



PERIOD 10 MONITORING REPORT

Kenny A. v Perdue

July 1 to December 31, 2010

Accountability Agents:

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June 3, 2011

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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
CMS	Centers for Medicare and Medicaid
CPA	Child Placing Agency
CPRS	Case Plan Reporting System
CPS	Child Protective Services
CRR	Case Record Review
DAARE	DFCS Data Analysis, Accountability, Research & Evaluation Division
DFCS	Department of Family and Children Services
DHR	Department of Human Resources
DHS	Department of Human Services
DOE	Department of Education
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 on the Placement of 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
QA	Quality Assurance

RBWO	Room, Board, and 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 tenth report prepared by the Accountability Agents for the *Kenny A. v Perdue* Consent Decree. This report reviews the State Defendants' progress from July 1 through December 31, 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 10 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 December 31, 2010 and the other of all licensed foster homes active in the same time period. All maltreatment in care investigations completed between July and December 2010 were reviewed. Appendix B has a full description of the methodology for Period 10. 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 10 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 10. 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 10 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 10 performance related to Outcomes 4, 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 10 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 10 progress in achieving Outcomes 25, 26, 29, and 31 and implementing required infrastructure components related to providing services to families and children.

Part VII, 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 July 1 and December 31, 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 December 31, 2010.

Part II CONCLUSIONS AND RECOMMENDATIONS

During the July 1 to December 31, 2010 period covered by this report, the State's overall performance sustained excellence in a number of areas and continued steady improvement in other areas. Period 10 saw the State's best performance to date. In particular, the State demonstrated marked improvement in the maltreatment in care rate and caseload sizes. Furthermore, this is the first reporting period in ten that did not witness a decline in performance in any outcome area. The challenge for the State and Counties now is sustaining these achievements while further strengthening practice with families and children.

The remainder of this chapter highlights the State's performance trends, opportunities for improvement, and the Accountability Agents' recommended priorities for State attention. 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 9 performance.

A. Positive Trends and Major Accomplishments

Safety Performance

- *Maltreatment in Care Declined Substantially. (Outcome 5)*

The Period 10 maltreatment in care rate (Outcome 5) was **0.42 percent**, the State's best-ever performance, and one-third lower than the Period 9 rate of 0.63 percent. The Outcome 5, standard is 0.57 percent. Maltreatment in congregate care settings continued to have a substantial impact on the overall maltreatment in care rate. In Period 10 that impact was salutary, with the fewest-ever substantiated victims in congregate care facilities (one), coinciding with the best-ever Outcome 5 performance.

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

The State commenced **100 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 State's best-ever performance on Outcome 1, the second consecutive period in which the Outcome 3 threshold of 99 percent was attained, and the fifth consecutive reporting period that compliance with these standards has been maintained at a rate of 97 percent or better.

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

For the tenth consecutive reporting period, the State met the Consent Decree standard related to the use of corporal punishment in foster homes (Outcome 6). Of the 160 foster homes sampled, 160 (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. (Outcomes 8, 9, and 10)***

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, the Period 10 performance was an overall improvement over prior periods. By the end of Period 10, 75 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. Only 15 percent of the children entering in the last five years remained in foster care on December 31, 2010 and half of those remaining had been in custody 15.5 months or less.

Similarly, the State had its best performance since Period 2 on behalf of 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). Seventy-three percent of these longest staying children had exited to reunification or to another family-connected permanency by the end of December 2010; five years after the Consent Decree's advent. Approximately four percent of this group of children remained in custody on December 31, 2010.

The number of children in foster care on December 31, 2010 was *half* what it was in October 2005.

Performance specifics include the following:

- 54 percent of the children entering custody since the Consent Decree exited to permanency within 12 months (Outcome 8a). This is measured against a standard of 40 percent.
- 62 percent of the children entering custody since the Consent Decree exited to permanency within 24 months (Outcome 8b). This is measured against a standard of 74 percent.
- 24 percent of the children in custody up to 24 months prior to the Consent Decree exited to permanency (Outcome 9). This is measured against a standard of 40 percent.
- 23 percent of the children in custody for more than 24 months prior to the Consent Decree exited to permanency (Outcome 10). This is measured against a standard of 35 percent.

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- *A Larger Proportion of Children Experienced Timely Permanency After the Termination of Parental Rights. (OM 11)*

Outcome 11 applies to all children whose parents' parental rights were terminated between July 1 and December 31, 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.¹ Although the State's Period 10 performance of **59 percent** is still well below the outcome threshold, the State demonstrated improvement on this outcome for the second consecutive reporting period.

- *A Smaller Proportion of Children Entering Foster Care Had a Recent Previous Foster Care Episode. (Outcome 4)*

Although the rate of re-entry is still not as low as that stipulated in the Consent Decree, the State showed substantial improvement on this outcome in Period 10. In Period 10, **9.6 percent** of the children who entered foster care had had a previous episode within 12 months of their entry. This compares to the Period 9 rate of 11.1 percent.

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

For the ninth 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 10, the State placed **99 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 fourth consecutive period, the State surpassed the Outcome 21 threshold. **Eighty-eighty percent** of the children with the goal of reunification in the sample of foster care case records reviewed had visited appropriately with their parents.

¹ See p. 34. Outcome 11 of the Consent Decree.

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

In Period 10, 143 children entered foster care with one or more siblings who did not need special separate placements. The State placed together **94 percent** of the 143 children, surpassing the Outcome 16 threshold of 80 percent. This is the fifth consecutive reporting period in which the State has been able to place together 79 percent or more of the siblings entering custody. Eight (6%) of the 143 children entering care with siblings in Period 10 were placed separately because of sibling conflict or they were split among relatives.

For all siblings who are in separate placements, Outcome 23 requires that at least 90 percent of the required monthly visits among separated siblings occur.² In Period 10, **92 percent** of the required monthly visits among separated siblings occurred.

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

For the fifth consecutive reporting period (since July 2008), the State met or surpassed the Outcome 15 threshold.³ Among the 780 children who, during Period 10, reached or had surpassed their 15th month in custody out of the last 22 months and were not living with relatives, **98 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.

- *The Timeliness of Judicial and Citizen Panel Reviews Improved. (Outcomes 27 and 28)*

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 of a child's entry into custody and every six months thereafter the child is in custody;⁴ and children are expected to have a judicial permanency hearing at least every 12 months they are in custody.⁵ Outcome 27 stipulates that at least 95 percent of the children are to have timely semi-annual case plan reviews or the State is to have filed a timely request for such a review. Outcome 28 stipulates that 95 percent of permanency hearings are to be held timely to determine whether the State is making reasonable

² Beginning in Period 10 based on a modified stipulation to the Consent Decree, the State is required to ensure 90 percent of the required monthly visits between separated siblings occur. As a result, Accountability Agents verified county reported data for visits among all separated siblings to measure outcome 23. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

³ 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.

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

⁵ See p. 9, paragraph 4B.10, and p.37, Outcome 28, of the Consent Decree.

efforts to help children achieve permanency or the State is to have filed a timely request for such a hearing.

In Period 10, the State demonstrated its best performance to date on both Outcomes 27 and 28. For Outcome 27, **92 percent** of the children in the foster care sample received a timely sixth-month case review or petition for one. For Outcome 28, **99 percent** of the children in the foster care sample received timely permanency reviews or petitions for one.

Well-being Performance

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

In the sample of foster care cases reviewed, **94 percent** of the children experienced two or fewer placement moves in the 12 months prior to December 31, 2010 or their last date in custody. This is the State's best performance to date on this outcome. Outcome 17 requires that 95 percent of the children in foster care experience no more than two moves among placements in 12 months. Period 10 marked the second consecutive period that over 90 percent of the children in care experienced two or fewer placement moves within 12 months.

- *Children in Foster Care Visited Twice Every Month with their Case Managers. (Outcome 20)*

Beginning with Period 10, Outcome 20 has two components. Outcome 20a requires that 96.25 percent of the required twice-monthly visits between case managers and children occur. Outcome 20b requires that 96.25 percent of the required monthly private visits between case managers and children occur. This new standard is part of a stipulated modification to the Consent Decree.⁶ The counties surpassed these standards. For Outcome 20a, **97.8 percent** of the required twice monthly visits were made and for Outcome 20b, **98.3 percent** of the required monthly private visits were made.

- *Case Managers Frequently Visited Substitute Caregivers. (Outcome 22)*

Outcome 22 expects case managers to visit substitute care givers at least once a month. Beginning with Period 10, the Outcome 22 standard is at least 95 percent of the monthly case manager-caregiver visits occur. This new standard is the result of a stipulated modification to the Consent Decree.⁷ In Period 10, **98 percent** of the substitute care givers received the required monthly visits from case managers.

⁶ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010. As a result, the Accountability Agents applied a different measurement methodology that relied on verifying county generated data.

⁷ Ibid.

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- *Over half of the youth who exited foster care at age 18 or older completed high school or a GED program.*

Basic educational attainment is critical for youth to live independently and self-sufficiently. 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.”⁸ Although the State has not yet been able to match the baseline year performance, it has shown consistent improvement on this outcome with an increasing proportion of exiting youth meeting the educational requirement. In 2010, **58 percent** of the youth exiting DFCS care at age 18 or older had graduated from high school or received a GED certificate.

- *A Larger Proportion of Children Are Getting All Their Needs Met. (Outcome 30)*

The State improved its performance on Outcome 30 after three periods of declining performance. Outcome 30 stipulates that the State meet all the service needs identified in case plans for at least 85 percent of the children in foster care. In Period 10, the State met all the service needs for **77 percent** of the children in the sample of foster care cases reviewed. The State had not performed at that level since Period 3 (January-June 2007).

Infrastructure Strengthening

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

Beginning with Period 10, Outcome 25 requires at least 98 percent of all foster placements serving class member children to be in “full approval and/or licensure status.” This new standard is part of a stipulated modification to the Consent Decree.⁹ The State met this standard for Period 10 with **98 percent** of foster placements serving class member children in “full approval and/or licensure status.” Period 10 also marked the fourth 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)*

Beginning with Period 10, Outcome 31 stipulates that no more than ten percent of all foster family home placements serving class member children will have 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. This new standard is part of a stipulated modification to the

⁸ See p. 36, paragraph 24 of the Consent Decree.

See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010. The Parties agreed to replace the previous Outcome 25 measure with a revised measure that uses *the placement* as the unit of analysis and which can be extracted from a single, automated data source – SHINES.

