all children remaining in the 24 month backlog pool after the third reporting period at least 40% by the end of the fourth reporting period shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	24%	Improved

Permanency Outcomes Children Achieve Permanency	Period IX Performance	Comparison to Period VIII
Outcome 10: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree: For all children remaining in the over 24 month backlog pool after the third reporting period at least 35% by the end of the fourth reporting period shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	18%	Similar
Outcome 11: For all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights	54%	Improved
Outcome 12: For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.	94% One Time Measure Taken in Period I	N/A
Outcome 13: For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.	30% One Time Measure Taken in Period I ⁸	N/A
Outcome 14: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.	0%	Same
Outcome 15: Permanency efforts (15/22): At least 95% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed.	100%	Improved

 $^{^{8}}$ The children to whom this outcome applied have recruitment plans. Those who have been discharged since Period I have been included in the Outcome 9 and 10 results.

Permanency Outcomes Children Achieve Permanency	Period IX Performance	Comparison to Period VIII
Outcome 27: At least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's sixmonth case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.	71%	Declined within the Margin of Error
Outcome 28: At least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.	89%	Similar
Well-Being Outcomes		
Children Experience Stable Placements and Worker Continuity		
Outcome 17: At least 95% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody.	92%	Improved within the Margin of Error
Outcome 18: At least 90% of all children in care at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption worker or Specialized Case Manager; case managers who have died, been terminated, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave.	84%	Declined
Outcome 20: At least 95% of children in care at a point in time during the reporting period shall have had at least one in-placement visit and one other visit, as defined in Section 5.D, each month by their case manager during the prior 12 months in custody.	64%	Same
Outcome 22: At least 90% of all children in care at a point in time during the reporting period shall have had visits between their DFCS placement case manager and their foster parent, group care, institutional or other caretaker at least one time each month during the prior 12 months in custody.	80%	Similar

Well-Being Outcomes Children and Youth Receive Services They Need	Period IX Performance	Comparison to Period VIII
Outcome 24: The percentage of youth discharged from foster care at age 18 or older with a high school diploma or GED will increase over baseline by 20 percentage points.	To be Measured in Period 10	
Outcome 30: At least 85% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan.	69%	Similar
Strengthened Infrastructure Outcomes Effective Oversight of Placement Settings		
Outcome 25: At least 98% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status.	98%	Similar
Outcome 26: At least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act.	80%	Improved
Outcome 29: No more than 5% of all children in custody of DHS/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 months.	3%	Similar
Outcome 31: No more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three(3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.	0%	Improved Within Margin of Error

Part III SAFETY

Children in Foster Care are Safe from Maltreatment

Principle four of the Consent Decree asserts, "the state has primary responsibility for the care and protection of the children who enter the foster care system." As a consequence of this responsibility, several Consent Decree outcomes and requirements focus attention on the safety of children in the custody of the State (DHS/DFCS). This part reports on the State's progress in the areas related to the maltreatment of children in foster care and the process by which such allegations are investigated, and concludes with a more detailed discussion of the practices and processes employed to address reports and concerns of maltreatment in care.

A. Outcome Performance: Outcomes 1, 2, 3, 5, and 6

Five of the Consent Decree outcomes are clustered around keeping children safe while they are in custody and quickly addressing safety issues as they occur. All five of these outcomes had performance thresholds that were to be achieved before Period IV (December 2007). Table III-1 below provides the measured performance summary for each outcome in Period IX. The discussion following the table provides a more detailed description of State performance as well as the interpretation and measurement issues associated with the outcomes, and information about issues surrounding the work that provide a context for understanding the State's performance. This part also includes charts which display the State's performance trends over the nine reporting periods to date.

Table III-1 Children in Foster Care are Safe from Maltreatment: Progress as of June 30, 2010

Consent Decree Outcome	Period IX Performance
Outcome 5: No more than .57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.	0.63%
Outcome 1: At least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.	99%
Outcome 2 : At least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.	55%
Outcome 3: At least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with the alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.	99%
Outcome 6 : 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.	100%

⁹ See p. 4, Principle 4, of the Consent Decree

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1. Maltreatment in Care: Occurrence and Investigation of Reports

Outcome 5 – Maltreatment in Foster Care

Outcome 5 lies at the very heart of the Consent Decree. It is about keeping children in foster care safe from maltreatment. Child welfare systems have no higher obligation. It is unacceptable that any child in the State's protective custody should experience maltreatment in their out-of-home placement.

a. <u>Interpretation and Measurement Issues</u>

There were no new interpretation or measurement issues encountered during Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The Consent Decree standard for maltreatment in care (Outcome 5) since the end of 2007 (Period IV) has been 0.57 percent. This percentage (0.57%) represented the federal standard for maltreatment in care that was in effect at the time the Consent Decree was finalized. (The federal standard has since been reduced to 0.32%). Accordingly, Outcome 5 is measured using the federal definition of maltreatment in care as it existed in 2005: "Of all children in foster care in the State during the period under review, 0.57 percent or fewer were the subject of substantiated or indicated maltreatment by a foster parent or facility staff member." The data used to measure the outcome performance are derived from a review of all 82 investigations of alleged maltreatment concerning class member children in foster care completed during Period IX (January-June 2010).

b. State Performance

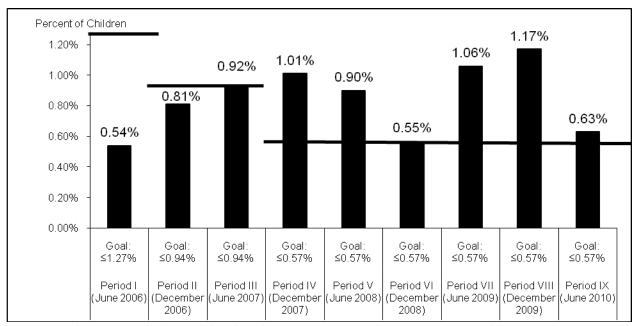
• The State Fell Short of the Outcome 5 Threshold

For Outcome 5, less than one percent (0.63%) of all children in foster care between January 1 and June 30, 2010 had been victims of substantiated maltreatment during that time period. The Consent Decree performance threshold for Outcome 5 is not more than 0.57 percent. The Period IX rate is roughly half the Period VIII rate of 1.17 percent, and represents the lowest maltreatment in care rate measured since Period 6. Figure III-1 displays the State's performance over nine reporting periods.

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¹⁰ U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families: Updated National Standards for the Child and Family Service Reviews and Guidance on Program Improvement Plans. Information Memorandum ACYF-CB-IM-01-07, August 16, 2003.

Figure III-1
Nine Reporting Periods of State Performance on Outcome 5:
Maltreatment in Care



Source: File Review of All Completed Maltreatment in Care Investigations, October 2005 – June 2010.

In Period IX, the case record review found 12 instances of substantiated maltreatment fitting the federal definition among the 1,890 children in custody at any point during the reporting period. This is less than half of the 25 substantiated victims of maltreatment in care found in Period VIII. The type of maltreatment substantiated for these 12 children consisted of: inadequate supervision alone (4 children); inadequate supervision along with inadequate health and medical care (4 children), physical abuse alone (3 children); and inadequate supervision along with emotional abuse (1 child). During the reporting period, 7 other class-member children were the victims of substantiated maltreatment that did not fit the federal definition of maltreatment in care. Four children were maltreated by their biological parent during an unsupervised visit, one child was maltreated by his biological parent during a supervised visit, and one child was maltreated by a relative in whose care the child had been placed. In one additional case, the maltreatment perpetrator could not be identified.

In Period IX as in previous reporting cycles, congregate care settings continued to have a disproportionate impact on the overall maltreatment in care rate. Table III-2 displays the pattern of distribution between family-based care settings and congregate care settings of: children in placement, maltreatment in care investigations, and substantiated victims of maltreatment over the last five reporting periods. While the percentage of maltreatment in care investigations in family-based care and in congregate care has remained roughly proportional to the percentage of children placed in those care settings over the last five periods, the percentage of substantiated victims maltreated in congregate care settings has grown

increasingly disproportionate to the percentage of children placed in those settings. For example, in Period V, congregate care facilities accounted for 15 percent of placements and 21 percent of substantiated victims of maltreatment; in Period IX, congregate care facilities accounted for 18 percent of placements but 75 percent of maltreatment in care victims. Conversely, in Period V, family-based care accounted for 85 percent of placements and 79 percent of substantiated victims of maltreatment; while in Period IX, family-based care accounted for 82 percent of placements but only 25 percent of maltreatment in care victims.

Table III-2
Outcome 5: Distribution of Children in Placement^a, Maltreatment in Care Reports, and Substantiated Victims of Maltreatment in Care between Family-based and Congregate Care, Periods V, VI, VII, VIII and IX

	Period V		Perio	od VI	Period VII		Period VIII		Period IX	
	Outcome 5: 0.90%					ome 5: 06%	Outcome 5: 1.17%		Outcome 5: 0.63 %	
Family Based Care ^b	% of total	Num -ber	% of total	Num -ber	% of total	Num -ber	% of total	Num -ber	% of total	Num -ber
Children in Family-based Care	85%		81%		81%		79%		82%	
Maltreatment in Care Investigations	80%	66	76%	68	71%	79	69%	63	70%	57
Substantiated Maltreatment in Care Victims	79%	19	85%	11	60%	15	56%	14	25%	3
Congregate Care ^c	% of total	Num -ber	% of total	Num -ber	% of total	Num -ber	% of total	Num -ber	% of total	Num -ber
Children in Congregate Care	15%		19%		19%		21%		18%	
Maltreatment in Care Investigations	20%	16	24%	21	29%	32	31%	28	30%	25
Substantiated Maltreatment in Care Victims	21%	5	15%	2	40%	10	44%	11	75%	9

Source: Case file review of all investigations completed January 1, 2008 – June 30, 2010.

However, part of the observed change is attributable to the number of substantiated victims maltreated in family-based care dropping sharply in Period IX (to 3, from 15 and 14 in Periods VII and VIII, respectively), while the number of substantiated victims maltreated in congregate care settings remained fairly steady over the last three periods (10, 11, and 9, respectively) – thus, the proportion of all substantiated victims accounted for by congregate care settings was much larger in Period IX. While some of the decline in substantiated maltreatment in family-based care in Period IX may reflect random change in these relatively small numbers, Table III-2 shows that in number and proportion, substantiated maltreatment in family-based care has

^aAccording to the random sample of children in foster care drawn each period.

^bIncludes: relative placements, DFCS-supervised foster homes, provider-supervised foster homes, and trial discharges to birth parents.

^cIncludes: group homes, residential care facilities, specialty hospitals, Metro YDC, and the Fulton Family Resource Center.

been trending downward for the last five periods. This likely reflects the impact of many of the practice changes the State and Counties have implemented in the last several years, such as increased frequency and quality of caseworker-child and caseworker-caretaker visits.

Maltreatment in care may be harder to reduce in congregate care settings due to the significant supervision challenges presented by the multiple teens usually placed in them, the tendency for supervision to be provided by non-resident shift-work staff rather than resident parental authority figures, and the fact that maltreatment reports emanating from them have the potential of involving multiple victims. For example, in Period IX a single incident in a congregate care facility accounted for four substantiated victims.

This congregate care incident itself made attainment of the Consent Decree standard for Outcome 5 of 0.57 percent extremely unlikely since, given the 1,890 children in the legal custody of DeKalb and Fulton Counties during Period IX, substantiated maltreatment during the Period would have had to be reduced to 10 or fewer victims for the standard to be met. Given the disproportionate contribution of congregate care facilities to the State's maltreatment in care rate, meeting the Consent Decree standard for Outcome 5 may require the State to continue moving away from the use of congregate care whenever possible in favor of family-based placement settings.

Outcomes 1, 2, and 3 – Maltreatment Investigation Process Measures

While Outcome 5 focuses on the result of reduced maltreatment in care, Outcomes 1, 2, and 3 measure important aspects of the process through which allegations of maltreatment in foster care settings are investigated. Outcome 1 relates to the timeframe in which an investigation of suspected maltreatment of a foster child is commenced. Outcome 3 relates to the frequency with which such investigations include face-to-face contact with the alleged victim within 24 hours. Because DFCS policy defines the "commencement" of an investigation as the point at which face-to-face contact with the alleged victim is made, they are very similar measures; the primary difference between them is the unit of analysis. For Outcome 1, the unit of analysis is the investigation itself (which may involve multiple alleged victims). For Outcome 3, the unit of analysis is the individual child who is an alleged victim. Outcome 2 relates to the length of time it takes to complete such investigations.

Data for these outcomes are based on the universe of 82 maltreatment investigations completed during the reporting period that involved a child in the custody of DeKalb or Fulton County. This represented a 10 percent decrease from the 91 such reports completed during Period VIII. The Consent Decree covers maltreatment in care investigations that involve any child in the adjudicated custody of DeKalb or Fulton counties, regardless of where in the State of Georgia the child's foster care placement is located. DFCS policy stipulates that alleged maltreatment is to be investigated by the County of the child's residence. Thus, when maltreatment is alleged to involve a class member who is placed outside DeKalb or Fulton County, the allegation is

investigated by the DFCS office in the county in which the child resides. For ease of reference, counties outside DeKalb and Fulton are referred to throughout this report as "perimeter counties."

a. Interpretation and Measurement

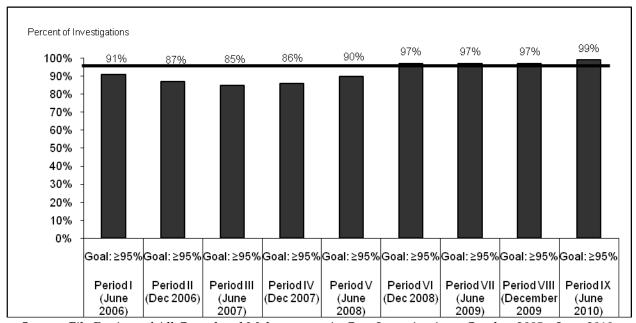
There were no new interpretation or measurement issues encountered during Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The data used to measure the outcome performance are derived from a review of all 82 investigations of alleged maltreatment of class member children in foster care completed during Period IX (January-June 2010).

b. State Performance

• The State Surpassed the Outcome 1 Threshold

As noted in Table III-1 for Outcome 1, **99 percent** of maltreatment in care investigations were commenced within 24 hours according to file review data from the universe of investigations completed during the reporting period. Outcome 1 requires that 95 percent of such investigations be commenced within 24 hours. This represents the fourth consecutive reporting period for which the Outcome 1 threshold was surpassed and the highest performance on Outcome 3 measured thus far. Figure III-2 displays the State's performance on Outcome 1 over nine reporting periods.

Figure III-2
Nine Reporting Periods of State Performance on Outcome 1:
Maltreatment in Care Investigations Commenced
Within 24 Hours of Receipt of Report



Source: File Review of All Completed Maltreatment in Care Investigations, October 2005 – June 2010.

As displayed in Table III-3, DeKalb and Fulton counties commenced 100 percent of the investigations they completed within 24 hours, while the 24-hour commencement rate for the perimeter counties was 97 percent. This is similar to the DeKalb/Fulton Period VIII rate of 100 percent, and a substantial improvement for the perimeter counties compared to their Period VIII 24-hour investigation commencement rate of 88 percent.

This measure counts only investigations in which an alleged victim is seen face-to-face by a trained CPS investigator or by police within 24 hours. The single case in which this did not happen was investigated by a perimeter county. In this case, the alleged victim was seen and removed from the placement setting before or at the time the allegation was made. Although this case counts as a "miss" toward Outcome 1, in terms of ensuring child safety it is important to recognize that in 81 of the 81 investigations (100%) the alleged victim(s) were seen by or removed from potential risk by child welfare professionals within 24 hours. ¹¹ This represents an improvement compared to Period VIII, in which 98 percent of alleged victim(s) were seen by or removed from potential risk by child welfare professionals within 24 hours.

¹¹ One alleged victim was deceased at the time the report was made; therefore the Outcome 1 and 3 analysis is based on 81 investigations.

Table III-3
Outcome 1 – Commencement of Maltreatment in Care Investigations
N=81*

Investigating	Not Comme Within 24 H		Commence Within 24 Ho		Total	
County	Number of Investigations	Percent of Total	Number of Investigations	Percent of Total	Number of Investigations	Percent of Total
DeKalb/Fulton	0	0%	51	100%	51	100%
Perimeter Counties	1	3%	29	97%	30	100%
Total	1	1%	80	99%	81	100%

Source: File Review of All Completed Investigations, January - June 2010.

• The State Fell Short of the Outcome 2 Threshold

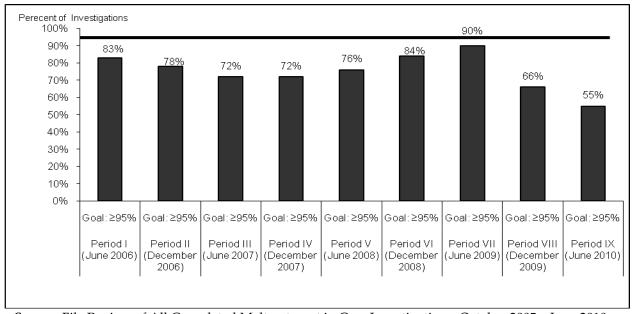
For Outcome 2, **55 percent** of maltreatment in care investigations (45 of 82) were completed within 30 days according to file review data from all investigations completed during the reporting period. This was an 11 percentage point decrease compared to the Period 8 rate of 66 percent, and represents the lowest performance on Outcome 2 measured thus far. However, an additional 33 investigations (40%) were completed within 31-44 days, bringing the proportion of investigations completed within 45 days to 95 percent. The remaining 4 investigations (5%) were completed within 46-59 days¹².

Outcome 2 requires that 95 percent of maltreatment in care investigations be completed, in accordance with DFCS policy, within 30 days. For Period IX, 95 percent of such investigations were completed within 44 days. The DFCS investigative practice standard applicable to investigations of alleged maltreatment among children NOT in foster care is 45 days, which was implemented to accommodate changes in the State's investigative practice protocol. As discussed below under "Operational Context," the State believes the sharp decline in Outcome 2 performance (from 90 percent in Period VII to 55 percent in period IX) may have resulted from the misapplication by field staff of the 45 day practice standard to investigations of maltreatment involving children in foster care, although the 30 day standard for completing such investigations did not change. Figure III-3 displays the State's performance on Outcome 2 over nine reporting periods.

^{*}One alleged victim was deceased at the time the report was made.

¹² The investigation that took 59 days to complete involved the death of a 10 month-old child in care (referenced also in footnote 3). The investigation was held open pending a police investigation and autopsy; the allegation of maltreatment was found to be unsubstantiated.

Figure III-3
Nine Reporting Periods of State Performance on Outcome 2:
Maltreatment in Care Investigations Completed Within 30 Days of Receipt of Report



Source: File Review of All Completed Maltreatment in Care Investigations, October 2005 – June 2010.

The Period IX performance of DeKalb and Fulton counties in completing investigations within 30 days declined compared to Period VIII (from 73% to 58%) while that of the perimeter counties improved from 46 percent to 50 percent. Period IX performance in completing investigations within 45 days declined in DeKalb and Fulton compared to Period VIII, from 100 percent to 92 percent; while remaining 100 percent for both periods in the perimeter counties. The Period IX performance of DeKalb, Fulton, and the perimeter counties is displayed in Table III-4.

Table III-4
Outcome 2 – Timely Investigations
N=82

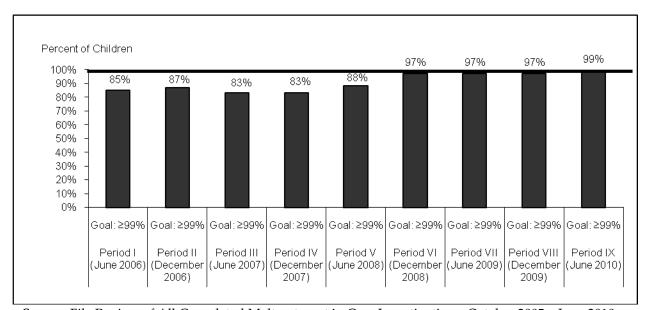
Investigating	Completed	d in ≤ 30 Days	Complete	ed in≤45 Days	Total		
County	, , ,		Number	% of Total	Number	% of Total	
DeKalb/Fulton	30	58%	48	92%	52	100%	
Perimeter Counties	15	50%	30	100%	30	100%	
Total	45	55%	78	95%	82	100%	

Source: File Review of All Completed Maltreatment in Care Investigations, January – June 2010.

• The State Met the Outcome 3 Threshold

For Outcome 3, 99 percent (108 of 109) alleged victims of maltreatment in care during Period IX had face-to-face private contact with a CPS investigator within 24 hours, according to file review data from all investigations completed during the reporting period.¹³ This represents the first reporting period in which the Outcome 3 threshold was met and the fourth consecutive period with a rate of 97 percent or higher. Figure III-4 illustrates the State's performance on Outcome 3 for nine reporting periods.

Figure III-4
Nine Reporting Periods of State Performance on Outcome 3:
Maltreatment in Care Investigations with Timely Face-to-Face Private Contact with All Alleged Victims



Source: File Review of All Completed Maltreatment in Care Investigations, October 2005 – June 2010.

The 109 alleged victims of maltreatment in care represented a five percent decrease from the 115 alleged victims reported for Period 8. The Outcome 3 performance of the perimeter counties improved substantially, from 88 percent in Period VIII to 98 percent in Period IX, while the performance of DeKalb and Fulton counties remained the same at 100 percent. Period IX data for Outcome 3 is displayed in Table III-5.

¹³ There were a total of 110 alleged victims of maltreatment in care during Period IX, but one child died prior to the investigation. In such circumstances, it is DFCS practice to conduct an investigation to determine whether maltreatment contributed to the child's death. This investigation found no evidence of maltreatment.

Table III-5
Outcome 3 – Face-to-Face Contact with Alleged Maltreatment Victims within 24 Hours
N=115*

Investigating	- 10 - 00-110	ect Within Lours	or Withir	d Prior To a 24 Hours eport	CPS Contact Within 24 Hours		Total	
County	Alleged	Percent	Alleged	Percent	Alleged	Percent	Alleged	Percent
	Victims	of Total	Victims	of Total	Victims	of Total	Victims	of Total
DeKalb/Fulton	0	0%	0	0%	68	100%	68	100%
Perimeter								
Counties	0	0%	1	2%	40	98%	41	100%
Total	0	0%	1	1%	108	99%	109	100%

Source: File Review of All Completed Maltreatment in Care Investigations, January – June 2010.

In measuring Outcome 3 performance, only alleged victims having face-to-face, private contact with a trained CPS investigator within 24 hours of the report's receipt are considered to have met the standard. The one alleged victim who was not seen within this time frame was in a case investigated by Cobb County. In this case, the alleged victim was removed from the placement setting in which the maltreatment was alleged to have occurred by the supervisor of her Fulton County placement case manager prior to the CPS referral being made, but the child was not interviewed by the Cobb County CPS investigator within 24 hours.

c. Operational Context

The State's overall Period IX performance in keeping children in care safe from maltreatment represented substantial improvement from Periods VII and VIII. The maltreatment in care rate of 0.63 percent was within .06 percentage points of the Outcome 5 standard, and was the lowest rate measured since Period VI. The State's performance on the measures related to timely initiation of investigations (Outcome 1) and timely face-to-face contact with all alleged victims (Outcome 3) established new "high water marks" at 99 percent, and represented the fourth consecutive reporting period for which performance on these measures exceeded 97 percent. However the proportion of timely-completed investigations (55%) was the lowest since reporting began and represents a precipitous decline from the Period VII performance of 90 percent.

The State's declining performance on Outcome 2 may have been the result of a change in investigative practice and State monitoring thereof that began in 2006. In that year, the State added to the previous child protective services (CPS) investigative protocol a "risk assessment" tool intended to help investigators distinguish between the dynamic, future-oriented concept of "risk of future maltreatment" and the more immediate and static concept of "child safety."

^{*}One alleged victim was deceased at the time the report was made.

"Both safety and risk are concerned with future maltreatment; however, safety is distinguished from risk as it concerns the immediacy of the future maltreatment. Risk refers only to the likelihood that the maltreatment may occur in the future. In addition, safety is dichotomous (a child is either safe or unsafe); while risk is typically classified on a high-low continuum." ¹⁴ To accommodate the additional time required for investigators to conduct a thorough assessment of family strengths and of risk factors, the state issued a "policy letter" extending the timeframe for completing investigations to 45 days in counties that had implemented the risk assessment tool. ¹⁵

Beginning in the first quarter of calendar year 2009, the 45 day timeframe for investigation completion became a focus of regular monitoring by the State through weekly "cadence calls." These cadence calls are a means through which county accountability on a number of measures is ensured and reinforced. Although the 30-day timeframe for completing "special investigations" of alleged maltreatment (which include those involving children in the State's custody) did not change, the State believes that field staff may have mistakenly believed the 45-day timeframe monitored through the cadence calls applied to investigations of all types.

To reverse the downward trend in Outcome 2 compliance, the State intends to take the following steps:

- Issue a memo to the field clarifying the time frames for completing special investigations as well as which cases meet the criteria for special investigations;
- Include in the cadence calls special investigations and their timely completion (within 30 days) as well as the timely completion of regular investigations (45 days);
- Resume comprehensive *Kenny A.* training for county staff during calendar year 2011; and,
- Release a SHINES enhancement that will allow users to produce a report that identifies cases designated as Special Investigations, when they were assigned, closed, how many days they were open, and case disposition. Counties will be able to produce the report daily to see how long cases have been open and if they are approaching the 30th day.

Outcome 6 – Corporal Punishment

Outcome 6 seeks to protect children in foster care from experiencing corporal punishment, which the Consent Decree defines as "...any physical punishment of a child that inflicts pain." ¹⁶

¹⁶ Ibid, p. 2

¹⁴ A Framework for Safety in Child Welfare; American Public Human Services Association, 2009; p.13.

¹⁵ Policy letter from DFCS Director Mary Dean Harvey to field management staff entitled "Investigation Timeframes for Counties Utilizing Risk Assessment," July 21, 2006.

Outcome 6 stipulates that by the end of Period IV, 98 percent of all foster homes will not have an incident of corporal punishment within the previous 12 months.

a. Interpretation and Measurement

The Consent Decree's use of the phrase "...all foster homes...."¹⁷ is operationalized as all foster homes with a class member in custody during the reporting period for measurement purposes. Appendix B provides a summary of previously resolved interpretation and measurement issues. The data used to measure Outcome 6 performance is based on a sample of 161 foster homes that had a class member in care at any point during the reporting period.

b. State Performance

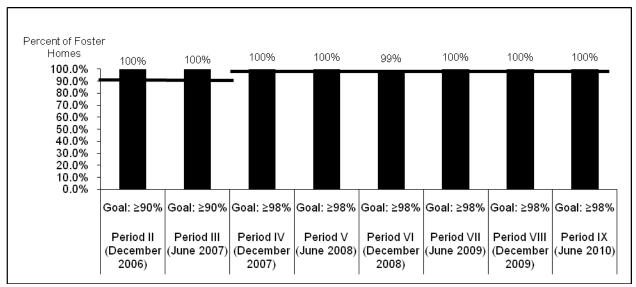
• The State Surpassed the Outcome 6 Threshold

The standard for Outcome 6 requires that 98 percent of foster homes be without an incident of corporal punishment in the previous 12 months. As noted in Table III-1, **100 percent** of the foster homes sampled had not had a confirmed incident of corporal punishment in the previous 12 months, surpassing the Consent Decree standard. This is the same as Period VIII, during which 100 percent of the foster homes sampled had not had a confirmed incident of corporal punishment and indicates that DFCS continues to do extremely well at protecting children placed in foster homes from corporal punishment. Figure III-5 illustrates the State's performance on Outcome 6 over the eight reporting periods to which the Consent Decree standards applied.

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¹⁷ Ibid, p. 32

Figure III-5
Eight Periods of State Performance on Outcome 6:
Incidents of Corporal Punishment in Foster Homes



Source: Foster Home Record Reviews, July 2006 – June 2010.

B. Other Practice/Process Requirements Regarding Maltreatment in Care Investigations and Corporal Punishment

1. Maltreatment in Care Investigations

Section 12 of the Consent Decree contains other requirements pertaining to the process of investigating and responding to reports of maltreatment in care.¹⁸ The following discussion summarizes the State's implementation of these requirements.

a. Investigations of Reports of Maltreatment in Care

Section 12.A. of the Consent Decree requires all reports of suspected maltreatment of children in foster care to be investigated by Child Protective Services staff (rather than permanency staff) in the manner and within the time frame provided by law and DFCS policy. Interviews with Fulton and DeKalb County staff, with staff of the Office of Provider Management (OPM) and the Office of Residential Child Care (ORCC), and the review of 180 randomly selected foster care records and all 82 reports of maltreatment in care completed during the reporting period indicate that it is the policy and the practice that all reports of maltreatment in foster care are investigated by CPS staff. The review of foster care records of 180 sampled children and 161 foster home records identified no instance in which an allegation of maltreatment appears to have been inappropriately screened out by a permanency worker. Future file reviews will continue to scrutinize placement and foster home records for compliance with the requirements of Section 12.A. to ensure that allegations of maltreatment in foster care are dealt with appropriately.

b. <u>Investigations Conducted in Accordance with State Standards</u>

Section 12.A. of the Consent Decree states that "All ... reports of suspected abuse or neglect of children in foster care shall be investigated by DFCS child protective services staff in the manner and within the time frame provided by law and DFCS policy." DFCS policy on maltreatment in care investigations (which are considered "Special Investigations") is contained in Section 2106 of the Social Services Manual. Section 2106 contains guidance on the many aspects of properly conducting Special Investigations, such as separately interviewing the parties involved, making two collateral contacts, evaluating the likelihood of continued safety, etc. In all, Section 2106 contains more than 150 discrete requirements pertaining to Special Investigations. The particular requirements vary depending on the type of placement setting being investigated.

The file review of maltreatment in care investigations explored the extent to which the investigations completed during Period IX were conducted in accordance with the investigative

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¹⁸ See pp.28-30 of the Consent Decree

¹⁹ See p. 28 of the Consent Decree

²⁰ Social Services Manual, Chapter 2100, Section VI, Georgia Dept. of Human Resources, July 2005.

standards contained in Section 2106. (The extent to which such investigations comport with the required timeframes is addressed in the discussion of Outcomes 1 and 2, above.) The results are presented in Table III-6 for the 11 investigative standards common to most placement types. The percentages reported in Table III-6 represent the number of instances for which the investigative file documentation was adequate to provide a conclusive, affirmative response.

Table III-6
Proportion of Investigations Meeting Policy Requirements
(N shown is for Period IX cases and varies based on placement setting and other case characteristics)

Investigation Policy Requirement	Percent of Applicable Files with Documentation of Compliance		
Period V		Period IX	
Investigator saw/interviewed every alleged maltreated child separately (N=81)	100%	100%	
All other adults frequently in the home interviewed separately (N=11)	82%	100%	
Alleged maltreater was interviewed separately (N=73)	91%	96%	
Continued safety of the child(ren) placed in the home was adequately evaluated and assessed (N=50)		96%	
At least two relevant collateral sources contacted during the investigation (N=80)	95%	96%	
All approved foster parents/caregivers interviewed separately (N=82)	92%	95%	
Investigator reviewed the DFCS history of the foster parent/caregiver (N=44)	96%	95%	
Investigator reviewed previous CPS reports for foster parents/caregivers (N=44)	92%	93%	
Investigator saw/interviewed each of the other children (non-alleged victims) separately (N=51)	97%	90%	
DFCS case managers required to visit in this foster care setting were contacted (N=82)	89%	87%	
File contains physical evidence to support case documentation (N=34)	73%	82%	

Source: Case file review of all maltreatment in care investigations completed July 1, 2009 – June 30, 2010.

As reflected in Table III-6, documented compliance with each of the 11 investigative policy requirements applicable to most investigations was found in 82 percent or more of the records reviewed. Compared to Period VIII, Period IX showed evidence of improved compliance for four requirements, four remained about the same (± one percentage point), while compliance appears to have declined for three requirements.

The case record review found evidence of improvement (18, 5, 3, and 9 percentage points, respectively) for four of these 11 policy requirements: all other adults frequently in the home interviewed separately; alleged maltreater was interviewed separately; all approved foster parents/caregivers interviewed separately; and file contains physical evidence to support case documentation.

For four investigative policy requirements (investigator saw/interviewed every alleged maltreated child separately; at least two relevant collateral sources contacted during the investigation; investigator reviewed the DFCS history of the foster parents/caregivers; and investigator reviewed previous CPS reports for foster parents/caregivers) evidence of compliance remained essentially unchanged from Period VIII.

For three of the investigative policy requirements, compliance appears to have declined by two, seven, and two percentage points, respectively, from Period VIII (continued safety of the children placed in the home was adequately evaluated and assessed; investigator saw/interviewed each of the other children (non-alleged victims) separately; and DFCS case managers required to visit in this foster care setting were contacted). Only the decline in investigator saw/interviewed each of the other children (non-alleged victims) separately (7 percentage points) was of a noteworthy size. Even with this decline, documented compliance remained at 90 percent.

c. Referrals of Reports of Maltreatment in Care to the DFCS Policy Unit, Office of Residential Child Care (ORCC), and the Office of Provider Management (OPM)

DFCS policy requires counties, at the conclusion of maltreatment in care investigations, to send an "Administrative Packet" detailing the incident and findings to the Social Services Director within ten days. If the incident occurred in a provider-supervised foster care setting, an investigative summary is also to be sent to ORCC and OPM.

Section 12.B. of the Consent Decree requires all reports of suspected abuse or neglect of foster children in institutional, group, residential, or private provider-supervised foster family home settings to be referred to and reviewed by the Office of Residential Child Care (ORCC) and the Office of Provider Utilization and Outcomes Measurement (OPM).²¹ The purpose of the review specified in the Consent Decree is "...to determine whether a pattern of abuse or neglect exists within... [the provider agency].... that contributed to the abuse or neglect; whether the contract should be terminated; whether particular homes or facilities should be closed...."²²

To assess compliance with these provisions, the Accountability agents collect data directly from ORCC, OPM, and the DFCS Policy Unit to ascertain which maltreatment investigations involving foster children had been reported to each office, and interview ORCC and OPM leadership and staff to confirm that the required reviews are taking place and to understand

²¹ ORCC licenses child placing agencies (CPA), child caring institutions (CCI), and outdoor therapeutic programs (OTP). OPM approves CPAs, CCIs, and OTPs wishing to serve DFCS children once they have been licensed by ORCC.

²² See Section 12 B, p. 28 of the Consent Decree

what actions are being taken as a consequence of them. The reporting of maltreatment in care investigations to each of these three offices and the review of those reports are considered separately below.

Notification of the Policy Unit, ORCC and OPM of Maltreatment in Care Investigations

The completeness of maltreatment in care reporting to the DFCS Policy Unit, ORCC, and OPM declined in Period IX. In light of the Consent Decree's stringent standard for maltreatment in care, improving the completeness of maltreatment in care reporting to the three statewide offices responsible for identifying maltreatment in care patterns remains critical to the State's ability to successfully prevent maltreatment in care.

For Period IX, data collected directly from the DFCS Policy Unit indicate that administrative packets were received for 78 (95%) of the 82 maltreatment in care investigations completed during Period IX. This represented a decline from Period VIII when the Policy Unit was notified of 91 of 91 investigations (100%). Seventeen (22%) of the 78 reports the Policy Unit received for Period IX were sent within the 10-day window specified by DFCS policy.²³ This rate remains low and represents a substantial decline from the 41 percent of maltreatment in care reports received within the 10 day window in Period VIII. Table III-7 displays data on reporting of maltreatment in care investigations to the DFCS Policy Unit.

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²³ Social Services Manual, Section 2106.11, Georgia Dept. of Human Resources, July 2005

Table III-7
Policy Unit Notification of Period IX Maltreatment in Care Investigations
N=82

Investigating	Total Investigations	Notified		Not N	otified
County	Number	Number	% of Total	Number	% of Total
Fulton	34	32	94%	2	6%
DeKalb	18	18	100%		
Baldwin	1	1	100%		
Bibb	3	3	100%		
Carroll	2	2	100%		
Clayton	3	3	100%		
Cobb	5	5	100%		
Douglas	4	4	100%		
Fayette	2	2	100%		
Gordon	1	1	100%		
Henry	1	1	100%		
Paulding	1	1	100%		
Rockdale	6	5	83%	1	17%
Taylor	1			1	100%
Total	82	78	95%	4	5%

Source: Survey of Notification of CPS Investigations in Foster Care Settings, January 1 – June 30, 2010.

The Period IX file review of maltreatment in care investigations included 44 investigations of maltreatment that occurred in provider-supervised settings and therefore should have been reported to both ORCC and OPM.²⁴ Data collected directly from ORCC and OPM indicate that ORCC was notified of 40 (91%) of these investigations. This represents a decline from Period VIII when ORCC was notified of 94 percent of such maltreatment in care investigations. Table III-8 displays data on county reporting of maltreatment in care investigations to ORCC.

Community Health, Healthcare Facility Regulation Division.

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²⁴ There were a total of 58 investigations that involved children placed in provider-supervised settings, but 14 of these fell outside the jurisdiction of ORCC and OPM. In nine cases, the alleged maltreatment occurred elsewhere (including school or daycare, at the home of a relative, and at the home of the biological parent) and in five cases the alleged maltreatment occurred in Psychiatric Residential Treatment Facilities (PRTFs) which operate under contract to the Department of Behavioral Health and Developmental Disabilities and are regulated by Department of

Table III-8
Office of Residential Child Care Notification of
Period IX Maltreatment in Care Investigations
N=44

Investigating	Total Investigations	Notified		Not N	otified
County	Number	Number	% of Total	Number	% of Total
Fulton	16	14	88%	2	12%
DeKalb	7	7	100%		
Baldwin	1	1	100%		
Bibb	3	3	100%		
Carroll	2	2	100%		
Clayton	2	2	100%		
Cobb	3	3	100%		
Douglas	1	1	100%		
Fayette	1			1	100%
Gordon	1	1	100%		
Paulding	1	1	100%		
Rockdale	5	4	80%	1	20%
Taylor	1	1	100%		
Total	44	41	91%	4	9%

Source: Survey of Notification of CPS Investigations in Foster Care Settings, January 1 – June 30, 2010.

Fulton County conducted the largest number of maltreatment in care investigations in provider-supervised settings at 16. Fourteen (88%) were reported to ORCC and two (12%) were not. This is a decline compared to Period 8 when Fulton County notified ORCC of 100 percent of 13 investigations. DeKalb County conducted seven maltreatment-in-care investigations in such settings and notified ORCC of all seven (100%). In Period 8, DeKalb County notified ORCC of 17 of 17 (100%). Nine of the 11 perimeter counties that completed maltreatment in care investigations in provider-supervised settings notified ORCC of 100 percent of those investigations. The remaining two perimeter counties (Rockdale and Fayette) notified ORCC of 80 and 0 percent, respectively. Notifying ORCC of maltreatment reports in the care settings they license is essential to the ability of ORCC to effectively use that licensing authority to help prevent maltreatment in care.

The Period IX notification data illustrate that county incident reporting enables prudent, collaborative action by ORCC and DFCS. Among the 41 maltreatment in care investigations of which ORCC was informed, ORCC elected to conduct a joint investigation with DFCS for 26 (63%) of them. Not surprisingly, among the four complaints that were not reported to ORCC, no joint investigations were conducted.

Complete reporting of maltreatment in care investigations in provider-supervised settings to the Office of Provider Management (OPM), the statewide organizational entity charged with supervising DFCS' provider contracts, enhances OPM's ability to be a prudent purchaser of care. For Period IX, OPM appears to have been notified of 34 (77%) of the 44 investigations of alleged maltreatment that occurred in provider-supervised settings. This is a decline from Period VIII, when OPM was notified of 84 percent of the investigations of alleged maltreatment that occurred in provider-supervised settings. Table III-9 displays data on county reporting of maltreatment in care investigations to OPM.

Table III-9
Office of Provider Management
Notification of Period IX Maltreatment in Care Investigations
N=44

Investigating	Total Investigations	Notified		Not N	otified
County	Number	Number	% of Total	Number	% of Total
Fulton	16	10	63%	6	37%
DeKalb	7	7	100%		
Baldwin	1	1	100%		
Bibb	3	3	100%		
Carroll	2	1	50%	1	50%
Clayton	2	1	50%	1	50%
Cobb	3	3	100%		
Douglas	1	1	100%		
Fayette	1	1	100%		
Gordon	1	1	100%		
Paulding	1	1	100%		
Rockdale	5	4	80%	1	20%
Taylor	1			1	100%
Total	44	34	77%	10	23%

Source: Survey of Notification of CPS Investigations in Foster Care Settings, January 1 – June 30, 2010.

DeKalb County notified OPM of 100 percent (7 of 7) of the Period IX investigations of maltreatment alleged to have occurred in provider-supervised settings. This was an improvement compared to Period VIII when DeKalb County notified OPM of 16 of 17 such investigations (94%). Fulton County conducted 16 investigations of maltreatment alleged to have occurred in such settings and notified OPM of 10 of these (63%). This represents a substantial decrease from Period VIII when Fulton County notified OPM of 12 of 13 investigations (92%). Baldwin, Bibb, Cobb, Douglass, Fayette, Gordon, and Paulding counties all had OPM notification rates of 100 percent. However, Carroll, Clayton, and Taylor counties each failed to notify OPM of half or more of their maltreatment in care investigations.