Consent Decree.¹⁰ For Period 10, less than **2 percent** of all foster family home placements serving class member children exceeded these standards.

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

For the eighth 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 10, **one percent** of the children in the foster care sample appear to have had a lapse of legal custody within the prior 13 months. This is the State's best performance to date on Outcome 29.

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

Outcome 26 relates to the proper legal documentation in a child's file to support an appropriate claim for Federal reimbursement under the Title IV-E program.¹¹ For Outcome 26, 148 children (85%) of the 175 children in the Period 10 foster care 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 10 performance is the State's best performance to date.

- *Workforce Management Succeeded with Universally Lowering Caseloads But Case Manager Continuity Did Not Improve. (OM 18)*

In December 2010, **98 percent** of the case managers were at or below the Consent Decree designated caseload caps or DFCS policy requirements. This is a substantial improvement for the State and represents the best performance on caseloads to date. However, 84 percent of the children in custody on December 31, 2010 had two or fewer case managers in the previous 12 months (Outcome 18). This performance is similar to Period 9 and is the second reporting period in which the State has fallen short of the 90 percent standard for this outcome. Although still reasonably high, the continued plateau at this performance level appears to be, in part, the result of case redistributions to comply with the caseload caps. The tension between maintaining worker continuity and maintaining lower caseloads is a real management issue and one that requires attention because both manageable caseloads and worker continuity can affect outcomes for children in foster care. Case manager continuity, in particular, has been shown to have a significant effect on children achieving timely permanency. When making case

¹⁰ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010. The Parties agreed to replace the previous Outcome 31 measure with a revised measure that uses *the placement* as the unit of analysis and which can be extracted from a single, automated data source – SHINES.

¹¹ See pp 36-37, Outcome 26 of the Consent Decree.

assignments, the counties need to remain mindful of the loss of time and knowledge that often accompanies the transfer of responsibilities among case managers.

B. Recommended Priorities for State Attention

The State is to be commended for the positive trends and accomplishments evident in Period 10. Moreover, there were no significant setbacks to progress in Period 10. However, several items remain important challenges. Sustaining the broad-based, significant improvements evident in the many Consent Decree outcomes that have now been achieved, while attaining the last several remaining outcomes, may be the greatest challenge of all. 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 Improve the Timely Completion of CPS Investigations***

Although the timely completion of maltreatment in care investigations improved by 22 percentage points from Period 9, the Period 10 rate of 77 percent remains well below the Outcome 2 standard of 95 percent. Conducting a thorough investigation should remain a higher priority than concluding it within a given time frame, but as recently as Period 7 the State's performance was at 90 percent. Since the corrective actions taken by the State in response to the poor Period 9 performance were implemented during Period 10, the Accountability Agents expect continued improvement to be evident in Period 11. Continued vigilance and accountability are needed if the Outcome 2 standard is to be achieved and maintained.

- ***Restore Investigator Review of Previous CPS History to its Prior Levels***

Checking for any previous CPS history of foster parents at the inception of maltreatment in care investigations is a critical step in establishing a context for the current investigation and in interpreting the facts it brings to light. As recently as Periods 8 and 9, documented compliance with this important step was found to be 92 and 93 percent, respectively. In Period 10, documented compliance inexplicably dropped to 76 percent. It is not known whether this reflects a decline in investigative practice, a decrease in the completeness of documentation, or a combination of the two. However, it casts a shadow over the State's other noteworthy Period 10 accomplishments in the area of maltreatment in care, and the State is urged to take immediate action to address the problem.

- ***Continue to Address the Rate of Re-entry.***

Since June 2010, the counties have initiated some promising strategies to improve the likelihood that children who are reunified with their families or become the custodial responsibility of a relative achieve sustained permanency through those arrangements. As noted, there was improvement in Period 10. Over the next few periods, these efforts may continue to reduce to

the Consent Decree stipulated standard of 8.6 percent the proportion of children experiencing re-entry. 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.*

State strategies initiated during Period 10 to improve assessment of the needs of children and the State's responsiveness to those needs 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.

Table II-1
Kenny A. Outcomes: Progress as of December 31, 2010

Safety Outcomes Children in Foster Care are Safe From Maltreatment in Care	Period 10 Performance	Comparison to Period 9¹²
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.	100%	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.	77%	Improved
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%	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.	0.42%	Improved
Outcome 6: 98% of all foster homes will not have an incident of corporal punishment within the previous 12 months.	100%	Similar
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.	To be reported on in Period 11	
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.	94%	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).	99%	Improved within the Margin of Error

¹²The characterization of differences between Period 10 and Period 9 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, 20, 22, 23, 24, 25 and 31): similar = change up to +/- 2%; improved/declined = change +/- 3% or more; Outcomes measured using a sample each period (numbered 6,7,17,18,19,21,26,27,28,29, and 30) employed a statistical test that measured the differences between the results for the two periods, accounting 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.

Table II-1, continued
Kenny A. Outcomes: Progress as of December 31, 2010

Permanency Outcomes Children in Placements Maintain Family Connections	Period 10 Performance	Comparison to Period 9
Outcome 21: At least 85% of all children with the goal of reunification shall have appropriate visitation with their parents to progress toward reunification.	88%	Similar
Outcome 23: At least 90% of the total minimum number of required monthly sibling-group visits shall have taken place during the reporting period. Children who have one or more siblings in custody with whom they are not placed shall be provided a visit 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. ¹³	92%	New measurement standard and methodology for Period 10
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.	9.6%	Improved
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.	62%	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 month 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%	Similar

¹³ As part of a Stipulated Modification to the Consent Decree, the standard for Outcome 23 was modified. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

Table II-1, continued
Kenny A. Outcomes: Progress as of December 31, 2010

Permanency Outcomes Children Achieve Permanency	Period 10 Performance	Comparison to Period 9
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.	23%	Improved
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	59%	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 ¹⁴	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%	Similar
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.	98%	Similar

¹⁴ 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.

Table II-1, continued
Kenny A. Outcomes: Progress as of December 31, 2010

Permanency Outcomes Children Achieve Permanency	Period 10 Performance	Comparison to Period 9
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 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.	92%	Improved
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.	99%	Improved Within Margin of Error
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.	94%	Similar
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%	Similar

Table II-1, continued
Kenny A. Outcomes: Progress as of December 31, 2010

Well-Being Outcomes Children Experience Stable Placements and Worker Continuity	Period 10 Performance	Comparison to Period 9
Outcome 20a: At least 96.25% of the total minimum number of twice monthly face-to-face visits between case managers and all class member children required by Section 5.D.1.b during the reporting period occur. ¹⁵	97.8%	New measurement standard and methodology for Period 10
Outcome 20b: At least 96.25% of the total minimum number of twice monthly private , face-to-face visits between case managers and all class member children required by Section 5.D.1.b during the reporting period occur ¹⁶	98.3%	New measurement standard and methodology for Period 10
Outcome 22: At least 95% of the total minimum required monthly visits by case managers to care givers during the reporting period occur. ¹⁷	98%	New measurement standard and methodology for Period 10
Well-Being Outcomes Children and Youth Receive Services They Need		
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.	58%	Improved from Period 8
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.	77%	Improved

¹⁵ As part of a Stipulated Modification to the Consent Decree, the standard for Outcome 20 was modified. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

¹⁶ Ibid.

¹⁷ As part of a Stipulated Modification to the Consent Decree, the standard for Outcome 22 was modified. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

Table II-1, continued
Kenny A. Outcomes: Progress as of December 31, 2010

Strengthened Infrastructure Outcomes Effective Oversight of Placement Settings	Period 10 Performance	Comparison to Period 9
Outcome 25: At least 98% of all foster placements serving class member children shall be in full approval and/or licensure status. ¹⁸	98%	New measurement standard and methodology for Period 10
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.	85%	Improved within Margin of Error
Outcome 29: No more than 5% 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.	1%	Similar
Outcome 31: No more than 10% of all foster family home placements serving class member children at any time during the reporting period shall 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. ¹⁹	2%	New measurement standard and methodology for Period 10

¹⁸ As part of a Stipulated Modification to the Consent Decree, the methodology for Outcome 25 was modified. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

¹⁹ As part of a Stipulated Modification to the Consent Decree, the methodology for Outcome 31 was modified. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

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.”²⁰ 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 4 (December 2007). Table III-1 below provides the measured performance summary for each outcome in Period 10. 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 that display the State’s performance trends over the applicable reporting periods to date.

Table III-1
Children in Foster Care are Safe from Maltreatment: Progress as of December 31, 2010

Consent Decree Outcome	Period 10 Performance
Outcome 5: No more than .57% of all children in foster care shall be the victim of substantiated maltreatment while in foster care.	0.42%
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.	100%
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.	77%
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%

²⁰ See p. 4, Principle 4, of the Consent Decree.

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. Interpretation and Measurement Issues

There were no new interpretation or measurement issues encountered during Period 10. 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 4) 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."*²¹ The data used to measure the outcome performance are derived from a review of all 77 investigations of alleged maltreatment concerning class member children in foster care completed during Period 10 (July-December 2010).

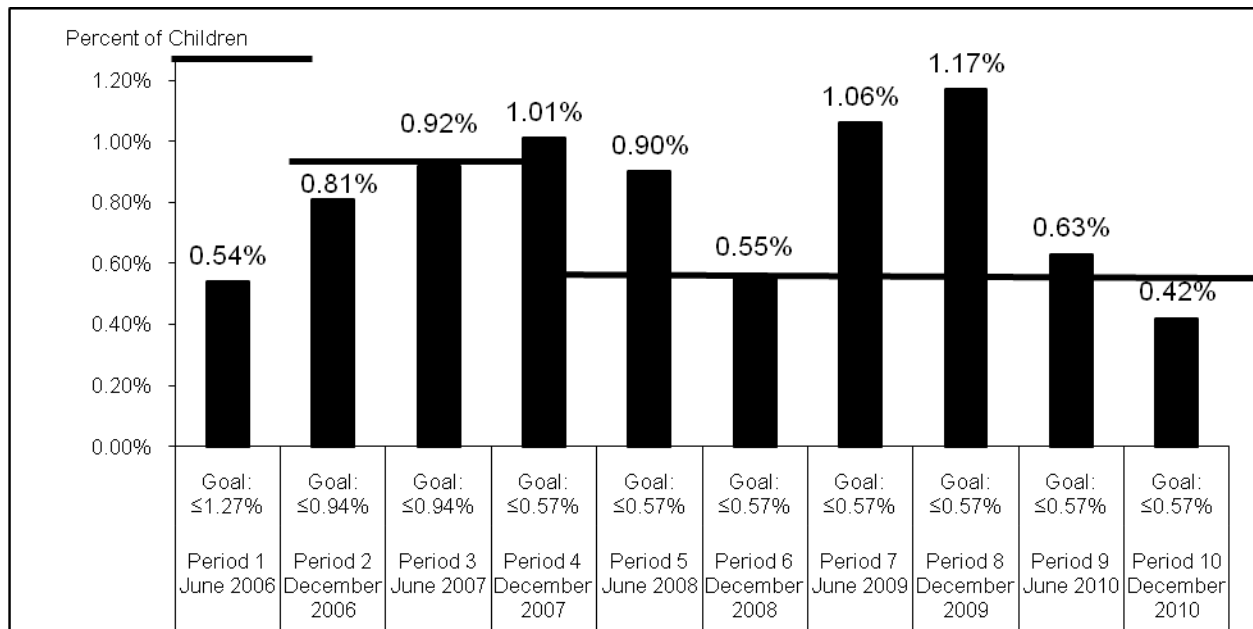
b. State Performance

- **The State Surpassed the Outcome 5 Threshold**

For Outcome 5, less than one-half percent (**0.42%**) of all children in foster care between July 1 and December 31, 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 10 rate is one-third below the Period 9 rate of 0.63 percent, and represents the lowest maltreatment in care rate measured since reporting began. Figure III-1 displays the State's performance over ten reporting periods.

²¹ 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
Ten Reporting Periods of State Performance on Outcome 5:
Maltreatment in Care



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

In Period 10, the case record review found seven instances of substantiated maltreatment fitting the federal definition among the 1,649 children in custody at any point during the reporting period. This is a decline of more than 40 percent from the 12 substantiated victims of maltreatment in care found in Period 9. The type of maltreatment substantiated for these seven children consisted of: inadequate supervision alone (6 children) and inadequate food, clothing, shelter along with emotional abuse (1 child). During the reporting period, 10 other class-member children were the victims of substantiated maltreatment that did not fit the federal definition of maltreatment in care. Three children were maltreated by relatives in whose care the children had been placed, three children were maltreated by a transportation agency employee, two children were maltreated by their biological parent during a supervised visit, one child was maltreated by a licensed practical nurse, and one child was maltreated by a daycare provider.

In Period 10 as in previous reporting cycles, congregate care settings continued to have a substantial impact on the overall maltreatment in care rate. In Period 10, that impact appears to have been salutary, as the lone substantiated victim of maltreatment in a congregate care facility coincided with the lowest maltreatment in care rate recorded since the advent of the Consent Decree.

Table III-2 shows congregate care as the primary driver of the State's best and poorest performance on Outcome 5 to date. It displays the number of victims of substantiated

maltreatment in congregate care settings and in family foster homes for the three reporting periods in which the State had its best performance on Outcome 5, and the three periods with the poorest performance on this outcome. In each of Periods 1, 6, and 10 (the three periods in which performance bettered the current Outcome 5 standard of 0.57%) there were six or fewer substantiated victims of maltreatment in congregate care facilities. Conversely, in each of the three periods in which Outcome 5 exceeded one percent of the children in care, the number of substantiated victims of maltreatment in congregate care facilities ranged from 10 to 15. The number of substantiated victims of maltreatment in family foster homes varied to a much lesser extent across these reporting periods.²²

Table III-2
Substantiated Maltreatment in Congregate Care^a and Family Foster Homes in
Reporting Periods with the Best and Poorest Performance on Outcome 5

Substantiated Maltreatment	Lowest Maltreatment in Care Rates			Highest Maltreatment in Care Rates		
	Period 1	Period 6	Period 10	Period 4	Period 7	Period 8
	Outcome 5: 0.54%	Outcome 5: 0.55%	Outcome 5: 0.42%	Outcome 5: 1.01%	Outcome 5: 1.06%	Outcome 5: 1.17%
Number of Substantiated Victims in Congregate Care	6	2	1	15	10	11
Number of Substantiated Victims in Family Foster Homes	12	11	6	12	15	14
Total	18	13	7	27	25	25

Source: Case file review of all investigations completed October 27, 2005 – December 31, 2010.

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

One reason the maltreatment in care rate is sensitive to maltreatment occurring in congregate care facilities is the fact that maltreatment reports emanating from such settings have a higher likelihood of involving multiple victims. In addition, successfully reducing maltreatment in congregate care settings is complicated by the significant supervision challenges presented by the multiple teens usually placed in such facilities and the tendency for supervision to be provided by non-resident shift-work staff rather than resident parental authority figures.

The challenges of reducing maltreatment in congregate care settings notwithstanding, State efforts to engage providers in finding data-driven strategies to address maltreatment,

²² Although the number of substantiated victims in family foster homes was half in Period 10 than what it was in Period 1, the number remained proportional to the number of children in care at any point during the reporting period, which declined 51 percent between Periods 1 and 10 (from 3349 to 1649).

commenced toward the end of Period 8, appear to be having the desired impact. The State has continued to host monthly “Provider G” meetings modeled on the State’s successful G9 and G2 meetings, which use data related to maltreatment in care and other issues to prompt discussion of the contributing factors and the collaborative development of strategies to address problem areas. During Period 10 these meetings emphasized reducing maltreatment in care, increasing placement stability, and meeting the needs of older youth.

Given the sensitivity of the State’s maltreatment in care rate to maltreatment occurring in congregate care facilities, continuing to meet 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, and continuing to work with providers to identify and ameliorate the conditions associated with the maltreatment of children who *are* placed in congregate care 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 77 maltreatment investigations completed during the reporting period that involved a child in the custody of DeKalb or Fulton County. This represented a six percent decrease from the 82 such reports completed during Period 9. 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

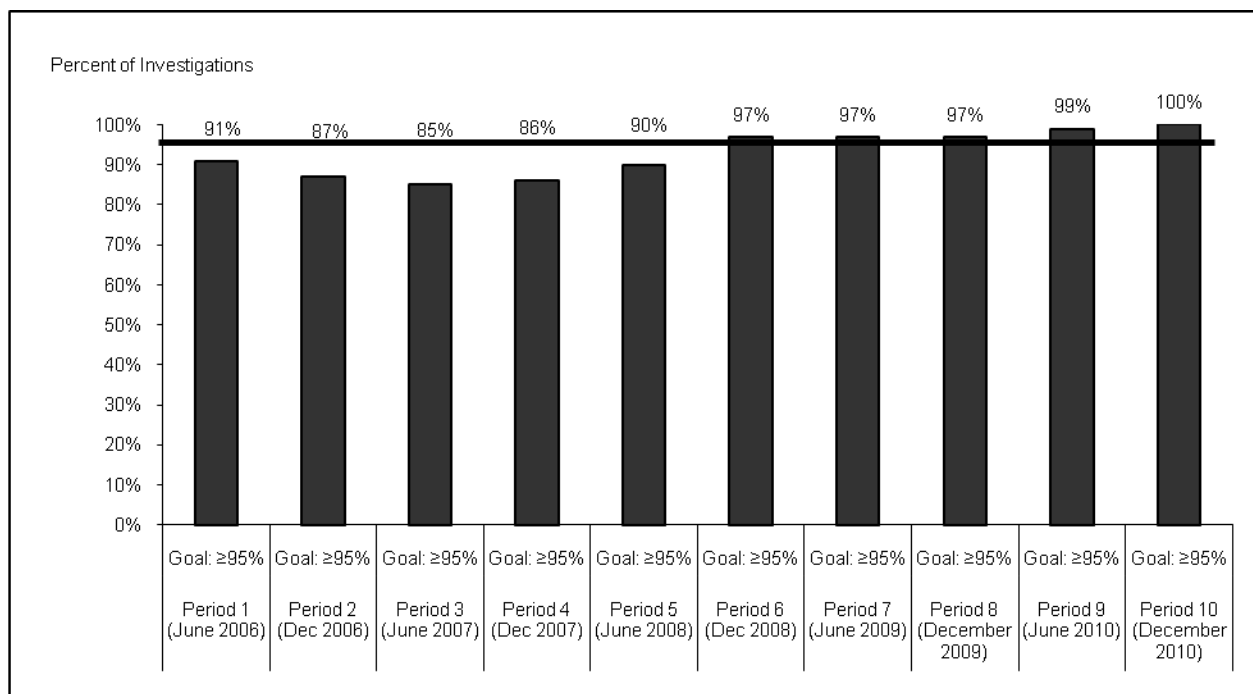
There were no new interpretation or measurement issues encountered during Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The data used to measure the outcome performance are derived from a review of all 77 investigations of alleged maltreatment of class member children in foster care completed during Period 10 (July-December 2010).

b. State Performance

- **The State Surpassed the Outcome 1 Threshold**

As noted in Table III-1 for Outcome 1, **100 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 fifth consecutive reporting period for which the Outcome 1 threshold was surpassed and the highest performance for this outcome measured thus far. Figure III-2 displays the State's performance on Outcome 1 over ten reporting periods.

Figure III-2
Ten 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 – December 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 also 100 percent. This is similar to the DeKalb/Fulton Period 9 rate of 100 percent, and an improvement for the perimeter counties compared to their Period 9 24-hour investigation commencement rate of 97 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.