Review by ORCC and OPM of Maltreatment in Care Reports in Providersupervised Settings

Interviews with ORCC and OPM leadership and staff indicate that every report of maltreatment in care originating in provider-supervised settings is reviewed upon receipt by designated staff in each office. Reports received and reviewed by ORCC are assigned to appropriate ORCC survey staff and shared with members of the ORCC leadership team and with OPM and other DFCS staff. ORCC and OPM staff meet jointly, by conference call, or in office conferences with provider agencies as needed to review incident reports and provider compliance with rules and regulations.

The results of these meetings have included:

- Where appropriate, ORCC has issued Enforcement Actions (civil penalties, restricted license and revocation of license) on some licensed facilities.
- Where patterns of repeat maltreatment have been identified, OPM follows up with
 the provider by addressing the outcome of the CPS investigation via phone
 conference, office conference, or a visit to the facility. Corrective action plans are
 implemented to correct areas of deficiency. Pending agreement on a corrective
 action plan, intake may be suspended.
- After a corrective action plan is implemented to address any identified areas of
 deficiency, the provider's compliance with it is monitored via a higher frequency of
 announced and unannounced visits. On a case-by-case basis, review and approval
 by OPM of all prospective placements prior to admission may be required
 throughout the following quarter.

2. <u>Corporal Punishment in Foster Homes</u>

Section 12C of the Consent Decree contains process and practice requirements related to the prohibition of corporal punishment in foster care settings and investigations of reports of corporal punishment.²⁵ The following discussion summarizes the requirements and how DFCS is meeting them.

a. Awareness of Corporal Punishment Prohibition

All placement settings are to prohibit the use of corporal punishment. In 160 of 161 foster home records sampled (99%), there was a signed written statement or other evidence that foster parents understood and agreed to comply with DFCS' prohibition on the use of corporal punishment. This is similar to the Period VIII performance of 100 percent.

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²⁵ See pp 29-30, paragraph 12.C of the Consent Decree

b. Enforcement of Corporal Punishment Prohibition

Enforcement of the corporal punishment prohibition in DFCS-supervised foster homes is carried out by the County DFCS offices. Enforcement in private provider placements is carried out by child placing agencies (CPAs), Office of Residential Child Care (ORCC), and the Office of Provider Management (OPM). ORCC requires CPAs, Child Caring Institutions, and Outdoor Child Caring Programs to have written policies prohibiting corporal punishment as a condition of licensure. ORCC monitors compliance with this requirement by means of a pre-licensure review of all provider policies. When ORCC receives a complaint related to corporal punishment in a provider supervised foster home, they inspect the home's file to see if the foster parent(s) signed the CPA's discipline policy.

OPM requires providers to refrain from using corporal punishment as part of the Room Board Watchful Oversight (RBWO) Provider Contract, the Foster Home Minimum Standards, and the Prospective Provider Application. OPM enforces this prohibition through site visits to CPAs and to a sample of the foster homes they supervise, and through reviewing a sample of the foster home files the CPAs maintain. OPM's Period IX visitation strategy was to prioritize visits to the administrative offices and foster homes of providers with higher numbers of incident reports and cases of substantiated or unsubstantiated maltreatment, while providers with lower numbers of reported incidents were visited during the latter part of the monitoring cycle.

c. Compliance with Corporal Punishment Prohibition

Actual compliance with the corporal punishment prohibition appears to be excellent. The review of child records of 180 randomly selected children in foster care during Period IX identified no confirmed instances of corporal punishment (0.0%). This is comparable to Period VIII, during which there were no confirmed instances of corporal punishment among the children included in the placement sample.

The foster home record review of 161 randomly selected foster homes looked for evidence in the foster home record that foster parents or other placement resources used corporal punishment or permitted it to be used on any foster child, whether or not a subsequent investigation or assessment confirmed the allegation. Such evidence was found in one of the 161 foster home records reviewed (0.6%). In this one incident, a CPS report was made by the placement case manager which was screened out by CPS staff; the CPA that supervises this foster home recounseled the foster parent on the Department's disciplinary policy and appropriate methods of discipline.

The review of all 82 maltreatment in care reports investigated during the reporting period identified only one report (1%) that began as an allegation of corporal punishment. This represents a decrease from Period VIII, during which seven of the 91 maltreatment in care reports (8%) began as corporal punishment allegations. The one investigation completed during Period IX that began with an allegation of corporal punishment was found to be

unsubstantiated for abuse or neglect, and no violation of DFCS disciplinary policy was confirmed. No further action was taken on the case.

d. Screening and Investigation of Corporal Punishment Allegations

Allegations of corporal punishment must be screened by qualified CPS (rather than foster care) staff. Depending on the screening conclusions, the allegations may be responded to differently. Where reasonable cause exists to believe abuse or neglect occurred, or if the allegations arose in a group care setting, the allegations must be treated as an abuse referral and investigated accordingly. If the screener concludes that reasonable cause does not exist, the Consent Decree requires a timely assessment of the allegations and placing "holds" on any further placements until the assessment is complete. It also stipulates conditions under which homes must be closed, and conditions under which homes may remain open under a corrective action plan.

Interviews with the Special Investigations units in DeKalb and Fulton counties indicate that both counties are handling allegations of corporal punishment consistent with these Consent Decree provisions. Both counties use experienced CPS supervisors to assess incoming corporal punishment allegations.

In DeKalb and Fulton Counties, incoming complaints are screened by the CPS Intake Unit; those showing reasonable cause are investigated by the Special Investigations Unit with a 24 hour response time. Those lacking reasonable cause are either screened out or referred to the Resource Development Unit if it is a DFCS-supervised foster home. Incidents that occur in provider-supervised foster homes are investigated by the Special Investigations Unit and are referred to the Office of Residential Child Care (ORCC). In both counties, any complaint of corporal punishment of children in group homes automatically receives a CPS investigation.

As noted above, the review of all maltreatment in care investigations found only one CPS investigation prompted by an allegation of corporal punishment. This allegation concerned a provider-supervised foster home. A review of this investigation showed that:

- The alleged victim was interviewed separately within 24 hours;
- The continued safety of any children remaining in the home was adequately evaluated;
- The file reviewer felt the investigative conclusion was consistent with the investigative documentation; and,
- The investigation was completed within the 30 days required by DFCS policy.

The one investigation in privately-supervised foster homes represented a decrease compared to Period VIII during which four investigations in private care settings were precipitated by corporal punishment allegations. Documentation indicates that both ORCC and OPM were notified of this investigation and ORCC jointly conducted the investigation with DFCS. Both ORCC and OPM were notified of the investigative conclusion.

In both counties, corporal punishment allegations against DFCS-supervised foster homes that do not meet the criteria for a CPS investigation receive an "assessment." The Resource Development staff in each county conduct the assessment in the home and decide if the home should be closed, placed under a corrective action plan, or if counseling or other support services are needed. While the assessment is being conducted, the home is to be placed on "hold" (barred from receiving additional placements). Both counties indicated that if the allegation revealed a policy violation that had a direct impact on safety or represented a serious risk, they would send the case to CPS and a special investigation would be opened. Both counties also indicated that if a policy violation was a home's second violation, or the family was not amenable to change, the home would be closed.

In both counties, all allegations of corporal punishment in provider-supervised foster homes are handled by the Special Investigations unit. Cases that fail to meet the criteria for a CPS investigation receive an "assessment" from the Special Investigations unit. The results of those assessments are indirectly shared with ORCC through the SHINES system.

Part IV PERMANENCY

Children in Care Maintain Family Connections and Achieve Permanency

Several of the Consent Decree outcomes and practice requirements focus on various components of achieving permanency for children. This part reports on the State's progress in the areas related to children in DFCS custody maintaining their family connections and safely returning home or achieving permanency with new families.

A. Outcome Performance

As described in the Introduction (Part I), 17 separate outcomes are clustered in the category of "Permanency." Outcomes 12 and 13, related to children achieving the goal of adoption, were one-time, Period I requirements that have been discussed in previous reports. ²⁶ The remaining outcomes apply to subsequent reporting periods with the final phase-in of performance thresholds occurring in Period IV. Table IV-1 on the next two pages provides the most recent measured performance summary for each of the permanency outcomes. For purposes of analysis and communication, the 17 outcomes have been further subdivided into two broad categories, *Children in Placement Maintain Family Connections* and *Children Achieve Permanency*.

The discussion following Table IV-1 provides a more detailed description of State performance. This discussion includes a summary of the Consent Decree requirements, interpretation and measurement issues associated with the outcomes, and contextual information as necessary for better understanding the State's performance at the end of Period IX. This part also includes charts which display the State's permanency performance trends over the eight reporting periods to date.

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²⁶ See Dimas, J. T. and Morrison, S. *Period I Monitoring Report, Kenny A. v Perdue*, November 2006 and Period *II Monitoring Report, Kenny A. v Perdue, June* 2007.

Table IV-1 Permanency Outcomes

Children in Placements Maintain Family Connections	Period IX Performance
Outcome 7: At least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.	94%
Outcome 16: At least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.	84%
Outcome 19: At least 90 % of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b (ii) and (iii).	95%
Outcome 21: At least 85% of all children with the goal or reunification shall have appropriate visitation with their parents to progress toward reunification.	87%
Outcome 23: At least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placement is more than 50 miles and the child is placed with a relative.	52%
Children Achieve Permanency	
Outcome 4 : No more than 8.6% of all foster children entering custody shall have reentered care within 12 months of the prior placement episode.	11.1%
Outcome 8a : Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	54%
Outcome 8b: Of all the children entering custody following the entry of the Consent Decree, at least 74% shall have had one of the following permanency outcomes within 12 months or less after entry: reunification, permanent placement with relatives, or shall have had one of the following permanency outcomes within 24 months or less after entering: adoption, permanent legal custody, or guardianship.	61%
Outcome 9 : Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the "24 backlog pool"): For all children remaining in the 24 month backlog pool after the fourth reporting period at least 40% by the end of the fifth reporting period shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	24%
Outcome 10: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree (children in the "over 24 backlog pool"): For all children remaining in the over 24 month backlog pool after the fourth reporting period at least 35% by the end of the fifth reporting period shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.	18%

Table IV-1, continued Permanency Outcomes

Children Achieve Permanency	Period IX Performance
Outcome 11: For all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights	54%
Outcome 12: For children whose parental rights have been terminated or released and	First Period
the child has an identified adoptive or legal guardian resource at the time of the entry of	94%
the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized	One Time
within six months after the entry of the Consent Decree.	Measure
Outcome 13: For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified	First period 30%
adoptive resource, 95% shall have been registered on national, regional, and local	One time
adoption exchanges, and have an individualized adoption recruitment plan or plan for	measure
legal guardianship within 60 days of the Consent Decree.	
Outcome 14 : No more than 5 % of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.	0%
Outcome 15: At least 95% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed.	100%
Outcome 27: At least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's sixmonth case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review.	71%
Outcome 28: At least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.	89%

1. Children in Placement Maintain Family Connections: Outcomes 7, 16, 19, 21, and 23

One of the Consent Decree principles is "all non-destructive family ties should be maintained and nurtured."27 Preserving connections between children and their families, friends, and community is an important strategy for achieving permanency when those relationships are not Preservation of these connections starts with placing children with family resources whenever possible and placing children with their siblings. Regular visits between children and parents and among separated siblings are also critical ingredients to maintaining family ties and achieving permanency.

Outcome 7 – Diligent Search

A "reasonably diligent search is required by law (O.C.G.A. Section 15-11-55) to identify those individuals who may be considered a resource for placement or custody of the child."28 The Consent Decree, in Outcome 7, requires the diligent search for parents and relatives to be undertaken and documented within 60 days of entry for at least 95 percent of all foster children entering care. In practice, a search should be initiated as soon as the child enters custody or before entry as information is gathered in the investigation or assessment stage. Immediate efforts can serve to hasten permanency for a child and to minimize the trauma of removal if the child can be placed with someone known to him or her.

Furthermore, the search for relatives and other individuals who have "demonstrated an ongoing commitment to the child"29 should be ongoing until the child has achieved permanency. The diligent search process can be effective in identifying individuals who are or can be part of a supportive team for the child and family. For example, these individuals may be called on to help supervise a safety plan for a child who is returned home or provide housing and transportation for parents or facilitate regular visits among separated siblings.

a. <u>Interpretation and Measurement Issues</u>

Measurement of Outcome 7 lags behind the measurement of most other outcomes because it requires a sample of children in care who enter and remain in care at least 60 days. As a result, the performance reported here reflects the Period VIII activity, not Period IX. The performance of Outcome 7 was measured based on a case record review of 130 children randomly selected from those entering custody between July and December 2009 and remaining at least 60 days. The margin of statistical error for the sample was +/-6.5 percent. The targeted review of these cases was conducted in May and June 2010. The outcome requirement for undertaking a

See p. 4, principle 2 in the Consent Decree
 Social Services Manual, Chapter 1000, Section 1002.3.1, Georgia Department of Social Services

²⁹ Social Services Manual, Chapter 1000, Section 1002.31 Georgia Department of Social Services

diligent search within 60 days was deemed to have been met if one of the following conditions was met³⁰:

- the child was placed with a family resource within 60 days after entering custody; or,
- a court order stated that the diligent search had been properly and timely submitted to the court; **or**,
- there were documented search efforts that included: children age 4 or older were interviewed about adults in their lives or someone with whom they would want to live and one or more family member or family friend was interviewed within 60 days and, when resources were identified, there was evidence that one or more of the identified resources were contacted or contact was attempted within 60 days.

b. State Performance

• The State Fell Short of the Outcome 7 Threshold.

The file documentation indicated that a diligent search was undertaken and documented for 122 (94%) of the 130 children in the sample. The Consent Decree requires at least 95 percent of children entering care in the reporting period to have a diligent search undertaken and documented within 60 days. This performance is a substantial improvement from the Period VI performance of 80 percent and the change exceeds the margin of statistical error for the sample. Table IV-2 provides the number and frequency of different types of diligent search actions undertaken on behalf of the 130 sampled children. The State's performance over the four reporting periods for which the outcome has been measured is displayed in Figure IV-1.

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³⁰ See Appendix B for more description of the measurement of Outcome 7.

Table IV-2
Diligent Search Actions Undertaken
n=130

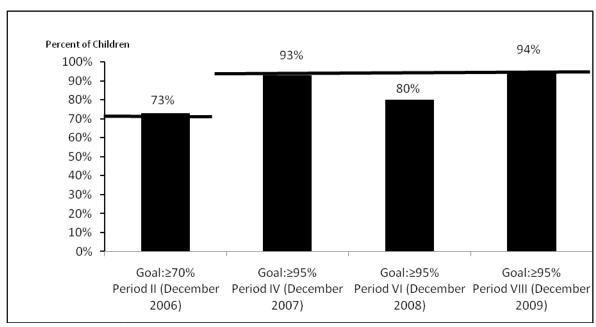
Actions	Number	Percent	Cumulative Percent
Children placed with a family resource within 60 days of entering custody	10	8%	
Court order documented that the diligent search was "properly and timely" submitted	44	34%	42%
Evidence of interviews with child and child's family and others within first 60 days and contact made with one or more possible resource, as applicable	68	52%	94%
Subtotal for Outcome Measurement	122	94%	
Insufficient search activities in first 60 days: no documented interviews of children to gather information about relatives and significant others (children ranged in age from 4 to 12)	8	6%	100%
Total	130	100%	

Source: Case Record Review, May-June 2010.

Figure IV-1

Four Reporting Periods of State Performance on Outcome 7:

Diligent Searches Undertaken Within 60 Days



Source: Case Record Reviews

c. <u>Diligent Search Results</u>

Locating parents

Mothers (birth or adoptive) were identified for 128 (98% of 130 children entering and remaining in care at least 60 days). Fathers (putative or legitimated birth or adoptive fathers) were identified for 106 children (82% of 130). However, the parent's location was not always known. The whereabouts of 13 mothers³¹ were not known at the time children entered care. Various search activities were conducted to determine this information in each of these cases. The searches ranged in intensity from simply interviewing the child to using up to six (6) different methods to find the mother. The whereabouts of 69 fathers were known when children entered DFCS custody. Therefore, some search efforts were required for 61 fathers: 24 needed to be identified and located and another 37 identified fathers needed to be located. Search activities appear to have been undertaken for 54 of the 61 absent fathers (89%).

Identifying other resources

The diligent search activities undertaken for the sample of 130 children identified 1190 individuals in addition to parents as possible resources for 130 children. The individuals included grandparents, siblings, other relatives, and "fictive kin" (individuals with whom the child has a relationship and emotional bond but who are not blood relatives). This represented an average of about nine family members or fictive kin per child. Table IV-3 displays the type and number of non-parental resources identified.

Table IV-3

Types and Frequency of Individuals Identified as a part of Diligent Search Efforts

n=130

Types of Individual Resources	Number of	Percent of
	resources	resources
Maternal relatives excluding mother	672	56%
Paternal relatives excluding father	263	22%
Adult siblings	84	7%
Fictive kin	151	12%
Stepparents	14	<1%
Adult step-siblings	6	<1%
Total relatives or identified resources other than parents	1190	
Average number of non-parental resources per child	9	

Source: Case Record Review, May-June 2010.

³¹ The 13 includes the two mothers who were not identified and 11 additional mothers.

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Resources contacted

A total of 357 individuals (connected to 116 children) were contacted. This compares to the previous measurement for Period VI of 324 individuals contacted for 119 children. Table IV-4 displays the pattern of contacted resources compared to those identified.

Table IV-4

Types and Frequency of Individuals Contacted as a part of Diligent Search Efforts

n=130

Individual	Total	Total	Percent of those
	Identified	Contacted	identified contacted
Maternal Relatives excluding mother	672	179	27%
Paternal relatives excluding father	263	60	23%
Adult Siblings	84	26	31%
Fictive Kin	151	83	55%
Caretakers of minor siblings	0	0	N/A
Stepparents	14	5	35%
Adult Step siblings	6	4	67%
Total resources other than the parents	1190	357	30%

Source: Case Record Review, May-June 2010

Placement or visiting resources obtained

Forty-six (46) children (40% of 116 children) for whom the search included contacting individuals by the 60th day had placement and/or visiting resources within 60 days of entry. Of the 46, 15 were placed with their resources within approximately 90 days of entry and another 28 had visited with their visiting resources in the first 60 days.

Outcome 19 - Placement Proximity

When it is in the best interest of the child for the State to remove the child from his or her home and place him or her in State custody, Outcome 19 defines the acceptable placement proximity as being in a setting within the county or within a 50 mile radius of the home from which the child was removed.³²

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³² See p. 35, Outcome 19, of the Consent Decree.

a. <u>Interpretation and Measurement Issues</u>

No new interpretation or measurement issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 19 performance is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010.

b. State Performance

The State Surpassed the Outcome 19 Threshold.

The State placed 171 children (95%) of the 180 children in the sample of children in foster care within the designated proximity to the home from which they were removed or there was an accepted reason for a more distant placement. The outcome performance threshold is 90 percent. Of the 171 children, 164 children were placed within the same county as the home from which they were removed or within a 50 mile radius of the home and seven children were placed outside the designated proximity because of their exceptional needs. The distribution of all children in the sample among placement locations is displayed in Figure IV-2 below. The State's performance over the eight reporting periods to which the Consent Decree standards applied is displayed in Figure IV-3.

Figure IV-2
Child Placement Proximity to Home of Removal
or Reason for Being Unable to Place Within the Proximity Standards

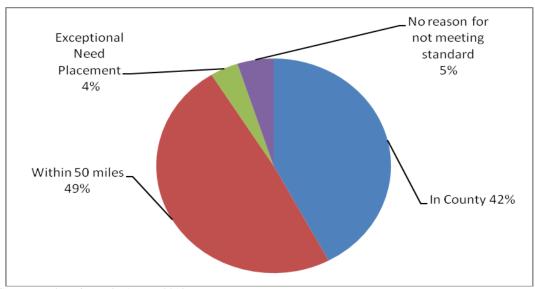
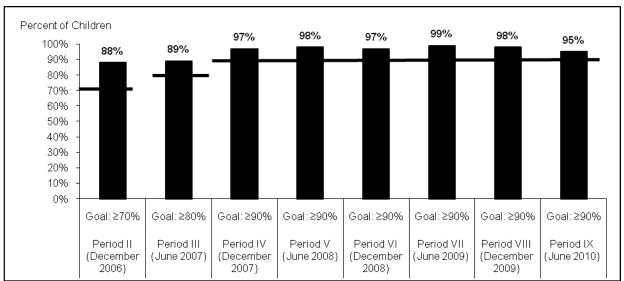


Figure IV-3
Eight Reporting Periods of State Performance on Outcome 19:
Children are in Placements Close to their Homes



Source: Review Period Foster Care Case Record Reviews, July 2006-June 2010

Outcome 21 - Parent-Child Visitation

National studies have found that children who have frequent, regular contact their birth parents are more likely to be successfully reunified with them. Outcome 21 seeks to ensure that appropriate visitation takes place between children and their parent(s)³³ by setting targets for the percent of children who visit with their parents, but there are no stipulations as to timing or visit content.

a. Interpretation and Measurement Issues

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 21 is based on the sample of 180 children at any time between January 1 and June 30, 2010. Within the sample of 180 children in foster care, 101 were considered to have the permanency goal of reunification for purposes of measuring parental visitation. However, seven children were excluded from the analysis for the following reasons:

- Four children were living with their reunification resources during the entire six months of the review period;
- One child did not have visits with birth parent who had moved to another state before the period, but they were reunified in July 2010;

³³ In some instances, the child was not removed from a parent. In these circumstances, the individual from who they were removed is considered the reunification resource.

- One child's parent had a "no contact order" during the review period; and
- One child was discharged 15 days into the review period.

Therefore, 94 children were included in the parent-child visitation analysis. 34

b. State Performance

• The State Surpassed the Outcome 21 Threshold.

Among the 94 children used in this analysis, 82 children (87%) had evidence in their records of appropriate visitation to progress toward reunification with their parents or other individuals with whom they were to be reunified.³⁵ In fact, 18 children (19% of 94) were reunified during the period. The performance threshold for this outcome is 85 percent. This performance is lower than the Period VIII performance of 90 percent but the difference is within the margin of statistical error for the sample.

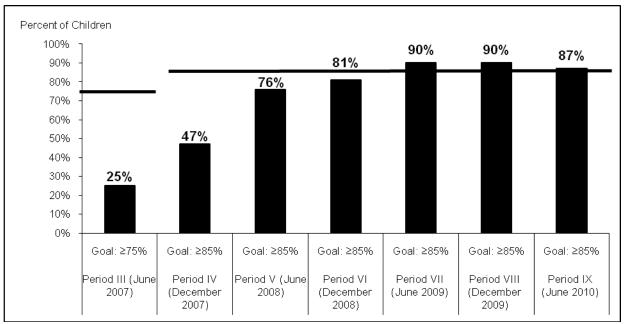
Among the remaining 12 children, six children had sporadic visits and six children had no documented visits with their parents. Among these 12 children, seven children had concurrent goals of reunification or adoption, or of living with a relative or adoption. One of these 12 children did exit to the custody of a relative during the period. Figure IV-4 displays the State's performance over the seven reporting periods to which the Consent Decree standards applied.

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 $^{^{34}}$ Conclusions drawn from the subsample of 93 children used in this analysis are subject to a margin of error of ± 10 percent.

³⁵ See Appendix B for a discussion of how "appropriate visitation" was determined.

Figure IV-4
Seven Reporting Periods of State Performance on Outcome 21:
Children are Appropriately Visiting with their Parent(s) to Progress Toward Reunification



Source: Review Period Foster Care Case Record Reviews, January 2007 - June 2010

Outcome 16-Sibling Placement and Outcome 23 - Sibling Visitation

The Consent Decree stipulates a sibling placement standard³⁶ that intends to keep siblings connected and establishes two performance outcomes. Outcome 16 requires at least 80 percent of all foster children entering care with one or more siblings to be placed with their siblings. Outcome 23 expects 80 percent of the children in foster care who have siblings in separate placements to visit with their separated siblings at least once a month each and every month for the previous 12 months, or every month they have been in custody if less than 12 months.³⁷ Because these Outcomes both focus on sibling connections, they are reported on together.

b. Outcome 16: Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period IX. The analysis relied on SHINES data. A total of 246 children entered custody in a sibling group of two or more during period IX. Among the 246 children, 13 in nine sibling groups were separated from other siblings due to special circumstances. The placement arrangements of the remaining 233 children were used to measure the Outcome 16 performance.

³⁶ See p. 16, paragraph 5C.4.d of the Consent Decree.

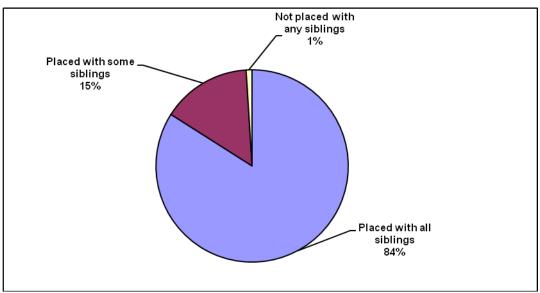
³⁷ See p.36, Outcome 23, in the Consent Decree.

b. Outcome 16: State Performance

• The State Surpassed the Outcome 16 Threshold.

Of the 233 children who entered custody with one or more siblings in Period IX and did not have a special placement need, 195 children (84%) were placed with all of their siblings. ³⁸ Outcome 16 requires at least 80 percent be placed with all siblings. This is an improvement over the Period VIII performance of 79 percent and it is the State's best performance to date on this outcome. Another 35 children (15% of 233) were placed with some of their siblings but not all due to insufficient space or to the placement of some siblings with relatives. These 35 children were part of five very large sibling groups ranging from five to 11 children in each group. Figure IV-5 illustrates the sibling placement pattern in Period IX and Figure IV-6 displays the State's performance over the six reporting periods to which the Consent Decree standard applied.

Figure IV-5
Sibling Group Placement for Period IX Foster Care Entries
N=233

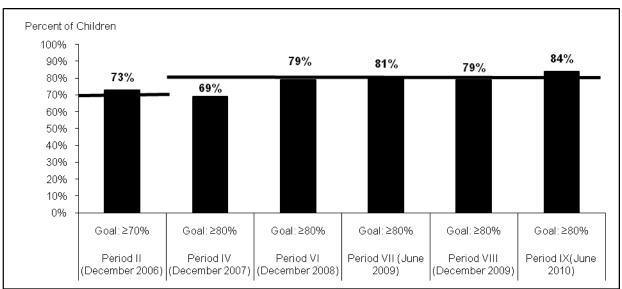


Source: SHINES report, verified.

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³⁸ This includes children who were placed with all siblings who did not require a separate setting because of special needs.

Figure IV-6
Six Reporting Periods of State Performance on Outcome 16:
Sibling Groups are Together in Placements



Source: Review Period Foster Care Case Record Reviews and SHINES reports, July 2006 to June 2010.

c. Outcome 23: Interpretation and Measurement Issues

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 23 is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010. In the sample of 180 children, there were 54 children who were separated from some or all of their siblings during some or all of the 12 months preceding June 30, 2010 or the date they were discharged. Two children were excluded from the analysis. One excluded child was in custody less than 30 days and the other child was excluded because the child's therapist recommended no sibling visits. Therefore, the analysis for Outcome 23 is based on 52 children.³⁹

d. Outcome 23: State Performance

• The State Fell Short of the Outcome 23 Threshold.

For Outcome 23, the Consent Decree's sibling visitation requirement was met for **27 (52%)** of the 52 children in the sample who had one or more siblings in custody but in separate placements. The outcome performance threshold is 80 percent, and requires that separated siblings visit at least once, each and every month of the previous 12 months during which they were in custody

 $^{^{39}}$ Conclusions drawn from the subsample of 52 children who were separated from their siblings for all or some of the time they were in care would have a margin of error of at +/-13%.

and separated. The 27 children visited with at least one separated sibling each consecutive month for the last 12 months. The State's performance is a slight decline from the Period VIII proportion of 56 percent, but the change is within margin of statistical error for the sample. However, the cumulative proportion of children who had monthly sibling visitation for 11 consecutive months or more (missing only one of the required months) reached 77 percent in Period IX compared to 64 percent in Period VIII. The remaining children visited with their siblings six to 10 months in the preceding 12 months. Overall, this is the State's best performance on this outcome to date. Table IV-5 describes the visitation picture captured by the case record review. Figure IV-7 displays the State's Outcome 23 performance over the seven of eight reporting periods to which the Consent Decree standard applied.⁴⁰

This is the last reporting period the Accountability Agents will be reporting Outcome 23 performance in this way. Beginning in Period 10, the Accountability Agents will be applying a different standard and methodology based on a revised agreement between the Parties. That agreement creates a slightly higher visitation standard (90% rather than 80%) and replaces the current methodology (based on file review data for the last 12 months for a sample of the children in care; counting as "successes" only children that had visits each and every month they were in care of the last 12 months) with a methodology based on the Counties' monthly visitation data for the entire universe of separated siblings for the reporting period only. The new approach will produce more timely data that more closely reflects actual monthly State performance.41

Table IV-5 Separated Sibling Visitation Pattern for the 12 months* preceding June 30, 2010 or the last date of DFCS custody

			Cumulative
Frequency of meeting required visitation	Number	Percent	Percent
Met outcome requirement of monthly visits each month for every month of previous 12 months.	27	52%	
Missed visitation in one of the required months (i.e. equivalent to 11 of 12 months)	13	25%	77%
Did not meet outcome requirement but visited with siblings at least half of the months separated (i.e. the equivalent of 6-10 visits in a 12 month period)	12	23%	100%
Total	52	100%	

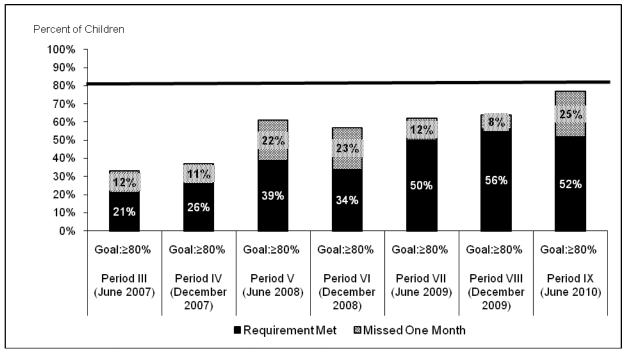
Source: Case record review, August-October 2010.

*For those children in custody less than 12 months, only the applicable number of months in custody was considered

⁴⁰ The sibling visitation analysis was slightly different in Period II; therefore there is not a comparable set of data points to include in Figure IV-7.

See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, effective November 22, 1010.

Figure IV-7
Seven Reporting Periods of State Performance on Outcome 23:
Siblings Not Placed Together Have 12* Consecutive Monthly Visits



Source: Review Period Foster Care Case Record Reviews and SHINES reports, January 2007-June 2010.

2. Children Achieve Permanency: Outcomes 8, 9, 10, 11, 4, 14, 15, 27, and 28

Permanency for a child can be achieved in many ways. Subject to the absolute constraint represented by child safety, the initial focus of child welfare work is always on reunification with the birth parents or other reunification resource. Should that result be unattainable, the state may pursue transferring custody to a relative or adoption by a relative, another family member, or a family specifically recruited for the child. Legal guardianship is also a means of securing permanency for a child. The use of a "concurrent goal" appears to be increasing. In such circumstances, reunification usually remains the primary goal, but a concurrent goal of custody to a relative, guardianship, or adoption may be part of the permanency plan as well in the event that reunification efforts fail. Concurrent planning encourages case managers to be focused on more than one permanency option for a child and it provides a very clear statement to parents that the State will move to achieve permanency for the children even if they cannot be returned home. As indicated in Table IV-6, 42 percent of the children have concurrent permanency goals.

^{*}For those children in custody less than 12 months, only the applicable number of months in custody was considered.

Table IV-6 Permanency Goals of Children n=180

Permanency Goal	Number	Percent
Judicially Determined/Presumed Reunification*	40	22%
Concurrent Goal (Reunification and another goal; or, in some cases, Adoption and another goal)	75	42%
Adoption	38	21%
Guardianship	9	5%
Custody to a Fit and Willing Relative	9	5%
Long Term Foster Care	1	1%
Emancipation	8	4%
Total	180	100%

Source: Case Record Review, August-October 2010. * Presumed re-unification goal for children in care for less than 12 months.

In the case record review of a sample of children in foster care, 73 percent did not have any documented barriers to permanency. In the remaining 27 percent that did have documented barriers, the most frequently cited barriers were lack of parental participation in services or visiting with children; child medical or behavioral conditions; and the lack of an adoptive resource. Many children had barriers unique to their circumstances such as parents with pending criminal charges or parents with physical limitations such as deafness. In addition, economic conditions appear to be a barrier for some families as housing and employment appeared to be the primary needs. In a few cases, however, the barriers appeared to be readily addressed; for example adoptive resources needed to complete training or prospective adoptive families needed approval.

Outcome 8a and 8b – Permanency Exits for Those Children Who Entered DeKalb or Fulton Custody on or After October 27, 2005

Outcome 8 (parts a and b) relate to children that enter custody after the effective date of the Consent Decree (October 27, 2005). The difference between Outcome 8a and Outcome 8b lies in how they treat three permanency outcomes: adoption, permanent legal custody (live with other relatives), and guardianship. Table IV-7 below summarizes the differences between Outcome 8a and Outcome 8b.

Table IV-7
Requirements for Outcome 8(a) and (8b)

Permanency Exit	Outcome 8(a) Timeframe	Outcome 8(b) Timeframe	
Reunification	Within 12 months of Entry		
Permanent Placement with Relatives	Within 12 months of Entry		
Permanent Legal Custody with	Within 12 months of Entry	Within 24 months of Entry	
Adoption	Within 12 months of Entry	Within 24 months of Entry	
Guardianship	Within 12 months of Entry	Within 24 months of Entry	

To meet the requirements of 8(a), the indicated permanency outcomes must be achieved within 12 months of a child's entering State custody; to meet the requirements of 8(b), the indicated permanency outcomes must be achieved within 24 months of entry. With respect to two other permanency outcomes – reunification and permanent placement with relatives (i.e. living with relatives but remaining in legal custody of the State)⁴² – the requirements of 8(a) and 8(b) are identical: to be "counted" toward the Outcome performance requirements, each must be achieved within 12 months of a child's entering State custody.

As a result of the overlapping time frames shown in Table IV-7, Outcome 8b performance is very dependent on Outcome 8a performance. In Period IX, Outcome 8a accounted for 89 percent of the Outcome 8b performance.

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 8a and 8b is based on the entire population of children who have entered DFCS custody since October 27, 2005. The data for this outcome was reported by the State from the SHINES system.

relatives".

⁴² The Consent Decree stipulates for a relative who is "willing to assume long-term responsibility for the child but has reasons for not adopting the child or obtaining guardianship or permanent legal custody, and it is in the child's best interest to remain in the home of the relative rather than be considered for adoption, permanent legal custody, or guardianship by another person." In these circumstances, the child remains in the custody of the state with the relative committing to the "permanency and stability" of the placement. This is called "permanent placement with

b. State Performance

• The State Surpassed the Threshold for Outcome 8a and Fell Short of the Threshold for Outcome 8b

Through June 30, 2010, 6085 children had entered DFCS custody since October 27, 2005. From this cohort of children, 3285 children (54%) exited by June 30, 2010 to live with their parents, other relatives, guardians or new families through adoption within 12 months of entering State custody (Outcome 8a). The performance threshold for 8a is 40 percent. The State's performance on Outcome 8a in Period IX is again an improvement over the Period VIII performance of 53 percent. The State has surpassed the Outcome 8a standard in every reporting period to which it applied.

Another 422 children were adopted or exited to the custody of relatives or to legal guardians between 12 and 24 months of entering foster care (Outcome 8b), bringing the total that exited to the designated permanency arrangements within the time fames specified in the Consent Decree to 3707 or 61 percent of the total cohort. This is also a modest improvement over the Period VIII performance of 59 percent, but remains short of the Outcome 8b performance threshold of 74 percent.

Table IV-8 provides the distribution of all the children in the Outcome 8 cohort who exited custody by June 2010. An additional 649 children (11% of the cohort) exited to one of the designated permanency arrangements but these exits occurred outside the designated time frames for the outcomes. Although these children cannot be "counted" toward either Outcome 8a or 8b, the Accountability Agents recognize the permanency achievement.

The Accountability Agents continued to observe a decline in the proportion of children who have entered State custody since the Consent Decree and are still in care. At the end of Period IX, 19 percent of the Outcome 8 cohort of children remained in custody compared to 21 percent at the end of Period VIII and 26 percent at the end of Period VII. However, the length of time the remaining children have been in care is increasing. At the end of Period IX, half the children remaining in the cohort had been in custody 15 months compared to 14.5 months for those remaining at the end of Period VIII.

Table IV-8 provides the performance detail for period IX. Figure IV-8 illustrates the exit outcomes for all children who have entered State custody on or after the Consent Decree.

Table IV-8
Outcome 8
Children Entering DFCS Custody on or after October 27, 2005 Who Exited to Permanency by
June 30, 2010

	Children who entered custody on or since October 27, 2005	
Number of children in cohort	6085	
Exits as of June 30, 2010	8(a)	8(b)
Reunification within 12 months	2544	2544
Permanent Placement with Relatives within 12 months (still in state custody)	0	0
Permanent Legal Custody within 12 months (custody transferred from DFCS)	485	485
Additional Permanent Legal Custody between 12 and 24 months (custody transferred from DFCS)		218
Adoption within 12 months	10	10
Additional Adoptions between 12 and 24 months		91
Guardianship within 12 months	246	246
Additional Guardianships between 12 and 24 months		113
Total Exits for Outcome Measurement	3285	3707
Percentage Exiting for Outcome Measurement	54%	61%
Number Exited to Permanency but not in required time frame	649	
Other exits (transfer to other counties, emancipation, etc)	599	
Total number exiting	4953	
Remaining number in cohort on June 30, 2010	1132	
Demographics of those still in DFCS custody at June 30, 2010	Average length of stay: 18	
	months	
	Median length of stay 15	
	months	
	Average Age: 8.6	
	46% female; 54% male	

Source: SHINES, and county tracking systems.

Other Exits, 10%
Still in Custody on June 30, 2010, 19%

Positive Permanency Exits, 71%

Figure IV-8
Foster Care Outcomes of 6085 Children Entering Custody since October 27, 2005*

Source: SHINES, and county tracking systems

*Positive Permanency exits include reunification, adoption, guardianship, permanent legal custody, and permanency placement with relatives. Other exits include emancipation and transfer to other counties or states.

c. Operational Context

The observed improvements in both Outcome 8a and 8b and the continued trend of exits to permanency outside of the stipulated time frames may be the result of some of the strategies initiated by the State and Counties previously and during Period IX, but the specific impact of any one strategy has not been tracked. More likely, the improvements reflect the cumulative effect of multiple efforts.

As part of an agreed-upon corrective action plan by the parties, Fulton County reports establishing an Adolescent Unit that focuses on children 14 to 18 years of age. The unit is designed to help prepare adolescents for positive permanency and their transition into adulthood. Both counties initiated placement disruption prevention meetings to improve placement stability as research has suggested that contributes to permanency. (This strategy may have contributed to the improved Outcome 17 performance cited later in Part V, Well-Being). Both counties had expanded the Roundtable strategy and this expanded practice is now part of the curative action. First initiated with the help of Casey Family Programs as part of a joint resolution of a contempt motion to expedite permanency for children on the Outcome 9 and Outcome 10 cohorts, the strategy is now being implemented with more children at different

times and for different reasons in the life of cases.⁴³ Roundtables are held as early as two months for those cases where there are significant barriers to permanency or special circumstances such as children or parents with special needs. All cases that receive a 13th month review are now automatically referred to Master Practitioners for Roundtables. DeKalb County has increased case manager-supervisor staffing for children in custody 12 months or more, sought waivers to assist with financial barriers to permanency, and expanded its work with Youth Villages.⁴⁴ DeKalb also created a special unit in September 2010 is designed to expedite permanency for children within the first few months of a foster care episode. In addition, DeKalb has been working with Youth Matters for some time to prevent Psychiatric Residential Treatment Facility placements and to help youth transition back into the community from such placements when they are necessary.

Other efforts underway to expedite safe and lasting permanency for those children who remain in foster care include the following:⁴⁵

Contracting with Youth Villages

Youth Villages is a private provider in Georgia and other states that is nationally recognized for its innovative and effective programs in serving "emotionally troubled children and their families." ⁴⁶ DFCS has contracted with Youth Villages to provide intensive in-home family counseling, education and other concrete services with the goal of reunification with family members or identified caregivers. The main criteria for admission is that the "youth must have a viable parent, relative or adoptive resource willing to provide care for the youth and participate in intensive treatment." In addition, Youth Villages expanded its program and has begun the "Inner Harbor Permanency Continuum Program". This program is designed for youth with serious mental health and behavioral challenges and helps stabilize and reunify youth aged 10 to 17 with their families.