Table III-3
Outcome 1 – Commencement of Maltreatment in Care Investigations
N=77

Investigating County	Not Commenced Within 24 Hours		Commenced Within 24 Hours		Total	
	Number of Investigations	Percent of Total	Number of Investigations	Percent of Total	Number of Investigations	Percent of Total
DeKalb/Fulton	0	0%	61	100%	61	100%
Perimeter Counties	0	0%	16	100%	16	100%
Total	0	0%	77	100%	77	100%

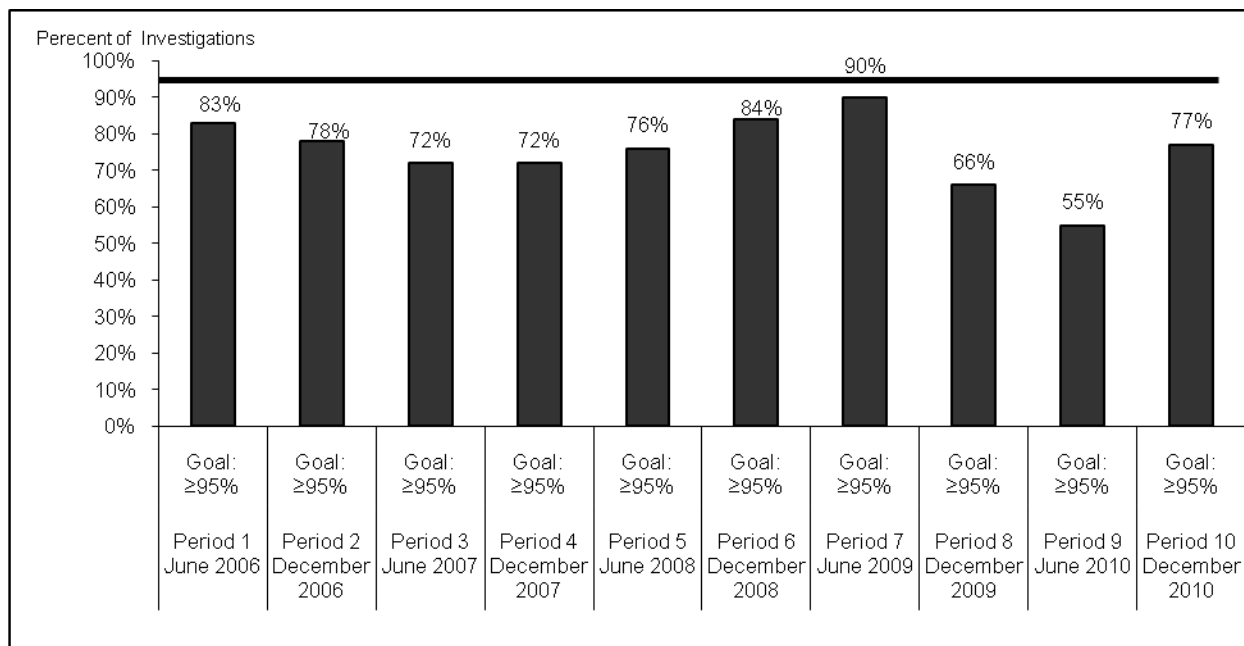
Source: File Review of All Completed Investigations, July - December 2010.

- **The State Fell Short of the Outcome 2 Threshold**

For Outcome 2, **77 percent** of maltreatment in care investigations (59 of 77) were completed within 30 days according to record review data from all investigations completed during the reporting period. This was a 22 percentage point increase compared to the Period 9 rate of 55 percent. An additional 16 investigations (21%) were completed within 31-45 days, bringing the proportion of investigations completed within 45 days to 97 percent. The remaining two investigations (3%) were completed within 46-52 days.

Outcome 2 requires that 95 percent of maltreatment in care investigations be completed, in accordance with DFCS policy, within 30 days. For Period 10, 95 percent of such investigations were completed within 43 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 7 to 55 percent in Period 9) may have resulted from the misapplication by field staff of the 45 day practice standard to investigations of maltreatment involving children in foster care. Figure III-3 displays the State's performance on Outcome 2 over ten reporting periods.

Figure III-3
Ten 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 – December 2010.

The Period 10 performance of DeKalb and Fulton counties in completing investigations within 30 days improved compared to Period 9 (from 58% to 79%) and that of the perimeter counties improved from 50 percent to 69 percent. Period 10 performance in completing investigations within 45 days improved in DeKalb and Fulton compared to Period 9, from 92 percent to 97 percent; while remaining 100 percent for both periods in the perimeter counties. The Period 10 performance of DeKalb, Fulton, and the perimeter counties is displayed in Table III-4.

Table III-4
Outcome 2 – Timely Investigations
N=77

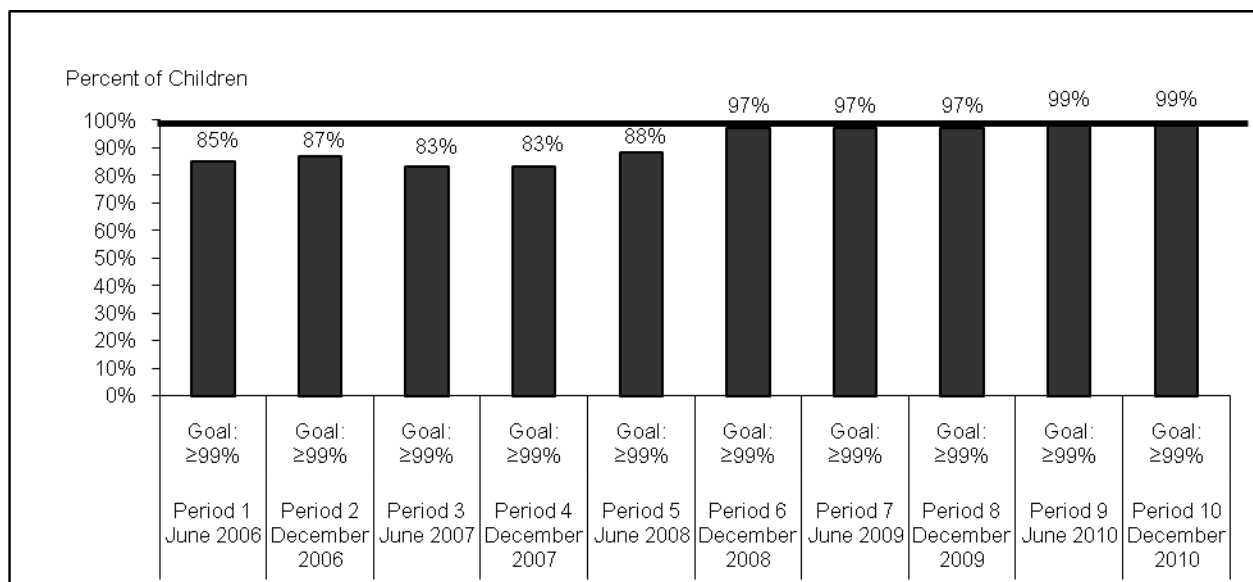
Investigating County	Completed in ≤ 30 Days		Completed in ≤ 45 Days		Total	
	Number	% of Total	Number	% of Total	Number	% of Total
DeKalb/Fulton	48	79%	59	97%	61	100%
Perimeter Counties	11	69%	16	100%	16	100%
Total	59	77%	75	97%	77	100%

Source: File Review of All Completed Maltreatment in Care Investigations, July – December 2010.

- **The State Met the Outcome 3 Threshold**

For Outcome 3, **99 percent** (98 of 99) alleged victims of maltreatment in care during Period 10 had face-to-face private contact with a CPS investigator within 24 hours, according to record review data from all investigations completed during the reporting period. This represents the second consecutive reporting period in which the Outcome 3 threshold was met. Figure III-4 illustrates the State's performance on Outcome 3 for 10 reporting periods.

Figure III-4
Ten 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 – December 2010.

The 99 alleged victims of maltreatment in care represented a nine percent decrease from the 109 alleged victims reported for Period 9. The Outcome 3 performance of the perimeter counties improved from 98 percent in Period 9 to 100 percent in Period 10, while the performance of DeKalb and Fulton counties dropped slightly from 100 percent to 99 percent. Period 10 data for Outcome 3 is displayed in Table III-5.

Table III-5
Outcome 3 – Face-to-Face Contact with Alleged Maltreatment Victims within 24 Hours
N=99

Investigating County	No Contact Within 24 Hours		Removed Prior To or Within 24 Hours of Report		CPS Contact Within 24 Hours		Total	
	Alleged Victims	Percent of Total	Alleged Victims	Percent of Total	Alleged Victims	Percent of Total	Alleged Victims	Percent of Total
DeKalb/Fulton	0	0%	1	1%	78	99%	79	100%
Perimeter Counties	0	0%	0	0%	20	100%	20	100%
Total	0	0%	1	1%	98	99%	99	100%

Source: File Review of All Completed Maltreatment in Care Investigations, July – December 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 Fulton County. In this case, the alleged victim was removed from the placement setting in which the maltreatment was alleged to have occurred by the supervising private agency within 24 hours, but the child was not interviewed by the Fulton County CPS investigator within that timeframe.

c. Operational Context

The State's overall Period 10 performance on the outcome measures related to child safety represented continued improvement from Periods 8 and 9 and the State's best performance to date, with the exception of Outcome 2 (timely investigation completion). The maltreatment in care rate of 0.42 percent (Outcome 5) was the lowest rate measured since the advent of the Consent Decree. 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) equaled or exceeded the previous "high water marks" at 100 percent and 99 percent, respectively, and represented the fifth consecutive reporting period for which performance on these measures exceeded 97 percent. The proportion of timely-completed investigations (Outcome 2), while still low at 77 percent, represented a substantial improvement from the Period 9 performance of 55 percent.

The State's improved performance on Outcome 2 likely resulted from a set of corrective actions put in place under an agreement with Plaintiff's Counsel to address a precipitous decline in Outcome 2 observed between Periods 7 and 9. That decline was thought to be the product of confusion in the field that a 45 day timeframe that was adopted for "regular" CPS investigations to accommodate the use of a new risk assessment tool also applied to investigations of

maltreatment in care, which are considered “special” investigations and to which the 45 day timeframe did not apply.²³ The corrective actions taken by the State after Period 9 involved:

- Issuing a memo to the field clarifying the time frames for completing special investigations as well as which cases meet the criteria for special investigations;
- Including in weekly cadence calls (a means through which county accountability on a number of measures is ensured and reinforced) special investigations and their timely completion (within 30 days) as well as the timely completion of regular investigations (45 days);
- Resuming comprehensive *Kenny A.* training for county staff during calendar year 2011; and,
- Releasing a SHINES enhancement that allows 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 are now able to produce the report daily to see how long cases have been open and if they are approaching the 30th day.

As these corrective actions were implemented at varying points throughout Period 10, their full impact on Outcome 2 is unlikely to be realized until Period 11 and beyond.

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.”²⁴ Outcome 6 stipulates that by the end of Period 4, 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....”²⁵ 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 160 foster homes that had a class member in care at any point during the reporting period.

²³ See Dimas, J.T. and Morrison, S.A. *Period IX Monitoring Report, Kenny A. v Perdue*, December 2010 pp. 30-31 for a more detailed discussion of this issue.

²⁴ See p. 2 of the Consent Decree.

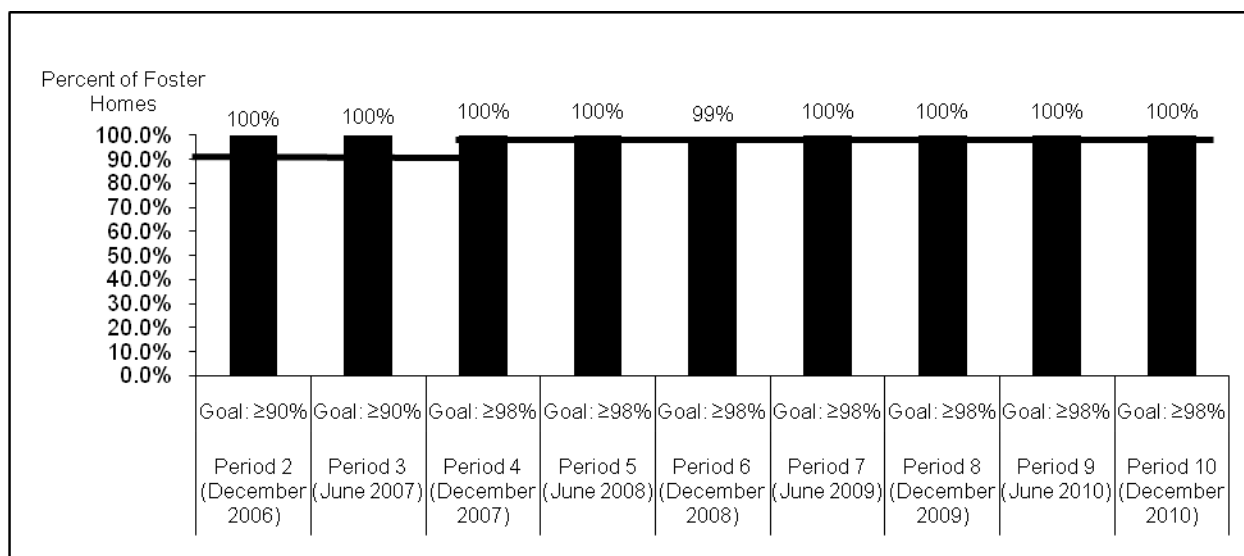
²⁵ See p. 32 of the Consent Decree.

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 rate as Period 9 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 nine reporting periods to which the Consent Decree standards applied.

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



Source: Foster Home Record Reviews, July 2006 – December 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.²⁶ 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 175 randomly selected foster care records and all 77 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. However, the review of foster care records of 175 sampled children and 160 foster home records identified four instances (two each from DeKalb and Fulton counties) in which placement staff declined or failed to refer allegations of maltreatment to CPS staff for screen-out or investigation, as appropriate. These incidents are described below:

- Incident 1. A DeKalb County child had a physical altercation (shoving) with his birth mother on an overnight visit near the end of the reporting period. The child's placement case manager (PCM) and her supervisor were made aware of the incident but did not refer the matter to CPS for screen-out or investigation. The County initiated an investigation after the incident was brought to their attention by the *Kenny A.* file review team and the allegation of physical abuse was found to be unsubstantiated.
- Incident 2. A foster mother notified her supervising CPA that a DeKalb County child in her care had a mark from a scarf being tied too tightly around her head while she slept. She also indicated the child had told a teacher that the mark was from being pushed down the stairs by the foster mother, which the foster mother denied doing. The supervising CPA notified the child's PCM of the incident. After discussing the incident with her supervisor and the CPA case manager, it was determined that a CPS report was not warranted because there was no evidence of maltreatment. The County initiated an investigation after the incident was brought to their attention by the Accountability Agents and that investigation has not yet been concluded.

²⁶ See pp.28-30 of the Consent Decree.

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- Incident 3. A medically fragile Fulton County child placed in DeKalb County was found by daycare nurses to have bruises and marks of unknown origin on his chin and back. The foster mother offered inconsistent accounts of how the injuries occurred. The child's Fulton County PCM was notified of the situation and she brought it to her supervisor's attention. Documentation indicates the supervisor attempted to refer the incident to DeKalb County CPS for investigation or screen-out, but was required to leave a message. There is no evidence that the supervisor followed-up with DeKalb County CPS, and DeKalb County CPS could find no record of the incident being reported, or of it being screened out or investigated. The child in care was moved in early 2011 and the foster home was closed due to a separate CPS report involving the foster mother's birth child.
 - Incident 4. A Fulton County child placed in a CPA-supervised foster home in Newton County reported to his CPA case manager that his foster mother subjected him to corporal punishment. The CPA conducted an investigation and determined there was no evidence to support the allegation. The child subsequently recanted the allegation. The supervising CPA notified the Fulton County PCM and placement supervisor of the matter and they determined that they would not make a CPS report on this incident. The corporal punishment allegation concerning this child surfaced again during a subsequent CPS investigation of the home conducted by Newton County involving one of this child's siblings, and the allegation was found to be unsubstantiated.

According to Section 12.A. of the Consent Decree and to DFCS policy, it appears that all four of these allegations should have been referred to the CPS unit for assessment and screen-out or investigation. These cases were referred to the DeKalb and Fulton County leadership for further action. As a consequence, the DeKalb County PCMs and supervisors involved in the first two incidents were counseled on maltreatment policy and related *Kenny A.* requirements by their administrator and a Permanency Section meeting is planned to again review these requirements with all placement workers and supervisors. The Fulton County administrator responsible for the staff involved in Incidents 3 and 4 addressed the incidents and the *Kenny A.* and DFCS policy requirements at a unit staff meeting, clarified that all incidents involving children in care (including policy violations) should be referred to and handled by CPS staff, and instituted a unit policy requiring follow-up within 24 hours of making a CPS referral. In addition, the Accountability Agents have encouraged the DFCS Office of Provider Management to remind all CPAs and CCIs that they are required to report to their county DFCS office and to ORCC any allegations of maltreatment or corporal punishment of children placed in their care and that such reporting should neither be delayed while they conduct their own internal investigations nor contraindicated by the outcome of any such internal investigation.

Based on a careful vetting of the specifics of these cases, the Accountability Agents are satisfied that they represent isolated incidents and are not indicative of a systemic problem. 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. Investigations Conducted in Accordance with State Standards

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.”²⁷ DFCS policy on maltreatment in care investigations (which are considered “Special Investigations”) is contained in Section 2106 of the Social Services Manual.²⁸ Section 2106 contains guidance on the many aspects of properly conducting Special Investigations, such as separately interviewing the parties involved, contacting DFCS case managers required to visit the placement setting, 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 10 were conducted in accordance with the investigative 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 record was adequate to provide a conclusive, affirmative response.

²⁷ See p. 28 of the Consent Decree.

²⁸ Social Services Manual, Chapter 2100, Section VI, Georgia Dept. of Human Resources, July 2005.

Table III-6
Proportion of Investigations Meeting Policy Requirements
(N shown is for Period 10 cases and varies based on
placement setting and other case characteristics)

Investigation Policy Requirement	Percent of Applicable Files with Documentation of Compliance	
	Period 9	Period 10
Investigator saw/interviewed every alleged maltreated child separately (N=77)	100%	100%
At least two relevant collateral sources contacted during the investigation (N=77)	96%	99%
Alleged maltreater was interviewed separately (N=74)	96%	97%
Continued safety of the child(ren) placed in the home was adequately evaluated and assessed (N=49)	96%	96%
All approved foster parents/caregivers interviewed separately (N=77)	95%	95%
All other adults frequently in the home interviewed separately (N=13)	100%	92%
Investigator saw/interviewed each of the other children (non-alleged victims) separately (N=57)	90%	91%
Investigator reviewed the DFCS history of the foster parent/caregiver (N=49)	95%	88%
DFCS case managers required to visit in this foster care setting were contacted (N=77)	87%	88%
Investigator reviewed previous CPS reports for foster parents/caregivers (N=49)	93%	76%
Case record contains physical evidence to support case documentation (N=37)	82%	76%

Source: Case file review of all maltreatment in care investigations completed January 1 – December 31, 2010.

As reflected in Table III-6, documented compliance with each of the 11 investigative policy requirements applicable to most investigations was found in 80 percent or more of the records reviewed for all requirements but two (*case record contains physical evidence to support case documentation* and *investigator reviewed previous CPS reports for foster parents/caregivers*). Performance on these two requirements is considered in greater detail below.

Compared to Period 9, Period 10 showed evidence of improved compliance for one requirement (*at least two relevant collateral sources contacted during the investigation*), six requirements (*investigator saw/interviewed every alleged maltreated child separately*; *alleged maltreater was interviewed separately*; *continued safety of the children placed in the home was adequately evaluated and assessed*; *all approved foster parents/caregivers interviewed separately*; *investigator saw/interviewed each of the other children (non-alleged victims) separately*; and *DFCS case managers required to visit in the foster care setting were contacted*) remained about the same (\pm one percentage point), while

compliance appears to have declined for four requirements (*all other adults frequently in the home interviewed separately; investigator reviewed the DFCS history of the foster parent/caregiver; investigator reviewed previous CPS reports for foster parents/caregivers; and case record contains physical evidence to support case documentation*).

The compliance rate of 76 percent for *case record contains physical evidence to support case documentation* represented 28 of the 37 cases in which the record reviewer concluded that the nature of the allegations warranted the collection of physical evidence. Of the nine such cases in which no physical evidence was found in the SHINES case record, seven (78%) had a clear indication in the case record that such evidence **was** collected. The problem of physical evidence existing but not being retrievable in SHINES is not a new one, and it remains unknown whether its cause is failure by the investigators to upload the physical evidence to SHINES altogether; failure of the investigator to **properly** upload the physical evidence to SHINES; failure of SHINES to properly and reliably handle the documents uploaded to the system; or some combination of these. However, it is an ongoing problem that the Accountability Agents, record review staff, and other DFCS staff continue to encounter and DHS is strongly urged to investigate its causes and to take whatever remedial action is required to correct it.