• Multi-Agency for the Alliance of Children Contract

The Multi-Agency for the Alliance of Children (MAAC) entered into a contract with GRN Community Services Board through which MAAC agreed to work with severely emotionally disturbed youth referred by Fulton and DeKalb DFCS. MAAC will provide services to the youth and families using an evidence-based practice model of services known as "High Fidelity Wraparound."⁴⁷

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⁴³ See Dimas, J.T. and Morrison, S. A., *Period VI Monitoring Report, Kenny A. v Perdue*, June, 2008 for a description of the Roundtables.

⁴⁴ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, April 6, 2010, February 15, 2010, August 23, 2010, and September 22, 2010.

⁴⁵ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, August 23, 2010.

⁴⁶ See http://www.youthvillages.org/about-us.aspx

⁴⁷ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, September 22, 2010.

Outcome 9 – Permanency Exits Among Children Who Had Been In the Custody of DeKalb or Fulton County Up To 24 Months as Of October 27, 2005

Outcome 10 - Permanency Exits Among Children Who Had Been In the Custody of DeKalb or Fulton County More Than 24 Months as Of October 27, 2005

The Consent Decree established two other permanency outcomes, Outcomes 9 and 10, to be achieved with two different cohorts of children who have been in State custody for a particularly long time. Many of these children have lived nearly their entire lives in foster care. Outcome 9 has permanency expectations for the children who had already been in custody up to 24 months when the Consent Decree' was finalized in October 2005.⁴⁸ Similarly, Outcome 10 has permanency expectations for the children who had been in state custody for 24 months or more when the Consent Decree became effective.⁴⁹

a. <u>Interpretation and Measurement Issues</u>

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 9 and 10 is based on the entire population of children in each of two described cohorts.

b. State Performance

• The State Fell Short of the Outcome 9 Threshold.

Of 106 children who had been in State custody up to 24 months as of October 27, 2005 and were still in custody on December 31, 2009, 25 children (24%) had positive permanency exits during the period January 1 through June 30, 2010.⁵⁰ The performance threshold for this outcome is 40 percent. Another seven children exited DeKalb and Fulton custody for reasons other than positive permanency during this time period, leaving 74 children from the Outcome 9 cohort still in custody on June 30, 2010. The State's Period IX performance is a five percentage point improvement over the Period VIII performance. This is the State's best performance since achieving 49 percent in Period II.

As noted in Table IV-9, 47 percent of the 74 children remaining in custody were under the age of 12. The average age was about 14 years, the average length of stay was five and half years, and 53 percent of the children were male. In addition, there were 16 sibling groups remaining in this cohort.

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⁴⁸ See p. 33, Outcome 9, of the Consent Decree

⁴⁹ See pp 33 and 34, Outcome 10, of the Consent Decree

⁵⁰ "Positive permanency exits" refers to reunification, permanent placement with relatives, permanent legal custody, adoption or guardianship.

• The State Fell Short of the Outcome 10 Threshold.

Of the 95 children who had been in State custody for over 24 months as of October 27, 2005 and remained in custody on December 31, 2009, 17 children (18%) exited to positive permanency during the period January 1 through June 30, 2010. This was an improvement from Period VIII, when 16 percent of the Outcome 10 cohort exited to positive permanency, and represented the best performance since Period II when the outcome threshold was surpassed with 36 percent. The performance threshold for this outcome is 35 percent. Another 12 children exited DeKalb and Fulton custody for reasons other than positive permanency during this time period, leaving 66 children from the Outcome 10 cohort still in custody on June 30, 2010.

As noted in Table IV-9, 15 percent of the 66 children remaining in custody were under the age of 12. The average age of all children in the cohort was about 15 years and the average length of stay was 10.3 years. There are seven sibling groups among the remaining 66 children. As with Outcome 9, the majority of children remaining in the Outcome 10 cohort (52%) were male.

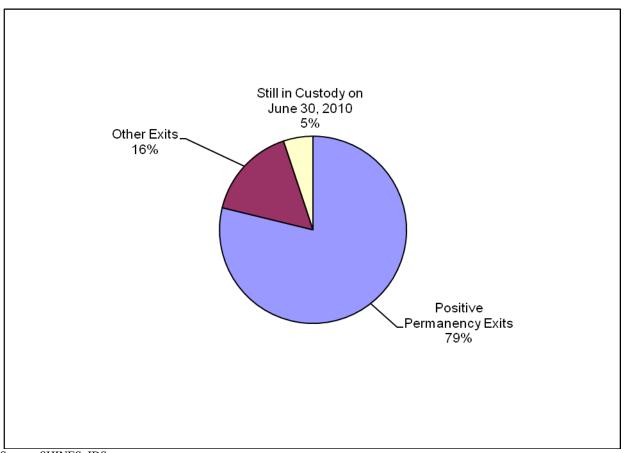
Table IV-9
Outcomes 9 and 10
Remaining Children Who Entered DFCS Custody before October 27 2005 and Who Exited to
Permanency January 1 through June 30, 2010

	Cohorts	Cohorts of Children		
	Children in custody for <u>up to</u> 24 months and still in custody on October 27, 2005 (Outcome 9)	Children in custody <u>for more</u> than 24 months and still in custody on October 27, 2005 (Outcome 10)	Total	
Number of children in cohort	106	95	201	
Permanency Exits				
Reunification	0	1	1	
Adoption	16	11	27	
Guardianship	4	4	8	
Live with other relative	5	1	6	
Permanent Placement with relatives				
Total for Outcome Measurement	25	17	42	
Percentage exiting for Outcome Measurement	24%	18%	21%	
Other exits (transfer to other counties, emancipation, etc)	7	12	19	
Total number exits	32	29	61	
Remaining number in cohort June 30, 2010	74	66	140	
Characteri	stics of those children remaining ir	custody on June 30, 2010		
Proportion under the age of 12	47%	15%		
Average length of stay	66.4 months (5.5 years)	123.23 months (10.3 years)		
Median length of stay	64.5months (5.4 years)	108 months (9 years)		
Average age	14.4 years	15.6 years		
Percent female	47%	48%		
Percent male	53%	52%		

Source: SHINES, and county tracking systems.

Figures IV-9 and IV-10 summarize the State's performance on Outcome 9 and Outcome 10, respectively. These figures reflect the State's cumulative progress with these two groups of children.

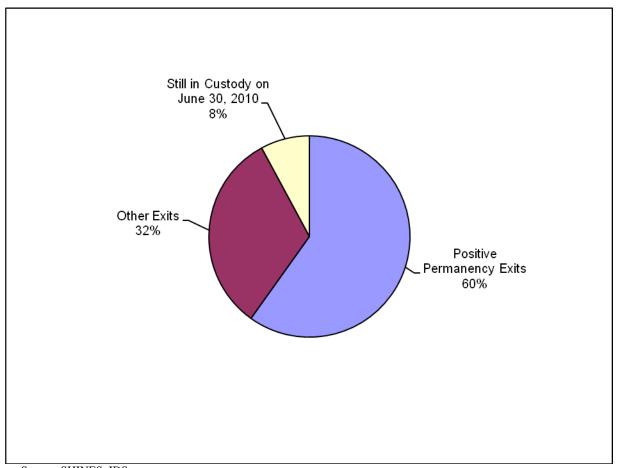
Figure IV-9 Outcome 9 Foster Care Outcomes of 1448 Children in Custody Up To 24 Months Before October 27, 2005*



Source: SHINES, IDS

*Positive Permanency exits include reunification, adoption, guardianship, permanent legal custody, and permanency placement with relatives. Other exits include emancipation and transfer to other counties or states. Original cohort number of 1453 adjusted for children who exited before Consent Decree as they have been identified.

Figure IV-10
Outcome 10
Foster Care Outcomes of 825 Children Entering Custody More than 24 Months Before
October 27, 2005*



Source: SHINES, IDS

*Positive Permanency exits include reunification, adoption, guardianship, permanent legal custody, and permanency placement with relatives. Other exits include emancipation and transfer to other counties or states. Original cohort number of 828 adjusted for children who exited before Consent Decree as they have been identified.

Outcome 11 - Adoptions within 12 Months of Termination of Parental Rights

Outcome 11 applies to all children whose parents' parental rights were terminated between January 1 and June 30, 2009. Outcome 11 stipulates that 80 percent of these children should have their adoptions or legal guardianships finalized within 12 months of final termination or relinquishment of parental rights.⁵¹ The intent of this outcome is to encourage the movement of children into permanent families as quickly as possible after dissolution of their family of

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⁵¹ See p. 34. Outcome 11 of the Consent Decree.

It is similar to one of the national permanency outcomes established by the U.S. Department of Health and Human Services.⁵²

Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. measurement of Outcome 11 is based on the entire population of children whose parents had their parental rights terminated any time between January 1 and June 30, 2009. measurement is based on a report from SHINES supplied by the State and verified by the Accountability Agents.

b. State Performance

The State Fell Short of the Outcome 11 Threshold

Between January 1 and June 30, 2009, the parental rights of the parents of 80 children were terminated or relinquished. Of these 80 children, 43 children, (54%) were adopted within 12 months. This falls below the performance threshold of 80 percent for this outcome but it is an improvement over the Period VIII performance of 50 percent.

As reflected in Table IV-10, another six children (8%) achieved permanency through adoption but not within the stipulated 12-month time frame. Two of the six were adopted or had legal guardians within 13 months and four had adoptions finalized or legal guardians in approximately 14 to 16 months. Figure IV-11 displays the State's Outcome 11 performance for the six reporting periods to which the Consent Decree standard applied.

As part of an agreed-upon curative action plan among the parties, the State reports it created a team with a "champion administrator" to ensure that barriers and/or needs to achieve permanency are effectively addressed. The team is composed of adoption workers from both DeKalb and Fulton counties as well as representatives from state office. The administrator is responsible for tracking and ensuring that staffings are regularly held to identify children appropriate for termination of parental rights and to initiate timely actions for termination and adoption/guardianship.⁵³ In addition, several strategies are being employed to reduce the time between termination of parental rights and finalization of adoption including close monitoring by adoption supervisors, case managers, and State Assistant Attorneys General.

Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader,

Children's Rights, August 23, 2010 and September 22, 2010.

⁵² See discussion of the 15 new outcome measures developed for the second round of the CFSRs in *Child Welfare* Outcomes 2002-2005: Report to Congress, Appendix B, specifically C2.5 at http://www.acf.hhs.gov/programs/cb/pubs/cwo)5/appendix/appendixb.htm

53 Correspondence from Principles

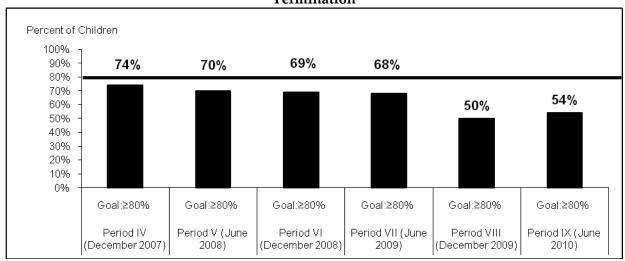
53 Correspondence from Principles

Table IV-10
Status as of June 30, 2010 of Children with Parental Rights Terminated between
January 1 and June 30, 2009
N=81

	Number	Percent	Cumulative
			Percent
Adoption finalized within 12 months	43	54%	
Guardianship	0		
Adoption or Guardianship finalized within 13 months	2	3%	56%
Adoption or Guardianship finalized within 14 - 16 months	4	5%	58%
Custody to relatives for purposes of adoption (granted within 12	0		
months of TPR)			
Emancipated from foster care at age 18	0		
Awaiting adoption as of July 1, 2010	31	39%	100%
Total	80	101%	

Source: State reporting from SHINES. Total greater than 100% due to rounding.

Figure IV-11
Six Reporting Periods of State Performance on Outcome 11:
Children are Adopted within 12 months of Parental Rights
Termination



Source: State reporting from IDS and SHINES, July 2007 –June 2010

When children exit foster care, it is an expectation of Georgia's child welfare system that the children will have exited to a stable, family care arrangement. In particular, exits to reunification and adoption are intended to be life-long arrangements. The casework done while a child is in custody and the planned aftercare can help these exits remain successful. Unfortunately, circumstances sometimes require children to re-enter care to ensure their safety or well-being. Two outcomes, Outcome 4 and Outcome 14, focus on the State's performance in ensuring successful permanency without subsequent re-entry in a year.

Outcome 4 – Re-Entry into Custody

In Outcome 4, the Consent Decree establishes a measure of the stability of foster care exits: the percentage of children who re-enter state custody within 12 months of having previously left custody.⁵⁴ Outcome 4 sets the same numerical standard as the national outcome established by the U.S. Department of Health and Human Services. However, the national outcome is limited to those children who exit custody specifically to reunification and therefore measures the permanency of reunification, not all permanency exits.⁵⁵

a. <u>Interpretation and Measurement Issues</u>

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues and the verification process. The measurement of Outcome 4 is based on the entire population of 481 children who entered foster care through adjudication at any time between January 1 and June 30, 2010. The State used SHINES to produce a report of the children experiencing a re-entry into foster care in Period IX. This list was verified by the Accountability Agents.

b. State Performance

• The State Fell Short of the Outcome 4 Threshold.

Of the 481 children who entered foster care between January and June 2010, 53 children (11.1%) had exited foster care at least once in the 12 months prior to their most recent entry. The outcome performance threshold is no more than 8.6 percent. The Period IX performance is a substantial increase over the Period VIII performance of 9.7 percent and is the State's poorest performance on this outcome to date. With increasing State efforts to shorten foster care stays for children and to safely return them to their families, the increase in re-entries is not entirely unexpected since children cannot *re-enter* care until they have been *discharged* from care. However, the increase over the last 12 months needs to be carefully examined for insights into potentially-effective ways to limit the re-entry dynamic *without* unnecessarily elongating foster

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⁵⁴ See p 32, Outcome 4, of the Consent Decree.

⁵⁵ See discussion of the 15 new outcome measures developed for the second round of the CFSRs in *Child Welfare Outcomes 2002-2005: Report to Congress*, Appendix B, specifically C1.4 Permanency of Reunification at http://www.acf.hhs.gov/programs/cb/pubs/cwo)5/appendix/appendixb.htm

care stays. Figure IV-12 displays the State's Outcome 4 performance over the eight reporting periods to which the Consent Decree standard applied.

The State reports that each of the counties conducted studies of their re-entry population as a step in developing strategies to reduce the re-entries. As with the Accountability Agent's analysis of Period VIII re-entries, a large proportion (69% to 81%) of the children remained under court-ordered DFCS supervision through protective orders when they exited custody to their parents or relatives. The children returned to custody primarily because families were considered noncompliant with the requirements of the protective orders. Therefore, how the case management transition is handled and how post foster care services are monitored may play a role in preventing re-entry. Teenagers with dual involvement (but not dual custody) with the Department of Juvenile Justice accounted for another trend among the re-entries. These youth often pass from the custody of one system to another and back again because of their behaviors or family dynamics. Finally, the initial foster care episode for most children was less than six months.⁵⁶ This trend suggests that some children may have been discharged before their behaviors or family circumstances changed sufficiently to enable them to find permanency in the home to which they were discharged. . As part of an agreed-upon curative action plan between the parties, both counties undertook the previously described studies to provide greater guidance on how to address the trend. During Period 10, they are developing and implementing strategies that focus on improved assessment of needs when children first enter custody, transitional supports for children exiting custody under continued DFCS supervision, strengthening discharge planning, and coordination with the Department of Juvenile Justice.⁵⁷

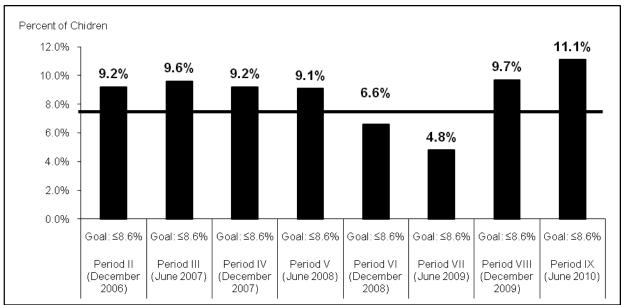
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⁵⁶ See Dimas, J. T. and Morrison, S. A. Period PVIII Monitoring Report, *Kenny A. v. Perdue*, July 2010, for an analysis of children who re-entered custody in Period VIII.

analysis of children who re-entered custody in Period VIII.

Torrespondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, September 2, 2010 and November 8, 2010.

Figure IV-12
Eight Reporting Periods State Performance on Outcome 4:
Foster Care Re-entry within 12 Months of Previous Exits



Source: IDS and SHINES reports, July 2006-June 2010

Outcome 14 – Adoption Disruptions within 12 Months of Finalizations

Outcome 14 focuses on adoptions that fail or are at the brink of failure. Adoption disruptions occur when adoptive parents no longer can or no longer wish to parent the children to whom they made a lifetime commitment or when children are found to be at risk of harm and must be removed from the adoptive home. When a disruption occurs, DFCS works with these families to achieve reunification and prevent dissolution, but the effort is not always successful. The Consent Decree establishes a performance threshold that no more than 5 percent of adoptions finalized during a reporting period shall disrupt within the 12 months subsequent to finalization.⁵⁸

a. <u>Interpretation and Measurement Issues</u>

No new interpretation or measurement issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 14 is based on the entire population of 51 children who were adopted between January 1 and June 30, 2009 (Period VII) to allow for the 12 month follow-up period.

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⁵⁸ See p. 34, Outcome 14, of the Consent Decree

b. State Performance

• The State Surpassed the Outcome 14 Threshold.

Within the group of 51 children adopted between January 1 and June 30, 2009, no child is known to have re-entered the State's custody by June 30, 2010. The outcome performance threshold is no more than 5 percent. The State has consistently surpassed this outcome measure in all reporting periods.

Outcome 15 – Permanency Actions for Children Reaching Their 15h Month in Custody of Most Recent 22 Months

To reduce the number of children who experience long foster care stays, Federal law requires states to file for termination of parental rights when a child has been in care for 15 cumulative months of the previous 22 months. There are three exceptions to this requirement. They are:

- The child is being cared for by a relative;
- The state has documented a "compelling reason" that filing a petition to terminate would not serve the child's best interests; or
- The state has not made "reasonable efforts" to reunify the family.⁵⁹

Furthermore, Federal regulations state and DFCS policy advises, that a "compelling reason" must be based on the individual case circumstances guided by what is in the best interest of the child.⁶⁰

The Consent Decree Outcome 15 stipulates that by Period IV (December 2007), 95 percent of children who reach their 15th month in care will have had either 1) a petition for the termination of parental rights filed as to both parents or legal caregivers, as applicable, or 2) documented compelling reasons in the case record as to why such action is not in the best interest of the child.⁶¹

a. <u>Interpretation and Measurement Issues</u>

No new interpretation or measurement issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 15 is based on the entire population of children who had reached or were beyond their 15th month in custody out of the previous 22 months in Period IX. As in previous periods, the Accountability Agents reviewed the compelling reason provided for each child and compared it to past information. Information from the Period IX case record review

⁶¹ See p 34, Outcome 15, of the Consent Decree.

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⁵⁹ Adoption and Safe Families Act, see also Social Services Manual Chapter 1000, Section 1002.7, Georgia Department of Human Services

⁶⁰ See Social Services Manual, Section 1002.12.3, 1002.17, and 1013.11 Georgia Department of Human Services

of the 180 children in the foster care sample was compared to the information provided by the counties as another means of verifying the report provided by the counties

During Period IX, there were 1005 children who had reached or surpassed their 15 month in custody out of the last 22 months. A portion of the children, 248 (25%) were discharged by the end of the reporting period but were included in the analysis. A portion of children, 121 (12% of 1005), were excluded from the Outcome 15 performance measurement based on the placement with relatives as allowed under Federal law.

b. State Performance

The State Surpassed Outcome 15 Threshold

By June 30, 2010, **100 percent** of the children in care 15 of the previous 22 months were legally free to be adopted or the State had filed to terminate parental rights or documented compelling reasons why it had not taken such action. This is an improvement over the Period VIII performance of 96 percent and it is the fourth consecutive period that the State has met or surpassed this outcome measure. Figure IV-13 displays the State's performance on Outcome 15 for the eight reporting periods to which the Consent Decree standards applied. Table IV-11 summarizes the different components of the counties' Period IX performance as analyzed from the data in their tracking systems.

The 248 children discharged were distributed across all categories displayed Table IV-11. For example, among the 147 children who had a compelling reason of *expected reunification within six months*, 50 children (34%) actually were discharged during the period. In another example, 77 of the 342 children who were legally free for adoption exited care, most to finalized adoptions. In addition, the State moved to terminate parental rights for a portion of children who had previously had compelling reasons not to take such action. Their circumstances had changed such that there was no longer a compelling reason to not file for termination of parental rights.

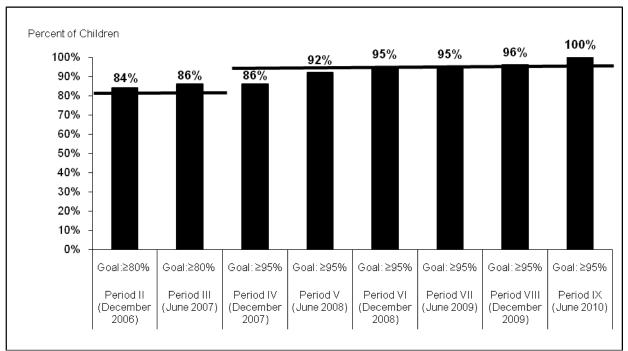
The Outcome 15 analysis shines a light on the pool of children for whom parental rights have been terminated. This pool of children legally free for adoption in custody 15 months or more has grown from 190 at the end of Period VIII to 265 at the end of Period IX, or 39 percent. At the end of Period IX, 35 percent of the children who had spent 15 months or more in foster care were legally free for adoption, compared to 25 percent of all children who had reached this milestone and remained in care at the end of Period VIII. At the end of Period VII the proportion was 31 percent.

Table IV-11 Status of Children Who Had Been in DFCS Custody 15 of the previous 22 months As of June 30, 2010

Category			Total		
		Number	Percent	Cumulative	
Children who reached or surpassed their 15th month in custody in		1005			
the last 22 months between July 1 through June 30, 2010.*	J	1005			
Excepted subpopulation (s):					
Children placed wit	h relatives	121			
The State has not made reasonable efforts to reunify	the family	0			
Number of Children for Outcome 15 Meas	surement	884			
Parental Rights of Both Parents have been terminated or		242	39%		
relinquished.		342	39%		
DFCS has filed a petition to complete the termination of the	ne	68	8%	46%	
parental rights of both parents where applicable.		00	0 /0	40 /0	
There is a documented compelling reason for not ter	minating	474	54%	100%	
parental rights.		4/4	J4 /0	100 /0	
Reasons cited	Number				
There is a permanency goal of return home,					
approved by the Court and the child is expected to	147				
be reunited with parents within 6 months.					
The child is a specified age (14) or older and objects	93				
to being adopted.	,,,				
The child has severe emotional or behavioral					
problems or a serious medical condition and	14				
reunification remains an appropriate goal.					
The child has a permanency goal other than	101				
adoption and is expected to achieve that goal within	186				
12 months of establishing the goal.					
Parents are deceased, or have voluntarily	2				
relinquished rights.					
The child is an unaccompanied refugee minor as	7				
defined in 45 Code of Federal Regulations 400.11.					
The child is a child of a teen mother who is also in the State's custody	13				
	12				
There is no documented Compelling Reason not to file a petition to terminate parental rights.		0			
There are plans to terminate parental rights, but a petition	n had not				
yet been filed as of June 30, 2010 or date of discharge.	i ilua ilot	0			
jet been inca ab of june bo, 2010 of date of discharge.		l			

Source: SHINES and County tracking systems; *248 children were discharged from this pool during Period IX; they are distributed across all categories;

Figure IV-13
Eight Reporting Periods of State Performance on Outcome 15:
Children in Care 15 of the Previous 22 Months have Petitions for Terminating Parental Rights or a Compelling Reason Not to Terminate Parental Rights



Source: County data, verified, July 2006-June 2010.

Outcome 27 – Timely Semi-annual Judicial or Administrative Case Plan Reviews

Children are expected to have case plans developed within 30 days of entering State custody. According to Federal and State policy and the Consent Decree, case plans are to be initially reviewed by the court or designated panel within six months and every six months the child is in custody thereafter.⁶² Outcome 27 stipulates that at least 95 percent of the children are to have timely semi-annual reviews of their case plan.

• <u>Interpretation and Measurement Issues</u>

There were no interpretation or measurement issues in Period IX. The measurement of Outcome 27 is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010. The outcome 27 analysis was applicable to 155 children who had been in custody six months or more. This represents 86 percent of the sample of 180 children in foster care. 63

⁶² See p. 7, paragraphs 4A.4 and pp. 7-8, paragraphs 4B.1-6, and p. 37, Outcome 27, of the Consent Decree.

⁶³ Conclusions drawn from the 155 would be subject to a margin of error of \pm 8 percent.

b. State Performance

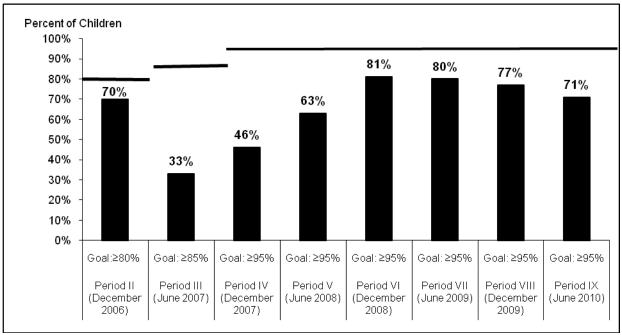
• The State Fell Short of the Outcome 27 Threshold

Case file documentation indicates that 110 children (71%) of the 155 children in the foster care sample in custody for six months or more had documented timely case plan reviews completed by the Juvenile Court or Juvenile Court Review Panel (JCRP) or a timely request for review by June 30, 2010. The Outcome 27 performance threshold is 95 percent. The Period IX performance declined from the Period VIII performance of 77 percent, but the observed difference is within the margin of statistical error for the sample.

By comparison, the information collected by the State team that conducts the 13th month permanency reviews (discussed later in this part) indicates that 78 percent of the children in custody 12 months had a panel or judicial review within the six months preceding the 13th month permanency review. The Accountability Agents will continue to work with the State to understand this performance level and explore possible documentation issues that may be affecting it.

Among the remaining 45 children requiring reviews who did not receive a timely review or a timely request for review, 25 children (16% of 155) had a plan reviewed but not within six months of entry or the previous case plan review and 17 children (11% of 155) had one review in the 12 months between July 1 2009 and June 30, 2010. Three children (2% of 155) due one or more reviews had no documentation of a plan review or an attempt to schedule a review in the period. Figure IV-14 displays the State's performance for the eight reporting periods to which the Consent Decree standards applied.

Figure IV-14
Eight Reporting Periods State Performance on Outcome 27:
Timely Semi-Annual Judicial/Citizen Panel Case Reviews



Source: Review Period Foster Care Case Record Reviews, July 2006-June 2010

In total, the plans of 150 children in the foster care sample who had been in custody at least six months (97% of 155) received a review by either the Juvenile Court or the JCRP in the most recent 12-month period (sometime between July 1, 2009 and June 30, 2010). These included the reviews considered timely for Outcome 27 as well as those that were not timely. One review was held for child who had not yet been in custody six months. These 151 reviews were used to provide information about aspects of the review process. Among the 151 reviews, DFCS sought a permanency plan change for 25 children (17%). There were court orders documenting court approval for 78 (52%) and court rejection of one (<1%) of the 151 plan reviewed. In the plan that was rejected, DFCS had planned to proceed with termination of parental rights but the presiding judge denied the termination plan and approved a plan of "living with a fit and willing relative. The case files of the remaining 71 (47%) children did not contain court orders specifically indicating approval or rejection of the plans by the court. Table IV-12 provides information documented in the case files regarding the 151 most recent six-month reviews occurring between July 2009 and June 2010.

Table IV-12 Characteristics of Six-month Case Reviews n= 151

(most recent plans reviewed between July 2009-June 2010)

Characteristic			Number	Percent
Participants				
Birth Mother			56	37%
Birth Father			21	14%
Child			39	26%
Relative caregivers/ Extended Family Members			23	15%
Foster parents/placement providers			38	25%
DFCS case manager			134	89%
DFCS supervisor			15	10%
Other DFCS representative			2	1%
CCFA provider			0	0
Private agency case manager			24	16%
Medical and mental health professionals			7	5%
Parents' attorney(s)			44	28%
SAAG (State Assistant Attorney General)			74	49%
Child's advocate			111	74%
Elements Evaluated/Considered				
Necessity and appropriateness of child's placement			102	68%
Reasonable efforts made to obtain permanency			120	79%
Degree of compliance with specific goals and action steps			99	66%
Progress made in improving conditions that caused removal			77	51%
Changes that need to be made to plan			15	10%
County recommendations			43	28%
Parent recommendations			5	3%
JCRP conducted review (percentage based on n=151)			71	47%
Total JCRP reports submitted (percentage based on n=71)	54	76%	/1	47 /0
Number of reports with Panel findings (percentage	54	100%		
based on n=54)	34	100 /6		
Number of reports with Panel recommendations	54	100%		
(percentage based on n=54)	34	10070		
Number of reports with County findings (percentage	36	67%		
based on n=54)		07.70		
Number of reports with County recommendations	39	72%		
(percentage based on n=54)				
Court conducted review (percentage based on n=151)		80	53%	
Plan adopted by Juvenile Court (percentage based on n=151)			78	52%

Source: Case Record Review, August-October 2010

Outcome 28 - Timely Annual Judicial Permanency Reviews

According to Federal and State policy and the Consent Decree, children are expected to have a judicial permanency hearing at least every 12 months they are in custody.⁶⁴ These hearings are held to determine whether the State is making reasonable efforts to help children achieve permanency.

a. <u>Interpretation and Measurement Issues</u>

There were no interpretation or measurement issues in Period IX. The measurement of Outcome 28 performance is drawn from the sample of 180 children in foster care at any time between January 1 and June 30, 2010. The outcome 28 analysis was applicable to 123 children (69%) in the sample of 180 who had been in custody 12 months or more.⁶⁵

b. State Performance

• The State Fell Short of the Outcome 28 Threshold

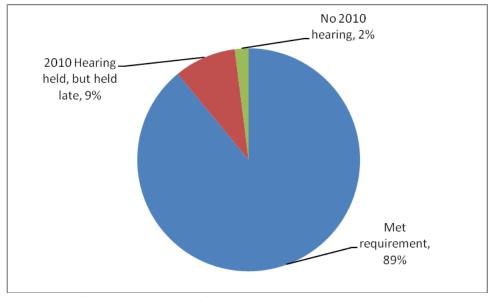
For Outcome 28, 106 children (89%) of the 123 foster children in the sample who were in custody for 12 or more months in Period IX had timely permanency hearings held by the Juvenile Court or a timely request for a hearing when the 12 months had expired. The performance threshold for Outcome 28 is 95 percent. Although Period IX performance is an increase from the Period VIII performance of 87 percent, the observed change is within the subsample's margin of statistical error. The Period IX performance on this outcome was the second best in seven reporting periods.

During Period IX, 106 children had had a permanency hearing within 12 months of entry or the previous twelve-month permanency hearing. Three other children had a timely petition for a permanency hearing but continuances delayed the hearing. Among the remaining 14 children who did not appear to have a timely permanency hearing or a petition, six children had a hearing within 13 months; three had hearings within 14 months; two had hearings within 22 to 24 months; two who were due a hearing in June 2010 had not yet had them by the end of June; and one child did not have a documented permanency hearing in 2009. Figure IV-15 illustrates the proportion of records in each category. Figure IV-16 illustrates the State's performance for this Outcome over the eight reporting periods to which the Consent Decree standard applied.

⁶⁴ See p. 9, paragraph 4B.10, and p.37, Outcome 28, of the Consent Decree.

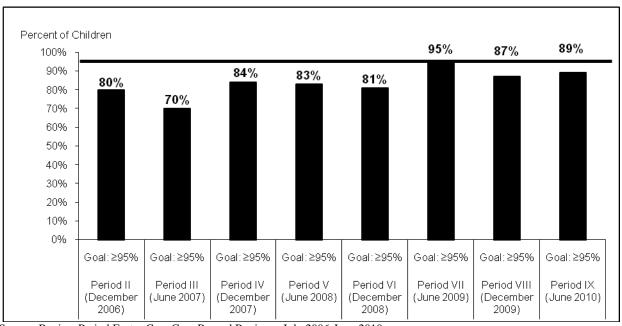
⁶⁵ Conclusions drawn from the subsample of 123 children are subject to a margin of error of ± 9 percent.

Figure IV-15
Timeliness of Permanency Hearings
n= 123



Source Case Record Review, August-October 2010

Figure IV-16
Eight Reporting Periods of State Performance on Outcome 28:
Timely Permanency Hearings



Source: Review Period Foster Care Case Record Reviews, July 2006-June 2010

B. Other Practice and Process Requirements for Helping Children Achieve Permanency

Placement with relatives has been demonstrated to help children have placement stability ⁶⁶ and placement stability contributes to children achieving permanency. In addition, DFCS policy and the Consent Decree requirements establish several guidelines for practice to help children achieve permanency. These requirements include regular parental visitation with children who have the permanency goal of reunification;⁶⁷ internal DFCS permanency reviews for children who reach their 13th month in custody; and county-state staffings for children who reach their 25th month in custody.⁶⁸

1. <u>Placement with Relatives</u>

Of the 180 children in the foster care sample, 40 children (22%) were placed with relatives on June 30, 2010 or the last date the children were in custody. This is lower than the 27 percent found in the Period VIII sample. Children placed with family were in a combination of relative homes, relative homes licensed and reimbursed for foster care, and parental homes.

2. <u>DFCS Permanency Reviews at the 13th or 25th month in custody.</u>

Starting in Period IX, the Permanency Review Unit modified the information it collects and tracks about the permanency review practice. The revised permanency review form that is completed by the child's case manager now gathers a variety of new information around "Permanency Plan and Agency Actions" and "Services and Family Engagement". Questions relevant to federal provisions regarding permanency planning, semi-annual reviews, agency efforts to achieve court-ordered goals, and decision making around termination of parental rights have been added. The forms no longer record information from the CCFAs that are submitted as part of the review packet or whether youth at the 25th month staffing had also participated in 13 month reviews/ staffings. Permanency reviewers are asked to record judgments about whether appropriate services have been/are being provided based on the findings of all formal and informal assessments the child and family have received. This shift was informed by internal discussions about what information is most useful to guide practice improvement around permanency. In addition, to expanding information collection, permanency staffings are now held using the roundtable format to increase meaningful participation by all partners.

The Accountability Agents have added the data around who has active involvement in case planning at the 13th and 25th month to this report. These data will continue to be tracked in period 10 and additional measures may be added moving forward.

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⁶⁶ Zinn, Andrew, DeCoursey, Jan, Goerge, Robert M., Courtney, Mark E. A Study of Placement Stability in Illinois, Chapin Hall Center for Children, 2006.

⁶⁷ See p 6, paragraph 4A.6vi, of the Consent Decree for visitation planning in Family Team Meetings. Visitation schedules are also an element of DFCS case planning.

⁶⁸ See p. 9-10, paragraphs 4C.1-5, of the Consent Decree.

a. 13th month Permanency Reviews

The State reports that regularly scheduled reviews of progress toward permanency take place in each county for children who reach their 13th month in care. Staffings are held when the review team does not concur with the permanency plan for a child or when there is a belief that the plan would benefit from more discussion and additional actions.

Table IV-13 summarizes some of the characteristics of the 13th month permanency review practice as reported by the State.⁶⁹ Based on the State's own tracking and reconciliation, all children received a timely 13th month permanency review between January and June 2010. A total of 200 cases were reviewed during Period IX. Key findings from state-tabulated data include the following:

- The proportion of cases in which the State reviewers concurred with the county permanency plan decreased in Period IX as the reviewers concurred with 62 percent of the case plans compared to 66 percent in Period VIII.
- Overall, 149 cases (75%) received subsequent staffing with the counties.
- The proportion of cases with current case plans has increased, with 67 percent of 200 cases in Period IX having current case plans compared to 57 percent in period VIII.
- The practice of convening Family Team Meetings (see Table IV-14) before reviews appears to have declined since Period VIII. In Period IX, 42 percent of the 200 cases in which FTMs were applicable had Family Team Meetings within 90 days of the 13th month review and in Period VIII, 65 percent had had such meetings.

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⁶⁹ The information was not independently verified by the Accountability Agents in Period IX. Period VIII reported information was verified as described in Dimas, J. T. and Morrison, S. A., *Period VIII Monitoring Report, Kenny A. V Perdue*, July 2010. The Accountability Agents will continue to periodically verify 13th and 25th Month Permanency Review Activity.

Table IV-13 13th Month Permanency Review Implementation January 1 through June 30, 2010 N=200

	Number	Percent
Total Cases Reviewed by State Permanency Reviewers	200	
Reviewer Concurrence with goal and plan	124	62%
Permanency Goal		
Reunification	136	68%
Permanent placement with relative	29	15%
Adoption	27	14%
Guardianship	6	3%
Another planned permanency arrangement	2	1%
Totals	200	100%
Cases with current case plans (Court sanctioned/approved)	134	67%

Source: Division of Family and Children's Services, State Permanency Review Project Director, Quarterly Reports on 13th month Permanency Reviews. Percentage totals greater than 100 due to rounding.

Table IV-14
Family Team Meetings Convened for 13th Month Permanency Reviews
January 1 through June 30, 2010

junituring a same surjuring et	Number	Percent
Cases with "Family Team Meetings" (FTM) within the last 90 days	83	42%
(percentages based on the number of applicable cases =200)		
FTMs with mothers involved (percentages based on the number	40	48%
of FTMs held = 83)		
FTMs with fathers involved (percentages based on the number of	12	14%
FTMs held = 83)		
FTMs with relatives involved (percentages based on the number	19	23%
of FTMs held= 83)		
FTMs with foster parents involved (percentages based on the	34	41%
number of FTMs held = 83)		
FTMs had recommendations specific to Child/Family needs	64	77%
(percentages based on the number of FTMs held =83)		

Source: Division of Family and Children's Services, State Permanency Review Project Director, Quarterly Reports on 13th month Permanency Reviews.

Table IV-15 summarizes family and caretaker involvement in case planning as identified in the 13th month permanency review and reported by the State. The assessment by permanency reviewers was based on all documentation in the case file that indicated parental and/or youth involvement. The information about involvement is different from that reported about Family Team Meeting as it looks at family and caretaker participation over the life of the foster care episode, not just the single event of the FTM required for the 13th month permanency review.

Although a total of 200 cases were reviewed during Period IX, the applicable number of cases varies for each category based on several factors. Cases in which the children were too young to participate in case planning, there was termination of parental rights, the parents' whereabouts were unknown, or the parent was deceased were excluded. Key findings from state-tabulated data include the following:

- The vast majority of substitute caretakers (95%) participated actively in case planning.
- Mothers' active involvement in case planning was the second highest at 84 percent.
- 71 percent of children old enough to participate in case planning were actively involved.
- Fathers were the group with the lowest active participation in case planning (60%).

Table IV-15 13th Month Permanency Review: Engagement in Case Planning January 1 through June 30, 2010 N=varies

	Number	Percent
Active involvement in the case planning process		
Child (n=120)	85	71%
Mother (n=154)	129	84%
Father (n=123)	60	49%
Caretaker (n=200)	190	95%

Source: Division of Family and Children's Services, State Permanency Review Project Director, Quarterly Reports on 13th month Permanency Reviews.

b. 25th Month County-State Staffings

In addition to the 13th month permanency reviews, the State reported holding state/county staffings for all children (100%) required to have a 25th month staffing between January and June 2010 and who remained in custody throughout the month. A total of 100 staffings were held. Table IV-16 provides a summary of the data related to these staffing. Reported findings include:

- The permanency review team concurred with the County's permanency plan in 73 percent of the cases (73 children). This is similar to Period VIII when the team concurred with 74 percent of the plans.
- In Period IX 33 percent of plans had a goal of reunification. This has decreased from Period VIII in which 49 percent of the permanency goals was reunification.
- In period IX, 36 percent of plans had a goal of adoption. This is dramatically up from Period VIII in which no plans had a goal of adoption at the 25th month.
- The proportion of children with current case plans was 63 percent (63 children). This is a dramatic decline from Period VIII in which 89 percent of the case plans were reportedly current.

Table IV-16 25th Month Permanency Review Implementation January 1 through June 30, 2010 N=100

	Number	Percent
Total Cases Staffed	100	
Reviewer Concurrence with county plan	73	73%
Permanency Goal		
Reunification	33	33%
Permanent Placement with relative	9	9%
Adoption	36	36%
Guardianship	11	11%
Another planned arrangement	11	11%
Totals	100	100%
Cases with current case plans (Court sanctioned/approved)	63	63%

Source: Division of Family and Children's Services, State Permanency Review Project Director, Quarterly Reports on 25th month Permanency Reviews. Percentage totals greater than 100 due to rounding.