The compliance rate of 76 percent for *investigator reviewed previous CPS reports for foster parents/caregivers* is the lowest rate measured since the advent of the Consent Decree. It is unclear to what extent this reflects a regression in investigative practice, a deficiency in case documentation, or a combination of the two. In the first five reporting periods, the compliance rate for this extremely important step in conducting a thorough CPS investigation ranged from 90 percent to 96 percent. After the implementation of SHINES, compliance rates fell to 87 percent in Period 6 and to 84 percent in Period 7, primarily, it was thought, because while SHINES contains “hard-coding” to indicate that the intake worker searched for a previous CPS record on an alleged maltreater when the CPS report was taken (and identifies the intake worker who performed the search) SHINES has no dedicated mechanism (such as clicking a radio button) that the investigator can use to indicate that he/she *reviewed* the CPS history compiled by the intake worker. The only place in SHINES an investigator can indicate that they reviewed previous CPS reports on an alleged maltreater is in the “contact narrative” field (which supports free form text). This prompted the Accountability Agents to conclude in the Period 7 Report that “In the near term, it appears that this problem must be approached as an ongoing training challenge....In the longer term, it appears that some modifications to SHINES to support the hard-coding of additional important information on the investigative process may be warranted.”²⁹ Although modifications to SHINES to address this limitation have not been made, compliance rates subsequently rebounded to 92 percent in Period 8 and to 93 percent in Period 9, as investigators grew more consistent in their use of the contact narrative field to document their review of previous CPS histories.

²⁹ Dimas, J.T. and Morrison, S.A. *Period VII Monitoring Report, Kenny A. v Perdue*, January 2010 p. 37.

Given this history, the Period 10 drop-off to 76 percent is somewhat perplexing. All of the Period 10 investigations that had no documentation that the previous CPS history was reviewed were conducted by DeKalb and Fulton Counties. A number of the Fulton County investigations in question were conducted by relatively inexperienced investigators, which might explain the missing documentation in those cases. However, DeKalb County investigations accounted for a majority of the cases that had no such documentation, and nearly all of those were conducted by fairly experienced investigators – largely the same investigators who contributed to the 92 and 93 percent compliance rates in Periods 8 and 9. DHS and DFCS are strongly urged to make immediate remediation of this problem through training, supervision, and/or technological enhancements, as appropriate, a high priority.

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 Management (OPM).³⁰ 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....”³¹

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 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.

³⁰ 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.

³¹ See Section 12 B, p. 28 of the Consent Decree.

- **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 improved in Period 10. Complete 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 10, data collected directly from the DFCS Policy Unit indicate that administrative packets were received for 74 (96%) of the 77 maltreatment in care investigations completed during Period 10. This was similar to Period 9 when the Policy Unit was notified of 78 of 82 investigations (95%). Thirty (41%) of the 73 reports the Policy Unit received for Period 10 were received within the 10-day window specified by DFCS policy.³² This rate remains low but represents a substantial improvement from the 22 percent of maltreatment in care reports received within the 10 day window in Period 9. Table III-7 displays data on reporting of maltreatment in care investigations to the DFCS Policy Unit.

Table III-7
Policy Unit Notification of Period 10 Maltreatment in Care Investigations
N77

Investigating County	Total Investigations	Notified		Not Notified	
	Number	Number	% of Total	Number	% of Total
Fulton	28	28	100%		
DeKalb	33	31	94%	2	6%
Carroll	1	1	100%		
Cobb	3	3	100%		
Douglas	3	2	67%	1	33%
Fayette	2	2	100%		
Forsyth	1	1	100%		
Henry	2	2	100%		
Richmond	1	1	100%		
Rockdale	2	2	100%		
Taylor	1	1	100%		
Total	77	74	96%	3	4%

Source: Survey of Notification of CPS Investigations in Foster Care Settings, July 1 – December 31, 2010.

The Period 10 file review of maltreatment in care investigations included 46 investigations of maltreatment that occurred in provider-supervised settings and therefore should have been

³² Social Services Manual, Section 2106.11, Georgia Dept. of Human Resources, July 2005.

reported to both ORCC and OPM.³³ Data collected directly from ORCC and OPM indicate that ORCC was notified of 43 (93%) of these 46 investigations. This represents an improvement from Period 9 when ORCC was notified of 91 percent of such maltreatment in care investigations. Table III-8 displays data on county reporting of maltreatment in care investigations to ORCC.

Table III-8
Office of Residential Child Care Notification of
Period 10 Maltreatment in Care Investigations
N=46

Investigating County	Total Investigations	Notified		Not Notified	
	Number	Number	% of Total	Number	% of Total
DeKalb	20	20	100%		
Fulton	18	16	89%	2	11%
Carroll	1	1	100%		
Cobb	1	1	100%		
Fayette	1	1	100%		
Henry	2	2	100%		
Richmond	1			1	100%
Rockdale	1	1	100%		
Taylor	1	1	100%		
Total	46	43	93%	3	7%

Source: Survey of Notification of CPS Investigations in Foster Care Settings, July 1 – December 31, 2010.

DeKalb County conducted the largest number of maltreatment in care investigations in provider-supervised settings at 20. All 20 (100%) were reported to ORCC. This matches DeKalb's Period 9 performance when the County notified ORCC of 100 percent of seven such investigations. Fulton County conducted eighteen maltreatment-in-care investigations in provider-supervised settings and notified ORCC of sixteen (89%) of these. In Period 9, Fulton County notified ORCC of fourteen such investigations out of sixteen (88%). Six of the seven perimeter counties that completed maltreatment in care investigations in provider-supervised settings notified ORCC of 100 percent of those investigations. The remaining perimeter county (Richmond) failed to notify ORCC of the one such investigation it conducted. 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.

³³ There were a total of 55 investigations that involved children placed in provider-supervised settings, but nine of these fell outside the jurisdiction of ORCC and OPM. In four of these nine cases, the alleged maltreatment occurred outside the child's placement (including at the home of the biological parent and during transit by a transportation agency employee) 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 the Department of Community Health, Healthcare Facility Regulation Division.

The Period 10 notification data illustrate that county incident reporting enables prudent, collaborative action by ORCC and DFCS. Among the 43 maltreatment in care investigations of which ORCC was informed, ORCC elected to conduct a joint investigation with DFCS for 35 (81%) of them. Not surprisingly, among the three 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 10, OPM appears to have been notified of 46 (100%) of the 46 investigations of alleged maltreatment that occurred in provider-supervised settings. This is a significant improvement from Period 9, when OPM was notified of 77 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 10 Maltreatment in Care Investigations
N=46

Investigating County	Total Investigations	Notified		Not Notified	
	Number	Number	% of Total	Number	% of Total
DeKalb	20	20	100%		
Fulton	18	18	100%		
Carroll	1	1	100%		
Cobb	1	1	100%		
Fayette	1	1	100%		
Henry	2	2	100%		
Richmond	1	1	100%		
Rockdale	1	1	100%		
Taylor	1	1	100%		
Total	46	46	100%		

Source: Survey of Notification of CPS Investigations in Foster Care Settings, July 1 – December 31, 2010.

DeKalb County notified OPM of 100 percent (20 of 20) of the investigations of alleged maltreatment in provider-supervised settings completed during Period 10. This matched DeKalb's Period 9 performance when the County notified OPM of seven of seven such investigations (100%). Fulton County completed 18 investigations of maltreatment alleged to have occurred in such settings and notified OPM of 18 of these (100%). This represents a substantial improvement from Period 9 when Fulton County notified OPM of 10 of 16 investigations (63%). All perimeter counties that completed maltreatment investigations in

provider-supervised settings (Carroll, Cobb, Fayette, Henry, Richmond, Rockdale, and Taylor) had OPM notification rates of 100 percent.

- **Review by ORCC and OPM of Maltreatment in Care Reports in Provider-supervised 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. The OPM Contracts and Risk Manager leads the review process for OPM. ORCC and OPM staff meet individually or 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 or, in some instances, completion of it, intake may be suspended for that provider.
- 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. Corporal Punishment in Foster Homes

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.³⁴ The following discussion summarizes the requirements and how DFCS is meeting them.

³⁴ See pp 29-30, paragraph 12.C of the Consent Decree.

a. Awareness of Corporal Punishment Prohibition

All placement settings are to prohibit the use of corporal punishment. In 160 of 160 foster home records sampled (100%), 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 9 performance of 99 percent.

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, and 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.

c. Compliance with Corporal Punishment Prohibition

Actual compliance with the corporal punishment prohibition appears to be excellent. The review of child records of 175 randomly selected children in foster care during Period 10 identified no confirmed instances of corporal punishment (0.0%). This is comparable to Period 9, during which there were no confirmed instances of corporal punishment among the children included in the placement sample.

The foster home record review of 160 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 160 foster home records reviewed (0.6%). In this one incident, a child in respite care at a provider-supervised foster home was allegedly spanked. The supervising CPA made an incident report to ORCC and ORCC made a CPS report that was screened out by CPS staff. The child was returned to her placement foster home, and the supervising CPA treated the incident in the respite home as an infraction of their disciplinary policy.

The review of all 77 maltreatment in care reports investigated during the reporting period identified seven reports (9%) that began as an allegation of corporal punishment. This represents an increase from Period 9, during which one of the 82 maltreatment in care reports (1%) began as a corporal punishment allegation. None of the seven investigations completed during Period 10 that began with an allegation of corporal punishment was found to be substantiated for abuse or neglect. In two cases, no further action was taken. However, in the remaining five cases:

- The alleged victim child and a sibling were removed from the placement and not returned in one case;
- The foster parent received a written reprimand for failing to report in a timely manner an incident that allegedly occurred in a daycare center in one case;
- Overnight unsupervised visits with the birth father were temporarily discontinued in one case;
- Relative caregivers were counseled on acceptable methods of discipline in two cases, and in one of these, the relatives signed a safety plan stating that they would not use corporal punishment on the children in their care.

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 seven CPS investigations prompted by an allegation of corporal punishment; two involving children placed in DFCS supervised foster homes, two involving children placed in provider-supervised foster homes, and three involving children in relative placements. Of these seven investigations:

- 7 (100%) showed that all alleged victims were interviewed separately within 24 hours;
- 7 (100%) showed that the continued safety of any children remaining in the home was adequately evaluated;
- 7 (100%) included investigative documentation that the record reviewers felt was consistent with the investigative conclusion; and,
- 5 (71%) of the investigations were completed within 30 days as required by DFCS policy (the remaining two investigations were completed in 33 and 51 days, respectively).

In neither of the investigations involving children placed in privately-supervised foster homes was corporal punishment alleged to have occurred in the child's placement setting (in one case the maltreatment was alleged to have occurred in a day care center and in the other, in a birth parent's home during an unsupervised visit). Although in such instances notice of the investigation is not required to be made to ORCC and OPM, OPM was notified of the report and of the investigative conclusion in both of these cases. ORCC was notified of the report involving the day care center, but was not 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 1 requirements that have been discussed in previous reports.³⁵ The remaining outcomes apply to subsequent reporting periods with the final phase-in of performance thresholds occurring in Period 4. 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 10. This part also includes charts that display the State's permanency performance trends over the applicable reporting periods to date.