Table IV-17 summarizes family and caretaker involvement in case planning at the 25th month permanency review practice as reported by the State. Although a total of 100 cases were reviewed during Period IX, the applicable number of cases for family involvement varies for each category based on several factors. Cases in which the children were too young to participate in case planning, there was termination of parental rights, the parents whereabouts were unknown, or the parent was deceased were excluded. Key findings from state-tabulated data include the following:

- The vast majority of caretakers (97%) participated actively in case planning.
- Mothers' active involvement in case planning was the second highest at 78 percent.
- 63 percent of children old enough to participate in case planning were actively involved.
- Fathers were the group with the lowest active participation in case planning (58%).

Table IV-17 25th Month Permanency Review: Engagement in Case Planning January 1 through June 30, 2010 N=varies

	Number	Percent
Active involvement in the case planning process		
Child (n=59)	37	63%
Mother (n=55)	43	78%
Father (n=43)	25	58%
Caretaker (n=99)	96	97%

Source: Division of Family and Children's Services, State Permanency Review Project Director, Quarterly Reports on 25th month Permanency Reviews.

C. Post Adoption Assistance

The State reported that 67 children were adopted between January 1 and June 30, 2010. According to data obtained from the Office of Adoptions, 62 (93%) of those children were receiving or were scheduled to receive monthly Adoption Assistance benefits and Medicaid. This is slightly smaller proportion than in Period VIII. All families receiving the monthly adoption assistance are also eligible to receive additional benefits to cover non-recurring expenses. Among the 67 families, 61 percent had received these benefits by June 30, 2010, however the additional eligible families may have been reimbursed after that date.

Part V WELL-BEING

Children in Care Experience Stable Placements and Worker Continuity and Receive the Services They Need

Foster care is intended to be a temporary arrangement for children. During the time a child is in care, not only does he or she deserve to be safe, but the child also needs to be nurtured. The Consent Decree establishes six outcomes that are related to children's well-being. This part reports on the State's performance on these outcomes and the practice in assessing and meeting the needs of children in care. Corrective State actions regarding discharge planning to be taken in Period VI and subsequent reporting periods under a negotiated agreement between the State and the Plaintiffs' Counsel are summarized at the end of this part.

A. Outcome Performance

Table V-1 below provides the summary of measured performance for each of the six Well-Being Outcomes. The discussion following the table provides a more detailed description of State performance. This discussion includes a summary of the Consent Decree requirements, interpretation and measurement issues associated with the outcomes, and contextual information as necessary for better understanding the State's performance at the end of Period IX. This part also includes charts which display the State's performance trends over the eight reporting periods to date.

Table V-1
Well-Being Outcomes

Children Experience Stable Placements and Worker Continuity	
Outcome 17: At least 95% of all children in care shall have had 2 or fewer placement	020/
moves during the prior 12 months in custody.	92%
Outcome 18: At least 90% of all children in care at a point in time during the reporting	
period shall have had 2 or fewer DFCS placement case managers during the prior 12	
months in custody. This measure shall not apply to cases that are transferred to an	
adoption worker or Specialized Case Manager; case managers who have died, been	84%
terminated, or transferred to another county; or case managers who have covered a	
case during another case manager's sick or maternity leave.	
Outcome 20: At least 95% of children in care at a point in time during the reporting	
period shall have had at least one in-placement visit and one other visit, as defined in	64%
Section 5.D, each month by their case manager during the prior 12 months in custody.	
Outcome 22: At least 90% of all children in care at a point in time during the reporting	
period shall have had visits between their DFCS placement case manager and their	
foster parent, group care, institutional or other caretaker at least one time each month	80%
during the prior 12 months in custody.	

Table V-1, continued Well-Being Outcomes

Children and Youth Receive the Services they Need	
Outcome 24: The percentage of youth discharged from foster care at age 18 or older	Not
with a high school diploma or GED will increase over baseline by 20 percentage	
points.	Period IX
Outcome 30: At least 85% of children in care shall not have any unmet medical,	
dental, mental health, education or other service needs, according to the service needs	69%
documented in the child's most recent case plan.	

1. <u>Children Experience Stable Placements and Worker Continuity: Outcomes 17, 18, 20 and</u> 22

The Consent Decree stipulated four Outcomes (17, 18, 20, and 22) related to children experiencing a stable placement, case manager continuity, and regular case manager visitation that have performance thresholds to be achieved and sustained.

Outcome 17 - Placement Stability

Once placed in an appropriate setting, a casework goal is to maintain the stability of the placement and avoid the trauma of disruption and placement into another setting. With Outcome 17, the Consent Decree establishes a threshold for placement stability by requiring that at least 95 percent of children in custody have 2 or fewer placement moves during the most recent 12 months in custody.⁷⁰

a. Interpretation and Measurement Issues

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 17 performance is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010.

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⁷⁰ See p. 35, Outcome 17 of the Consent Decree

b. State Performance

• The State Fell Short of the Outcome 17 Threshold

For Outcome 17, 165 children (92%) of the 180 children in the foster care sample experienced two or fewer placement moves during the previous 12 months in custody. The performance threshold is 95 percent for this outcome. The Period IX performance is an improvement over Period VIII performance of 87 percent but is within the margin of statistical error for the sample. It is the State's best performance since Period V. Table V-2 provides a breakdown of the number of placement moves experienced by the children in the foster care sample. File documentation attributes the majority of multiple moves to diagnosed (ADHD, Bi-polar conditions) and undiagnosed child behaviors. Figure V-1 illustrates the State's performance over the eight reporting periods to which the Consent Decree standards applied.

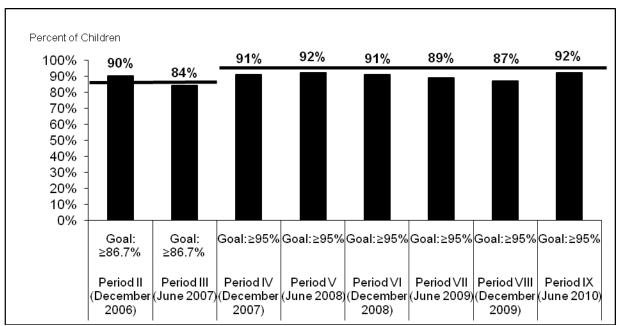
As noted in the Part IV discussion of state and county efforts to expedite permanency, some of the efforts have been directed at reducing placement moves. These efforts may have contributed to the observed improvement.

Table V-2
Number of Placement Moves Experienced by Children in the 12 months prior to
June 30, 2010 or the Last Date of Custody
n=180

11 100			
Number of Moves	Number	Percent	Cumulative
			Percent
No Moves	98	54%	
One Move	47	26%	81%
Two Moves	20	11%	92%
Subtotal	165		
Three Moves	8	4%	96%
Four Moves	2	1%	97%
Five Moves	4	2%	99%
Six Moves or more	1	1%	100%
	180		

Source: Case Record Review, August-October 2010.

Figure V-1
Eight Reporting Periods of State Performance on Outcome 17:
Children with 2 or Fewer Placement Moves in Prior 12 Months



Source: Review Period Foster Care Case Record Reviews, July 2006-June 2010

Outcome 18 – Worker Continuity

Worker continuity also contributes to a child achieving permanency more quickly and to a child's well-being while in care. Worker transition can often lead to a delay in service delivery and court reporting while the new worker is "coming up to speed" on the child's case and getting to know the child and family. Outcome 18 requires that at least 90 percent of children in custody have no more than 2 workers during their most recent 12 months in custody. There are exceptions that allow for case manager terminations, death, transfers, and temporary assignments to cover another case manager's cases while a case manager is out on sick leave. The Consent Decree also allows for the child's one-time transfer to a Specialized or Adoptions case manager.⁷¹

a. <u>Interpretation and Measurement Issues</u>

No new interpretation or measurement issues were encountered in Period IX. Measurement in Period IX used SHINES as the primary source of data. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 18

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⁷¹ See p. 35, Outcome 18, of the Consent Decree.

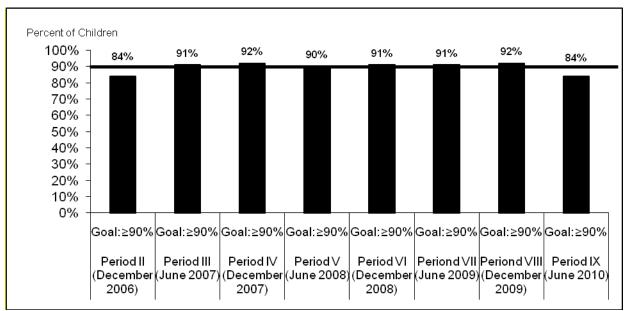
performance is based on the entire population of children in DeKalb and Fulton county custody on June 30, 2010.

b. State Performance

• The State Fell Short of the Outcome 18 Threshold

For Outcome 18, 1076 (84%) of the 1275 children in custody on June 30, 2010 had 2 or fewer placement case managers since July 1, 2009, once the allowable exceptions were taken into account. The performance threshold for this outcome is 90 percent. This is a decline from the previous six reporting periods' consistent performance of 90 percent or better. The primary reasons for the decline in performance appear to be efforts by both counties to redistribute caseloads to improve compliance with the Consent Decree's caseload caps, and to resignations, and promotions. Figure V-2 illustrates the State's performance on this outcome over the eight reporting periods to which the Consent Decree standard applied.

Figure V-2
Eight Reporting Periods of State Performance on Outcome 18:
Children with 2 or Fewer Placement Case Managers in Prior 12 Months



Source: State systems: SHINES and county records, July 2006-June 2010

Outcome 20 – Case Manager Visits with Children

Visits are an opportunity to engage children and assess their safety and well-being and address the trauma they are experiencing or from which they may be healing. Frequent quality visits can increase the case manager's knowledge about the children and inform how best to pursue permanency for them. As stipulated in the Consent Decree, visits should be used to monitor

and document the "child's adjustment to placement, the appropriateness of placement to meet the child's needs, the receipt of appropriate treatment and services by the child, the child's safety, and service goals."⁷²

To achieve the Outcome 20 performance threshold, case managers must have at least two visits per month with children in foster care, each and every month of the previous 12 months in custody and the nature of the twice monthly visits is defined very specifically. At least one of the visits is to be a "private face-to face visit with the child *in the child's home/placement.*"⁷³

a. <u>Interpretation and Measurement Issues</u>

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 20 performance is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010, with adjustments to the applicable months for those children who were actually in custody fewer than 12 months.

b. State Performance

• The State Fell Short of the Outcome 20 Threshold

Case managers met the Outcome 20 criteria for twice-monthly visits each and every month of the previous 12 months for 115 children (64%) of the children included in the placement sample for Period IX. This is the same performance as found in Period VIII. The threshold for this outcome is 95 percent. Table V-3 displays the case manager visit pattern with the 180 children Figure V-3 illustrates the State's performance on this outcome over the seven of eight reporting periods to which the Consent Decree standard applied.⁷⁴ The figure shows both the percentage that met the visitation requirements fully and the proportion for which the twice monthly visitation requirement was missed for only one month. The figure reflects steady progress since Period IV toward the rigorous standard for this outcome.

This is the last reporting period the Accountability Agents will be reporting Outcome 20 performance in this way. Beginning in Period 10, the Accountability Agents will be applying a different standard and methodology based on a revised agreement between the Parties. That agreement creates a slightly higher visitation standard (96.5% rather than 95%), and replaces the current methodology (based on file review data for the last 12 months for a sample of the children in care; counting as "successes" only children that received two visits each and every month they were in care of the last 12 months) with a methodology based on the Counties' monthly visitation data for the entire universe of children in care for the reporting period only.

⁷² Ibid.

⁷³ See p. 19, Section 5D of the Consent Decree

⁷⁴ The case manager-child visitation analysis was slightly different in Period II, therefore there is not a comparable set of data points to include in Figure V-3.

The new approach will produce more timely data that more closely reflects actual monthly State performance. 75

Table V-3

Case Manager Visitation with Children as Stipulated in Outcome 20:

Visitation Pattern over the 12 months prior to

June 30, 2010 or last date of custody

n= 180

Number of Months Achieving Two Visits per Month That Meet the Outcome 20 Definition	Number of Children	Percent	Cumulative Percent
12 of 12 months	115	64%	
11 of 12 months	37	21%	84%
10 of 12 months	14	8%	92%
9 of 12 months	6	3%	96%
8 of 12 months	4	2%	98%
7 of 12 months	1	<1%	
6 of 12 months or less frequent visitation meeting the requirement	3	2%	100%
TOTAL	180	100%	

Source: Case Record Review, August-October 2010.

⁷⁵ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, effective November 22, 1010.

KENNY A. CONSENT DECREE

Percent of Children 100% 90% 80% 20% 70% 60% 19% 50% 40% 64% 64% 30% 51% 48% 20% 36% 10% 0% Goal:≥95% Goal:≥95% Goal:≥95% Goal:≥95% Goal:≥95% Goal:≥95% Goal:≥95% Period III Period IV Period V Period VI Period VII Period VIII Period IX (December (June 2007) (December (June 2008) (June 2009) (December (June 2010) 2007) 2008) 2009) ■Children Seen Twice Every Month, All Months Children with One Month Missed

Figure V-3
Seven Reporting Periods of State Performance on Outcome 20:
Case Managers Visit Children Twice Monthly, Every Month

Source: Review Period Foster Care Case Record Reviews, January 2007-June 2010

Outcome 22 - Case Manager Visitation with Substitute Caregivers

The Consent Decree requires case managers to visit once a month with placement caregivers, every month a child is in care for 12 months straight.⁷⁶ This includes foster parents, group home and institutional staff and others charged with the responsibility of caring for children in DFCS custody. In situations where the child has been returned home but remains in DFCS custody, "caregivers" refers to the birth parents or other reunification resources.

a. <u>Interpretation and Measurement Issues</u>

No new interpretation issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 22 performance is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010, with adjustments to the applicable months for those children who were actually in custody fewer than 12 months.

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⁷⁶ See p. 36, Outcome 22 of the Consent Decree

b. State Performance

• The State Fell Short of the Outcome 22 Threshold

For Outcome 22, 144 children (80%) of the sample of 180 children had caregivers who were visited by case managers at least once each and every month in the 12 months prior to June 30, 2010 or the last date in custody. The performance threshold for this outcome is 90 percent. The Period IX performance is a decline from the Period VIII performance of 82 percent, but the observed change is within the margin of statistical error for the sample. Table V-4 summarizes the pattern of case manager visitation with caregivers. Figure V-4 illustrates the State's improved performance over the seven of the eight reporting periods to which the Consent Decree standard applied.

This is the last reporting period the Accountability Agents will be reporting Outcome 22 performance in this way. Beginning in Period 10, the Accountability Agents will be applying a different standard and methodology based on a revised agreement between the Parties. That agreement creates a slightly higher visitation standard (95% rather than 90%), and replaces the current methodology (based on file review data for the last 12 months for a sample of the children in care; counting as "successes" only caretakers that received visits each and every month a child was in their care of the last 12 months) with a methodology based on the Counties' monthly visitation data for the entire universe of children in care for the reporting period only. The new approach will produce more timely data that more closely reflects actual monthly State performance.⁷⁷

Table V-4
Case Manager Visits with Placement Caregivers over the 12 months preceding
June 30, 2010 or Last Date of Custody
n=180

Proportion of Monthly Case Manager Visits with Substitute Caregivers	Number	Percent	Cumulative Percent
All required sequential monthly visits	144	80%	
All but one monthly visit (missed one month among applicable months)	31	17%	97%
All but two monthly visits (missed two months among applicable months)	5	3%	100%
Total caregivers	180	100%	

Source: Case Record review, August-October, 2010.

⁷⁷ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, effective November 22, 1010.

Percent of Caregivers 100% 90% 18% 80% 15% 15% 70% 60% 50% 40% 80% 68% 68% 30% 60% 20% 10% 0% Goal:≥90% Goal:≥90% Goal:≥90% Goal:≥90% Goal:≥90% Goal:≥90% Goal:≥90% Goal:≥90%

Period VI

(December

2008)

☑ Caregivers with One Month Missed

■Caregivers Seen Once Every Month, All Months

Period VI

(December

2008)

Period VII

(June 2009)

Period VIII

(December

2009)

Period IX

(June 2010)

Figure V-4
Eight Reporting Periods of State Performance on Outcome 22:
Case Managers Visit Substitute Caregivers Monthly, Every Month

Source: Review Period Foster Care Case Record Reviews, January 2007-June 2010

Period IV

(December

2007)

2. <u>Children and Youth Receive the Services They Need: Outcomes 24 and 30</u>

Period V

(June 2008)

Outcome 24 – Educational Achievement of Youth Leaving Foster Care at age 18 or Older

Outcome 24 sets increasing targets over a baseline year for the percentage of youth who are "discharged from foster care at age 18 or older ... who have graduated from high school or earned a GED."⁷⁸ By the end of the fourth period (December 2007), this Outcome called for the State to increase by 20 percentage points the proportion of youth who achieve a high school diploma or a graduate equivalency diploma (GED) over a pre-Consent Decree baseline year.

The baseline revealed that 65.7 percent of the youth 18 years old or older who left DFCS care in the baseline year had earned a high school diploma or GED. Therefore, the target DFCS has for this outcome is now 85.7 percent. Performance on this outcome will be reported on in the Period 10 report.

Period III

(June 2007)

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⁷⁸ See p. 36, paragraph 24 of the Consent Decree

Outcome 30 - Meeting the Needs of Children as Identified in their Case Plans

The Consent Decree specifies that the needs to be considered for achieving Outcome 30 are those medical, dental, mental health, educational and other needs identified in the child's most recent case plan.⁷⁹ As noted in Part IV, case plans are to be developed within 30 days of a child's entry into foster care and updated every six months thereafter.

a. <u>Interpretation and Measurement Issues</u>

No new interpretation or measurement issues were encountered in Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 30 performance is based on the sample of 180 children in foster care at any time between January 1 and June 30, 2010.

Among the 180 children in the sample, 175 children had one or more case plans in their records. All five of the children who did not have case plans in the files had been in custody 30 or fewer days during the review period. Of the 175 plans, 166 (95%) were current – they had been developed within seven months or less by June 30, 2010 or the child's discharge date. Another nine (5%) were seven to 12 months old. Three children had no needs indentified in their plans, thus the outcome performance is based on 172 children who had plan-identified needs.

b. State Performance

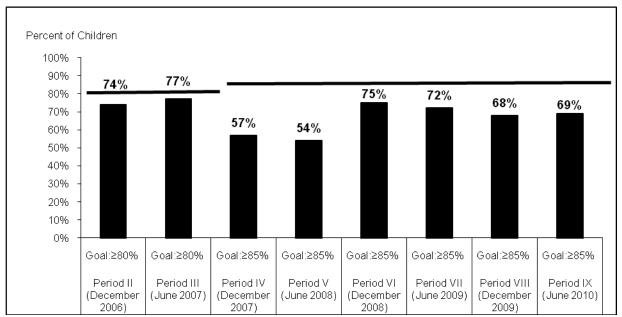
• The State Fell Short of the Outcome 30 Threshold

Based on case file documentation and reviewer judgment, **119** children **(69%)** of 172 children with needs identified in their case plans had all the plan-identified needs met. The performance threshold for this outcome is 85 percent. Period IX performance is similar to the Period VIII performance of 68 percent. Figure V-5 displays the State's performance over the eight reporting periods to which the Consent Decree standards applied.

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⁷⁹ See p 38, Outcome 30 of the Consent Decree

Figure V-5
Eight Reporting Periods of State Performance on Outcome 30:
Children with All Plan Identified Needs Met



Source: Reporting Period Foster Care Case Record Reviews, July 2006-June 2010

Table V-5 provides a breakdown of the needs identified and the percentage of needs met in each category. Nearly all children had routine medical, dental health and educational/developmental needs cited in their plans. These routine needs include timely health and dental "well child" check-ups. The percentage of children who appear to have mental health needs documented is about the same as the 82 percent in Period VIII and about the same proportion of the needs were being met (92% compared to 96%). The challenge to improved performance on this outcome continues to be attention to ensuring the routine physicals and dentals are completed timely and properly documented.

Table V-5
Needs Identified in Most Recent Case Plans and Degree Needs Met as of
June 30, 2010 or last Date of Custody

Children with C n=175		Children Received/Receiving Services n varies depending on need identified			
	Number	Percent		Number	Percent of identified need
One or More Need Identified (routine or child- specific)	172		All Identified Needs Met (n=172)	119	69%
Frequency of different identified needs			Frequency of different needs being met		
Medical	171	99%		141	82%
Dental	166	97%		146	88%
Mental Health	137	80%		126	92%
Educational/ Developmental	170	99%		162	95%
Other	0			0	

Source: Case Record Review, August-October 2010

c. <u>Operational Context</u>

As part of a curative action plan prompted by concerns of Plaintiff's Counsel regarding the low performance level on this outcome, the State, identified many existing activities it has undertaken to improve its performance in this area. It also identified several activities it intended to strengthen or initiate in Periods IX and X (July-December 2010) that are designed to ensure children are getting their needs appropriately identified and addressed. These activities include:⁸⁰

- A 100 percent case record review of all children in care to determine gaps in assessments and to schedule needed screenings with a report to the plaintiff's counsel by November 8, 2010.⁸¹
- Identification of barriers to obtaining timely assessments, ensuring they are appropriately documented in the files, and to recommended follow-up of identified needs with a report to the plaintiff's counsel by January 8, 2011.
- Fully implement the SHINES capability to produce a report of children with near due or overdue health checks (medical, dental, mental health, and/or developmental) by October 1, 2010.
- DeKalb created a protocol for obtaining timely medical reports for children placed out of state, effective July 20, 2010.

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⁸⁰ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, February 15, 2010, August 23, 2010 and September 22,2010.

⁸¹ The review was completed in November 2010

- Continued supervisory oversight.
- Communication with substitute caregivers regarding the importance of regular, timely health checks.
- Increased use of the dental van to expand dental appointment capacity.
- Staff training on the schedule and components of the Early and Periodic, Screening, Diagnosis, and Treatment (EPSDT) Health Check Program.
- Both counties have created a "Passport" package for each child that is to contain health and educational material. The intent is for the foster parent to record all appointments and medications and store all medical and educational records.
- DeKalb is sending foster parents letters reminding them about upcoming appointments
- Quarterly meetings with foster parents and placement providers include addressing barriers to meeting the health needs of children.
- Fulton established an Ancillary Services Support Unit in July 2009 that is designed to schedule and track regular medical, dental, and mental health appointments. Fulton adopted the Roundtable process for assessing child well being.

B. The Placement Experience

This section describes characteristics and placement practices identified in the case record review of 180 children in foster care during the period January 1 through June 30, 2010. This includes the placement environment, the use of temporary placement settings, and case manager visits to children in new placements. Congregate care for children under the age of 12 is based on actual population data.

1. Placement Setting

There have been no significant changes to the placement process from that reported in the first monitoring report. Table V-6 provides the distribution of children among placement settings found in the case record review. When the different family settings are combined, 147 children (81%) in the sample were in family settings on June 30, 2010 or the last day of DFCS custody. These settings include family foster homes, relative foster homes, relative homes, and the homes of birth parents and guardians. Thirty children (17%) were in congregate care settings including residential treatment facilities, group homes, skilled nursing facilities and special psychiatric hospitals. Three youth were in a detention/correctional facility and one youth was in a personal care home (total of 2%).

Table V-6
Placement Settings of Children in DFCS Custody
on June 30, 2010 or the last day of custody (or before running away)
(n=180)

Placement Type	Frequency	Percent	Category Percent
Family Settings			81%
Foster Home (DFCS or Private Agency Supervised)	107	59%	
Relative Home (Foster and non Foster Home)	35	19%	
Parents/Guardian/Fictive Kin	4	2%	
Congregate Care Settings			17%
Emergency Shelter/Assessment Center	0		
Group Home	17	9%	
Residential Treatment Facility/ Child Caring	13	7%	
Institution/ Specialty Hospital	13	7 70	
Other			2%
Regional Youth Detention Center (RYDC)/ County	4	2%	_
Jail, personal care home	4	Ζ%	
Total	180	99%	100%

Source: Case Record Review, August-October, 2010. Total less than 100% due to rounding

2. Efforts to Minimize Emotional Trauma When Children Enter New Placements

Sixty children (33%) in the sample of 180 children in foster care experienced a new placement setting or at least one move during Period IX. This is a smaller proportion of children experiencing a new placement or placement change than in Period VII or Period VIII and supports the findings of fewer placement moves reflected in Outcome 17. However, for those who did experience a move, there was evidence that case managers attempted to minimize the emotional trauma of the most recent move for 36 of the 60 children (60%). Twenty of the 60 children experienced more than one new placement setting in Period IX and the record review collected information about trauma minimizing efforts on the previous placement experience. Among these 20 children, it appeared that case managers attempted to reduce the trauma of the earlier move for nine children (45% of 20). Trauma minimizing efforts included placing children with parents and relatives; conducting transition interviews and transition visits; explanatory conversations with the children and foster parents; and helping children to pack personal belongings. In one situation, both the case manager and the birth mother went with the child to the residential facility and toured the facility after admission.

3. <u>Use of Emergency or Temporary Placements</u>

The Consent Decree has several requirements addressing placement appropriateness. It requires that "no child shall be placed in an emergency or temporary facility....for more than 30 days." It also stipulates that no child shall spend more than 23 hours in a County DFCS office or any facility providing intake functions.⁸²

The case record review found that one child, (2%) of the 60 children in the foster care sample that entered care and/or changed placements during January 1 through June 30, 2010 experienced more than 23 hours in one of the counties' assessment centers. The youth was in the Fulton County Resource Center (FRC) for four days in April 2010. No other children in the sample were placed in temporary settings. The State acknowledged this instance of a child staying in FRC more than 23 hours and other instances where children had extended stays at FRC through May 21, 2010 but reported that there have been no "overstays" since then. As part of an agreed upon curative action program, the State agreed to provide the Plaintiff's Counsel with notification of any further instances of overstays at FRC through December 31, 2010. The State also agreed to provide the same notification to the Accountability Agents as a courtesy. The Accountability Agents are not aware of any overstays since May 2010.⁸³

⁸² See p. 16, paragraph 5C4.c of the Consent Decree

⁸³ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, August 23, 2010.

4. <u>Informing Caregivers and Providing Appropriate Clothing</u>

The Consent Decree stipulates that DFCS will ensure available information concerning a specific foster child will be provided to foster parents before the child is placed.⁸⁴ As the Accountability Agents learned in Period III, the files of children do not contain an adequate picture of the information that is given to foster parents. Although it is improving with the use of SHINES, there is still limited available information in the records of children. Most of the available information is maintained by the designated placement units in each county and an assessment based solely on children's records misrepresents actual case practice. additional files maintained by the placement units were not reviewed for Period IX. Among the 60 children who had an initial and/or a new placement during the period (excluding children returned to parents) in the sample of 180 children in foster care, case managers appeared to have provided medical information to the substitute caregivers of 21 children (35% of 60) and education and mental health information to 14 care givers (23% of 60). information in these same records, case managers appeared to have reviewed the clothing needs and taken the necessary steps to ensure that the children had appropriate clothing in the new placement setting for 17 (28% of 60) children. During Period VIII and IX, Fulton County met with foster parents and discussed how to improve communication. One idea that will be implemented in Period X is a "Placement Passport" which is a compilation of assorted information that is to accompany the child at each move.

5. <u>Case Manager Visitation with Children Who Experienced a New Placement</u>

The Consent Decree stipulates a frequent case manager visit schedule for the first eight weeks of a new placement. ⁸⁵ Children are to have at least one in-placement visit in the first week and one in-placement visit between the third and eighth weeks with six additional visits at any time within the eight week period; essentially, weekly visitation. This visitation requirement was applicable for 57 of the 60 children in the sample who entered and/or changed placements during the reporting period. The circumstances of three children precluded starting the required visits during the review period. ⁸⁶ Of the 57 children, the file documentation indicated that all requirements were met for 15 children (26% of 57). Another 10 children (18% of 57) missed one of the required additional visits. The majority of the remaining children (22 of 32) had at least half of the required visits. Ten children had less than half of the required visits. The visitation pattern is arrayed in Table V-7.

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⁸⁴ See p. 19, paragraph 5C.6d of the Consent Decree

⁸⁵ See p. 19, paragraph 5D.1 of the Consent Decree

⁸⁶ One child exited custody two days after placement with relative, one child was placed with a relative on June 30, 2010, and a third child was placed in a Regional Detention Center on June 24, 2010.

Table V-7
Pattern of Case Manager Visits with Children in the First 8 Weeks
of a New Foster Care Placement

n=57

	Number	
Degree of Required Visits	of	Percent
	Children	
All requirements met for period of time child in placement	15	26%
Missed one week of requirement (equivalent of 5 visits in addition to	10	18%
the two required in-placement visits over the 8 week period)	10	10 /0
Missed two weeks of requirement (equivalent of 6 visits in addition 8	9	16%
week period with at least 2 in-placement visits)	9	16 %
Half of the requirements (equivalent to 4 visits in 8 weeks)	13	23%
Less than half of the required visits	10	18%
Total	57	100%

Source: Case Record Review, August-October 2010

6. <u>Use of Congregate Care</u>

The Consent Decree has several restrictions related to the use of group care. ⁸⁷ Between January 1 and June 30, 2010, the counties continued to limit their use of congregate care for young children. The reported information is for all children aged 12 and under; not for a sample of the foster care population. A total of 10 children under the age of 12 were placed in congregate care during Period IX. Six of the 10 children (60%) were infants or toddlers placed with their mothers in a group care setting designed for teen mother transitional living or older mothers with children. The remaining four children (40%), aged 10-11 years, were placed in settings believed to be able to best treat their special needs. Two of these four children were placed in psychiatric hospitals with 40 to 100 beds, and the remaining two children were placed in a child care institution that is part of the Youth Villages' contract previously described in Part IV with regard to the State's permanency efforts. This setting has a reported capacity of 14 beds.

Some children were moved from congregate care settings or reached age 12 before June 30, 2010. Therefore, on June 30, 2010, 11 children under the age of 12 remained in group care settings with four children in facilities with more than 12 beds. Among the 11 children, 5 (45%) were young children placed with their teenage mothers, two (18%) were medically fragile infants, and four (36%) were aged 7 to 11 years. All four children were placed in facilities designated as psychiatric hospitals to treat their aggressive and suicidal behaviors (three have subsequently been placed in family settings: with relatives, foster parents, or prospective adoptive parents). These facilities range in capacity from 40 to 100 beds. Although DFCS does not consider psychiatric hospitals congregate care placement settings, DFCS has supplied documentation to the Accountability Agents that these placements have been reviewed and

⁸⁷ See p. 16-17, paragraph 5C.5f of the Consent Decree

certified to meet the needs of the children.⁸⁸ Table V-8 summarizes the State's actions with regard to the Consent Decree stipulations.

Table V-8 Children Younger Than Age 12 in Group Care Settings January 1 through June 30, 2010

Children under the age of 6									
Reason for		Number placed		as	Number newly placed		Number st	Number still placed as of	
placement		of June 3	0, 2009		between Ja	anua	ry 1 and	June	30, 2010
	June 30, 20		010						
		Bed C	Capacity	,	Bed	l Cap	pacity	Bed (Capacity
		≤12	>12	2	≤12		>12	≤12	>12
With moth	er	5	1		4		1	5	
Service Ne	Service Need							2	
Total			9		5		7		
				(Children age	ed 6	to 12		
	Num	ber placed	d as of		Number newly placed		Number still placed as of		
	J	une 30, 20)9	b	between January 1 through		June 30, 2010		
				June 30, 2010		010			
	Bed Capacity		ty		Bed C	Capac	city	Bed (Capacity
	≤12	2 >	·12		≤12		>12	≤12	>12
			8				4		4
Total					4			4	

Source: State reported data, waivers and documentation of need reviewed by Accountability Agents.

⁸⁸ The Accountability Agents did not verify the appropriateness of these arrangements or the certification of need.

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C. Meeting the Needs of Children, Youth, and Families

In addition to safe, appropriate, and stable placement settings, DFCS policy and the Consent Decree stipulate that DFCS will provide for the physical, developmental, and emotional needs of children in its custody. As a means of "strengthening and rebuilding families to bring about the child's early return" DFCS is also responsible for providing services to birth families. Finally, it is responsible for supporting and assisting foster parents to more effectively address the needs of the children in their care. This section of the report reflects on the State's practice as gleaned through state and county reported data and the case record review.

1. Assessment of Needs at Foster Care Entry

Once a child enters custody, one of the earliest opportunities for assessment of family strengths and needs is a Family Team Meeting (FTM), to be held within three to nine days of entry. ⁹¹ Other initial activities include health and dental screening and mental health or developmental assessments. ⁹² All of these activities form the basis of the first case plan used to guide the case to permanency.

a. Family Team Meetings

During Period IX, the State used SHINES data to report that 375 children entered custody and were in custody nine days or more as of June 30, 2010. This information was compared to the counties' performance tracking information and Figure V-6 displays the proportion of children that had timely (within 3 to 9 days) Family Team Meetings (FTMs). According to the county tracking systems, timely FTMs were convened for 326 of the 375 children (87%). Another 46 children (12%) had FTMs but they were not convened within the first nine days. Three additional children (1%) did not appear to have had a FTM.⁹³ The proportion of FTMs that was timely was similar to the Period VIII level of 85 percent, but the proportion of children that had a Family Team Meeting convened at all has increased to almost 100 percent.

⁹² See p. 20, Section 6.A. of the Consent Decree.

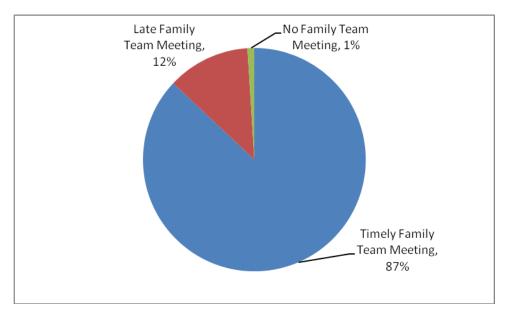
⁸⁹ See p. 4, principle 7; pp. 20-21, section 6; p.38, Outcome 30 of the Consent Decree; See also Social Services Manual Section 3060, Georgia Department of Human Services.

⁹⁰ See Social Service Manual 3060, Georgia Department of Human Services.

⁹¹ See pp 5-7, section 4A of the Consent Decree.

⁹³ See Appendix D for a supplemental report containing the results of a sample of 130 children who entered custody between July 1 and December 31, 2009. The results support the State performance reporting.

Figure V-6
Initial Family Team Meetings at Foster Care Entry
January 1 – June 30, 2010
N=375 (all children remaining in custody 9 days or more)



Source: County records

b. Initial Health and Dental Screenings94

The State's overall performance around initial health and dental screening is measured by the subsample of children who entered care and had been in custody at least 10 days. In the Period IX sample of 180 children, there was a subsample of 16 children who entered during the period and remained at least 10 days. The margin of statistical error for a subsample of 16 children is approximately +/-24 percent. As in previous reports, caution should be exercised in interpreting these and other results drawn from the subsample of children who entered care because the sample size is very small and they were not randomly selected from the entire population entering custody during the period.

Of the children in this subsample of 16, 12 (75%) had documented health screens within 10 days of entering care. When the ten-day time frame is relaxed, 15 children (94% of 16) received an initial health screen. For those children whose health screen fell outside the 10-day window, the elapsed time ranged from 13 to 43 days. One youth, who did not have a documented initial health screen, entered care in March 2010 and was discharged after about 20 days in care. Although there was no health screen in the file, there was a clinical report regarding the youth's

⁹⁴ See Appendix D, Period VIII Supplemental Report, for an assessment of initial health, dental, mental health and developmental screenings based on a sample drawn from those children who entered DFCS custody July 1 through December 31, 2009.

mental health from March 2010 that summarized the youth's health and noted that as a recent teen mother she was breast feeding her infant.

Eight children (50% of 16) had a documented dental screen within 10 days. However, the total proportion receiving an entry dental screening within any timeframe was 75 percent (of 16). The four children who received their initial dental screens late received them 14 to 41 days after entering.

Table V-9
Initial Health and Dental Exams at Foster Care Entry:
January 1 – June 30, 2010
n=16

Screen	Number	Percent	Cumulative
			Percent
Initial Health Screen At Foster Care Entry (n=16 from sample)			
Received within 10 days	12	75%	
Received, but not within 10 days (13 to 43 days)	3	19%	94%
No initial health screen received	1	6%	100%
Total	16	100%	
Initial Dental Screen At Foster Care Entry (n=16) (includes			
infants for a "gum check")			
Received within 10 days	8	50%	
Received, but not within 10 days (14-41days)	4	25%	75%
No initial dental screen received (5 children were under	4	25%	100%
the age of 3)			
Total	16	100%	

Source: Case record review, July-August 2010.

c. Initial Mental Health/Developmental Assessment

The Consent Decree requires that all children under the age of four years receive a developmental assessment in compliance with EPSDT standards within 30 days of placement. December 1. Children four years of age or older are expected to receive a mental health screening in compliance with EPSDT standards within 30 days of placement. Within the sample of 180 foster children in Period IX, there were seven children who were younger than age 4 and were in custody at least 30 days after entering care on or after December 1, 2009. There were 21 children in the foster care sample who entered DFCS custody on or after December 1, 2009 and

⁹⁶ See p. 20, paragraph 6A.3 of the Consent Decree.

⁹⁵ See p. 20, paragraph 6A.3 of the Consent Decree.

⁹⁷ In order to have a larger pool of children in the sample for whom the responsiveness to identified needs could be measured, the record review was designed to collect information on children who entered custody in December 2009 and, therefore identified needs could be responded to in Period IX.

remained in care 30 days or more who were age 4 or older. This information is included in Table V-10.

Among the seven children under the age of four, six had completed developmental assessments, two within 30 days. Three exceeded 30 days. They were completed between 45 to 78 days and in one case there was evidence that an assessment was completed, but it was not dated so the timing could not be determined.

Among the 21 children that were over the age of four and had been in custody 30 days or more, 17 had a mental health assessment. Thirteen children had their assessments within 30 days and four had the assessment completed between 43 and 69 days after entering.

Table V-10
Initial Developmental or Mental Health Assessments at Foster Care Entry:

January 1 – June 30, 2010

n=varies depending on the assessment

Assessment	Number	Percent	Cumulative Percent
Initial Developmental Assessment (children younger			
than age 4) (n=7)			
Received within 30 days	2	29%	
Received, but not within 30 days (45, 49, 78	4	57%	85%
days and unable to determine)			
No initial Developmental Assessment received	1	14%	100%
Total	7	100%	
Initial Mental Health Assessment (children age 4 and			
older) (n=21)			
Received within 30 days	13	62%	
Received, but not within 30 days (43-69 days)	4	19%	81%
No Initial Mental Health Assessment	4	19%	100%
Total	21	100%	

Source: Case record review, August-October 2010.

d. Initial Case Plans

All 13 children entering custody during the reporting period and remaining more than 30 days had an initial case plan developed by June 30, 2010 or their last date in custody. Eight were completed within 20 to 30 days of entering care and five were completed within 32 and 84 days.

2. Periodic Health and Dental Screening

In addition to requiring health and developmental assessments when a child enters foster care, the Consent Decree requires all children to receive periodic health screenings⁹⁸ in accordance with the Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT)/Georgia Health Check Program standards. ⁹⁹ DFCS' performance with respect to meeting these standards is discussed below. The case record review of 180 children in placement collected information about the timeliness of the required routine health and dental examinations provided (often referred to as "well-child" care) during their time in custody.

Routine health screening performance was assessed for all children in the sample of 180 children. For these 180 children, 177 (98%) had at least one documented health screen. Overall, 140 children (78%) of the 180 appeared to be current with their "well child" visits as a result of receiving a health screen on schedule prior to January 1, 2010, or during reporting Period IX; or they received a health screen between January 1 and June 30 that brought them up-to-date. This is about the same proportion as in Period VIII. The remaining 40 children (22% of 180) appeared to be overdue for an exam, even if they had received one or more in Period IX. The specific findings are provided in Table V-11.

Compliance with EPSDT requirements continues to be challenging to assess either because documentation of the exams is incomplete or the exams themselves lacked certain components. Of the 177 children who had at least one documented health screen, 51 (29%) of the most recent health screens may have been missing one or more required EPSDT components. These 51 exams were most often missing documentation of required height, weight, and blood pressure measurement or required laboratory work and vision and hearing testing.

⁹⁸ See p. 30, paragraph 13A in the Consent Decree.

KENNY A. CONSENT DECREE

⁹⁹ See p. 20, paragraphs 6A 1 and 2, and p.21, 6B, paragraphs 1-8 of the Consent Decree

Table V-11 Status of Periodic Health Screening for Children* January 1 through June 30, 2010 n=180

Component and Action	Number	Percent	Cumulative Percent
No health screen required during period, children current with health check-ups during entire period	53	29%	
Children receiving timely health screens (according to EPSDT schedule) between January 1 and June 30, 2010	62	34%	64%
Children receiving a health screen between January 1 and June 30, 2010 received later than recommended schedule	25	14%	78%
Children receiving one or more of the required health screens between January and June 2010, but were still behind schedule as of June 30, 2010	10	6%	83%
Required well child health screen(s) between January 1 and June 30, 2010 not received (includes 3 children with no documented health screen since entering foster care)	30	17%	100%
TOTAL	180	100%	

Fifty-one of the 177 most recent exams received appeared to be missing some EPSDT components.

Source: Case record review, August - October 2010.

As reflected in Table V-12, routine dental screening was assessed for 145 children because 35 children were under the age of three through June 30, 2010.¹⁰⁰ For the 145 children,¹⁰¹ dental screens appeared to be current for 120 children (83%). This is about the same as in Period VIII. Another six children received a dental screen during Period IX that was more than 12 months since the previous screen. Among the 19 who were due a dental exam during the period, eight had had at least one exam since entering but 11 children, ranging in age from three to 17 had not yet received an exam. They had been in custody 16 days to 7 months as of June 30, 2010 or the date they were discharged. Ten of the 120 of the dental exams considered timely did not have documentation of x-rays, teeth cleaning, or both.

¹⁰⁰ The Consent Decree stipulates that "all children age 3 and over shall receive at least one annual screening in compliance with EPSDT standards…" see Section 6B paragraph 8 on p.21. Children younger than age 3 may have oral exams as part of their regular well-child visits, but documentation of this is rarely found in the description of services rendered in an exam.

 $^{^{101}}$ The margin of error for a subsample of 145 is \pm -8%.

Table V-12 Children Age 3 and Over Receiving Periodic Dental Screening* January 1 through June 30, 2010 n=145

Component and Action	Number	Percent	Cumulative Percent
No annual EPSDT dental exam required during period, children current with annual requirement during entire period	55	38%	
Children receiving a timely annual EPSDT dental exam during period (includes initial exams of children under age 3)	65	45%	83%
Children receiving a dental exam, but more than 12 months since last exam EPSDT schedule (unable to determine EPSDT compliance)	6	4%	87%
Required annual dental exam not received as of June 30, 2010 (ages 3 to 17; 11 had no exams since entering foster care)	19	13%	100%
TOTAL	145	100%	

Source: Case record review, August-October 2010. *Ten of the 120 timely exams did not have documented x-rays or cleaning or both.

3. <u>Periodic Developmental and Mental Health Assessments</u>

The Consent Decree does not have a requirement that specifically speaks to the frequency of developmental and mental health assessments. The required EPSDT health screenings, by definition, should include some limited assessment of the child's developmental progress and mental health. In addition, the court may request specific evaluations. During Period IX, 18 children had documented developmental assessments in addition to the six children who received an initial assessment. Another 24 children had documented mental health assessments in addition to the 17 children who received the initial assessment.

4. Response to Assessment/Screening Identified Needs

Responsiveness to health needs remains an area for continued State focus. Evidence from the case record review provides the following specific findings for Period IX¹⁰²:

• 29 (30%) of the 97 children who received regular (initial and on-going) health screening during Period IX had health needs identified. Among these 29 children, the documentation in their files indicated that 21 (72% of 29) had received appropriate treatment, or treatment was scheduled, for all the needs identified during Period IX. One child (3% of 29) appeared

 $^{^{102}}$ Conclusions drawn from subsamples of 29 or smaller have margins of error of $\pm 19\%$.

to have had some, but not all needs met. Seven of the 29 children (24%) did not have follow-up treatment during the reporting period documented in the case record. The needs that appeared to be unmet included vision correction, a urological examination, follow-up for anemia, and other diagnostic tests or referrals. Among the seven, one child who received an initial health screen in late June also had not had follow-up treatment scheduled before June 30, 2010 and another child was discharged within 11 days of the initial medical identifying needs.

- 17 (24%) of the 71 children who had a dental health screening during Period IX had dental needs identified. Eight children (47% of 17) had all their needs met. Of the nine children with unmet needs, untreated cavities were the primary issue for six children and the other three had multiple dental issues including root canal and crowns.
- 20 (83%) of the 24 children who had developmental or educational assessments in Period IX had identified needs. All of the needs for 15 of the 20 children (75%) were being addressed up through the end of June. The services or activities to address unmet needs included academic assistance, Individualized Education Plan (IEP) development, therapeutic daycare, intervention services, and school data for further diagnosis.
- 32 (78%) of the 41 children who had mental health assessments in Period IX had identified needs. All of the needs for 22 of the 32 children (69%) were being addressed. Another six (19% of 32) had some of their needs addressed or services scheduled by June 30, 2010 and another four appeared to have none of their needs met. Among the four children with unmet needs, three children were in custody 47 to 76 days and they did not appear to have received individual therapy, parent-child psychiatric therapy, or further evaluation. The fourth child was either in the Regional Youth Detention Center or on runaway status the entire reporting period.

5. Response to Emerging Needs Between Routine Well-Child Visits

A small portion of children may have episodes of acute illness or emerging needs between regular assessments. Case documentation suggests the State is generally more responsive to these emerging needs than those identified through routine exams. The sample sizes and resulting percentages are too small to draw conclusions as to the need for improvement.

- 41 children (23%) of the 180 children in the sample experienced emerging physical health needs during the reporting period. All but one child appears to have had these needs met. This child was referred to a dermatologist and surgeon for two unrelated issues and neither of these appointments appears to have been made.
- One child (less than one percent) of the 180 children in the sample experienced acute dental needs during the reporting period and those needs were treated.

• 24 children (13%) of the 180 sample experienced acute or emerging mental health needs during the reporting period. All 24 children had those needs met.

6. On-going Attention to Development and Education

As previously noted, 20 children in the sample had one or more developmental and/or educational needs identified between January 1 and June 30, 2010. Seven children needed speech therapy. Academic assistance was needed by six children. Five children had developmental delays and two children needed to be further evaluated. Others needed comprehensive intervention services or therapeutic pre-school enrollment, IEPs, physical therapy for a walking impediment, and services for behavioral concerns. As previously noted, five children were in need of services including the intervention services, therapeutic pre-school, and IEP, and audiology testing.

Other indicators of developmental or educational needs are Supplemental Security Income (SSI) benefits and Individualized Education Plans (IEP). Eight children in the sample appear to be receiving SSI benefits and 44 had IEPs. Twenty-nine (65%) of the 44 IEPs appeared to be current (less than 12 months since the previous IEP).

Children aged 7 to 16 are required to be enrolled in school in Georgia. Within the foster care sample, 105 children (58% of 180) were aged 7 or older by August 31, 2009 and were in DFCS custody sometime during a portion of the school year. Among the 105 children 101 (96%) were enrolled in school or a GED program in the first half of 2010 and four (4%) were not. Among the 100 enrolled, however, seven children (7%) experienced gaps in school enrollment for different reasons. Gaps in enrollment appear to have been caused primarily by youth behaviors – running away and school expulsions. Placement disruptions appear to have contributed to gaps for two youth. Within the foster care sample, 75 children (42% of 180) were younger than age 7 on August 31, 2009 and were in DFCS custody sometime during a portion of the school year. Fifty-five of these children (73% of 75) were enrolled in a kindergarten, pre-school or another developmental program.

7. Services to Children in Foster Care 18 months or More

The Consent Decree requires a specific focus on children in care 18 months or more by moving them to "Specialized" caseloads of no more than 12 children per case manager. These Specialized Case Managers are responsible for individualizing services to children and families by convening meetings, accessing funding, and making decisions about the appropriateness of permanency goals and effectiveness of services. In doing so, they are to partner with the county Independent Living Coordinator for those children aged 14 and older, consult with public and private professionals regarding permanency, and to engage in discharge planning "no sooner than 30 days prior to discharge." 103

1

¹⁰³ See pp 11 and 12, Section 4.F paragraph 3, of the Consent Decree.

The foster care case record review of 180 children collected some limited information on the experience of children who had reached their 18th month in custody before or during Period IX. Within the sample of 180 children, 96 (53%) had been in custody 18 months or more. Among the 96 children, 32 (33%) were aged 14 or older and eligible for Independent Living Program (ILP) services. Twenty-two of the 33 (67%) appeared to be receiving such services. Another 10 youth (33% of 33) had Written Transitional Living Plans (WTLP) but did not appear to be receiving ILP services.

Eighty-three of the 96 children (86%) had meetings between January and December 2010 to review the appropriateness of their permanency goal and effectiveness of services they are receiving. Most of the meetings appear to be case plan reviews convened by the Judicial Citizen Review Panel. The meetings had a range of results. Most meetings resulted in few or no changes to the plans and strategies the State had in place. Some meetings changed the permanency goal, assessed progress in existing services and considered revised services, and explored adoption opportunities and recruitment.

Fourteen of the 96 children (15%) were discharged before June 30, 2010. One of the 14 children was discharged by the court against the recommendation of DFCS. Among the 13 discharges, eight appeared to have had discharge planning. Among the eight children, four children had an identified discharge meeting and discharge planning for another four children occurred over a series of visits between the case manager and child, there was no single event identified.

D. Curative Actions to Address Concerns about State Performance: Discharge Planning and Discharge Medicals for All Children

The Consent Decree stipulates that "DFCS will determine whether additional services are necessary to ensure the continued success of the discharge"104 and that all children receive a health screen within 10 days of discharge. 105 Discharge planning and discharge medicals continue to be areas of practice needing more attention. As a result, the State is engaged in an agreed-upon curative action to improve performance that includes re-enforced practice steps, more supervisory oversight, and tracking of previously established activities such as discharge family team meetings.¹⁰⁶

Analysis of the curative action performance in Period IX is based on information from two sources. First, within the sample of 180 foster care children, 43 children¹⁰⁷ (24% of 180) had been discharged by June 30, 2010. The discharges of 6 children (14% of 43 discharged) however, were excluded from the analysis because the presiding judge discharged the children without prior notice to DFCS. The 37 remaining discharges from the foster care sample were augmented with information from a separate, on-line case record review of 51 children who were discharged between January and June 2010.¹⁰⁸

a. Discharge Planning

In the sample of 37 children, there was documentation of discharge planning for 27 children (73% of 37). In 24 cases, the discharge planning took place over a series of visits with the children or in multiple family team meetings and discussions with family members. Discharge planning for 18 children occurred in some form of meeting – one-on-one meetings between case managers and children or family team meetings or multi-disciplinary meetings. In some cases discharge planning occurred through a combination of these activities. Table V-13 provides a summary of the information collected from the case record review.

From the additional on-line case review, 34 children and youth (67% of 51) had some form of discharge planning. Fifteen of the 34 children and families had meetings with the case managers or a discharge staffing; 14 children and families appeared to be planning over a series

¹⁰⁴ See p.10, Section 4.C.6 in the Consent Decree.

¹⁰⁵ See p. 21, Section 6.B.6 in the Consent Decree.

¹⁰⁶ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, February 15, 2010 and September 22, 2010.

¹⁰⁷ This number includes the children who had been in custody 18 months or more and reported on separately in the

previous section.

108 The Accountability Agents initially drew a random sample of 10 percent of the 591 discharges in Period IX. This equaled 59 children. However, as these cases were reviewed, 1 child (2% of 59) was excluded because the child appeared to have been discharged against the recommendations of DFCS. Another two children were excluded from the analysis because they were also in the sample of 180 children. Two children were excluded from the analysis because they reached the age of 18 prior to January 1, 2010. Three children were excluded because they were on runaway status for at least 30 days including date of discharge. The paper files for these children were not requested or reviewed.

of visits; five had a Family Team Meeting; and one child had an adoption placement staffing. This information is included in Table V-13.

While the information from each data source is not entirely comparable, it does indicate that some type of discharge planning occurred with about two-thirds or more of the children and families. However, it also indicates that there is a portion of children for whom discharge was expected but there was no documentation of what was being done to plan for their successful transitions back into their families or into other permanent living arrangements.

Table V-13
Discharge Planning in Period IX

Discharge Planning	Discharges in the case record review sample n=37*		Samp Mon Disch n=5	thly arges
	Number	Percent	Number	Percent
Discharge planning through one-on- meeting with case manager	4	11%	6	12%
Discharge planning in a Family Team Meeting	2	5%	5	10%
Discharge planning over a series of visits with children and family	24	65%	14	27%
Other type of meeting (internal staffing, discharge staffing)	12	32%	9	18%
No documented discharge planning	10	27%	17	33%

Source: *Case Record Review, August-October 2010; **SHINES, 10 percent of monthly discharges in Period IX Multiple discharge planning methods were used in some cases.

Both information sources indicated that discharge planning addressed a variety of topics including school enrollment and education performance, and on-going medical, dental, and mental health care for the majority of children. Other issues included continued therapeutic services and financial support. Specific services to support successful discharge included financial support through subsidies. In some cases, the family was still to be supervised and receive after care services under a protective order.

• <u>Discharge Medicals</u>

In the sample of 37 children discharged by June 30, 2010 eight had discharge medicals and all were completed within 10 days of their discharge. Five of these medicals had been discussed during the discharge planning. Another 13 medicals were planned during the discharge

planning and there was no documentation of planned medicals for 16 of the 37 children. The information is summarized in Table V-14.

In the on-line record review, 15 children (29% of 51) had discharge medicals. Scheduling a discharge medical was discussed in the discharge planning for another ten children (20% of 51). No reference to discharge medicals was found in 26 records (51% of 51). This information is summarized in Table V-14. In the on-line record review, there were 11 discharges to finalized adoptions and there was no on-line reference to discharge medicals in five of the cases. Three youth were discharged as runaways and there was no evidence of discharge medicals for them in the on-line file.

As with discharge planning, the information from each source of data is not entirely comparable. It does indicate that discharge medicals are not being discussed and/or not occurring for possibly 43 percent to 51 percent of the children for whom discharge is anticipated.

Table V-14
Discharge Medicals in Period IX

Discharge Medicals	Discharges in the case record review sample n=37*		Sample of Monthly Discharges n=51**	
	Number	Percent	Number	Percent
Discharge medicals scheduled during discharge planning	13	35%	10	20%
Evidence of discharge medicals received	8	22%	15	29%
No evidence of discharge medicals scheduled or received	16	43%	26	51%
TOTAL	37	100%	51	100%

Source: *Case Record Review, August-October 2010; **SHINES, 10% of monthly discharges in Period IX.

PART VI STRENGTHENING THE SERVICE DELIVERY INFRASTRUCTURE

Several of the Consent Decree requirements focus on DHS/DFCS organizational capabilities, with the intent of enhancing or creating capacity thought to be instrumental to the achievement of desired outcomes. This includes specialized staff, caseload sizes, workforce skill development, and having the resources and services to meet needs. This part reports on the progress of the State in meeting Outcomes 25, 26, 29, and 31 as well as capacity requirements.

A. Outcome Performance

The Accountability Agents attributed four outcomes (25, 26, 29, and 31) to creating a stronger infrastructure for caring for the children in DFCS custody. Table V1-1 below provides the measured performance summary for each infrastructure Outcomes. The discussion following the table provides a more detailed description of State performance. This discussion includes a summary of Consent Decree requirements and interpretation and measurement issues associated with the outcomes. Contextual information about issues surrounding the work is provided for understanding the State's performance in Period IX. Charts are used to illustrate the performance trends emerging over eight periods.

Table VI-1 Strengthening Infrastructure Outcomes

Effective Oversight of Placement Settings	Period IX Performance
Outcome 25 : At least 98 % of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status.	98%
Outcome 31: No more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three(3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.	0%
Timely and Complete Court Orders for Placement Authorization	
Outcome 26: At least 95% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act. This outcome shall be measured for court orders entered after the entry of the Consent Decree.	80%
Outcome 29: No more than 5% of all children in custody of DHS/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 months.	3%

1. Effective Oversight of Placement Settings: Outcomes 25 and 31

Two Outcomes (numbers 25 and 31) relate to the supervision of placement settings. Data for these outcomes were gathered from case record reviews, State administrative data systems, and site visits to private providers.

Outcome 25 - Approved Placement Settings for Children

Outcome 25 seeks to reduce the risk that children may be placed in harmful situations by requiring foster care placements to be evaluated and to be in full approval and/or licensure status. Outcome 25 stipulates that "...by the end of the fourth reporting period, at least 98% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status." 109

a. <u>Interpretation and Measurement Issues</u>

There were no new interpretation or measurement issues encountered during Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. Measurement of Outcome 25 performance is based on the sub-sample of 134 children who remained in care on June 30, 2010, drawn from the sample of 180 children in the custody of DeKalb or Fulton County placed in out-of home care at any time between January 1 and June 30, 2010. The margin of statistical error for this subsample is +/- 8 percent.

b. State Performance

• The State Met the Outcome 25 Threshold

At the end of Period IX, **98 percent** (126 of 128) children in custody and in placements with a relevant approval process were in placements that were in full approval and/or licensure status. This represents the third consecutive reporting period in which the Outcome 25 performance threshold of 98 percent was met or surpassed. The State's Period VIII performance on Outcome 25 was 98 percent. Additional detail on this measurement appears in Table VI-2.

As in Period VIII, compliance with the relevant approval processes remained at 100 percent for DFCS-supervised foster homes, group homes, and child-caring institutions. The approval rate for provider-supervised foster homes improved to 99 percent from the Period VIII level of 96 percent; while the approval rate for non-foster relative placements dropped from 96 to 94 percent, (however, the observed changes are within the placement sub-sample's margin of statistical error). Figure VI-1 displays the State's performance on this outcome over the eight reporting periods to which the Consent Decree standards applied.

1

¹⁰⁹ See p 36, Outcome 25, of the Consent Decree

Table VI-2
Outcome 25 – Children in Placements in Full Approval Status

Placement Type	Children in Placement Sample	Children in Placements on 06/30/2010	Children in "Fully Approved" Placements on 06/30/2010	Percent of Children in care on 06/30/2010 in "Fully Approved" Placements
Relative Placement a b	35	18	17 °	94%
DFCS-supervised Foster Home d	26	20	20	100%
Provider- supervised Foster Home ^{ef}	81	67	66	99%
Group Homeg	17	11	11	100%
Child Caring Institution ^g	13	12	12	100%
Other (no relevant approval process)	8	6	N/A	N/A
Total	180	134	126/128 h	98%

^a Data source: Placement file review.

^b Data source for ICPC relative placements: Georgia's ICPC records.

^c The criteria specified in Section 1004 of the DFCS Policy Manual for approval of a relative placement are the Social Services Supervisor's approval and completion of a satisfactory relative care assessment (RCA). For purposes of the file review, a judge's signature was also accepted as evidence of supervisory approval.

^d Data source: SHINES and Placement file review.

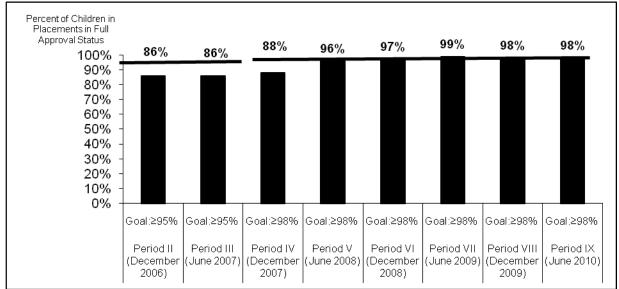
^eData source: Review of child-placing agency's records.

^fData source for ICPC foster home placements: Georgia's ICPC records.

g Data source: SHINES

^h Excludes six children in state custody on 06/30/2010 that were in settings with no relevant approval process (three children were placed with a birth parent/guardian, one was in Metro YDC, one in the DeKalb County Jail, and one in a personal care home funded by the Department of Behavioral Health and Developmental Disabilities).

Figure VI-1
Eight Reporting Periods of State Performance on Outcome 25:
Children Placed in Settings that are in Full Approval and/or Licensure Status



Source: Review Period Foster Home Case Record Reviews, July 1, 2006 - June 30, 2010.

Outcome 31 – Foster Home Capacity Limits

Outcome 31 seeks to limit the number of children placed in individual foster homes. By the end of Period II, it stipulates that "...no more than 10% of all children in foster homes shall be placed in foster care homes that exceed... [specified] capacity limits...." The capacity limits referenced in Outcome 31 are contained in Section 5.c.4.e of the Consent Decree.

a. Interpretation and Measurement Issues

There were no new interpretation or measurement issues encountered during Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. The point-in-time used for measurement of Outcome 31 in Period IX was June 30, 2010. Measurement of Outcome 31 performance is based on the 87 children in the sample of 180 children in foster care that were in custody and placed in family foster homes on June 30, 2010. The margin of statistical error for this subsample is +/- 10 percent.

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¹¹⁰ See p. 38 of the Consent Decree

The Section 5.c.4.e capacity limits provide that "No child shall be placed in a foster home if that placement will result in more than three (3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.... The only exception to these limits shall be circumstances in which the placement of a sibling group in a foster home with no other children in the home would exceed one or more of these limits." See p. 16 of the Consent Decree.

b. State Performance

• The State Surpassed the Outcome 31 Threshold

None of the 87 children from the placement sample that were in the care of foster homes at the end of Period IX, had been placed in foster homes that exceeded the specified capacity limits. By comparison, four percent of the children in foster homes on December 31, 2009 had been placed in foster homes that exceeded the specified capacity limits. In Period IX, three provider-supervised foster homes exceeded the three-foster-child capacity limit due to the placement of sibling groups; however, they qualified for the exception enumerated in Section 5.c.4.e. because no other children were in the homes other than the sibling groups. Additional detail on this measurement appears below in Table VI-3. Figure VI-2 illustrates the proportion of foster children placed in foster homes exceeding the Consent Decree standards over the eight reporting periods to which the standards applied.

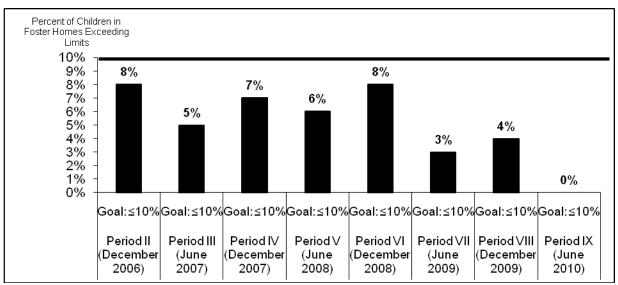
Table VI-3
Outcome 31 – Children in Foster Homes Exceeding Capacity Limits
n = 87

Placement Type	Sampled Children in Foster Homes on 06/30/2010	Children Placed in Foster Homes Having 3 or More Foster Children	Children Placed in Foster Homes Having 6 or More Children in Total	Children Placed in Foster Homes Having 3 or More Foster Children and/or 6 or More Total Children	
DFCS-supervised Foster Homes ^a	20	0	0	0%	
Provider Supervised Foster Homes ^b	67	0	0	0%	
Total	87	0	0	0%	

^a Data Source: SHINES

^b Data Source: Targeted review of provider foster home files

Figure VI-2
Eight Reporting Periods of State Performance on Outcome 31:
Children are Not in Foster Homes Exceeding Licensed Capacity



Source: Review Period Case Record Reviews July 2006-June 30, 2010.

2. <u>Timely and Complete Court Orders for Placement Authorization: Outcomes 26 and 29</u>

Two Outcomes (numbered 26 and 29) relate to strengthening the infrastructure by establishing benchmarks for practices that help support DFCS claims for federal reimbursement for services to children in custody and to ensure DFCS has documented custodial authority for the children in foster care.

Outcome 26 – Required IV-E Language in Court Orders

Outcome 26 relates to DFCS having the proper documentation in a child's file to support an appropriate claim for Federal reimbursement under the Title IV-E program. For those children who entered care on or after October 27, 2005, judicial determinations regarding "...contrary to the welfare..." must be made in the first order that authorizes the State agency's action to remove the child from home. In practice, this is often the court order from the 72 hour hearing. In addition, there must be documentation of a judicial determination made no later than 60 days from the date of the child's removal from the home that "reasonable efforts" were made to prevent the child's removal from his/her family. If either of these requirements is not met the State cannot claim federal Title IV-E reimbursement for the child's care the entire time the child is in custody even though the child's family meets the Title IV-E income test.

113 Ibid.

¹¹² See pp 36-37, Outcome 26 of the Consent Decree

All children in State custody after the Consent Decree should have a permanency hearing at least every 12 months with the appropriate language about "reasonable efforts" to achieve permanency included in the subsequent court orders. If these determinations do not occur timely or the language is not child specific, there is a gap in the child's eligibility until the determination is appropriately made and the State cannot claim federal reimbursement during the gap.

a. <u>Interpretation and Measurement Issues</u>

No new interpretation or measurement issues were encountered in the Period IX. Appendix B provides a summary of previously resolved interpretation and measurement issues. Measurement of Outcome 26 performance is based on record review of a sample of 180 children in foster care. During the Period IX record review, the Office of Revenue Maximization made available its paper files of court orders and eligibility determination to supplement what was recorded in SHINES and in the paper files maintained by case managers. For those children in the sample who entered before October 27, 2005, only the annual permanency review orders were included in the analysis.

b. State Performance

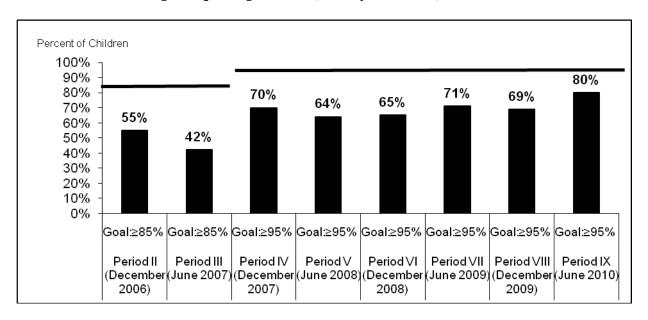
• The State Fell Short of the Outcome 26 Threshold

For Outcome 26, 144 children (80%) of the 180 children in the Period IX placement sample had the required court orders with all the required language necessary to assess current eligibility for federal funding under Title IV-E. The threshold for this outcome is 95 percent. The Period IX performance is the State's best performance to date and the difference between Period VIII and Period IX exceeds the margin of statistical error for the sample. Figure VI-3 displays the State's performance on Outcome 26 over the eight reporting periods to which the Consent Decree standards applied.

The Accountability Agents believe the improved performance is related to using the files from the Office of Revenue Maximization, which, in some instances, were more complete than the SHINES or the paper files maintained by case managers. Although the Office's files usually had the initial removal and determination orders, they were still some gaps as indicated below. Among the 36 records that did not meet Outcome 26 standards, the following pattern emerged:

- Files did not have the court orders to determine if language was in the orders:
 - o 5 initial orders; and
 - o 9 permanency orders.
- 14 Initial removal orders did not have child-specific language.
- 3 60-day determinations were either missing child-specific language or did not occur within 60 days.
- 5 Permanency hearing orders were missing appropriate language.

Figure VI-3
State Performance on Outcome 26:
Court Orders Contain Required Language to Support IV-E Funding Claims
For Eight Reporting Periods (January 1, 2006 to June 30, 2010)



Source: Review Period Foster Care Case Record Reviews

In addition to using the files from the Office of Revenue Maximization for documentation, the Accountability Agents reviewed the Office of Revenue Maximization's IV-E determination for each child in the sample of 180 as it is recorded in SHINES. Among the 180, it appears that 50 children (28%) were not eligible for IV-E reimbursement claims for other reasons than the status of the court orders in their files. These children were not eligible for differing reasons pertaining to the regulations governing eligibility for the defunct federal Aid to Families with Dependent Children (AFDC) program.¹¹⁴ These children did not meet the criteria for being a "dependent child" or being "financially needy" or they were not considered "deprived of parental support or care at the time of removal from his/her home." The Accountability Agents did not verify any of the determinations made by the Office of Revenue Maximization. However, as noted in the Period VIII report, the Administration for Children and Families of the U.S. Department of Health and Human Services conducted a secondary review of the State's Title IV-E foster care program and found that the State had strengthened several aspects of its IV-E eligibility and claiming process. It found that the State was in substantial compliance with Federal eligibility requirements for the period (October 1, 2008 through March 31, 2009).¹¹⁵ All states are subject to periodic audits of their Title IV-E program. These audits generally occur every three years. Georgia will likely undergo another federal audit in the next few years.

¹¹

¹¹⁴ Title IV-E Foster Care Eligibility Review Guide, U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families Children's Bureau, March 2006, pp 31-33.

¹¹⁵ See Dimas, J. T. and Morrison, S.A. Period VIII Monitoring Report, Kenny A. V. Perdue, July 2010, p. 160.

Outcome 29 - Lapses in Legal Custodial Authority

The Consent Decree strives to limit the proportion of children for whom DHS/DFCS custodial authority lapses.¹¹⁶ Outcome 29 stipulates that no more than 5 percent of all children should have a lapse in their legal custody within the most recent 13 months of their placement.

a. Interpretation and Measurement Issues

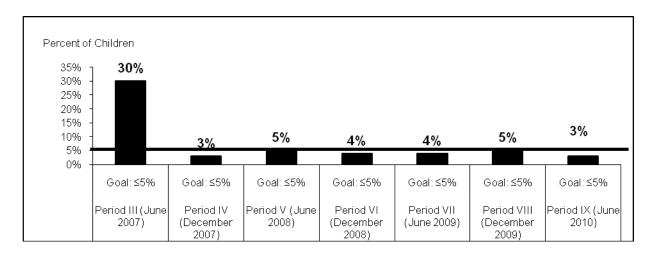
No new interpretation issues were encountered in Period IX. Measurement of Outcome 29 performance is based on 117 children in the sample of 180 children in foster care. These 117 children had been in custody 12 months or more and were still in the temporary custody of the State. The margin of statistical error for this subsample is +/- 9 percent.

b. State Performance

• The State Surpassed the Outcome 29 Threshold

In Period IX, it appears that DFCS had lapses in custody for three children out of 117 (3%). The outcome threshold is no more than 5 percent. This performance is the State's second-best performance to date. Figure VI-4 illustrates the proportion of children in DFCS custody with custody lapses over the seven reporting periods to which the Consent Decree standard applied.

Figure VI-4
Seven Reporting Periods of State Performance on Outcome 29:
Children in Care With Legal Custody Lapses



Source: Review Period Foster Care Case Record Reviews, January 2007-June 2010; Court documentation

¹¹⁶ See p 37, Outcome 29 of the Consent Decree

B. Caseloads

1. <u>Caseload Sizes</u>

There are six primary types of case managers responsible for direct interventions with children and families. The Consent Decree establishes caseload caps for five types. Table VI-4 displays the five different types of case managers, "case" definition, and the stipulated caseload caps.

Table VI-4
Case Manager Types and Respective Caseload Caps

Case Manager Function	Responsibility	Caseload Cap	
Child Protective Services	Respond to and investigate reports of child	12 cases (the	
Investigators	maltreatment. These individuals may also	equivalent of 12	
(CPS Investigations)	respond to reports of families in need who are	families)	
	considered candidates for "diversion" services.		
Family Preservation	Provide services to and supervise the safety of	17 cases (the	
(Child Protective Services	children who are not taken into state custody	equivalent of 17	
On-Going) Case Managers	and remain in their own homes.	families)	
Permanency Case	Provide services to the children and families of	15 cases (the	
Managers ¹¹⁷	children who are in the State's custody.	equivalent of 15	
		children)	
Adoptions Case Managers	Provide services to children whose parents'	16 cases (the	
	parental rights have been terminated and who	equivalent of 16	
	have the permanency goal of adoption.	children)	
Specialized Case	Provide services to the children and families of	12 cases (the	
Managers	children who have been in state custody 18	equivalent of 12	
	months or more.	children)	

A sixth type of case manager may be referred to as a Family Support Case Manager. These case managers are responsible for short-term intervention with families who come to the attention of DFCS because they are in need of services that will help them keep their families safe. In child welfare practice this strategy has come to be known as a "differential" or "alternative response" to either an investigation or totally "screening out" a report because the circumstances do not rise to the level of child maltreatment. Family Support case managers may handle child protective services investigations as well under two circumstances. One, if, upon meeting with the family and determining that the situation does rise to the level of possible abuse or neglect, the case designation is revised from "diversion" to "child protective services." The second circumstance may be when all other investigative staff are busy and Family Support case managers are called on to conduct the investigation to ensure a timely response. Family

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¹¹⁷ The State has newly designated "placement" case managers as "permanency" case managers to emphasize their primary purpose is to promote permanency in the lives of children.

Support cases and case managers are not covered by the terms of the Consent Decree. They are only included in the caseload analysis when they have responsibility for investigations or family preservation cases. When they are included, all of their cases are counted against the caseload caps -- family support cases along with investigations and/or family preservation cases.

a. State Performance as of June 30, 2010

On June 30, 2010, 69 percent of the case managers in DeKalb and Fulton Counties had caseloads that were at or under designated caps, as reflected in Table VI-5. This is a slight improvement over the Period VIII performance of 66 percent. In addition, the number of cases not assigned to an active case manger decreased by 51 percent (from 102 to 50). Thirty-four of the 50 were assigned to supervisors, administrators, or program specialists who stepped in temporarily to help provide services and safely close cases. Another 16 cases were still assigned to case managers who had left DFCS in the last few weeks of June 2010. The greatest improvement occurred among the CPS Investigative staff and the Specialized Foster Care case managers while the other areas continued to decline by differing degrees.

The Accountability Agents interviewed 48 case managers and eight supervisors in September and October 2010 to obtain supportive information about caseload sizes. The case managers were asked about their caseload sizes on the day of the interview and the pattern they experienced in the six-month period between January 1 and June 30, 2010. In many instances the case managers reviewed the SHINES assignment reports with Accountability Agents and discussed any discrepancies between SHINES and the number of cases they were actually "working" on the day of the interview. The discrepancies found generally reflected a lag time in cases being reflected as closed in SHINES although the case managers had completed all the necessary steps. There is also a lag time during the transfer of cases from investigations to family preservation. Family preservation staff often begin reviewing a new case and making a home visit before the investigation is complete and the "case" has officially been passed along to family preservation. Again, the lag time is reportedly brief and the work initiated during the lag is limited. When found, these discrepancies represented one or two cases. There were no apparent systemic discrepancies and the interviews confirmed the caseload sizes and supervisory ratios reported by the State.

According to the case managers and supervisors interviewed, the caseload sizes started to decrease in late June and July as more newly hired staff began receiving provisional caseloads and then achieved full certification status. In addition, DFCS historically receives fewer referrals in the summer months and the Investigators had more time to devote to completing and safely closing investigations that had been delayed by making response times to new reports a priority. Furthermore, both counties initiated new strategies to maintain more equal case distribution among investigators. Existing cases have been and continue to be reassigned among all case managers to achieve better balance. This is an on-going activity as staff turnover remains a challenge. However, as of October 2010, the staff interviewed acknowledged

having caseloads that were more in compliance with the Consent Decree standards than in they had experienced in the spring of 2010.¹¹⁸ As a result, the Accountability Agents anticipate that State performance in this area will continue to improve over Period 10.

Table VI-5
DeKalb and Fulton County Caseload Status on June 30, 2010

	Target	Number	Number	Actual Performance				
Case Manager Function	Caseload Cap: Number of cases	of Active Staff on 6/30/10 ¹	of Active, On-leave Staff on 6/30/10 ²	on assigned caseloads		Not Meeting Cap on assigned caseloads		Cases assigned to separated/ on leave workers/ Supervisors
				Number	%	Number	%	Number
CPS Case Manager	12 families	45		34	76%	11	24%	14
Family Preservation	17 families	30		13	43%	17	57%	23
Permanency Case Manager	15 children	55		43	78%	12	22%	10
Specialized Case Manager	12 children	32		20	63%	12	37%	0
Adoption Case Manager	16 children	29		21	72%	8	29%	3
Total		191		131	69%	60	31%	50

Sources: SHINES; county personnel systems for leave and separation information Notes:

¹Active staff are those staff that were not on leave of absence on June 30, 2010 that was expected to be more than 30 days. Includes workers with mixed caseloads of CPS investigations and diversions. Excludes workers who had diversion cases only. Excludes case managers who have caseloads exclusively of children placed in Georgia through ICPC and not in DFCS custody

²Active staff on leave at June 30, 2010 but leave anticipated to be more than 30 days.

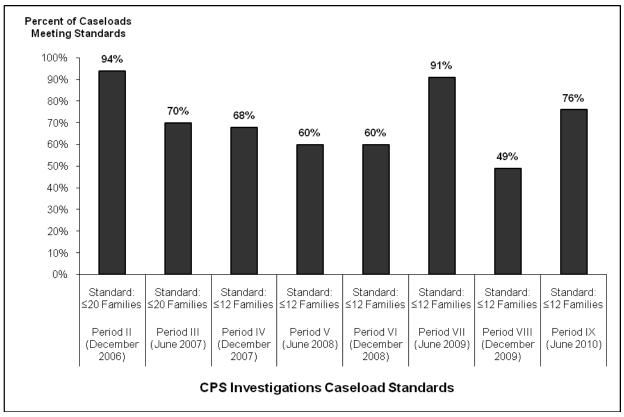
Child Protective Services Caseloads

In June 2010, 76 percent of the *CPS investigation* caseloads were at or under the caseload cap of 12 families. This is a substantial improvement over Period VIII when 49 percent of the case managers had caseloads at or under the cap. Caseloads over the cap ranged from 14 to 23 for

¹¹⁸In an October 22, 2010 email to the Plaintiffs and the Accountability Agents, Brenda King Woodard provided a state verified report on the Specialized Case managers in Fulton County that indicated all case managers had caseloads of 12 or fewer.

those responsible for investigations only. One case manager who had a mix of investigation, family preservation, and family support cases had 25 cases. Seven investigators had caseloads of 20 or more cases, down from 14 in Period VIII. All 14 cases that were not assigned to active case managers were assigned to supervisors, administrators, or field program specialists to Figure VI-5 illustrates the proportion of CPS investigation complete the investigations. caseloads meeting the Consent Decree standards over the eight reporting periods to which the standards applied.

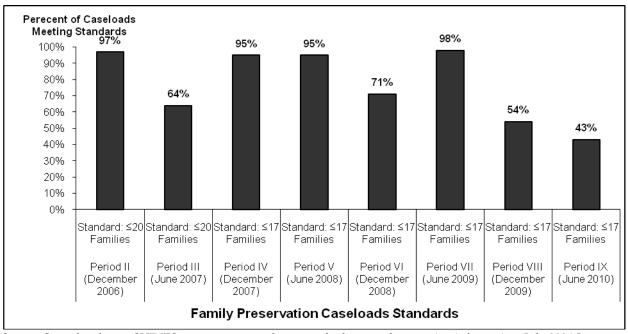
Figure VI-5 **Eight Reporting Periods of CPS Investigation Caseloads Percent of Caseloads Meeting Standards**



Source: State data bases: IDS and SHINES; county personnel systems for leave and separation information. July 2006-June 2010.

Among the case managers who provide family preservation (on-going, in-home child protective services), 43 percent had caseloads of 17 or fewer families. This is a decline from the State's Period VIII performance and is poorest performance to date in meeting the caseload caps for family preservation case managers. The range of caseloads over the cap was 18 families to more than 30 families. Twelve of the 17 caseloads exceeding the cap had over 20 families. Two case managers resigned in June, leaving 16 cases distributed among co-workers and seven cases were assigned to supervisors, administrators, or field program staff. Figure VI-6 illustrates the proportion of Family Preservation caseloads meeting the Consent Decree standard over the eight reporting periods to which the standards applied.

Figure VI-6 Eight Reporting Periods of Family Preservation¹¹⁹ Caseloads Percent of Caseloads Meeting Standards



Source: State data bases: SHINES; county personnel systems for leave and separation information. July 2006-June 2010

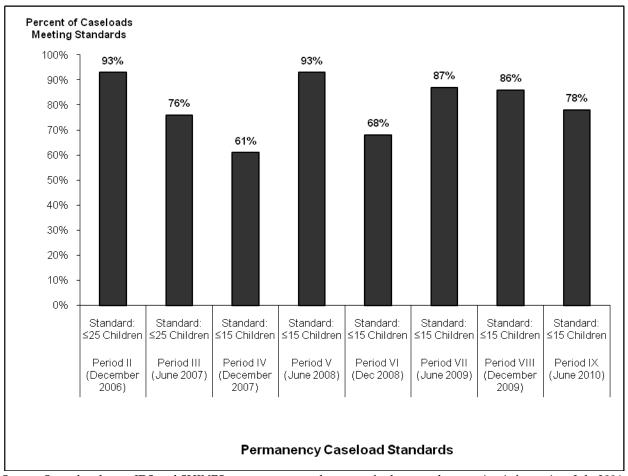
Permanency Caseloads

In Period IX, 78 percent of the "regular" permanency caseloads were at or under the caseload cap of 15 children. This is a decline from Period VIII when 86 percent of the caseloads were at or under the cap. Four of the 13 case managers with caseloads over the cap had 20 cases, the remaining nine case managers had between 16 and 19 cases. Ten cases were assigned to supervisors and administrators. Figure VI-7 illustrates the proportion of regular permanency caseloads meeting the Consent Decree standards over the eight reporting periods to which the standards applied.

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¹¹⁹These cases were formerly referred to "on-going CPS".