³⁵ 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 10 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.	To be reported on in Period 11
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.	94%
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).	99%
Outcome 21: At least 85% of all children with the goal or reunification shall have appropriate visitation with their parents to progress toward reunification.	88%
Outcome 23: At least 90% of the total minimum number of required monthly sibling-group visits shall occur during the reporting period. Children who have one or more siblings in custody with whom they are not placed shall be provided a visit 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. ³⁶	92%
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.	9.6%
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.	62%
Outcome 9: Children in custody for up to 24 months and still in custody upon entry of the Consent Decree (children in the "24 month 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%

³⁶ As part of a Stipulated Modification to the Consent Decree, the standard for Outcome 23 was modified. See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

Table IV-1, continued
Permanency Outcomes

Children Achieve Permanency	Period 10 Performance
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 month 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.	23%
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.	59%
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.	First Period 94% One Time 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 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.	First period 30% One time measure
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.	98%
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 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.	92%
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.	99%

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

One of the Consent Decree principles is “*all non-destructive family ties should be maintained and nurtured.*”³⁷ Preserving connections between children and their families, friends, and community is an important strategy for achieving permanency when those relationships are not destructive. 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 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.³⁸

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 19 performance is based on the sample of 175 children in foster care at any time between July 1 and December 31, 2010.

b. State Performance

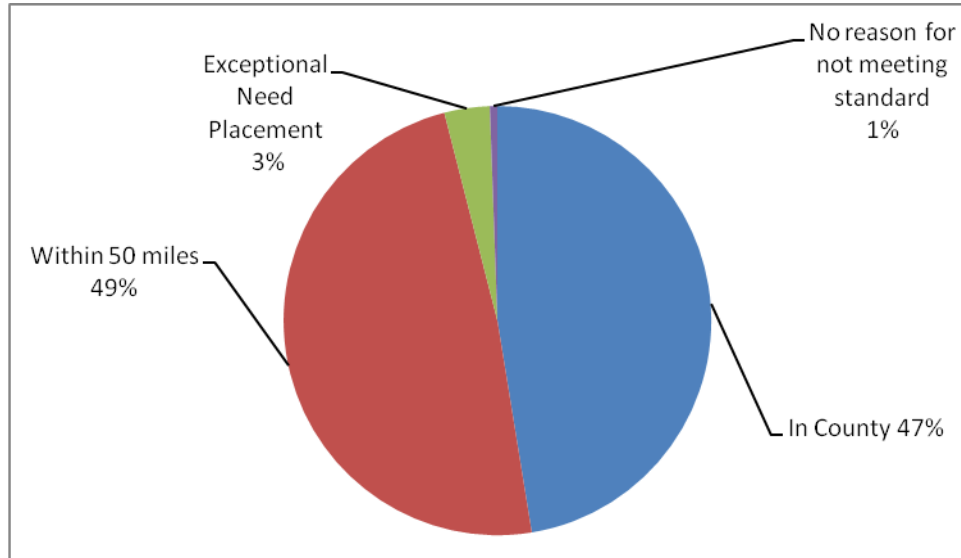
- **The State Surpassed the Outcome 19 Threshold**

The State placed 174 children (99%) of the 175 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 174 children, 168 children were placed within the same county as the home from which they were removed or within a 50 mile radius of the home. Placement of six other children was acceptable as two children were placed outside the designated proximity because of their exceptional needs, three children were placed in other states through ICPC arrangements, and one child was placed with relatives outside the 50 mile radius. The distribution of all children in the sample among placement locations is displayed in Figure IV-1. The State’s performance over the nine reporting periods to which the Consent Decree standards applied is displayed in Figure IV-2.

³⁷ See p. 4, principle 2 in the Consent Decree.

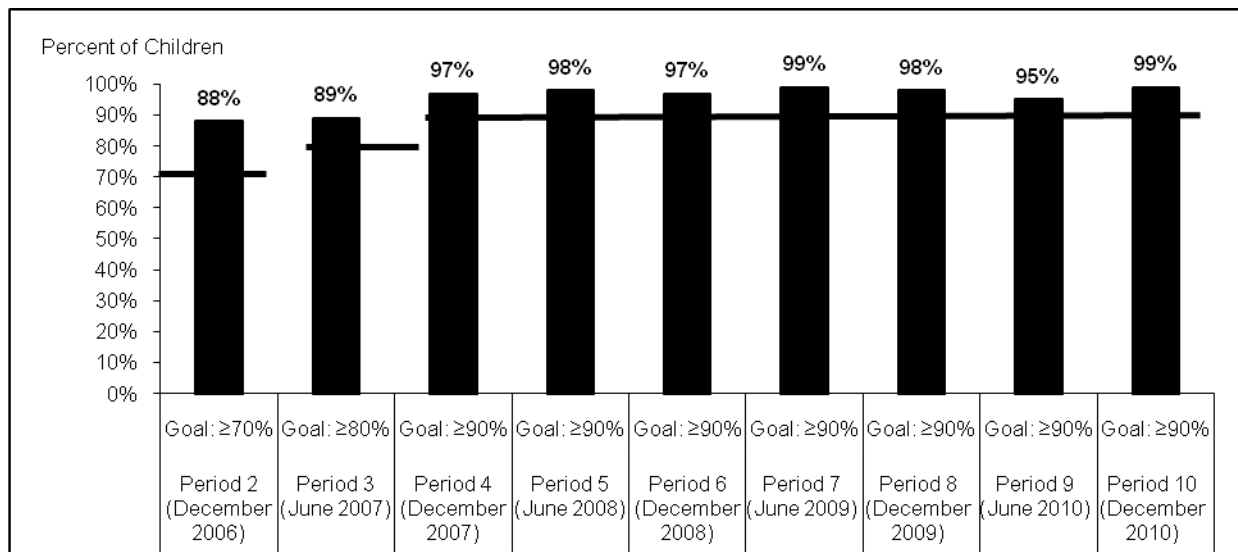
³⁸ See p. 35, Outcome 19, of the Consent Decree.

Figure IV-1
Child Placement Proximity to Home of Removal
or Reason for Being Unable to Place Within the Proximity Standards
n=175



Source: Case Record Review February-March 2011

Figure IV-2
Nine 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-December 2010

Outcome 21 – Parent-Child Visitation

National studies have found that children who have frequent, regular contact with 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)³⁹ by setting a target for the proportion 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 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 21 is based on the sample of 175 children at any time between July 1 and December 31, 2010. Within the sample of 175 children in foster care, 105 were considered to have the permanency goal of reunification for purposes of measuring parental visitation. However, 14 children were excluded from the analysis for the following reasons:

- Four children were placed the entire period with the family member with whom they were to be reunified.
- Five children were discharged within 10 days of the beginning of the period.
- Five children had the following special circumstances:
 - One youth made allegations against the adoptive father about past sexual abuse and refused to visit with either parent. The youth's therapist recommended against visits with father.
 - One child's mother has severe mental health problems and has been inconsistent with visits. The child has a concurrent plan of reunification and placement with a fit and willing relative. By December 31, 2010 the State had petitioned the court to terminate parental rights.
 - The reunification resource for two siblings was incarcerated 70 miles away from their placement at the end of June.
 - A youth who was in custody less than 30 days at the beginning of the period refused to visit with parents and was discharged to a guardian.

Therefore, 91 children were included in the parent-child visitation analysis. Conclusions drawn from the subsample of 91 children used in this analysis are subject to a margin of error of ± 10 percent.

³⁹ 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.

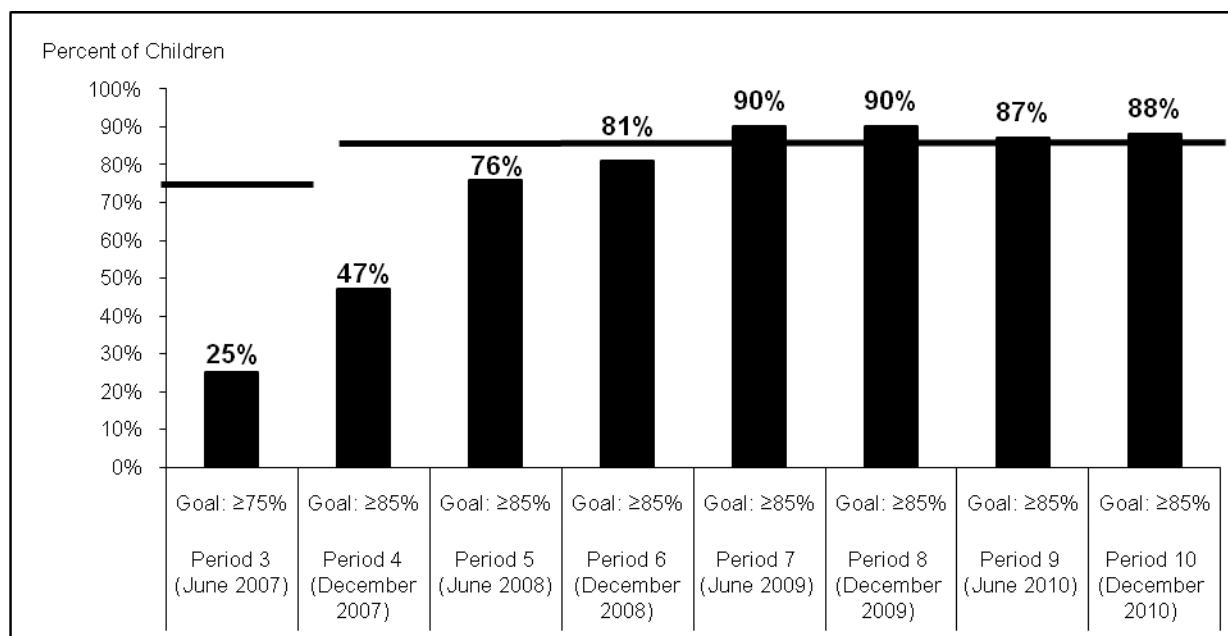
b. State Performance

- **The State Surpassed the Outcome 21 Threshold**

Among the 91 children included in this analysis, 80 children (**88%**) 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.⁴⁰ In fact, 17 of these children (19% of 91) were reunified during the period. The performance threshold for this outcome is 85 percent. This performance is similar to as the Period 9 performance of 87 percent. The Period 10 performance is also similar to that indicated by county tracking systems for all children in care during the period that had a goal of reunification.