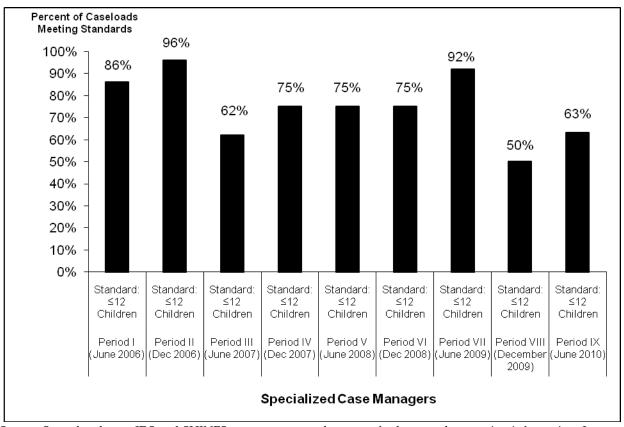
Figure VI-7
Eight Reporting Periods of Regular Permanency Caseloads
Percent Meeting Standards



Source: State data bases: IDS and SHINES; county personnel systems for leave and separation information. July 2006-June 2010

Compliance with the designated *specialized caseload* standard improved substantially, with 63 percent of the caseloads having 12 or fewer children. The State's Period VIII performance was 50 percent. The 12 caseloads over the cap ranged from 13 to 27 cases and five of the 12 had 20 or more cases. Figure VI-8 illustrates the proportion of specialized caseloads meeting the Consent Decree standard over the nine reporting periods to which the standard applied.

Figure VI-8
Nine Reporting Periods of Specialized Caseloads
Percent Meeting Standard



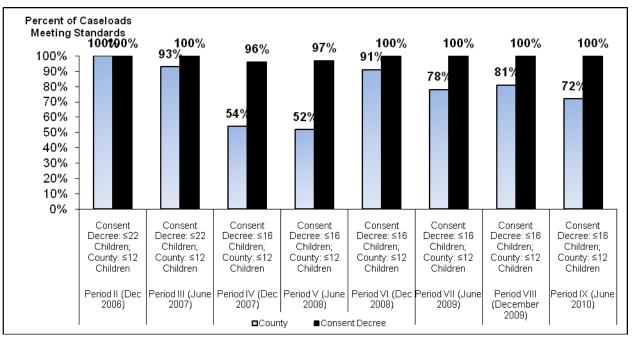
Source: State data bases: IDS and SHINES; county personnel systems for leave and separation information. January 2006-June 2010

County performance on the adoption caseloads, as measured by the counties' self-imposed limits, ¹²⁰ reveals that 72 percent of the adoption caseloads have 12 or fewer children. This a decline from the 81 percent achieved in Period VIII. As measured by the Consent Decree requirement, all of the adoption case managers continued to have caseloads of 16 or fewer children for the fourth consecutive period. Two case managers had caseloads of 13, three had 14 children, two had 15 children, and one had 16 children. One case manager who was promoted to supervisor retained three cases. Figure VI-9 illustrates the proportion of adoptions caseloads meeting the Consent Decree standards over the eight reporting periods to which the standards applied.

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¹²⁰ The Consent Decree stipulates that all adoption case managers have caseloads no larger than 16 children. However, as the Counties set up the required Specialized Caseloads in the first reporting period, they elected to keep adoption caseloads at 12 or fewer children to be equivalent with the specialized case manager requirements

Figure VI-9
Eight Reporting Periods of Adoption Caseloads
Percent Meeting Standards



Source: State data bases: IDS and SHINES; county personnel systems for leave and separation information. July 2006-June 2010

2. Supervisory Ratios

In addition to caseload caps, the Consent Decree establishes supervisory ratios. Each supervisor should supervise no more than 5 case managers at any one time.¹²¹

As shown in Table VI-6, on June 30, 2010, **96 percent** of the supervisory units had a ratio of five workers or fewer to one supervisor. This is a slight improvement from Period VIII when 94 percent had the required ratio. Two of the 50 units that did not meet the standard had six and nine case managers. However, there were six supervisory vacancies. None of these units had more than 4 case managers each and they were spread among one other supervisor and program administrators. Two units continue to be supervised by individuals who have taken the supervisory training, but do not have the educational credentials to be appointed supervisors yet.

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¹²¹ See p. 23, Section 8.B.2 in the Consent Decree.

Table VI-6
DeKalb and Fulton County Supervisory Ratios at June 30, 2010

Program/Service Area	Number of Units	Meeting 1 to 5 ratio		Not Meeting 1 to 5 ratio	
		Number %		Number	%
Child Protective Services (Investigations and Family Preservation)	20	19	95%	1	5%
Permanency	15	15	100%		
Adoption	7	1	86%	1	14%
Specialized Case Management	8	8	100%		
Total	50	48	96%	2	4%

Includes two Lead Workers acting as supervisors.

Sources: State SHINES, and county personnel systems for leave and separation information

C. Building Workforce Skills

The Consent Decree has several training requirements.¹²² In this report section, the Accountability Agents describe State efforts to improve its practice curricula, the qualifications of new supervisors and the State's compliance with pre-service and in-service training requirements.

1. Education and Training Services Section 123

There have been no changes in the leadership of the Education and Training Services (ETS) section since the fourth reporting period.

2. Staff Preparation and Professional Development

The State reported that the Education and Training Services Section (ETS) engaged in several activities in Period IX. Table VII-7 provides a summary of some of the new curricula and projects during the period.

See Dimas, J.T. and Morrison, S. A. *Period I Monitoring Report, Kenny A. v. Perdue*, November 2006, for a description of the Education and Training Services Section.

¹²² See pages 25 and 26 of the Consent Decree for the complete description of the requirements.

Table VII-7 Newly Developed Curricula for DFCS Professional Development and Education and Training Projects during Period IX

Target Audience	Curriculum/Activity
_	Family Team Meetings for Management uses the FTM model to provide
	an overview and prepare regional directors, county directors, deputy
	directors, and program administrators for their roles in the Family
	Team Meeting process. Curriculum includes standards of practice for
Regional Directors,	the FTM model, use of FTM process planning and decision-making
County Directors,	agency-wide (Family Preservation, Foster care, Independent Living,
Program	OFI), FTM policy, understanding use of FTM process to meet
Administrators	CFSR/PIP goals, assessing the effectiveness and quality of the process,
	supporting the process and decisions made through the process,
	engaging Community Partners. Participants have the opportunity to
	develop a working FTM protocol for their county or region or to
	strengthen an existing protocol.
	Supervisor Peer Mentoring Program follows the Supervisor Capacity
	Building: Putting the Pieces Together. New supervisors are matched
	with a peer veteran supervisor who provides guidance and counseling
New Supervisors	on their new job role. Peer mentors must be experienced supervisors
	who have attended the sequence. These peer mentors also receive
	training from education and training on being a mentor. Education
	and Training matches the supervisors.
	More Than Words is a 5 day course that provides for an intense
Case Managers	exploration of documentation. The class is comprised of half front line
And Supervisors	case managers and half supervisors. The participants learn quality
	and precise documentation skills by writing and reviewing their own
	documentation.
	Effectively Talking to Children Who Have Challenges about Tough Topics is
	a course that is available upon request. It provides staff with practical
	skills to effectively communicate complex and difficult information to
All Staff	children and teens. Techniques and strategies for matching interview
	skills with a child's social and emotional age, skills for interviewing
	young adults with ADHD, anxiety, depression and developmental
	disorders will be addressed using videos, scripts and hands-on
	practice.

Table VII-7, continued Newly Developed Curricula for DFCS Professional Development

Target Audience	Curriculum/Activity
All Staff	Piloted and implemented a <i>Transfer of Learning (TOL)</i> model to be integrated into each of the Professional Excellence (PE) courses. Transfer of Learning is defined as the application of knowledge, skills, and attitudes acquired in a training setting to the job. This encompasses what happens before, during and after staff attend training that either supports or undermines the likelihood that what is learned will actually be applied and result in improved job performance. The TOL model integrates previously developed tools and other specific activities into a cohesive process for promoting transfer of learning.
	Babies Can't Wait, a course to be delivered online was developed with initial content designed to help staff work with the Babies Can't Wait
	Program.

3. <u>New Supervisor Qualifications</u>

As stipulated in the Consent Decree, case manager supervisors employed by the counties after October 27, 2005 must have, at a minimum, a Bachelor's degree in Social Work (BSW) and two years of experience. Thirteen individuals were promoted or newly employed as case manager supervisors January 1 through June 30, 2010. All either had a BSW or a Master's degree in Social Work (MSW) and two or more years of experience.

4. <u>Pre-Service and On-going Training Hours</u>

According to the county training and certification data reviewed by the Accountability Agents, it appears that new case managers are receiving the required number of hours of pre-service training. Not all newly appointed or hired supervisors during Period IX appear to have received the supervisory pre-service training prior to the end of the period. Four supervisors were still completing their training in August and September, 2010. Overall, 95 percent of the case managers and 93 percent of the supervisors received the required annual 20 hours of professional development. In the interviews with 48 case managers and supervisors in September and October 2010, the Accountability Agents collected information about training opportunities and actual training received, including the time spent in the courses. Their description of the training they had completed was consistent with the training data provided by the counties.

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¹²⁴ See p. 26 of the Consent Decree

5. <u>Case Manager and Supervisor Certification</u>

The proportion of staff and supervisors who are fully certified decreased from Period VIII. Table VI-8 summarizes the certification status available from the State at the end of June 2010 for social service case managers and supervisors in Fulton and DeKalb counties. As shown, 167 (87%) case managers and 34 (74%) supervisors had achieved full certification as of June 30, 2010. This compares to 99.5 percent of the case managers and 87 percent of the supervisors in Period VIII. The Accountability Agents used the previously described case manager and supervisory interviews to obtain information to verify the reported certification status.

Table VI-8 Certification Status of Case Managers and Supervisors in DeKalb and Fulton County DFCS as of June 30, 2010

Position Title	Fully Certified	Results Pending	Provisional	Not Certified	Total*
Case Managers					
CPS Investigators	32		13		45
CPS On-Going Case	28		2		30
Managers					
Permanency Case Managers	49		7		56
Adoption Case Managers	29				29
Specialized Case Managers	29		4		33
TOTAL	167		26		193
Supervisors					
CPS (Investigations and On-	9	2		6	17
Going)					
Permanency	13	1		1	15
Adoption	7				7
Specialized Cases	5	1		1	7
TOTAL	34	4		8	46

Source: Compiled from data supplied by county training coordinators. One lead worker acting as supervisors is included, although the individual is not certified. *Includes workers who were on extended leave on June 30, 2010

D. Assuring Needed Services Are Available

During Period IX, the counties continued their foster home retention and recruitment efforts. Table VI-9 summarizes county progress by June 30, 2010 compared to the March 31, 2008 baseline. The counties continue to fall short of the goals they have set for themselves. Despite adding new homes each period, they continue to lose homes as well. Private agencies added a total of 24 homes in the two counties, but some of these are simply transfers from county supervision to private agency supervision. At the same time, the foster care population has continued to decline, lessening the anticipated demand for foster homes.

During Period IX, Fulton reported opening 13 new homes. However, the county also closed 41 homes and transferred six to other county supervision and one to private agency supervision during the period. Almost one quarter of the homes (10) closed at the foster parents' request citing personal reasons. Nine homes closed because the parents adopted or took guardianship of the foster child(ren) in their care or their related child was no longer in county custody. Another five homes closed involuntarily and four homes were closed due to maltreatment-related issues. Four families moved from the area. DeKalb reported opening 39 homes but closing 33 homes and transferring four to private provider supervision. Almost half (15) of the 33 closures were the result of finalized adoptions – foster parents desiring to close their homes after adopting children in their care.

Private agencies appear to have gained capacity in both counties during Period IX. In Period VIII, the Office of Provider Utilization and Outcomes Management reported private agencies had 228 foster homes in DeKalb County and in Period IX that number had increased by 14 to 242 homes. Therefore, the combined efforts of the county and private agencies produced a net gain of 12 homes in DeKalb County. Likewise the private agencies had 114 homes in Fulton County in Period VIII and 124 homes at the end of Period IX, providing a net gain of 10 homes in Fulton County.

The Accountability Agents have not verified the recruitment information of the counties or private providers. The sampling frame for the foster home case record review is all foster homes with a class member in care during the reporting period, therefore it does provide some verification of homes being open.

Table VI-9
DeKalb County and Fulton County Foster Home Capacity Building Progress

County		Baseline – As of March 31, 2008		2010 Not Coin on (Loss)		-		_		Soals
,	March	31, 2006	۷		Net Gain or (Loss)		(total capacity)			
	Beds	Homes	Beds	Homes	Beds	Homes	Beds	Homes		
DeKalb										
County Supervised Homes	418	209	410	203	-8	-6*	798	308 to 339		
CPA Supervised Homes*			666	242						
Total			1076	445						
Fulton										
County Supervised Homes	504	238	335	164	- 169	<i>-</i> 74*	594	328		
CPA Supervised Homes*			347	124						
Total			682	288						

Source: DeKalb and Fulton County reporting. *Includes homes that transferred from County supervision to private agency supervision.

E. Placement Support

This section of the report describes the State's performance on a number of issues related to the regulation and support of foster care providers. These issues are described in the Consent Decree in Section 5.C.4.e-i, 5.C.6¹²⁵ and Section 11.¹²⁶ The State performed extremely well in Period IX and maintained or further advanced many of the significant improvements documented in Periods V, VI, VII, and VIII compared to earlier reporting periods.

Section 11 of the Consent Decree contains a variety of requirements with respect to the screening, licensing, and training of foster parents. Paragraph B of Section 11 requires a set of uniform standards to be in place for the approval or re-approval of all foster and pre-adoptive families. In Paragraph F, the State agrees not to allow the perpetrators of substantiated maltreatment to become or to remain foster parents. The State's performance against each of these requirements is considered below.

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¹²⁵ Ibid, pp. 16-19.

¹²⁶ Ibid, pp. 26-28.

The file review of 161 foster homes sought evidence in each file that the home was in compliance with applicable standards at the end of the reporting period. Data from the foster file review are presented below. These data can be said to fairly represent the status of the sampled foster homes at the end of the reporting period, but may not accurately reflect the quality of the regulatory approval process. The reasons for this include changes that may occur in family circumstances or characteristics between the approval date and date the home's file was reviewed, aspects of the approval process that may have been underway at the end of the reporting period, but had not yet been concluded and documented in the case record, and the practice among some child-placing agencies of keeping certain information such as health records and toxicology reports in separate, locked files rather than in the foster home file due to HIPPAA and privacy concerns.

1. Regular and timely evaluations to ensure placement settings meet standards

Successfully preventing maltreatment in care is aided by effective evaluation and reevaluation of care settings. In addition, foster caregivers need to be supported and well-trained to effectively care for and, when necessary, appropriately discipline the children in their care.

To ensure that foster homes are equipped to provide safe and appropriate care, DFCS has promulgated a uniform set of approval standards that are intended to apply to DFCS-supervised and provider-supervised foster homes alike. In addition, the Office of Residential Child Care (ORCC) has promulgated licensing rules that apply to the Child Placing Agencies that supervise private foster homes.

However, the existence of uniform standards by itself cannot ensure children in care are safe and well. Therefore, the review of foster home files specifically sought evidence that the foster homes reviewed were in compliance with the DFCS approval standards. Overall, compliance was found to be excellent and to be somewhat improved compared to Period VIII.

Table VI-9 summarizes the extent to which documentation was found in the foster home records reviewed indicating that these homes met specific approval standards, and compares the results for Periods VIII and IX.

The foster home record review found completed initial/re-evaluation reports in 160 of 160 records (100%) in which they should have appeared, similar to the 100 percent found in Period VIII. ¹²⁷ The file review found evidence that for most approval standards, 99 percent or more of the homes reviewed were in compliance. This is similar to Period VIII, for which most of the approval standards were met by 97 percent or more of the homes reviewed (although the

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¹²⁷ One provider-supervised foster home was excluded from this analysis because the most recent approval type found in the record was not an initial approval or re-evaluation, but a conversion from a foster home to an adoption home.

change is within the sample's margin of error). Compliance appears to have improved on six of the 16 requirements and to have remained about the same (±2 percentage points) for the remaining 10 requirements (although all changes observed for Period IX were within the sample's margin of error). Period IX was the first Period in which no decline in compliance was observed among any of the approval and licensing standards.

Table VI-9
Foster Care Approval and Licensing Standards
n = 161

Foster Care Screening, Licensing, Training,	Documenta	Documentation found		
and Investigative Requirements	indicating requirement met			
	Period VIII	Period IX		
Family assessment completed	100%	100%		
Sex Offender Registry checked for foster parents	99%	100%		
Timely annual re-evaluation (no lapses)	96%	100%		
Appropriate health statements for other adults in the home	93%	100% a		
Gender of children in home never varied from that approved	100%	99%		
Pre-service foster parent training requirements met	100%	99%		
Timely Criminal Record Checks for foster parents	98%	99%		
No violations of agency discipline or other foster care policies	98%	99%		
Comprehensive medical report for each foster parent	97%	99%		
Number of children in home never exceeded approved capacity	93%	99%		
CPS history has been checked	99%	98%		
Comprehensive Drug Screen for Foster Parents	98%	98%		
Age of children in home never varied from that approved	93%	98%		
Timely Criminal Record Checks for other adults in the home	90%	98% ^a		
Sex Offender Registry checked for other adults in the home	90%	96% a		
Ongoing foster parent training requirements met	94%	93%		

Source: Foster Home Record Reviews for Periods VIII and IX.

In each of the Accountability Agents' first four reports, there were three or four approval and licensing standards for which evidence of compliance was found in fewer than 80 percent of the foster home files reviewed. In those review periods, evidence of compliance had been found to be as low as 54 percent for certain requirements. Period 5 saw widespread and, in many cases, substantial improvement in evidence of compliance with these licensing and approval standards, much of it coming from provider-supervised foster homes. The Period IX record review demonstrates that the improvement documented in Periods V, VI, VII and VIII has been maintained or further advanced for each of the 16 approval and licensing standards. Period IX marked the third consecutive period in which the compliance rate for each of the 16 approval and licensing standards exceeded 90 percent.

^a As these measures are based on a sub-sample of 48 foster homes, they have a margin of statistical error of ±14%.

2. <u>Prohibition of perpetrators of substantiated maltreatment to be foster parents</u>

Section 11.F. of the Consent Decree specifies that DFCS will not allow perpetrators of substantiated maltreatment, those with policy violations that threaten child safety, or those who repeatedly or unrepentantly use corporal punishment to become or to remain foster parents. The State's performance on this requirement was found to be quite good.

The State's performance in preventing foster parents from using corporal punishment was found to be excellent. Of the 161 foster home files reviewed for Period IX, none (0%) had confirmed incidents of corporal punishment during the 12 months ending June 30, 2010. Similarly, there were no confirmed incidents of corporal punishment identified in the Period VIII foster home sample. More detail on the State's performance in preventing the use of corporal punishment is discussed earlier in this report, in Part III.

To assess the State's performance in not allowing perpetrators of substantiated maltreatment to become or to remain foster parents, file reviewers performed a "look-up" in SHINES and the IDS Master Index for every foster home in the sample to determine if the home had any history of substantiated maltreatment. One home in the sample of 161 (1%) was found to have a prior substantiation of maltreatment and to be open during the reporting period. The nature of this previous substantiated report and the reason the home was allowed to remain open is detailed below.

The home in question was a provider-supervised foster home that was closed by the supervising CPA in March of 2010 for reasons unrelated to a report of inadequate supervision that was substantiated in June 2007. That report involved the foster mother taking the foster children with her to her place of employment when her work schedule changed and she was unable to locate child care that could accommodate her new work hours. For a period, the children were left unattended in a break room. The children placed in the home at the time of the report were removed and the home was placed on inactive status. Prior to receiving any additional placements the foster parent was counseled on the agency's supervision policies, the foster parent agreed to attend additional training related to supervision and safety of children, and to provide information on her work hours and plans for child care during her work hours that would be verified by agency staff. The foster mother was instructed to contact the agency when her work schedule changed such that she might be able to accommodate the placement of another child in her home.

Two other homes in the sample had allegations of maltreatment that were substantiated during the current reporting period. One of these was a Fulton County-supervised foster home that was closed at the investigation's conclusion due to the substantiation of physical abuse. The second was a DeKalb County foster home that was reported for alleged physical abuse because a non-verbal 3 year-old placed in the home had bruising consistent with corporal punishment. The perpetrator could not be identified. The foster parents insisted that the bruising occurred

while the child was at the daycare provider and the daycare provider denied being responsible for the bruising. The children were removed from the placement, which had an otherwise clean history and was regarded by all collateral contacts as a good and caring home. The County sought to keep the home open as a placement resource under a waiver from the State Office. That waiver was recently denied.

Given the importance of preventing perpetrators of substantiated maltreatment from becoming or remaining foster parents, the Accountability Agents vetted each of these three cases very carefully. In the first case, the children were removed from the home and the home was placed on inactive status until the circumstances that led to the inadequate supervision were remediated. The home was closed midway through Period IX. In the two cases that had substantiated reports during Period IX, one home was closed as a consequence of the maltreatment in care investigation and the second was allowed to remain open while a waiver was requested from the State Office. With that waiver request recently being denied that foster home presumably will be closed.

Section 11.F. of the Consent Decree stipulates that DFCS shall be able to identify DFCS-supervised or provider-supervised foster parents that have perpetrated substantiated maltreatment or had their home closed, and subsequently seek foster home approval from a CPA or a different CPA. To prevent such individuals from becoming approved foster parents, the Office of Provider Management (OPM) ¹²⁸ requires all CPAs to run a "CPS clearance" on all prospective foster homes through the DFCS Social Services ICPC Unit to ensure they do not have a previous history of substantiated maltreatment. In addition, OPM officials indicate the Office uses SHINES, CPS-specific notes in the GA+SCORE¹²⁹ data system, and an "issue" spreadsheet that is developed and distributed monthly by the office of the Family Services Section Director to identify and to prevent individuals with a history of substantiated maltreatment from attempting to switch supervision environments. OPM also incorporates feedback from Field Operations and Social Services staff regarding the CPS history of existing or prospective foster parents into the GA+SCORE system.

a. Operational Context

Section 11.C. of the Consent Decree requires the process of licensing and approving foster homes to be carried out jointly by DFCS and the Office of Residential Child Care (ORCC). This section describes the Accountability Agents' understanding of how DFCS and ORCC collaborate in this process. It is based on interviews with staff of both these units as well as interviews with other central office and county staff.

ORCC licenses Child Placing Agencies (CPAs) and other institutional providers. A CPA must be licensed by ORCC before DFCS will execute a contract with them to provide foster care. In

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¹²⁸ Effective June 2010, the DFCS Office of Provider Utilization & Outcomes Management (OPUOM) was renamed the Office of Provider Management (OPM).

¹²⁹ Effective June 2010, OPM's administrative data system called KIDSTAR was renamed GA+SCORE.

these private provider arrangements, the CPA conducts the approval process for the foster homes it supervises. For DFCS-supervised foster homes, the approval process is conducted by DFCS.

Section 5.C.4.i of the Consent Decree stipulates that DFCS will contract only with licensed placement contractors. To assess compliance with this requirement, data from the foster home file review were compared against the CPA licensing information available in SHINES. Of the 103 provider-supervised foster homes sampled that had a class member in care at any point during the reporting period, 103 (100%) were overseen by CPAs that had a valid license on June 30, 2010.

ORCC licenses the CPAs themselves, not the foster homes supervised by the CPAs. ORCC only gets involved with individual provider-supervised foster homes if they receive a complaint about a particular home or when they make unannounced visits to a random sample of provider-supervised foster homes. To receive a license, a CPA must allow ORCC to review their policies and procedures for compliance with the ORCC rules regarding such things as home studies and visitation. In deciding whether to grant, deny, or continue a CPA's license, ORCC reviews a random sample of the files of individual children against the provider record to ensure the placement was an appropriate match for the child and conducts unannounced inspections of a sample of the foster homes supervised by each CPA. If rule violations are found in the course of these inspections the CPA may be cited for violating the terms of its license.

CPAs wishing to serve children in DFCS custody must, in addition to licensure by ORCC, be approved by the DFCS Office of Provider Management (OPM). The DFCS policy manual specifies a set of uniform standards that foster care settings must meet to be approved by DFCS – in the case of DFCS supervised homes – or by CPAs – in the case of provider supervised homes. These uniform standards became fully operational on July 1, 2007 with the implementation of amended provider contract language.

Before arriving at an initial approval decision, OPM conducts a detailed desk review of the prospective provider's enrollment application. The provider is required to submit a copy of their current ORCC license along with the completed enrollment application to show that the agency is in good standing with ORCC. During the site visit conducted by OPM staff, the provider is asked questions about their latest ORCC visit(s) and if ORCC has issued any citations to the provider. In addition, OPM either accesses the ORCC website to gather information about recent ORCC citations against the provider and/or contacts the ORCC Surveyor to confirm that the provider is in good standing. If there are citations, the provider is required to explain how the citations were resolved before OPM will contract with the provider.

Typically, a prospective CPA will include at least three home studies with their provider enrollment application. The foster home studies are read during the desk review and a site visit is made to each home to evaluate readiness. The foster parents are interviewed and a walk through of the home is conducted. After field visits are completed, each enrollment application is staffed within OPM (this includes the Specialist, Supervisor, Unit manager and Unit Director) to determine if OPM will initiate a DHS contract with the provider.

OPM also conducts regular site visits to a portion of CPA administrative offices and to foster homes they supervise to interview children, review files for compliance with contract provisions, and to inspect physical plant.

- OPM visited 39 percent of the administrative offices of large CPAs (those with more than 20 foster homes), during the first half of Period IX, and 13 percent of the foster homes they supervise. During the second half of Period IX, site visits were made to 50 percent of the CPA administrative offices and to 12 percent of the foster homes supervised.
- OPM visited 54 percent of the administrative offices of small CPAs (those with fewer than 20 foster homes) during the first half of Period IX, and 22 percent of the foster homes they supervise. During the second half of Period IX, site visits were made to 41 percent of the CPA administrative offices and to six percent of the foster homes supervised.
- Approximately half of the foster home visits made in Period IX were unannounced.

OPM has undertaken some additional initiatives with placement providers to reduce the likelihood of maltreatment in care. Beginning in November 2009, OPM and DHS leadership have convened monthly "Provider G" meetings, modeled on the State's successful G9 and G2 meetings. The Provider G meetings use data related to maltreatment in care to prompt discussion of the contributing factors and the collaborative development of strategies to reduce incidents of maltreatment in care.

In December 2010, OPM began conducting "Safety Reviews" in addition to the Comprehensive Reviews that had previously been conducted during the site visits discussed above. A Safety Review (which takes about 90 minutes to complete) is a streamlined version of the Comprehensive Review (which typically takes about two days) that specifically focuses on child safety issues. During a typical Safety Review, one or more children are interviewed about how safe they feel in their placement environment; a caretaker is interviewed about how agency policies are implemented; the reviewer conducts a brief assessment of the facility's overall acuity mix; and a walk-through of the facility is conducted. The streamlined nature of Safety Reviews may enable OPM to have a more frequent presence in the field.

3. Other Practice/Process Requirements Regarding Placement Support

The Consent Decree contains a number of other requirements related to placement. These include restrictions on the capacity of foster and group homes; payment, training and support requirements pertaining to foster parents; and automating placement data.

a. Foster Home Capacity Restrictions

Section 5.C.4.e of the Consent Decree limits the capacity of foster homes to three foster children or a total of six children (including the family's biological or other children) absent the written approval of the Social Services Director unless these capacity limits are exceeded in order to accommodate the placement of a sibling group and there are no other children in the home. It also prohibits any placement that would result in more than three children under the age of three residing in a foster home, unless the children in question are a sibling group. Data from the foster home file review indicate that the state performed extremely well in meeting these requirements.

Of the 111 foster homes sampled that had a child in care on June 30, 2010, 109 (98%) were within the Consent Decree's capacity limits at that point in time. Of these 111 foster homes, 104 (94%) had three or fewer foster children in them on June 30, 2010 and five homes (5%) had more than three foster children but met the Consent Decree's sibling exception (they had sibling groups of more than three in placement and no other children in the home). With respect to the limit of six total children, 111 of the 111 foster homes that had a child in care on June 30, 2010 (100%) were within that limit. Finally, all of the foster homes (100%) with a child in care on June 30, 2010 had three or fewer children under the age of three in them. These capacity compliance rates are similar to the Period VIII rates of 97 percent within the overall capacity limits, 96 percent for three or fewer foster children, 98 percent for six or fewer total children and 100 percent for three or fewer children under the age of three.

b. Foster Care Maintenance Payments

Section 5.B.1. of the Consent Decree established specific foster care per diem rates to become effective July 1, 2005 (State fiscal year 2006). It also stipulates that the DHS Commissioner is to propose a periodic increase in foster care rates in subsequent fiscal years. For fiscal year 2008, a cost-of-living-type increase of approximately 3 percent in foster care per diem rates was proposed and implemented. The per diem rates that went into effect July 1, 2007 for fiscal year 2008 were: for children aged 0-6, \$14.60; for children aged 7-12, \$16.50; and for each child aged 13 and older, \$18.80. In the fiscal year 2009 DFCS budget request, the Commissioner again proposed a 3 percent cost-of-living adjustment to the foster care per diem rates. This request was not approved in the budget review process so the fiscal year 2008 rates remained in effect. For fiscal years 2010 and 2011 DHS, along with all other State agencies, was required to make widespread and substantial budget cuts in response to the State's declining revenues during the

economic recession. However, DHS successfully protected foster care per diem rates from these cuts. The above cited foster care rates are expected to remain in effect through FY2011.

Foster Parent Training and Support

Sections 5.C.6. and 11.D. of the Consent Decree stipulate that foster and pre-adoptive parents will receive uniform pre-service training prior to being approved or having a child placed in their home; and that they will be required to complete ongoing, annual training as part of the annual re-approval process. Section 5.C.6 further stipulates that foster parents will be able to contact DFCS 24 hour per day, seven days per week with their questions or concerns. The Accountability Agents found DFCS performance on these requirements to be excellent.

The foster home case record review found evidence in the files of 99 percent of the foster homes reviewed that the pre-service training requirements had been met. This is similar to the Period VIII rate of 100 percent.

With respect to ongoing annual training, documentation supporting that the requirements had been met was found in 93 percent of the files of the 127 foster homes sampled to which the requirement applied. This was about the same as the Period VIII rate of 94 percent, although the change is within the sample's margin of statistical error. With respect to the 24/7 phone support requirement, Resource Development staff in the counties report that they provide foster parents with the phone number of their assigned monitoring worker whom they can call during work hours, and the phone number of an on-call worker they can reach after hours.

F. Supervision of Contract Agencies

Sections 5.B.9, and 10.B. of the Consent Decree contain various provisions regarding provider reimbursement rates and contracts, specific language to be included therein, data submission, training, and the licensing and inspection of provider-supervised placement settings. The Office of Provider Management (OPM) has assumed an oversight role focusing on the quality of provider-delivered services and provider compliance with the terms of their contracts.

1. Reimbursement Rate Task Force

Section 5.B.2-7 of the Consent Decree stipulates that a Reimbursement Rate Task Force (RRTF) be established to recommend changes to the Level of Care system and to design a rate structure based on measurable outcomes for children.¹³⁰ These recommendations are contained in its Final Report delivered in January 2010¹³¹ and fell into the following four categories:

• Expand Partnerships with Behavioral/Mental Health;

¹³⁰ See pp. 14-15, paragraphs 2-7 of the Consent Decree

¹³¹ See Georgia Department of Human Services, Division of Family and Children Services, *Rate Reimbursement Task Force Final Report*, January, 2010.

- Maximize and Reinvest Resources to Achieve Child Welfare Outcomes;
- Acknowledge and Support Implications of Shifting Responsibility for Outcomes from Public Agency to Private Providers; and,
- Make Financial Decisions Based on Data.

In acting on these recommendations, the State reported preparing the contracts for the private agency performance based contracting approach for the state fiscal year beginning July 1, 2010 and working with the Department of Behavioral Health and Developmental Disabilities (DBHDD) on the Memorandum of Understanding (MOU) that details the scope and deliverables for child and adolescent mental health services for DFCS custody children. This MOU was also to be implemented starting July 1, 2010.

2. <u>Data Requested from Private Providers</u>

Section 9.C. of the Consent Decree stipulates that DHS must ensure that all private agencies that provide placements or services to children in foster care report accurate data to DHS at least every six months. The Office of Provider Management (OPM) reports that Child Placing Agencies (CPAs) use the GA+SCORE system to update data on the family composition and approval documentation for each foster home they supervise. The data, updated as necessary on a weekly basis, includes the following information for each CPA approved foster home:

- Home-by-home family composition;
- Status of completing foster parent training curriculum;
- Date of initial approval;
- Date of re-evaluation and whether it was completed timely;
- Date(s) of satisfactory criminal records check for all adults and whether it was completed timely;
- Completion of a CPS History check(s);
- Completion of Reference check(s);
- Completion of comprehensive drug screens; and
- Completion of comprehensive medical report(s) and whether it was completed timely.

OPM also reports that Child Caring Institutions (CCIs) report updated rosters of the children in their care to OPM through the GA+SCORE system each week. OPM reports that this information is validated by OPM through quarterly site visits and reviewing a sample of the files the CPAs and CCIs maintain.

To help maintain a high degree of compliance with State licensing and approval standards among CPA-supervised foster homes, OPM has asked Care Solutions (the GA+SCORE vendor) to develop two types of system e-mail alerts to be sent directly to CPAs (with a copy to OPM staff). The first is a set of Pre-Alerts at intervals of 60, 30, and 15 days to notify CPAs of pending lapses in individual foster home compliance with relevant approval standards. The

second is a weekly alert identifying the foster homes that are not in compliance and requiring immediate action to regain their compliance status.

3. <u>Case Management and Training</u>

Section 10.B.4 stipulates that private providers who provide placements for children in DFCS custody shall be "required, through contract provisions, to certify that employees providing case management or supervisory services for DFCS"¹³² meet certain criteria including educational credentials, pre-service training, certification, and on-going professional development. State efforts to ensure compliance with this requirement have proceeded slowly. The Accountability Agents believe this is because the process relies heavily on gathering information from providers, comparing it to the DFCS training and certification requirements and making provider-specific decisions. Multiple requests were made of the private agencies to provide the following information for creating a "baseline" from which to design the next steps to take in the process:

- A description or list of all case management activities being performed by the agency's employees;
- A list of employees performing case management;
- A list of the credentials of all employees' credentials that have contact with children;
- The names of the governing bodies through whom they are accredited; and,
- Their accreditation body's training requirements (initial and annual).

An initial survey of providers was extended beyond its initial goal date of March 2008 in an effort to obtain a 100 percent response from providers. By the end of Period IX, OPM indicates that the baseline remained about 70 percent complete.

During Period 11, OPM indicates it intends to reevaluate the need to complete the baseline and will determine what additional steps are needed to garner responses from all providers. This reevaluation will be predicated on OPM's contention that private providers provide supplemental case management support and that they do not replace DFCS case managers as the case manager of record. OPM contends that since private provider case managers do not bear ultimate case management responsibility for children in DFCS' custody, they are not obligated to meet the same training requirements as DFCS' case managers. The Accountability Agents will continue to monitor the State's efforts to achieve compliance with Section 10.B.4 of the Consent Decree.

4. The Office of Residential Child Care Continues to Conduct Unannounced Visits of Licensed Placement Settings

Section 9.D. of the Consent Decree specifies that ORCC will make at least one unannounced visit per year to all licensed Child Placing Agencies (CPAs) and Child Caring Institutions (CCIs)

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¹³² See Section 10.B. 4.a.-d. in the Consent Decree, pp 25 and 26.

to review all relevant aspects of their operations, and will also make annual unannounced visits to five percent of each licensed CPA's foster homes (or to all the foster homes supervised by CPAs with fewer than 10 total foster homes). The State reports that there were 243 licensed CCIs and 88 licensed CPAs in Georgia at the end of June 2010. This represents an eight percent decrease in the number of licensed CCIs and a three percent decrease in the number of licensed CPAs compared to Period VIII.

During the period January 1 through June 30, 2010, ORCC reports conducting 144 re-licensure inspections among CCIs and 47 re-licensure inspections among CPAs, a component of which was 212 unannounced foster home visits (representing 40 percent of the foster homes of the 47 CPAs inspected). While the 212 unannounced foster home visits represented a two-fold increase compared to the 102 such visits conducted during Period VIII, it should be noted that 18 of the 47 CPAs inspected during Period IX were agencies that had no active foster homes at the time of re-licensure (compared to 23 of 45 CPAs in Period VIII), either because they were "adoption only" agencies that do not provide foster care (nine agencies) or were previously licensed agencies that had no children in foster care placements during the review period (nine agencies). According to ORCC, the inspections and visits conducted during Period IX suggested a need for:

- Improved sharing of information at the time of placement between birth parents, foster
 parents, and other caretakers. ORCC is concerned that missing information may lead to
 poor assessment of child needs;
- Continued, diligent efforts to obtain timely background criminal records checks.
 Providers cite various backlogs and barriers to getting these checks performed timely; and,
- Improved documentation of the services and supports needed in placements to appropriately meet the needs of children. Provider agencies appear to be receiving more children with increasingly complex needs and they need to document that they have the services in place to meet those needs.

G. Improving Automated Support: SACWIS Implementation

The federally supported Statewide Automated Child Welfare Information System (SACWIS) is known as SHINES in Georgia. SHINES is now the database of record for Georgia child welfare, but remains challenged with data integrity problems such as duplicate records and incomplete reporting that often require additional reconciliation and verification to produce accurate reports.

The State reports continued enhancements to SHINES during Period IX. Major enhancements include:

• The Case Watch Page and User Defined Case Watch Report

The purpose of this page is to gather in a single location a targeted set of GA SHINES data

related to performance on key case quality metrics. Examples include response time, CPS and Foster Care contact standards, case plan review standards, and accurate and timely filing of TPR. The data for each metric is displayed, with potential warning conditions flagged in blue text and potential error conditions flagged in red. Hyperlinks are provided to the source data location for each metric to allow the user to view and/or correct the underlying pages (such as contact, case plan, etc.). The Case Watch User Defined Report generates a list of case warnings and errors.

• Contact Standards Page

The purpose of this page is to capture planned contact methods (face-to-face, telephone, or correspondence) and frequency of case manager contacts with parents/caretakers and children. It enables case managers to document reasons why they may have to deviate from standard policy.

• Guided Narrative for Contacts

Case managers now have the ability to organize the information gathered during their contacts with children, families, and caregivers by sub categories of Safety, Permanency, and Well-Being. They also can print a list of interview questions to guide their conversations with and about different ages of children. This format is not mandatory. It was introduced in mid-June 2010, therefore it was too early to see it evidenced in the Period IX case record review.

• Children 1st Referral Page

Case managers can now document all referrals to Children 1st in Georgia SHINES for Babies Can't Wait Services. There are two new features in Georgia SHINES to capture referrals and assessment outcomes: the Children 1st Referral Page and the Children 1st Referral Form. These new features are designed to improve the State's documentation and tracking of referrals. However, at this time there is no electronic link to Children 1st. Once a case manager enters the referral into SHINES, he/she must print the referral form and fax it to the county Children 1st office.

New Relationship: Legal Representation

Case managers now have the capability of identifying an individual as Guardians ad Litem, whether attorneys or non attorneys, or Court Appointed Special Advocates (CASA) and the date the assignment was made.

• Children with Overdue Healthchecks

This is a new report to assure children's needs and services are met while in care. The report displays children in DFCS custody who have not been given any health services, were overdue for ongoing health service(s), or will be due for one in the next 60 days. Although introduced in April 2010, this report was still undergoing some refinements in August 2010.

• Other Reporting Enhancements

The capability to produce several other reports was added during Period IX. These reports include Provider listing, facility list, and relative/non relative resource list.

H. Quality Assurance

The State and County quality assurance units are actively involved in monitoring and assisting the counties with the requirements of the Consent Decree. Staff from the Data Analysis, Accountability, Research and Evaluation (DAARE) Division's Program Evaluation and Analysis Section (PEAS) assists the Accountability Agents with all case record reviews. In addition to the staff devoted to conducting case record reviews for the Consent Decree, the PEAS unit also has staff that conducts Child and Family Service Reviews around the state in accordance with the State's federally required Program Improvement Plan (PIP). These reviews include interviews with case managers, foster parents, youth and birth parents and they assess the State's performance around the 23 items associated with the federal Safety, Permanency, and Wellbeing Outcomes. The results of these reviews are shared with county and state leadership. County quality assurance staff review visitation documentation and prepare monthly data reports for County leadership.

I. Maximizing Federal Funding 133

The Consent Decree contains requirements for DHS/DFCS to 1) maximize available federal funding through Titles IV-B and IV-E of the Social Security Act, and 2) not supplant state dollars for foster care services with any federal increase that results from the maximization efforts. A measure of a State's ability to claim federal reimbursement of foster care expenditures is known as the "IV-E penetration rate." The higher the rate, the more federal reimbursement is available to the state for administrative costs it incurs to provide safe and stable placements. As noted in previous monitoring reports, a consultant hired by the Department suggested the State should strive for a 45 percent penetration rate. As a whole, the State's penetration rate continued to increase modestly and the most recent measurement in June 2010 indicates the best rate since state fiscal year 2005. The trend is illustrated in Figure VI-6. To date the Accountability Agents have not found any evidence that the State is supplanting state dollars with increased federal reimbursement.

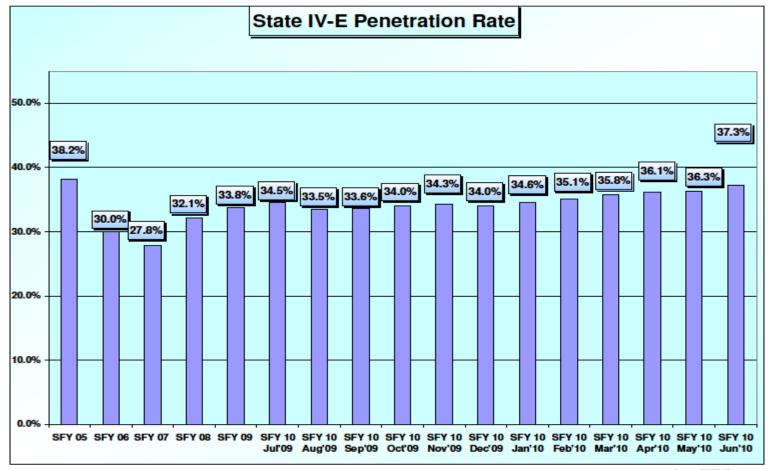
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¹³³ See Dimas, J.T. and Morrison, S. A. *Period I Monitoring Report, Kenny A. v. Perdue*, November 2006 for background on Title IV-E

¹³⁴ See p. 31, Section 14 of the Consent Decree

Figure VI-6 State IV-E Penetration Rates SFY 2005 through June 2010

N-E-6.0



Note: 2-mth delay in reporting, SFYs 2005 -2009 stated as of the end of each fiscal year. Based on payments processed, 10/26/2010

Source: COSTAR Data Analysis, Accountability, Research, and Evaluation

PART VII MISCELLANEOUS PROVISIONS

Section 20 of the Consent Decree contains the Agreement's miscellaneous provisions. Two provisions, contained in Section 20G, contain substantive data reporting requirements. These are covered in this part of the report.

A. Repeat Maltreatment Data

Section 20.G.1 of the Consent Decree requires DHS to provide the Accountability Agents data and information sufficient to enable them to verify data reported by the State on the number of children in DeKalb and Fulton Counties during the reporting period (other than those in foster care) that experienced repeat maltreatment. This is operationalized in the Consent Decree as follows:

- The number of children in each county who, during the reporting period, experienced substantiated maltreatment;
- The number and percentage of children in the first item who also experienced maltreatment during the preceding 12 month period. These data, as reported by the State, are reproduced in Table VII-1, below. The Accountability Agents' verification approach is discussed in Appendix B.

Table VII-1 Repeat Maltreatment							
Reporting Period: January 1, 2010-June 30, 2010							
		DEKALB	FULTON				
a) Number of children during the reporting period							
experiencing substantiated maltreatment		375	860				
b) the number of children in a) of this item who also							
experienced maltreatment during the preceding 12							
month period		14	31				
Percentage of children who had substantiated							
maltreatment during the preceding 12 months		3.7%	3.6%				

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¹³⁵ See pp. 45-46 of the Consent Decree,

B. Diversion Data

Section 20.G.2 of the Consent Decree requires DHS to provide the Accountability Agents data and information sufficient to enable them to verify data reported by the State on the number of children in DeKalb and Fulton counties during the reporting period (other than those in foster care) that experienced substantiated maltreatment within 11-365 days after being referred to DHS's diversion program. These data, as reported by the State for the period January 1, 2009 – June 30, 2009 are reproduced in Table VII-2, below. (Due to the 11-365 day follow up period for the diversion statistics, the diversion data reported here is for Period VII.) The Accountability Agents' verification approach is discussed in Appendix B.

Table VII-2 Diversions with Subsequent Substantiated Maltreatment						
Reporting Period: January 1, 2009 –June 30, 2009						
		DEKALB	FULTON			
a) Number of cases in each county during the reporting						
period in which there was a referral into DHS's diversion						
program		333	572			
b) the number of cases in a) in which there was						
substantiated maltreatment within 11-365 days after referral						
to DHS's diversion program		19	54			
Percentage of cases in which there was substantiated						
maltreatment within 11-365 days of referral into DHS's						
diversion program		5.7%	9.4%			

Appendix A Kenny A. v. Sonny Perdue Consent Decree Outcomes

Section 15 of the Consent Decree requires 31 outcomes. These outcomes are grouped in the categories of Safety, Permanency, Well-Being, and Strengthened Infrastructure

SAFETY

1. Children in Foster Care are Safe From Maltreatment

- Outcome 1: By the end of the first reporting period, at least 95% of all investigations of reports of abuse or neglect of foster children shall be commenced, in accordance with Section 2106 of the Social Services Manual, within 24 hours of receipt of report.
- Outcome 3: By the end of the first reporting period, at least 99% of all investigations of reported abuse or neglect of foster children during the reporting period shall include timely, face-to-face, private contact with alleged victim, including face-to-face contact with a child who is non-verbal due to age or for any other reason.
- Outcome 2: By the end of the first reporting period, at least 95% of all investigations of reported abuse or neglect of foster children shall be completed, in accordance with Section 2106 of the Social Services Manual, within 30 days of receipt of report.
- Outcome 5: By the end of the first reporting period, no more than 1.27% of all children in foster care shall be the victim of substantiated maltreatment while in foster care. By the end of the second reporting period, no more than .94% of all children in foster care shall be the victim of substantiated maltreatment while in foster care. By the end of the fifth reporting period, no more than .57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.
- Outcome 6: By the end of the second reporting period, 90% of all foster homes will not have an incident of corporal punishment within the previous six months. By the end of the third reporting period, 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.

PERMANENCY

2. Children in Placements Maintain Family Connections

- Outcome 7: By the end of the second reporting period, at least 70% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 90 days of entering foster care. By the end of the fifth reporting period, at least 95% of all foster children entering care shall have had a diligent search for parents and relatives undertaken and documented within 60 days of entering foster care.
- Outcome 16: By the end of the second reporting period, at least 70% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings. By the end of the fourth reporting period, at least 80% of all foster children who entered foster care during the reporting period along with one or more siblings shall be placed with all of their siblings.
- Outcome 19: By the end of the second reporting period, at least 70% of all children in

care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii). By the end of the third reporting period, at least 80% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii). By the end of the fourth reporting period, at least 90% of all children in care shall be placed in their own county (the county from which they were removed) or within a 50 mile radius of the home from which they were removed, subject to the exceptions in Paragraph 5.C.4.b(ii) and (iii).

- Outcome 21: By the end of the third reporting period, 75% of all the children with the goal reunification shall have had appropriate visitation with their parents to progress toward reunification. By the end of the fourth reporting period, 85% of all the children with the goal reunification shall have had appropriate visitation with their parents to progress toward reunification.
- Outcome 23: By the end of the second reporting period, at least 80% of children in the Class at a point in time during the reporting period who have one or more siblings in custody with whom they are not placed shall have had visits with their siblings at least one time each month during the prior 12 months in custody, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placement is more than 50 miles and the child is placed with a relative.

3. Children Achieve Permanency

(permanency= reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.)

Children in care at the time of the Consent Decree:

- Outcome 12: For children whose parental rights have been terminated or released and the child has an identified adoptive or legal guardian resource at the time of the entry of the Consent Decree, 90% shall have had their adoptions or legal guardianships finalized within six months after the entry of the Consent Decree.
- Outcome 13: For all children for whom parental rights have been terminated or released at the time of entry of the Consent Decree, and the child does not have an identified adoptive resource, 95% shall have been registered on national, regional, and local adoption exchanges, and have an individualized adoption recruitment plan or plan for legal guardianship within 60 days of the Consent Decree.
- Outcome 15: Permanency efforts (15/22): By the end of the second reporting period, at least 80% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed.

- By the end of the fourth reporting period, at least 95% of all foster children who reached the point of being in state custody for 15 of the prior 22 months, shall have had either (1) a petition for the termination of parental rights filed as to both parents or legal caregivers as applicable OR (2) documented compelling reasons in the child's case record why termination of parental rights should not be filed..
- Outcome 9: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the "24 backlog pool"): For all children in the 24 month backlog pool, by the end of the second reporting period, at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the third period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the 24 month backlog pool, who remain in custody at the end of the third reporting period, by the end of the fourth reporting period at least 40% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.
- Outcome 10: Children in custody for more than 24 months and still in custody upon entry of the Consent Decree (children in the "over 24 backlog pool"): For all children in the over 24 month backlog pool, by the end of the second reporting period, at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the over 24 month backlog pool, who remain in custody at the end of the second reporting period, by the end of the second reporting period, at least 35 percent shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship. For all children in the over 24 month backlog pool, who remain in custody at the end of the third reporting period, by the end of the fourth reporting period at least 35% shall have one of the following permanency outcomes: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.

Children entering custody after Consent Decree:

- Outcome 8a: Of all the children entering custody following the entry of the Consent Decree, at least 40% shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification, permanent placement with relatives, permanent legal custody, adoption, or guardianship.
- Outcome 8b: Of all the children entering custody following the entry of the Consent Decree, at least 74% (1) shall have had one of the following permanency outcomes within 12 months or less after entering custody: reunification or permanent placement with relatives; or (2) shall have had one of the following permanency outcomes within

24 months or less of entering custody: adoption, permanent legal custody, or guardianship.

Permanency actions after Consent Decree:

- Outcome 11: By the end of the second reporting period, for all children whose parental rights have been terminated or released during the reporting period, 80% will have adoptions or legal guardianships finalized within 12 months of final termination or release of parental rights.
- Outcome 4: By the end of the second reporting period, no more than 8.6% of all foster children entering custody shall have re-entered care within 12 months of the prior placement episode.
- **Outcome 14**: No more than 5% of adoptions finalized during the reporting period shall disrupt within the 12 months subsequent to the reporting period.

Court reviews of permanency actions

- Outcome 27: By the end of the second reporting period, at least 80% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review. By the end of the third reporting period, at least 85% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the six-month period following the last review. By the end of the fourth reporting period, at least 95% of foster children in custody for six months or more shall have either had their six-month case plan review completed by the Juvenile Court within six months of their prior case plan review, or DFCS shall have submitted the child's six-month case plan to the Juvenile Court and filed a motion requesting a six-month case plan review within 45 days of the expiration of the sixmonth period following the last review.
- Outcome 28: By the end of the second reporting period, at least 95% of foster children in custody for 12 or more months shall have either had a permanency hearing held by the Juvenile Court within 12 months of the time the child entered foster care or had his or her last permanency hearing, or DFCS shall have submitted the documents required by the Juvenile Court for and requested a permanency hearing within 45 days of the expiration of the 12-month period following the time the child entered foster care or had his or her last permanency hearing.

WELL BEING

4. Children Experience Stable Placements and Worker Continuity.

- Outcome 17: By the end of the second reporting period, at least 86.7% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody. By the end of the fourth reporting period, at least 95% of all children in care shall have had 2 or fewer moves during the prior 12 months in custody.
- Outcome 18: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had 2 or fewer DFCS placement case managers during the prior 12 months in custody. This measure shall not apply to cases that are transferred to an adoption worker or Specialized Case Manager; case managers who have died, been terminated, or transferred to another county; or case managers who have covered a case during another case manager's sick or maternity leave.
- Outcome 20: By the end of the second reporting period, at least 95% of children in care at a point in time during the reporting period shall have had at least one in-placement visit and one other visit, as defined in Section 5.D, each month by their case manager. During the prior 12 months in custody.
- Outcome 22: By the end of the second reporting period, at least 90% of all children in care at a point in time during the reporting period shall have had visits between their DFCS placement case manager and their foster parent, group care, institutional or other caretaker at least one time each month during the prior 12 months in custody.

5. Children and Youth Receive the Services they Need

- Outcome 24: By the end of the second reporting period, the percentage of youth discharged from foster care at age 18 or older with a high school diploma or GED will increase over baseline by 10 percentage points. By the end of the fourth reporting period, that percentage shall increase by an additional 10 percentage points.
- Outcome 30: By the end of the second reporting period, at least 80% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan. By the end of the fourth reporting period, at least 85% of children in care shall not have any unmet medical, dental, mental health, education or other service needs, according to the service needs documented in the child's most recent case plan.

STRENGTHENED INFRASTRUCTURE

6. Capacity to Support Placement Process

• Outcome 25: By the end of the first reporting period, at least 85% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the second reporting period, at least 95% of all foster children in custody at a point in time during the reporting period shall be in placements that are in full approval and/or licensure status. By the end of the fourth reporting period, at least 98% of all foster children in custody at a point in time

- during the reporting period shall be in placements that are in full approval and/or licensure status.
- Outcome 31: By the end of the second reporting period and continuing thereafter, no more than 10% of all children in foster homes shall be placed in foster care homes that exceed the capacity limits referenced in Section 5.C.4.e. of the Consent Decree, concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three(3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children.

7. <u>Timely and Complete Court Orders</u>

- Outcome 26: By the end of the second reporting period, at least 85% of foster children in custody at a point in time during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act. By the end of the fourth reporting period, at least 95% of foster children in custody at a point in lime during the reporting period shall have all applicable language in court orders necessary to assess qualification for federal funding under Title IV-E of the Social Security Act
- Outcome 29: By the end of the third reporting, no more than 5% of all children in custody of DHS/DFCS for 12 months or more shall have lapse of legal custody within the prior 13 month.

Appendix B Methodology

The Accountability Agents used several methodologies to arrive at the judgments, conclusions and recommendations contained in this report: (i) review of written materials and data supplied by the State and Counties; (ii) interviews; (iii) extensive case record reviews; and (iv) strategic engagement of State and county personnel for pro-active, hands-on monitoring through biweekly meetings known as the "G2." This appendix describes these data sources and methods and also catalogues and explains interpretation and measurement issues that were addressed and resolved during the first reporting period.

A. Data Sources and Methodology for Measuring State Performance in Reporting Period IX

Four primary sources of information were used to assess the State of Georgia's progress during Period IX, January-June 30, 2010. The challenge for data collection and analyses in Period IX was the continued need to use both SHINES, the statewide automated child welfare system and paper files. Fulton and DeKalb Counties implemented SHINES in June 2008 and ended all new data entry into the previous system, IDS, on May 28, 2008. Children who entered custody before the conversion to SHINES may have extensive paper files and even those entering after the switch to SHINES have paper files with external documentation that has not been scanned into SHINES. The timeliness of scanning external documentation into SHINES appears to be improving but record reviews still generally need both the paper records and SHINES access to complete all data collection.

1. <u>State Data Systems</u>

The first source of information is the DFCS administrative data that is housed in Georgia SHINES.

a. Addressing Data Integrity Issues

Like all information systems, the accuracy of SHINES data is a function of the accuracy with which data are coded and input into the system. Most identified discrepancies appear to be caused by human error. Typically, mistakes in interpretation and coding of the facts contained in the case record or data entry result in erroneous data being entered into the system.

SHINES has more "edit-checks" than its predecessor system. These edit-checks help to limit some the errors. In addition, the Accountability Agents have direct access to SHINES which allows for direct inquiry into cases to confirm or reject the reported information. However, the Accountability Agents continue to be selective about which data from SHINES to rely on for assessing compliance with the Consent Decree's provisions. Most of the data in this report was generated by file and case record reviews conducted specifically for this purpose.

2. Document Review and Interviews

During the monitoring period, the Accountability Agents collected written reports and materials regarding foster care and adoption policy, budgets, licensing, provider reporting, worker training and certification. At the local county level, interviews included supervisors and case managers responsible for investigating reports of maltreatment in care, placement, and foster parent training and support. The Accountability Agents worked directly with State and County Quality Assurance staff to analyze data collected and tracked at the local level such as caseloads, determinations for children in care 15 of 22 months, and staff certification.

3. Structured Case Record Reviews

A second source of information is systematic case record reviews (CRRs.) Three case record reviews were conducted: 1) investigations of maltreatment in care; 2) foster home approval and capacity, and 3) children in foster care placements who entered foster care at anytime up to December 30, 2009. Table B-4 summarizes sample characteristics of each review. The following discussion provides more detail on the sampling approach, the review instruments development, review logistics, reviewer qualifications and quality assurance, and analytical process.

a. Sampling Approach

As indicated in Table B-1, 100 percent of the investigations of maltreatment in care completed between January 1 and June 30, 2010 were read. Therefore, errors in these results would reflect case record reviewer differences or errors rather than differences within the universe.

For the two other case record reviews, random samples were drawn from two different universes:

- All foster homes that had a DeKalb or Fulton child placed in the home at anytime between January 1 and June 30, 2010. This included private agency supervised homes as well as DFCS supervised homes.
- All foster care cases (children) active in DeKalb and Fulton counties any time between January 1 and June 30, 2010.

For each of these reviews, samples were drawn such that the findings would have a +/- 7% error rate at a 95% confidence level. This level of precision is for frequencies reported for the sample as a whole. Data provided on subsets of the sample are less precise; where appropriate, separate margins of error for the different subsets have been calculated and noted in the body of the report. As described later in this appendix, a certain number of records included in the original samples could not be read and were rejected based on pre-determined criteria. To achieve the minimum number of records for each review, small additional, random replacement samples were drawn.

Table B-1
Case Record Review Sample Size and Associated Margin of Error

Target of Review	Universe of cases	Desired Maximum Sample Size	Actual Number Reviewed	Margin of Error
Maltreatment in Care Investigations	111	111	82	+/- 0.0 percent
Foster Homes	669	160	161	+/- 7 percent
Children in Foster Care	1762	180	180	+/- 7 percent

b. Instrument Design

Three separate data collection instruments were developed, one for each sample. They were developed in conjunction with the DFCS Program Evaluation and Analysis Section (PEAS) and consultants from Georgia State University (GSU) schools of public administration and social work. The instruments were field tested and reviewed by Counsel for the Plaintiffs and by the State; many changes recommended by the reviewers were incorporated into the final instruments. As is typical with case record reviews, reviewers encountered some problems with some of the questions. Learning from each iteration is incorporated into the next case record review.

c. Data Collection Schedule and Logistics

Planning for the data collection effort began in June 2010 with discussions with PEAS and GSU regarding formatting data instruments for efficient data capture and analysis. As in previous periods, each of the review guides was set up as a SAS-based form for electronic information entry directly into a data base through a GSU secure web site. This eliminated a separate data entry step. However, it did rely on the ability of the reviewers to be consistently linked to the internet. Occasional connectivity problems interfered with some data entry. This required some work to be repeated. As the reviews progressed, portions of guides were revised as necessary to accommodate unforeseen circumstances found in the records. In addition, the reviewers had the capability to make extensive comments to explain responses and provide more background on the case.

Data collection for the maltreatment in care investigations and foster care reviews began in July 2010 and the foster home file review in October 2010. Records selected from private agencies were reviewed at the respective private agencies. The remaining records for investigations, foster care, and DFCS supervised foster homes were reviewed at the county offices where the active cases are maintained. Closed records were brought to these sites for review.

d. Review Team Qualifications and Training

Nine PEAS staff were the primary case readers. These staff members average 25 years of experience in DFCS and are very familiar with the DFCS's policies and practices. They were selected for this task based on their skills, experience, and knowledge.

There were training sessions before commencing each record review. The training consisted of reviewing and discussing the wording and meaning of each question on the data collection instruments. Additional changes were made to the guides as a result of these discussions. Given the pace of the necessary semi-annual reporting schedule, it has been difficult to extend the training time. On-going training between reviews is taking place.

DFCS reviewers were provided with digital files containing a "Handbook" and a copy of the Consent Decree for reference. In addition, reviewers had personal copies of the instruments in hard copy on which they made notations regarding the discussions about definitions, responses, and where within the case records to locate certain pieces of information.

e. Quality Assurance

Reading accuracy and inter-reader reliability was addressed by an extensive quality assurance process that included constant "calibration" and a "second read" of the records. Two senior PEAS reviewers were designated team leaders. They were responsible for responding to reviewer questions regarding clarification or how to interpret information contained in the record. These team leaders shared with one another the questions being asked and the responses they were giving to reviewers so as to assure consistency. In this way, patterns among questions were monitored and instructions were clarified for all reviewers as necessary. Team leaders reviewed each reviewer's work at the completion of each review. Finally, reviewers were encouraged to provide explanatory comments for their responses if they felt the situation they found did not adequately fit the question being asked or additional detail for some critical questions was desired. These comments were invaluable to the Accountability Agents as they reviewed the data collected and made judgments about response recodes when necessary.

An additional level of Quality Assurance (QA) was provided by the Georgia State University (GSU) project coordinator and four research assistants with master's degrees in social work or a related field and backgrounds in child welfare and case record review. The GSU QA team reviewed the following percentages of case records: 43 percent of Maltreatment in Care Investigations cases; 42 percent of Placement cases; and 33 percent of foster homes cases. The records were randomly selected from each reviewer's completed set. Review guides that had different responses from the GSU QA staff and the PEAS reviewers were set aside, investigated and resolved as possible by the GSU project coordinator and PEAS team leaders, often in consultation with the Accountability Agents, and changes were made to the data set as

necessary. Time was set aside in the schedule to review the completed review guides in question and do any necessary clean up.

To calculate inter-rater reliability GSU selected variables from all three files (CPS Investigations, Foster Homes, and Foster Care) where both the reviewers and the QA reviewers had access to the same information in the case file. Each response was not tested for inter-rater reliability. Correlations between the reviewer results and the QA reviewer results were calculated using Microsoft Excel and a Cronbach's Alpha statistic was calculated for each. Cronbach's Alpha measures how well a set of items, in this case the reviewer responses and the QA reviewer responses, correlate or match. Cronbach's Alpha is not a statistical test - it is a coefficient of reliability (or consistency). Note: when a Cronbach's Alpha is used in a Social Science research situation, like the *Kenny A*. case review, a reliability coefficient of .70 or higher indicates that there is an almost zero probability that the reviewer and QA reviewer would achieve these results by chance.

The Cronbach's Alpha coefficients for each of the data sets are provided in Table B-2, below. All measures are above the threshold of .70.

Table B-2 Cronbach's Alpha Measure of Inter-Rater Reliability for Each Case Record Review

Sample	Cronbach's Alpha Measure
CPS Investigations	.974
Foster Homes	.998
Foster Care	.994

A final check on quality came during the analysis. When the analysis identified a discrepancy that could not be explained by the reviewer comments, the Accountability Agents requested a reviewer to go back to the file in question and collect more specific information on which to make a judgment or the Accountability Agents looked directly into the SHINES record.

f. Data Analysis

Microsoft Excel was used for analyzing the collected data and calculating inter-rater reliability. GSU staff assisted in creating descriptive statistics for the Accountability Agents.

g. Records in Sample that Were not Read

Not all records included in the original samples were reviewed. Before the reviews began, we a set of reasons for why a case record may not be read was established. Table B-3 provides a summary distribution of the cases that were not read with the reasons for not reading them. Files that could not be located for the review were reported to county leadership.

Table B-3
Case Records Drawn for Original Sample, Not Reviewed

Target of	Number of cases sampled but not read as part of the review and				
Review	reason why they were not read				
	Investigation not completed between January 1 and June	0			
	30, 2010				
	Coding error, this is not a maltreatment in care	6			
	referral/report				
Maltreatment	Case was "opened on report" (no maltreatment was	1			
in Care	alleged)				
Investigations	Case record cannot be located	0			
	No child in the legal custody of Fulton and Dekalb	2			
	Counties was involved in this report				
	Other	7			
	Total	16			
	Coding error in SHINES, this home was not open	0			
	between January 1 and June 30, 2010				
	No children were placed in this home between January 1 and June 30, 2010	0			
	No children in the legal custody of Dekalb or Fulton	0			
	County DFCS were placed in this home between January				
Foster Homes	1 and June 30, 2010				
	Private agency did not supply necessary files	0			
	Case record cannot be located	0			
	Oversight of foster home transferred to another county	0			
	Other	6			
	Total	6			

Table B-3, continued
Case Records Drawn for Original Sample, Not Reviewed

Target of	Number of cases sampled but not read as part of the review and					
Review	reason why they were not read					
	Child not in foster care anytime January 1 and June 30, 2010	0				
	Child not in the adjudicated legal custody of Fulton or Dekalb counties January 1 and June 30, 2010	0				
	Child's file has been sealed as result of finalized adoption	17				
	Child living in another state, file has insufficient information to review adequately.	1				
	Child age 18 before January 1, 2010.	1				
Children in	Case timeframe too short (child in care 8 days or less)	0				
Foster Care	Case record cannot be located.	0				
	Case record provided too late to be included in review.	0				
	Incomplete case file provided – missing important volumes.	0				
	Child placed out of state through ICPC the entire review period.	4				
	This is a duplicate of child in sample.	0				
	Other	1				
	Total	24				

4. Meetings with the management teams of Fulton and DeKalb County DFCS (G2)

The Accountability Agents met once to twice each month with Fulton and DeKalb directors, senior management, supervisors and case managers, and senior central office staff. These meetings allowed for hands-on monitoring and data verification. Specifically, the purpose of the **G2** has been fourfold:

- Engage Fulton and DeKalb County senior management teams in tracking their own progress in achieving the Consent Decree outcomes;
- Have "real-time" communication about successes and areas of concern regarding the progress of reform;
- Establish a clear understanding of the relationship between practice, process, and infrastructure enhancements and outcome achievements; and,
- Integrate the Consent Decree outcomes and required practice and process into other initiatives the Counties are engaged in, such as the Program Improvement Plan (PIP) to help develop and articulate the "big picture" of reform.

The process during the G2 starts with using administrative data to prompt the group to develop hypotheses about underlying problems that threaten the achievement of critical outcomes, and about potential solutions. Fresh data that shed light on the validity of those hypotheses are then brought back to a subsequent meeting. Based on the group's examination and discussion of the fresh data, a given hypothesis may then be rejected, accepted, or refined and retested. For hypotheses that are accepted, in-depth "So What?" conversations take place during which best practices among field staff may be highlighted, operational strategies that leverage the learning that has transpired are devised, resource allocation decisions may be made by DFCS leadership, and parties responsible for implementation identified.

B. Interpretation and Measurement Issues

The following discussion highlights the interpretation and measurement issues that arose during the previous reporting periods that were accepted by the parties and also apply to Period IX.

1. Safety Outcomes

Outcomes 1, 2, and 3 use the same "By the end of the first reporting period..." language used in Outcome 5, but the standard remains fixed at the period 1 level for all subsequent reporting periods. These outcomes, therefore, do not raise the same point-in-time vs. cumulative measurement issue raised by Outcome 5.

Section 12.A. of the Consent Decree requires that maltreatment in care investigations be conducted by trained child protective services staff. As indicated above, DFCS policy regards the commencement of an investigation to be the point at which an alleged victim child is seen by the investigator. For measurement purposes Outcomes 1 was operationalized as the percentage of cases in which any alleged victim had face-to-face contact with a CPS investigator or police within 24 hours. Outcome 3 was operationalized as the percentage of alleged victims that had face-to-face contact with a CPS investigator within 24 hours.

Outcome 5 was operationally defined as the percentage of children in care during the reporting period that experience maltreatment in care during the reporting period. Performance was measured by a cumulative look across the entire reporting period, not just at one point in time during the reporting period. The interpretation and measurement issues considered are described below.

• The interpretation issue centers on the meaning attributed to the words "...shall be the victim of substantiated maltreatment while in foster care." This could be interpreted to mean that any child who had *ever* experienced maltreatment while in foster care (even if it was years ago) should be counted in this percentage. Although this is perhaps the most obvious and literal

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¹³⁶ See p. 28 of the Consent Decree

interpretation of these words, such an interpretation would be unhelpful to the cause of improving Georgia's child welfare system.

A central precept of the Consent Decree is that it will bring about improvements in Georgia's child welfare system. Interpreting this measure in a way that places it beyond the influence of the State's *current and future* efforts to improve would be incongruous with this precept.

• The measurement issue inherent in Outcome 5 derives from the words "By the end of the [number] reporting period..." Taken literally, these words seem to suggest that this is a point-in-time measure to be taken on the last day of the first reporting period. In other words, what percentage of the children in care on December 31, 2007 had experienced maltreatment while in care? In the child welfare field, such a point-in-time approach is a common method of obtaining a census of children in care. The use of the word "By" could be construed to grant the state the entire length of the reporting period to produce improvements in this outcome.

However, operationalizing this as a point-in-time measure might create perverse incentives (i.e., schedule children who had experienced maltreatment in care for discharge before the end of the month). Although it is not believed the State would actually use this approach, the Accountability Agents believe that when the Consent Decree language is less than definitive, it should be construed to avoid establishing incentives that are inconsistent with spirit of improving Georgia's child welfare system.

Outcome 6 operationalizes the Consent Decree's use of the phrase "...all foster homes...." ¹³⁷ as all foster homes with a class member in custody during the reporting period for measurement purposes.

2. Permanency Outcomes

Outcome 4 is measured using a calculation based on data from the State's information system (IDS) and Georgia SHINES. The Accountability Agents used several steps, described below, to verify the information from SHINES.

First, the State generated a list from SHINES of all children who entered custody between January 1 and June 30, 2010. This list included several data elements including the dates of current removal and previous exit if the child had been in custody previously and an indicator as to whether the current episode represented a re-entry within 12 months of the previous exit. Second, county Quality Assurance staff compared this list to the data they maintain about exits and entries and corrections needed to SHINES. Using this information, the counties identified discrepancies requiring further research or additional children with re-entries in the period. In

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¹³⁷ Ibid, p. 32

a third step, the Accountability Agents used the record review of the 180 children in the foster care sample to identify children in the sample who had experienced re-entry within 12 months of their last foster care episode and compared the findings to the list generated from SHINES. Finally, the Accountability Agents compared county logs of entry Family Team Meetings in Period IX to the list of re-entries.

Outcome 7 considers the policy requirements and intent, the flexibility allowed in policy to tailor the search to individual circumstances, and the outcome's language, applies the following standards to determine if a diligent search was "undertaken and documented":

- 1. A "minimum full search" included evidence in the reviewed case files of the following minimum activities:
 - a. Children were interviewed, excluding children under the age of four under the presumption that the child would not have sufficient communication skills to provide useable information.
 - b. Family members were interviewed.
 - c. Other relatives and/or significant others involved in the family were contacted, whether it was to obtain more information or to assess placement suitability.
 - d. There was evidence that the minimal information gathering produced identified potential placement resources for the child.
 - e. There was evidence that potential resources were contacted.
- 2. If the some of the above steps were missing or not clearly documented, but the child was placed with relatives or such placement was pending (waiting for ICPC approval, home evaluation approval, etc), it was presumed to be an "abbreviated search."
- 3. Documentation included DFCS forms for recording basic family information, case narratives, Comprehensive Child and Family Assessments (CCFAs), Family and Multidisciplinary Team Meeting notes, case plans, county and state forms for documenting diligent searches, and court documentation.

According to DFCS policy, "at a minimum," the case manager is to conduct the diligent search by identifying, the child's parent(s), relatives, and "other persons who have demonstrated an ongoing commitment to the child." Search steps include:

- Interviewing the child and his/her family about extended family members and other significant individuals in the child's life;
- Reviewing the basic information worksheet (Form 450) initiated during the investigation of maltreatment allegations;
- Using the Family Team Meeting, case planning meetings, or Multi-disciplinary Team Meetings as an opportunity to identify individuals and collect contact information;
- Reviewing the Family Assessment portion of the Comprehensive Child and Family Assessment (CCFA);
- Checking various DFCS data systems;

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¹³⁸ Social Services Manual, Chapter 1000, Section 1002.3.1 Georgia Department of Human Services

- Contacting other individuals involved with the family such as day care or school staff, court appointed special advocates, ministers, etc.
- Making direct contact with individuals to determine their interest and suitability as a placement resource.

In practice, these "steps" are not mutually exclusive, sequential, or, in some circumstances possible. For example, Family Team and other meetings provide an opportunity for interviews and contact with family members and others of significance to the child. In addition, direct contact with individuals to assess placement interest and suitability may lead to information about other potential resources. Not all of these activities are easily documented in case records, such as the act of reviewing documents or checking data systems. Furthermore, DFCS policy also stipulates that the individual circumstances of the case "may dictate how and to what extent the search is conducted." Therefore, these steps may be abbreviated at the caseworker's discretion if, for example, a child is quickly reunified with the family member from whom he or she was removed or quickly placed with a relative or other family resource.

This outcome is measured using a case record review of a sample of children in foster care during the period.

Outcomes 8, 9, and 10 performance reported for outcomes 8, 9, and 10 is based on IDS /SHINES data and documentation of relatives who have signed "an agreement for long-term care." ¹⁴⁰ The outcome data from IDS was not independently validated by the Accountability Agents. However, the Accountability Agents have direct access to SHINES and did use this capability to review the status of cases to confirm the State's reporting. The Accountability Agents also participate with County leadership in monthly review of the data and the State's efforts to safely discharge children to permanent families. Furthermore, removal dates and discharge dates were collected for children in the foster care sample and compared to what was in SHINES and any discrepancies were reviewed and discussed with DFCS.

Outcome 11 is similar to the Federal measure¹⁴¹ for expeditious adoption following termination of parental rights and method used to calculate this outcome is consistent with the Federal method. This outcome is measured using a report from SHINES that identifies all children whose parents had their parental rights terminated 12-18 months prior to the end of the reporting period and their adoption status as of the end of the reporting period. The report has the calculated elapsed time between the final TPR action and adoption finalization.

Outcome 14 includes those children who return to the custody of DFCS/DHS after their adoption has been finalized. This includes children who are in the temporary custody of the

¹³⁹ Social Services Manual, Chapter 1000, Section 1002.3.2 Georgia Department of Human Services

¹⁴⁰ See p. 3, Definition T, of the Consent Decree

¹⁴¹See either of the following Federal internet sites: http://www.acf.hhs.gov/programs/cb/cwmonitoring data_indicators.htm;or

http://www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/statewidetwo.htm#Toc140565117.

Department while reunification is attempted and those children who return to the Department's permanent custody because the adoption has been dissolved.

Measurement issues include timing and case identification. In terms of timing, the first cohort of children for whom this outcome can could be measured were those children who were adopted during the first reporting period, October 27, 2005 to December 31, 2006. In terms of case identification, it is difficult to link case records of children who are returning to foster care from an adoption to their previous case records because key identifying information has changed and adoption records have been sealed. An adopted child always receives a new last name and social security number. In some cases, the child also receives a new first name. In addition, adoptive parents may live or move out of Georgia after the adoption and the disruption or dissolution may occur in another state. Furthermore, children who are discharged to relatives for the purposes of private adoption will not necessarily be reflected in the case files or data system as an adoption. Case identification, therefore, currently relies on a case manager's familiarity with the family through on-going post adoption communication, and comparing adoption dissolution actions that occur in the state to the adoptions that occurred in the state. In March 2007, the State established new procedures for collecting information about prior adoption activity as children enter care. This change requires case managers to record in IDS/SHINES, 1) whether the child was ever adopted, 2) type of adoption – public or private, 3) country of adoption, 4) state of adoption, and 5) if a Georgia adoption, the county of adoption.

Outcome 15 is measured using county tracking systems. Each county has a data base for tracking children who have reached or are approaching their 15th month in care within the most recent 22 months. The counties add to this data base by extracting information regarding length of stay, "TPR status," and compelling reasons from SHINES. County data, therefore, is used as the primary source of information to evaluate the continued progress on this outcome.

The Accountability Agents review and validate the county data as follows.

- First, independent of the county data, the case record review of children in foster care collects information about permanency plans and barriers. This information is compared to the tracking information.
- Second the Accountability Agents review all the compelling reasons cited in the data bases and compared them to Federal and State policy guidance. This effort frequently involves requesting more information about the circumstances of the case that led to the compelling reason.

Final measurement of the State's performance uses the population of children to whom the Federal regulatory exceptions did not apply. In other words, if a child was placed with a relative or there was a judicial indication in the child's record that the State had yet to make "reasonable efforts to reunify the family," the child was removed from the analysis.

The counties have adopted a classification system of compelling reasons or other exemptions from moving to termination of parental rights.¹⁴² The classifications used by both counties are as follows:

- 1. There is a permanency goal of return home, approved by the Court and the child is expected to be reunited with parents within 6 months.
- 2. The child is a specified age (14) or older and objects to being adopted.
- 3. The child has severe emotional or behavioral problems or a serious medical condition and reunification remains an appropriate goal.
- 4. The child has a permanency goal other than adoption and is expected to achieve that goal within 12 months of establishing the goal.
- 5. Parents are deceased, or have voluntarily relinquished rights.
- 6. A petition for adoption has been filed with the Court.
- 7. The parent is terminally ill, does not want parental rights terminated and has designated the child's present caretaker, with the caretaker's agreement, as the child's permanent caretaker.
- 8. The child is an unaccompanied refugee minor as defined in 45 Code of Federal Regulations 400.11.
- 9. There are no or insufficient legal grounds for filing a TPR because required reasonable efforts have not been made.
- 10. There are international legal obligations or compelling foreign policy reasons that would preclude terminating parental rights.
- 11. The child is a child of a teen mother who is also in the State's custody.
- 12. Other circumstances make termination of parental rights at this time inappropriate.

Outcome 16 uses the definition of, "children who entered foster care ... along with one or more siblings" those siblings who entered on the <u>same day</u>. In Periods II and IV, a targeted case record review was used to measure the performance on this Outcome. In Period VI and subsequent periods, the Accountability Agents were able to use data produced for the whole population from SHINES.

The Accountability Agents were able to change the measurement approach in Period VI because of SHINES implementation. At the request of the Accountability Agents, the State produces a report containing the list of all children who entered foster care in Period IX. This information includes the number of siblings a child had in custody and how many siblings were placed with the child. The Accountability Agents conduct on-line reviews or "look ups" of the SHINES file of each child with a sibling who had entered care during the period. Through this process, the Accountability Agents are able to confirm the number of siblings and placement settings of sibling group members. This also allowed identification of reasons for separate placements if sibling groups were separated.

¹⁴² Adapted from *Criteria and Procedures for Determining a "Compelling Reason" Not to File A TPR*, Discussion Paper and Approved Recommendations prepared for the Child Welfare Leadership Team of the District of Columbia by the Center for the Study of Social Policy, Washington D.C., March 2005.

Outcome 19 is measured through information collected through a record review of approximately 180 randomly selected children. When the record does not indicate that the child was placed within the county, either DeKalb or Fulton, from which he or she was removed, the case record review team used the on-line program "MapQuest" to determine "shortest drive time distance" between the address of the child's placement and the address of the home from which the child was removed. This is the default option in "MapQuest" and is generally used by the placement facilitators and case managers to determine the placement distance.

Outcome 21 language refers to "appropriate visitation" between children and parents "to progress toward reunification" where the goal is reunification. The issues with this language include 1) who has a permanency goal of reunification; 2) with whom is reunification intended; and 3) what is appropriate visitation to make progress toward reunification.

Permanency goals are established by court order with consideration of DFCS recommendation. During the first 12 months, before the first permanency hearing, the presumed goal is reunification or a concurrent goal of reunification and another goal such as adoption or custody to a relative. This outcome is measured using a case record review of a sample of children in foster care during the period. For purposes of this outcome, children with a presumed goal of reunification (in care less than 12 months) are included in the analysis. Exceptions would be instances where the Department is clearly not working toward reunification given case circumstances such as abandonment. Children with concurrent goals, presumed or court ordered, are also included in the analysis unless it is clear in the case documentation that the Department is working toward achieving the alternate permanency goal.

In some cases, the child has the goal of reunification, but the parent is not always available to visit regularly or take advantage of the visiting opportunities. Missed visits are often supporting evidence to change the goal from reunification in order to proceed with another permanency plan. Reunification may not be the appropriate goal and the department is working to change it.

Although the Consent Decree specifies visitation between parent(s) and children, in some cases the child was removed from a relative and that relative is the reunification resource. In these cases, the record review considered the reunification resource equivalent to the parent(s).

DFCS policy and practice provides a frame of reference for determining "appropriate" as it establishes several requirements with regard to parental-child visitation. First, "if possible" a child should have a family visit in the first week after removal.¹⁴⁵ Second, a plan for parental

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¹⁴³ See p. 36, Outcome 21, of the Consent Decree

¹⁴⁴ Ibid

¹⁴⁵ Social Services Manual, Section 1009.3 Georgia Department of Human Services

visitation should be a part of every Case Plan. Hird, "when agency resources allow, visitation shall be scheduled at two-week intervals unless the court has specified another visitation arrangement." Finally, established practice in the field requires a minimum of monthly visits when "agency resources do not allow" and the court does not dictate otherwise. Given these policy requirements, the case record review was designed to gather information on both the planned schedule for visitation and the actual visitation. In the absence of a schedule dictating otherwise the performance of the state was assessed according to the minimum monthly visitation standard. In addition, the Accountability Agents reviewed the cases to further assess the appropriateness of the visitation given the individual case circumstances. For example, a monthly visit might be missed due to a parent's incarceration, but the parent reestablishes contact after exiting jail and begins again to work toward reunification.

Measurement issues included the limitations of case documentation, how to address those children living with relatives and those children who were reunified during the reporting period but whose records contained little or no documentation relating to parent child visits. Case documentation often does not include precise dates of visits because case managers are not always present for the visits. The visits may be supervised by other DFCS staff or private agencies or foster parents. Visits may also be unsupervised as the case progresses toward reunification. However, case managers may record what they learn from foster parents, parents and children about the visits. As a result, in a portion of the cases the reviewers can often determine "regular" visitation is occurring because of the information shared, but cannot match the pattern of visits to the schedule established in the case plan or Family Team Meetings. That is, there may not be a reference to an exact date of the visit, but a reference to the visit occurring within a span of time, such as "last week." Or, another example of notation may be "children have unsupervised visits every weekend." Such cases were counted toward the achievement of the outcome.

A portion of the children in the sample live with relatives. These circumstances may allow for frequent visitation between parents and children. Again, however, the dates and frequency may not always be reported to the case manager and, therefore, documented. These children were included in the denominator for measurement of the outcome, but not the numerator unless there was documentation of a visitation pattern.

Finally, a small number of children achieved reunification without any or with few documented visits with parents or their reunification resource. Again, this does not mean that the children did not have contact with their parents. The contact that they did have was sufficient to "progress toward reunification" as the ultimate goal – reunification — was achieved. Or, the children were in custody a short period of time before being reunified. These children were included in the analysis.

¹⁴⁷ Social Services Manual Section 1009.5, Georgia Department of Human Services
 ¹⁴⁸ Annie E. Casey Foundation, Elders as Resources Fact Sheet, *Basic Data: Kinship Care*, 2005, found at http://www.aecf.org/upload/PublicationFiles/FactSheet.pdf,

¹⁴⁶ Social Services Manual, Section 1009.4 Georgia Department of Human Services

Outcome 23 is measured using information collected directly from the documentation in children's records. This outcome is measured using a case record review of a sample of children in foster care during the period. To measure this outcome, the record reviewers looked for documentation indicating that children saw at least one sibling in custody from whom they were separated at least once a month during each of the previous 12 months in custody.

Outcome 27 is measured using information collected directly from the documentation in a sample of the children's records. Children in custody less than six months are excluded from the analysis.

Outcome 28 is measured using information collected directly from the documentation in a sample of children's records. Children in custody less than 12 months are excluded from the analysis.

3. Wellbeing

Outcome 17 is similar, but not identical to the federal standard for placement stability. The federal standard is applied to the number of placements, not moves, and suggests that at least 86.7 percent of children should experience no more than two placements in the most recent 12 months in custody. Therefore, for comparison purposes the number of moves is equivalent to the number of placements minus one. This outcome is measured using a case record review of a sample of children in foster care during the period.

Outcome 18 performance measurement is based on data drawn from SHINES for children in DeKalb and Fulton Counties' custody on a point in time during the period and updated by the counties as to the reasons for case manager changes in the previous 12 months. Exemptions noted were case manager changes that resulted from 1) transfers to a Specialized Case Manager or Adoptions Case Manager, 2) case manager deaths, terminations, and transfers to another county or, 3) temporary assignments to cover cases during a maternity or sick leave. 149 Resignations and promotions were not exempted because they were not specifically identified as such in the Consent Decree. SHINES requires a child to be assigned to a case manager, supervisor, or administrator at all times. Therefore, when a new case is opened, it will initially be assigned to a supervisor or program administrator who is responsible for assigning the case to a case manager. This "pass through" process may only last a period of minutes or hours, but it might last a period of days. If a case is opened on a Friday, it may not be officially assigned to a case manager until Monday morning. The same process is in effect when a case manager leaves or goes on leave: cases are temporarily assigned to supervisors or program administrators. This is a dynamic process and a report generated at any point in time will reflect a different set of cases assigned to supervisors or administrators. To address this issue, a supervisor or program administrator was not counted as the primary individual responsible for

¹⁴⁹ See p. 35, paragraph 18, of the Consent Decree.

the case if the case was associated with the supervisor or administrator for 5 business days or less. If the period was longer, the supervisor or administrator was counted as one of the case managers a child had in the 12- month period.

State performance on this outcome does not reflect staff turnover rates. Children may still experience more than two case managers in a 12-month period if they are assigned to a series of case managers who leave as a result of terminations or transfers. This Outcome does encourage the counties to minimize reassignment of children among case managers for other reasons. The county data was reviewed by the Accountability Agents for consistency with the appropriate reasons and compared to monthly caseload data to verify resignations, terminations, transfers, and promotions.

Outcome 20 is measured through information collected from the case record review. The number of visits a child received each month from his or her case manager as well as whether the requirement for two monthly visits as defined by the Consent Decree was met is collected. In addition, it is important to note that these results represent visitation for 12 sequential months prior to and including the last date of the reporting period or the last day the child was in custody – not for the 6-month reporting period. If a child was in custody for less than 12 months as of the last day of the reporting period or the last date of custody, visitation was counted only for the applicable months of custody. Months that children were on run away status were also excluded from the analysis.

Factors affecting measurement include the following. First, the outcome measure's continuity feature (each and every month of the previous 12) means that if one visit is missed in any month, that child will not meet the requirement for a full twelve months from the missed month. This makes the measure one that takes a long time to improve. Second, while case documentation clearly indicates where the visits take place, it is often difficult to determine in a case review if there was any private time spent with the children during the visit. Third, the case documentation often does indicate that case managers are having private conversations with the children, but these conversations are taking place outside of the child's placement. They may be taking place at school, in court, in DFCS offices, and at locations used for Family Team Meetings or sibling and/or parent visitation.

Outcome 22, case manager-caregiver visitation, has a similar measurement issue to case manager-child visitation. This outcome is measured using a case record review of a sample of children in foster care during the period. Again, the Consent Decree only counts case manager visits with care givers if they happened at least once a month, each and every month, for 12 sequential months preceding the end of the reporting period. Again, if a child was in custody for less than 12 months as of the end of the reporting period or the last date of custody, visitation with the caregiver was counted only for the applicable months of custody.

Outcome 24, educational attainment, uses county records of diplomas and GED certificates as well as the records of the educational attainment of Georgia residents maintained by the

Georgia Departments of Education (DOE) and the Technical College System of Georgia (formerly the Department of Technical and Adult Education). The baseline year was October 27, 2004 to October 26, 2005. The first measurement year was October 27, 2005 to December 31, 2006 in order to place subsequent measurement on a calendar-year basis. The second measurement year was January 1 to December 31, 2007 and the third measurement year was January 1 to December 31, 2008, and the fourth measurement year was January 1 to December 31, 2009.

Outcome 30 uses the current case plan format used by DFCS is part of the Case Plan Reporting System (CPRS.) This format allows case managers to include routine goals and responsibilities for DFCS and others for parents when reunification is the goal. Although DFCS pre-service training provides guidance on tailoring the case plan and the initial case plan should be a product of a Family Team Meeting, multi-disciplinary meeting and the insights from the Comprehensive Child and Family Assessment, the CPRS format does not appear to be conducive to tailored plans without a good deal of modification. Child-specific need and treatment information therefore is often limited in the plans.

This outcome is measured using a case record review of a sample of children in foster care during the period. For purposes of determining whether needs identified in the most recent case plans were being met, children are excluded if they are in custody less than 30 days and would not be expected to have a case plan and if no plan is found in their case records.

To better align the case record review with the CPRS format, reviewers were asked to categorize the needs found in the plan as being "routine" or "child-specific." Routine needs included regular medical appointments, school enrollment, educational progress or grade completion. These routine needs are likely to be standard for every child. Child-specific needs included information about chronic conditions, prescribed treatment follow-up, placement requirements, and special education or academic assistance. Both types of needs were combined in the analysis for Outcome 30.

To measure whether the identified needs were being met the sample of case files were reviewed for evidence that services had been delivered or were being delivered to respond to the need. This information was gathered from any and all sources found in the files.

3. Strengthening Infrastructure

Outcome 25 presents a difficult measurement challenge. This outcome contains the phrase "By the end of the first reporting period..." and adds the phrase "....children in custody at a point in time during the reporting period..." This makes it quite clear that it is intended as a point-in-time measure to be taken at the end of the reporting period. To operationalize the measure as specified in the Consent Decree, data on the current approval status of individual foster placements on a particular date must be linked to data about the number of class member

children in those individual homes on that same date. Existing data sources are unable to accomplish this linking with satisfactory rigor.

By agreement of the parties and the Accountability Agents, measurement of this outcome is based on a subset of the 180 records sampled for the foster care placement file review. The full foster care placement file review is based on the universe of children in foster care at ANY time in the reporting period. The subset used for measurement of Outcomes 25 represents the children from the sample of children who were in foster care on the last day of the reporting period. For each child in this subset, the Accountability Agents "followed-back" the child's placement setting to its relevant approval status on the last day of the reporting period, using a variety of data sources.

Outcome 26 data was collected from the case records of the sample of children in foster care. The Outcome 26 analysis is applicable to those children who had entered DFCS custody after the Consent Decree was entered on October 27, 2005. Permanency Court Orders with the appropriate language are counted toward meeting the outcome even if the Permanency Hearings were not timely.

Outcome 29 data was collected from the case records of the sample of children in foster care. The outcome 29 analysis is applicable to children who had been in custody 12 months or more and were still in the temporary custody of the Department.

Outcome 31 is intended as a point-in-time measure. This measure specifies "children in foster homes" as the unit of analysis and requires these data to be linked with point-in-time data on the census of individual foster homes. By agreement of the parties and Accountability Agents, measurement of Outcome 31 for this report is based on the subset of children from the placement sample that were in foster home placements on the last day of the reporting period. Outcome 31 references the capacity limits enumerated in Section 5.c.4.e of the Consent Decree, "...concerning the requirement that no child shall be placed in a foster home if that placement will result in more than three (3) foster children in that foster home, or a total of six (6) children in the home, including the foster family's biological and/or adopted children." Section 5.c.4.e. also enumerates certain exceptions to these capacity limits. The parties further agreed that for purposes of measuring compliance with Outcome 31, the only exception that will pertain is that provided for the placement of a sibling group when there are no other children in the home.

¹⁵¹ Ibid, p.16.

¹⁵⁰ See Kenny A. Consent Decree, p. 38.

C. Methodology for Verifying Caseload Data

SHINES is able to produce reports on individual case manager caseloads and the Accountability Agents started using SHINES-produced reports in Period VI for assessing State progress in meeting the Consent Decree's caseload requirement reported in Section VI. As with the previous reports produced by IDS, the Accountability Agents take several steps to ensure the accuracy and completeness of these reports. Training, certification, and leave data are all maintained in separate data systems. All of this data are cross-referenced or reconciled with the SHINES caseload data. This allows the Accountability Agents to determine the caseload sizes of those on leave, separated from the Agency, and provisionally certified Discrepancies were discussed and resolved with the counties. Finally, a sample of case managers are interviewed at least once a reporting period and asked about their caseload size during the period. In many instances, the case managers are asked to produce supporting documentation. As a result of gaining direct access to SHINES, the Accountability Agents also have the ability to generate caseload reports at any time for review and follow-up with the State and counties.

D. Methodology for Verifying State Data on Repeat Maltreatment and Maltreatment Subsequent to Diversion

Section 20 G of the Consent Decree requires DHS to provide the Accountability Agents data and information sufficient to enable the verification of data reported by the State on the number of children in DeKalb and Fulton counties during the reporting period (other than those in foster care) that experience repeat maltreatment or substantiated maltreatment within 11-365 days after being referred to DHS's diversion program. Due to the 11-365 day follow up period for the diversion statistics, this Period IX report is the seventh time diversion data has been reported. The DHS data on repeat maltreatment and substantiated maltreatment subsequent to diversion in DeKalb and Fulton Counties are presented in Section VIII. Following is a discussion of the approach the Accountability Agents used.

The validity of the State statistics on repeat maltreatment and substantiated maltreatment subsequent to diversion rest on the accuracy of the data coding and data input associated with maltreatment investigations and diversion cases, and the validity and rigor of the file matching algorithm. These are considered separately below.

1. <u>Data Capture and Input</u>

Data fields that are quantitative or less complex (e.g., whether or not an allegation was substantiated) are less prone to coding errors and produce data with a higher degree of reliability. Data fields that are more complex, qualitative, or ambiguous are more error prone and demonstrate greater problems of reliability. Data on the results of maltreatment investigations and on whether or not a CPS report is "diverted" fall into the former category.

When a report of maltreatment is received, it is reviewed by CPS intake staff, logged into the County's tracking system, and if it meets the criteria to be investigated, an investigation is initiated. Pertinent data about the report are entered into the SHINES intake "stage." A casework supervisor reviews the completed SHINES intake stage and when they are satisfied with the quality of the intake information, they approve it in SHINES and close the intake stage. If the report meets the criteria for an investigation, the investigation "stage" is opened in SHINES and a casework supervisor uses SHINES to assign it to an investigator and to indicate the required response time.

If the report does not meet the criteria for a CPS investigation and it manifests issues that are primarily economic in nature, it may be considered for "diversion," also called Family Support Services. Diversion cases are not opened as CPS investigations, but the family is usually connected with community-based resources that can help meet the family's economic or other needs with the intent of helping the family keep their children safely in their own home.

Based on interviews with county investigations staff and the experience of reviewing 100 percent of the investigations of maltreatment in care, the Accountability Agents have confidence that SHINES captures virtually 100 percent of the investigations that are conducted.¹⁵²

With respect to diversion cases, the Accountability Agents are satisfied that the "stages" construct in SHINES effectively precludes diversion cases from being miscoded as CPS investigations or screen-outs, and vice versa. Moreover, each county maintains an intake log that captures pertinent information about each report received, and its disposition as: accepted for CPS investigation, diverted, or screened-out. The Kenny A. file review staff begins each maltreatment in foster care file review by reviewing the county's intake log against the data contained in SHINES to ensure that all CPS investigations and diversions are accurately reflected in SHINES. Any inconsistencies between SHINES and the county intake log are identified, brought to the attention of county management staff, and rectified.

2. <u>File Matching Algorithms</u>

To produce the data on repeat maltreatment required by the Consent Decree, the DFCS Data Analysis and Reporting Unit used the following algorithm:

- Data for DeKalb and Fulton counties were extracted from SHINES and from the state Protective Services Data System (PSDS), a component of IDS, depending on the date the report was logged (reports logged on or after May 28, 2008 were extracted from SHINES; reports prior to May 28, 2008 were extracted from PSDS);
- Children with substantiated maltreated were selected from two timeframes -- the

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¹⁵² An issue was identified in Period VII that involved the undercounting of maltreatment in care reports. This problem was a function of the erroneous creation of duplicate person identification numbers for some children in care. This problem did NOT affect the accurate counting of maltreatment reports, only the linking of those reports to foster care records so reports of maltreatment **in care** can be identified.

- reporting period and the preceding 12 months;
- Foster children were deleted from the files;
- Children from the reporting period were matched with children from the preceding 12 months using a search routine that cast a "wide net" to capture all potential matches; and
- Resulting matches were manually reviewed to affirm correct matches. Children that
 had a matched substantiation of maltreatment from the two time frames were deemed to
 have experienced repeat maltreatment.

Similarly, to produce the data on substantiated maltreatment subsequent to diversion, the DFCS Data Analysis and Reporting Unit used the following algorithm:

- Data for DeKalb and Fulton counties were extracted from SHINES and from the state
 Protective Services Data System (PSDS) and the diverted cases file provided monthly by
 Systems & Methods, Inc. (SMI), depending on the date the report was logged (reports
 logged on or after May 28, 2008 were extracted from SHINES; reports prior to May 28,
 2008 were extracted from PSDS and the diverted cases file);
- Cases diverted during the reporting period were selected;
- Diverted cases from the reporting period were matched with subsequent substantiated cases of maltreatment from the succeeding 12 months (to reflect the specified 11-365 day follow-up period after the diversion referral) using a search routine that cast a "wide net" to capture all potential matches; and,
- Resulting matches were manually reviewed to affirm correct matches that fell within the 11-365 day follow-up window of the diversion referral. Matches within this window of time were deemed to be maltreatment substantiations within 11 - 365 days of the diversion referral.

Appendix C Selected Characteristics of the Children in the Custody of DeKalb and Fulton Counties

This appendix provides some additional information about the 1277 children in the custody of DeKalb and Fulton counties on June 30, 2010. The information is reported by the State and has not been independently verified by the Accountability Agents.

Table C-1 Gender of Children Remaining in Custody on June 30, 2010

N=1276*

Gender	Percent of Children	
Male	55%	
Female	45%	
Total	100%	

Source: Georgia SHINES

Table C-2 Ager of Children Remaining in Custody on June 30, 2010

N=1276*

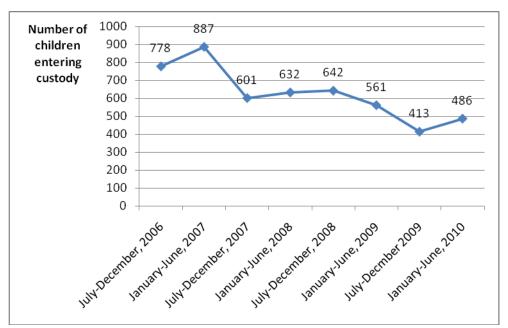
Age Group	Percent of Children
Age 2 years or less	22%
Ages 3 to 5 years	16%
Ages 6 to 9 years	15%
Ages 10 to 12 years	11%
Ages 13-15 years	10%
Ages 16 to 17 years	25%
Total	100%

Source: Georgia SHINES; User Defined Report. Total less than 100% due to rounding

^{*}Includes youth under the age of 18 placed voluntarily in DFCS as well as those adjudicated into custody.

^{*}Includes youth under the age of 18 placed voluntarily in DFCS as well as those adjudicated into custody.

Figure C-1
Number of Children Entering DeKalb and Fulton Custody since July 1, 2006
in Six-Month Increments*



Source: IDS and SHINES: *An additional 294 children entered between October 27, 2005 and December 31, 2005.

^{*}Includes youth under the age of 18 placed voluntarily in DFCS as well as those adjudicated into custody.

APPENDIX D

PERIOD VIII DRAFT SUPPLEMENTAL REPORT

Diligent Search Performance and Casework Activities in the First 60 Days of Foster Care July 1 through December 31, 2009

Accountability Agents:

James T. Dimas and Sarah A. Morrison

November 2010

Period VIII Supplemental Report: Diligent Search Performance and Casework Activities in the First 60 Days of Foster Care

I. Introduction

This is a supplemental report for monitoring Period VIII, July through December 2009. It provides an assessment of the State's Period VIII performance on Outcome 7, related to the Diligent Search for relatives and others who could be permanency resources for children. Due to the nature of the Outcome 7 standards, the State's performance can only be measured at this time through a case record review using a targeted sample of children who entered the custody of DeKalb or Fulton County during the reporting period and remained for 60 days or more. The lag time in reporting the Outcome 7 performance is the result of this measurement issue. This supplemental report represents the fourth measurement of Outcome 7 performance. Previous performance has been measured for periods II, IV, and VI with the results included in the reports for Periods III, V, and VII.

The targeted sample enabled the Accountability Agents to collect more representative information about the assessment, planning, and service activities when a child enters DFCS custody. Thus, the report provides a fuller picture of casework activities during the first 60 days in foster care than was available from the smaller subsample of the Period VIII record review sample.

All information presented in this report was obtained through a case record review of 130 randomly selected foster care case records of children who were adjudicated into the custody of DeKalb or Fulton County anytime between July 1 and December 31, 2009 and remained in care at least 60 days. The margin of statistical error for the sample is +/-6.5 percent. The case record review was conducted in May and June 2010.

II. Diligent Search (Outcome 7)

A "reasonably diligent search is required by law (O.C.G.A. Section 15-11-55) to identify those individuals who may be considered a resource for placement or custody of the child." The Consent Decree, in Outcome 7, requires the diligent search for parents and relatives to be undertaken and documented within 60 days of entry for at least 95 percent of all foster children entering care. In practice, a search should be initiated as soon as the child enters custody or before entry as information is gathered in the investigation or assessment stage. Immediate

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¹⁵³ Social Services Manual, Chapter 1000, Section 1002.3.1, Georgia Department of Social Services

efforts can serve to hasten permanency for a child and to minimize the trauma of removal if the child can be placed with someone known to him or her.

Furthermore, the search for relatives and other individuals who have "demonstrated an ongoing commitment to the child" ¹⁵⁴ should be ongoing until the child has achieved permanency. The diligent search process can be effective in identifying individuals who are or can be part of a supportive team for the child and family. For example, these individuals may be called on to help supervise a safety plan for a child who is returned home or provide housing and transportation for parents or facilitate regular visits among separated siblings.

c. <u>Interpretation and Measurement Issues</u>

As previously described, the performance of Outcome 7 was measured based on a case record review of 130 children randomly selected from those entering custody between July-December 2009 and remaining at least 60 days. The targeted review of these cases was conducted in May and June 2010. The outcome requirement for undertaking a diligent search within 60 days was deemed to have been met if one of the following conditions was met¹⁵⁵:

- the child was placed with a family resource within 60 days after entering custody; or,
- a court order stated that the diligent search had been properly and timely submitted to the court; **or**,
- there were documented search efforts that included: children age 4 or older were interviewed about adults in their lives or someone with whom they would want to live and one or more family member or family friend was interviewed within 60 days and, when resources were identified, there was evidence that one or more of the identified resources were contacted or contact was attempted within 60 days.

d. State Performance

• The State Fell Short of the Outcome 7 Threshold.

The file documentation indicated that a diligent search was undertaken and documented for 122 (94%) of the 130 children in the sample. The Consent Decree requires at least 95 percent of children entering care in the reporting period to have a diligent search undertaken and documented within 60 days. This performance is a substantial improvement from the Period VI performance of 80 percent and the change exceeds the margin of statistical error for the sample. Table 1 provides the number and frequency of different types of diligent search actions undertaken on behalf of the 130 sampled children. The State's performance over the four reporting periods for which the outcome has been measured is displayed in Figure 1.

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¹⁵⁴ Social Services Manual, Chapter 1000, Section 1002.31 Georgia Department of Social Services

¹⁵⁵ See Dimas, J. T and Morrison, S. A. Period VIII Monitoring Report, *Kenny A. v. Perdue*, July 2010 Appendix B for a fuller description of the interpretation and measurement issues associated with Outcome 7.

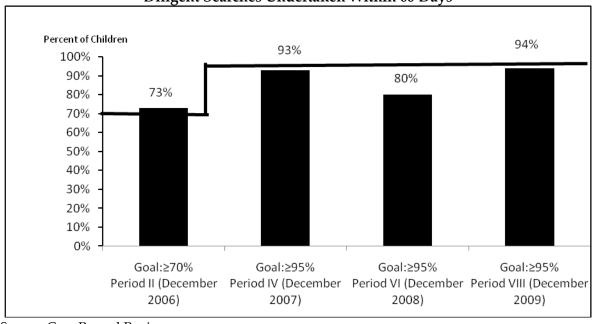
Table 1
Diligent Search Actions Undertaken
n=130

Actions	Number	Percent
Children placed with a family resource within 60 days of entering	10	
custody	10	
Court order documented that the diligent search was "properly and	4.4	
timely" submitted	44	
Evidence of interviews with child and child's family and others within		
first 60 days and contact made with one or more possible resource, as	68	
applicable		
Subtotal for Outcome Measurement	122	94%
Insufficient search activities in first 60 days: no documented interviews		
of children to gather information about relatives and significant others	8	6%
(children ranged in age from 4 to 12)		
Total	130	100%

Source: Case Record Review, May-June 2010.

Figure 1

Four Reporting Periods of State Performance on Outcome 7:
Diligent Searches Undertaken Within 60 Days



Source: Case Record Reviews

d. <u>Diligent Search Results</u>

Locating parents

Mothers (birth or adoptive) were identified for 128 (98% of 130 children entering and remaining in care at least 60 days). Fathers (putative or legitimated birth or adoptive fathers) were identified for 106 children (82% of 130). However, the location of parents was not always known. The whereabouts of 13 mothers¹⁵⁶ were not known at the time children entered care. Various search activities were conducted to determine this information in each of these cases. The searches ranged in intensity from simply interviewing the child to using up to six (6) different methods to find the mother. The whereabouts of 69 fathers were known when children entered DFCS custody. Therefore, some search efforts were required for 61 fathers: 24 needed to be identified and located and another 37 identified fathers needed to be located. Search activities appear to have been undertaken for 54 of the 61 absent fathers (89%).

Identifying other resources

The diligent search activities undertaken for the sample of 130 children identified 1190 individuals in addition to parents as possible resources for 130 children. The individuals included grandparents, siblings, other relatives, and "fictive kin" (individuals with whom the child has a relationship and emotional bond but who are not blood relatives). This represented an average of about nine family members or fictive kin per child. Table 2 displays the type and number of non-parental resources identified.

Table 2

Types and Frequency of Individuals Identified as a part of Diligent Search Efforts
n=130

Types of Individual Resources	Number of	Percent of
	resources	resources
Maternal relatives excluding mother	672	56%
Paternal relatives excluding father	263	22%
Adult siblings	84	7%
Fictive kin	151	12%
Stepparents	14	<1%
Adult step-siblings	6	<1%
Total relatives or identified resources other than parents	1190	
Average number of non-parental resources per child	9	

Source: Case Record Review, May-June 2010.

 $^{^{156}}$ The 13 includes the two mothers who were not identified and 11 additional mothers.

Resources contacted

A total of 357 individuals (connected to 116 children) were contacted. This compares to the previous measurement for Period VI of 324 individuals contacted for 119 children. Table 3 displays the pattern of contacted resources compared to those identified.

Table 3

Types and Frequency of Individuals Contacted as a part of Diligent Search Efforts
n=130

Individual	Total	Total	Percent of those
	Identified	Contacted	identified contacted
Maternal Relatives excluding mother	672	179	27%
Paternal relatives excluding father	263	60	23%
Adult Siblings	84	26	31%
Fictive Kin	151	83	55%
Caretakers of minor siblings	0	0	N/A
Stepparents	14	5	35%
Adult Step siblings	6	4	67%
Total resources other than the parents	1190	357	30%

Source: Case Record Review, May-June 2010

Placement or visiting resources obtained

Forty-six (46) children (40% of 116 children) for whom the search included contacting individuals by the 60th day had placement and/or visiting resources within 60 days of entry. Of the 46, 15 were placed with their resources within approximately 90 days of entry and another 28 had visited with their visiting resources in the first 60 days

III. The First 30 Days in Custody: Initial Teaming, Needs Assessment and Planning

The first 30 to 60 days a child is in custody is a critical time. The degree of family engagement during this time and the decisions that are made about strengths and needs can have a substantial effect on the direction the case will take and the timeliness of a child's safe return home or to other custodial arrangements. DFCS policy and the Consent Decree stipulates standards for several casework practices intended to ensure effective assessment of and planning for children when they first enter care.¹⁵⁷

¹⁵⁷ See pp 5-7, section 4A in the Consent Decree.

Within the first 30 days, case managers have the following practice requirements. Each requirement presents an opportunity for engagement with children, families, and caregivers and gathering insights to help families develop individualized plans for the safety, permanency, and well-being of their children. These opportunities include the following:

- A Family Team Meeting (FTM) within the three -nine days of the child's entry into care;¹⁵⁸
- Health and dental screening within ten days of the child's entry into care; 159
- Weekly visits with children;
- Parent and sibling visits;¹⁶⁰
- A Multi-Disciplinary (MDT) Meeting within 25 days of the child's entry into care;
- A mental health or developmental assessment within 30 days of the child's entry into care;
- Initiating a diligent search for relatives and others significant to the child;
- A Comprehensive Child and Family Assessment (CCFA) within 30 days of the child's entry into care; and
- An initial service plan to guide the first six-months of service activities.

For the sample of 130 children entering custody between July-December 2009 and remaining at least 60 days, Table 5 provides the findings as to the timeliness of initial assessment and planning efforts. Following the table is a discussion of the steps involved in assessment and service planning and response to needs.

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¹⁵⁸ See pp 5-7, section 4A of the Consent Decree.

See p 20, section 6A of the Consent Decree

¹⁶⁰ Parent and sibling visits are not addressed in this supplemental report.

Table 4

The First 30 Days of DFCS Custody: Timeliness of Initial Assessment and Planning Components July 1 – December 31, 2009

n=130 (unless otherwise noted)

Component	Number	Percent
Family Team Meeting		
Held within 3-9 days of entry	105	81%
Held, but not within 3-9-days (10-36 days)	22	17%
Total Initial Family Team Meetings	127	98%
Initial Health Screen At Foster Care Entry		
Received within 10 days	93	72%
Received, but not within 10 days (11-69 days)	31	24%
Total Initial Health Screens	124	95%
Initial Dental Screen At Foster Care Entry		
Received within 10 days	35	27%
Received, but not within 10 days (12-92 days)	59	45%
Total Initial Dental Screens	94	72%
Multi-Disciplinary Team Meeting		
Held within 25 days	69	53%
Held, but not within 25 days (26-79 days)	41	32%
Total Multi-Disciplinary Team Meetings	110	85%
Initial Mental Health Assessment in Compliance with EPSDT Standards (children age 4 and older) at Foster Care Entry (n=82)		
Received within 30 days	46	56%
Received, but not within 30 days (25 completed between 31 and 76 days; 3 were completed in a previous foster care episode)	28	34%
Total Initial Mental Health Assessment	74	90%
Initial Developmental Assessment (children younger than age 4) At Foster Care Entry (n=48)		
Received within 30 days	28	58%
Received, but not within 30 days (31-89 days)	8	17%
Total Initial Developmental Assessment	36	75%
Comprehensive Child and Family Assessments		
Completed within 30 days	44	34%
Completed, but not within 30 days (31-81 days)	60	46%
Completed, but unable to determine time frame	13	10%
Total Comprehensive Child and Family Assessments	117	90%
Initial Case Plan		
Completed within 30 days	90	69%
Completed within 31-60 days Total Case Plans	32 122	25% 94%

Source: Case Record Review, May-June 2010

a. Family Team Meetings

Timely Family Team Meetings (within 3 to 9 days) were convened for 105 of the 130 children (81%) in the sample. Another 22 children (17%) had Family Team Meetings (FTM) convened within ten to 36 days after entry and 3 children (2%) did not have documented FTMs. When the sample's margin of error is considered, this information is very comparable to the information drawn from the county tracking systems for Period VIII. The tracking systems indicated that 85 percent of the children who entered custody in Period VIII had timely family team meetings, 10 percent had late meetings, and 5 percent did not have a FTM.

Among the 127 FTMs that were convened,

- 81 meetings (64%) were attended by the birth mother, birth father, or relative caregivers. Another relative or informal support attended 72 meetings. Children were included in 31 meetings (24%). DFCS case managers attended 116 meetings (91%). DFCS Supervisors attended 77 meetings (61%). Child and Family Comprehensive Assessment (CCFA) providers had representatives at 95 meetings (58%). Family advocates attended three meetings (2%), child advocates attended four meetings (3%) and CASAs attended three meetings (2%). For the 46 FTMS that did not have birth parents or relative caregivers, file documentation indicated that efforts were made to encourage their attendance at 22 (48% of 46) meetings. Reviewers were unable to determine if 24 (52% of 46) of the non-attending parents/caregivers had been informed of the meeting or encouraged to attend.
- 111 meetings (87%) discussed family and child needs. Family and child strengths and goals were discussed in 96 of 127 meetings (76%). Placement arrangements were discussed in 74 meetings (58%).
- 101 meetings (80%) determined that further evaluations of children and or caregivers were needed; 85 meetings (67%) made determinations about service needs. Fifteen meetings (12%) determined that the child could be safely returned home and seven of the children were discharged within 70 days of entering. Another 66 meetings (52%) identified an appropriate relative with whom the child could be placed. Family visitation with siblings was determined in 23 meetings (18%). Forty-seven meetings (37%) had documentation about what was needed to ensure the child remains in the school he or she had been attending or enrolling the child in a school near the foster placement. Reviewers were unable to determine if 44 of the 46 non attending parents/caregivers had been informed of the determinations.

b. <u>Initial Health Screenings</u>

In the sample of 130 children entering custody between July-December 2009 and remaining at least 60 days, 93 (72%) had documented health screens within 10 days of entering care. In total, when the ten-day time frame is relaxed, 124 children (95%) received an initial health screen. For

those not meeting the ten-day timing, the elapsed time ranged from 11 to 69 days. Again, this is comparable to the results reported from a much smaller sample in the Period VIII report considering the margin of statistical error for the sample. However, 23 percent appear to be missing one or more components of an EPSDT exam and reviewers were unable to determine if the exams had all the EPSDT exam components for another 20 percent of the children. The components most often missing were height and weight measurements that are used to calculate a Body Mass Index (BMI). Some cases were also missing lab tests, vision/hearing testing, blood pressure readings, and immunizations. When the compliance or missing components could not be determined, it was usually because the documentation found in the file was simply a note signed by medical personnel stating that the child had been examined and was in good health.

Among the 124 children who received initial health screens, 41 (33%) had identified health needs. Thirty-five of the 41 children (85%) had all their needs met or were having them met in the first 90 days. Three children were having some of their needs met and three did not appear to be having any of their identified needs met. For five of the six children, the unmet needs were primarily follow-up appointments for:

- Additional vision screening with an optometrist/ophthalmologist; or
- Tuberculosis test readings; or
- Immunizations.

The sixth child did not receive a recommended circumcision and treatment for a hernia because his mother refused to authorize the treatment.

c. <u>Initial Dental Screenings</u>

In the sample of 130 children entering custody between July-December 2009 and remaining at least 60 days, 35 children (27%) had a documented dental screen within 10 days of entering foster care. The total proportion receiving an entry dental screening within any timeframe was 72 percent. Comparison to findings from the smaller sample used for the Period VIII report suggests that a larger proportion of children are receiving a timely dental screening and a larger proportion overall are receiving a dental screen than had been indicated in the smaller sample. The difference is greater than the margin of statistical error for the sample and the sample used for this supplemental report is more representative of the entire population entering and remaining in custody in Period VIII. Thirteen of the children who did not appear to have a dental screening were age three or younger at the time of entering DFCS custody. According to the Consent Decree, these very young children (up to age 3 years) are to receive a "gum check" as part of their physical health screen. Reviewers did not find documentation that the screens had all the EPSDT components for four children. These screens were missing either x-rays or cleaning. In another seven records, there was insufficient documentation to determine if anything was missing.

Among the 94 children with documented initial dental screens, 28 (30%) had dental health needs identified. Fifteen of the 28 children (54%) had all their needs met or were having all their needs met in the first 90 days. The unmet needs of 13 children included:

- Fillings, teeth restoration; or
- Wisdom teeth extraction/ evaluation for extraction; or
- Unspecified treatment to be scheduled; or
- Orthodontic evaluation.

d. <u>Multi-Disciplinary Meetings</u>

The case record review found 69 of 130 children (53%) had a Multi-Disciplinary Meeting (MDT) within 25 days. In total, when the 25 day time frame is relaxed, 110 (85%) of children had an MDT. As reflected in Table 5, the most frequent recommendations that emerged from the MDTs focused on the services needed (93) and the appropriateness of the child's permanency goal (90).

Table 5
Recommendations Made by Multidisciplinary Team Meetings
Between July-December 2009
n=110 except where otherwise noted

Recommendation Subject	Mee	ting
	Recommendation	
	Number	Percent
Appropriateness of child's permanency goal	90	82%
Services needed	93	85%
Implementing Assessment recommendations	50	45%
All or Some Issues identified in Family Team Meetings	79	72%
Appropriateness of the child's education (n=66 age 7 or older)	23	35%
Appropriateness of the child's independent living plan (n= 40 age 14 or	10	25%
older)		
Other issues	10	9%
No recommendations	5	5%

Source: Case Record Review, May-June 2010

e. Initial Mental Health/Developmental Assessment

The Consent Decree requires that all children under the age of four years receive a developmental assessment within 30 days of entering foster care in compliance with EPSDT

standards.¹⁶¹ All children four years of age or older are to receive a mental health screening within 30 days of placement in compliance with EPSDT standards.¹⁶²

As included in Table 4, 48 children in the foster care sample who entered DFCS custody between July 1 and December 31, 2009 and were in placement 60 days or more were younger than four. Among these 48 children, 36 (75%) had developmental assessments: 28 within 30 days and eight within 31-89 days. This is a much larger proportion than found in the smaller sample used in Period VIII report (50% in the smaller sample). The difference is greater than the margin of statistical error for the larger sample. Twenty-seven of the assessments appeared to comply with EPSDT standards. Documentation was insufficient in nine cases to determine if the assessments were missing an EPSDT requirement.

Among the 36 children with documented developmental assessments, nine children (25%) had developmental needs identified. Seven of the nine children (78%) had all their needs met or were having all their needs met in the first 90 days. The unmet needs of two children included: further evaluation and/or treatment (BCW referral, speech pathologist); and play therapy.

As shown in Table 4, 82 children in the foster care sample of 130 children who entered DFCS custody in the last half of 2009 and remained in care 60 days or more were age 4 or older. Among these 82 children, 74 (90%) had completed mental health assessments, 46 were completed within 30 days and 28 were completed outside of this timeframe. This result is similar to the findings from the smaller sample used in the Period VIII report.

Among the 74 children with documented mental health assessments, 62 (84%) had mental health needs identified. Twenty-nine of the 62 children (47%) had all their needs met or were having all their needs met in the first 90 days. The unmet needs of 33 children required one or more services. The distribution of needed services is provided in Table 6.

¹⁶¹ See p. 20, paragraph 6A.3 of the Consent Decree.

¹⁶² See p. 20, paragraph 6A.3 of the Consent Decree.

¹⁶³ It is however, still subject to a statistical margin of error of +/- 13 percent since the 48 children were not randomly sampled from only children under the age of 4.

Table 6
Frequency of Needed Services
N=33

Type of Service Needed	Number of Children in Need of Service
Individual counseling/therapy	17
Family therapy with parent	8
Further evaluation (cognitive abilities; learning	8
disorders, school progress)	
Substance abuse treatment	2
Group therapy	4
Medication management	2
Academic assistance	3
Mentoring	5
Caregiver's education on child's anxiety disorders	1

Source: Case Record Review, May-June 2010

f. Comprehensive Child and Family Assessments

According to the case record review, 117 of the 130 (90%) children entering care and remaining for 60 days or more had completed Comprehensive Child and Family Assessments (CCFA). Forty-four of the 117 (34%) CCFAs were completed within 30 days. Another 73 had completed CCFAs but they required more time to complete or the timeframe for completion was unclear from the file documentation. The family assessment was included in 115 (98%) of the 117 completed assessments. Fifty-three completed CCFAs (45%) included completed health checks. Fifty-two completed CCFAs (44%) addressed the appropriateness of the child's placement and 70 (60%) had recommendations pertaining to placement moves. Finally, 57 (49%) had information from the FTM and 93 (79%) had MDT reports.

g. <u>Initial Case Plans</u>

Among the 130 children entering custody during the reporting period and remaining in custody more than 60 days, 90 children (69%) had an initial case plan developed within 30 days. Another 32 children (25%) had case plans within 60 days. Seven children had case plans developed after 60 days and one child did not appear to have a case plan developed. In all, 94 percent of the children in the sample had case plans within 60 days of entering DFCS custody. This is a more representative measurement of performance than reflected in the small sample used for Period VIII where 88 percent of the sample had an initial case plan.

h. Case Manager Visitation with Children in the First Eight Weeks of Placement

The Consent Decree stipulates a frequent case manager visitation schedule for the first eight weeks of every new placement a child experiences. ¹⁶⁴ Children are to have at least one in-placement visit in the first week and one in-placement visit between the third and eighth weeks with six additional visits at any time within the eight week period. In practice, this represents weekly visitation for eight weeks.

Two children in the sample of children who entered custody between July 1 and December 31, 2009 and remained at least 60 days were on runaway status the first week of placement. Of the remaining 128 children¹⁶⁵ in the sample, 62 (48%) received at least one in-placement visit in their first week of placement.

After the first week, 91 children (70%) remained in the same placement their entire first eight weeks in custody and 34 children (26%) experienced more than one placement in their first eight weeks of custody. All of these children should have had eight visits in the first eight weeks. A total of five children (4%) were on runaway status one or more weeks of their first eight weeks in custody. They should have received a weekly visit each week they were in a placement. Table 7 provides further detail of the visit frequency children in the sample experienced in the first eight weeks in custody.

165 The margin of error for a subsample of 128 children is +/-7%.

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¹⁶⁴ See p. 19, paragraph 5D.1 of the Consent Decree

¹⁶⁶ Of the 34 children, 29 experienced 2 placements, 2 experienced hospitalizations, and 2 experienced 3 or more placements in the first 60 days of foster care. Among the 29 children, the second placement for four children was with relatives.

Table 7 Pattern of Case Manager Visits with Children in the First 8 Weeks of Foster Care n=varies as noted

	Number of Children	Percent	Cumulative Percent
At least one in-placement visit in week 1 (n=128)	62	48%	
Number of visits in 8 weeks with children who were never on runaway status (n=125 ¹⁶⁷)			
8 visits or more in first 8 weeks	26	21%	21%
7 visits in 8 weeks	23	18%	39%
6 visits in 8 weeks	23	18%	58%
5 visits in 8 weeks	21	17%	74%
Fewer than 5 visits in 8 weeks	32	26%	100%
Number of visits with children who were on runaway status during some time in first 8 weeks (n=5)			
Visits in each applicable week (5 and 6)	2	40%	
5 visits in 7 weeks	2	40%	
4 visits in 7 weeks	1	20%	

Source: Case Record Review, May-June 2010.

 167 The margin of error for a subsample of 125 is +/-7% .