Among the remaining 11 children, eight children had sporadic visits and three children had no documented visits with their parents. Eight of the 11 children had concurrent goals of reunification or adoption or of living with a relative or adoption; and three had the goal of reunification alone. Two of the 11 children did exit to the custody of relatives during the period. Figure IV-3 displays the State's performance over the eight reporting periods to which the Consent Decree standards applied.

Figure IV-3
Eight 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 – December 2010

⁴⁰ See Appendix B for a discussion of how “appropriate visitation” was determined.

Outcome 16– Sibling Placement and Outcome 23 - Sibling Visitation

The Consent Decree stipulates a sibling placement standard⁴¹ 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 requires at least monthly visits between siblings in care that are not placed together, unless specific circumstances preclude such visits. Starting with Period 10, at least 90 percent of the total required monthly sibling-group visits are to take place each reporting period.⁴² Because Outcomes 16 and 23 both focus on sibling connections, they are reported on together.

a. Outcome 16: Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. The analysis relied on SHINES data. A total of 146 children entered custody in a sibling group of two or more during Period 10. Among the 146 children, three in two sibling groups were separated from other siblings due to special medical or developmental needs. The placement arrangements of the remaining 143 children were used to measure the Outcome 16 performance.

b. Outcome 16: State Performance

- **The State Surpassed the Outcome 16 Threshold**

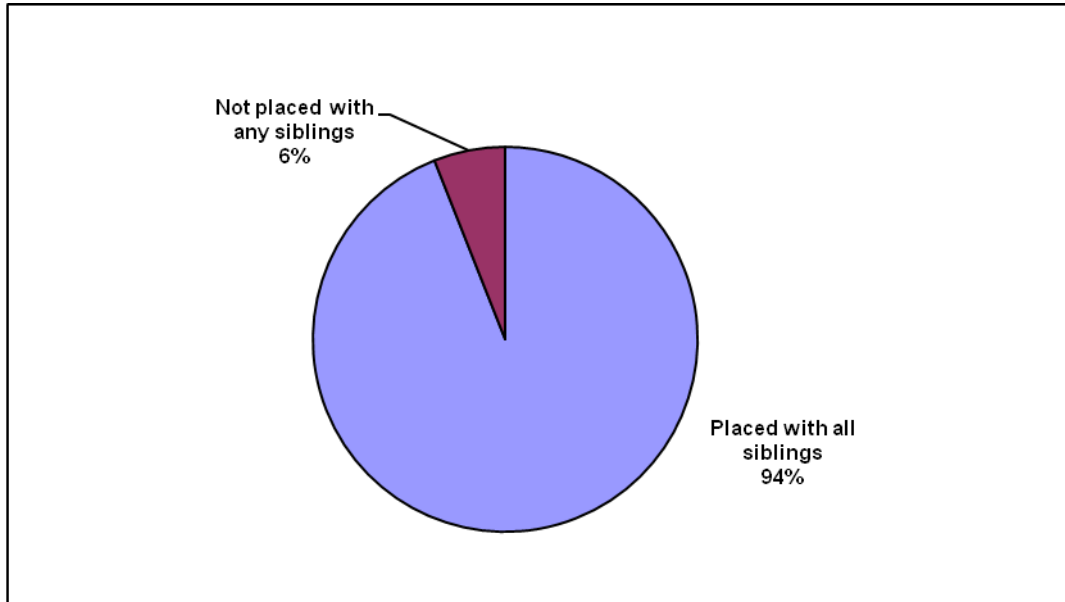
Of the 143 children who entered custody with one or more siblings in Period 10 and did not have a special placement need, 135 children (94%) were placed with all of their siblings.⁴³ Outcome 16 requires at least 80 percent be placed with all siblings. This is an improvement over the Period 9 performance of 84 percent and it is the State's best performance to date on this outcome. The eight children that were not placed with siblings were separated because of sibling conflict and behavior or the sibling group was split among relatives. Figure IV-4 illustrates the sibling placement pattern in Period 10 and Figure IV-5 displays the State's performance over the seven reporting periods to which the Consent Decree standard applied.

⁴¹ See p. 16, paragraph 5C.4.d of the Consent Decree.

⁴² See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

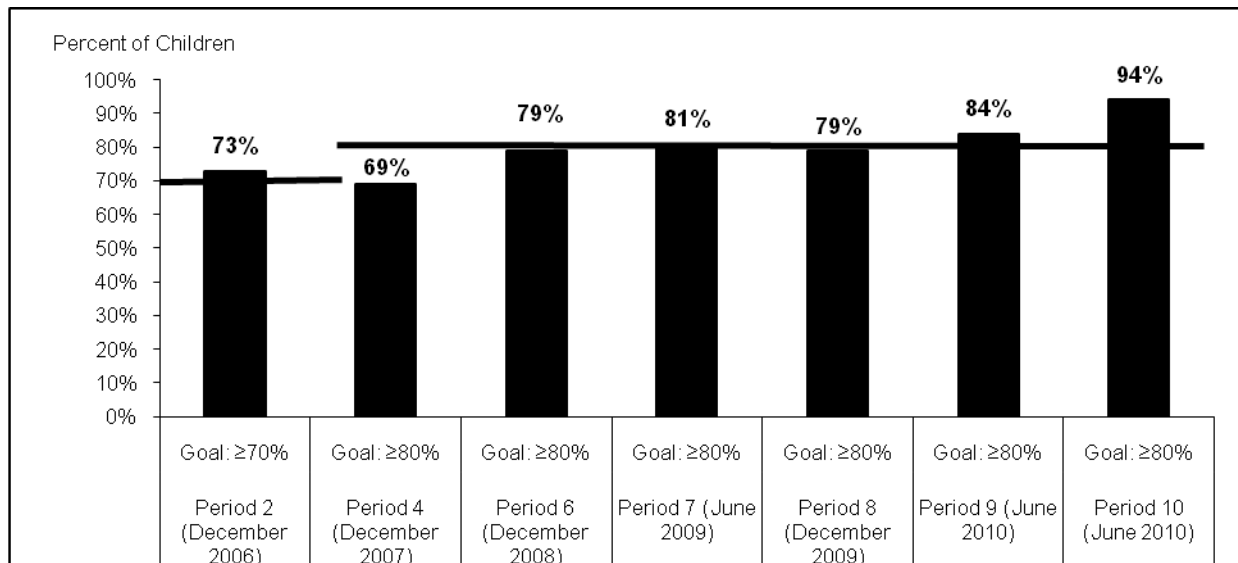
⁴³ All of their siblings that did not themselves require a separate setting because of special needs.

Figure IV-4
Sibling Group Placement for Period 10 Foster Care Entries
N=143



Source: SHINES report, verified.

Figure IV-5
Seven 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 December 2010.

c. Outcome 23: Interpretation and Measurement Issues

In November, 2010 the parties reached agreement on a revised standard for sibling visits. Starting with Period 10, the standard requires at least 90 percent of the total minimum number of required monthly sibling-group visits occur each reporting period. This requirement applies to children who have one or more siblings in custody with whom they are not placed. At a minimum, they are to have monthly visits 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.⁴⁴ As a result of this modification, the measurement of Outcome 23 is based on all sibling groups in foster care at any time between July 1 and December 31, 2010 as reported by the State. County Quality Assurance staff review the quality of the documentation and maintain a data base of all required and completed sibling visits. The State report is generated from this data base. The Accountability Agents verified the State report by randomly sampling 10 percent of the children in custody each month during Period 10 and collected information from the on-line case files in SHINES about all applicable visits (sibling, parental, and case manager.) Information for each of the children sampled was compared with the information in the county system and discussed with the county representatives. The Accountability Agents are satisfied that the State report on sibling visits is accurate.

d. Outcome 23: State Performance

- **The State Surpassed the Outcome 23 Threshold**

For Outcome 23, the Consent Decree's sibling visitation requirement was met for **92%** of the required monthly visits among siblings in custody but in separate placements. The outcome performance threshold is 90 percent.⁴⁵ Due to the changes in the standard and in the measurement methodology that took effect in Period 10, comparative data for previous periods is not available.

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. In concurrent planning, reunification usually remains the primary goal, but a concurrent goal of custody to a relative, guardianship, or adoption also may

⁴⁴ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

⁴⁵ *Ibid.*

be part of the permanency plan in the event that reunification efforts fail. Concurrent planning encourages case managers to focus 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. Table IV-2, provides the distribution of permanency goals across the sample of 175 children.

Table IV-2
Permanency Goals of Children
n=175

Permanency Goal	Number	Percent
Judicially Determined/Presumed Reunification*	43	25%
Concurrent Goal (Reunification and another goal; or, in some cases, Adoption and another goal)	69	39%
Adoption	28	16%
Guardianship	5	3%
Custody to a Fit and Willing Relative	15	9%
Long Term Foster Care	5	3%
Emancipation	10	6%
Total**	175	101%

Source: Case Record Review, February-March 2011. * Presumed re-unification goal for children in care for less than 12 months. ** Total exceeds 100% due to rounding

In the case record review of a sample of children in foster care, 84 percent did not have any documented barriers to permanency. In the remaining 16 percent that did have documented barriers, the most frequently cited single barriers were lack of parental participation in services or visiting with children. Many children had barriers unique to their circumstances such as parents with pending criminal charges or the children themselves had severe developmental or medical conditions. 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 homes needed to be evaluated or families needed furniture.

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-3 below summarizes the differences between Outcome 8a and Outcome 8b.

Table IV-3
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	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)⁴⁶ – 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.

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. 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.

b. State Performance

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

Through December 31, 2010, 6475 children had entered DFCS custody since October 27, 2005. From this cohort of children, 3524 children (**54%**) exited by December 31, 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 10 is similar to the Period 9 performance of 54 percent. The State has surpassed the Outcome 8a standard in every reporting period to which it applied.

⁴⁶ 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 relatives*”.

Another 482 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 frames specified in the Consent Decree to 4006 or **62 percent** of the total cohort. This is similar to the Period 9 performance of 61 percent, and remains short of the Outcome 8b performance threshold of 74 percent.

Table IV-4 provides the distribution of all the children in the Outcome 8 cohort who exited custody by December 2010. An additional 835 children (13% 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 10, 15 percent of the Outcome 8 cohort of children remained in custody compared to 19 percent at the end of Period 9 and 21 percent at the end of Period 8. However, the length of time the remaining children have been in care appears to have increased slightly. At the end of Period 10, half the children remaining in the cohort had been in custody 15.5 months compared to 15 months for those remaining at the end of Period 9.

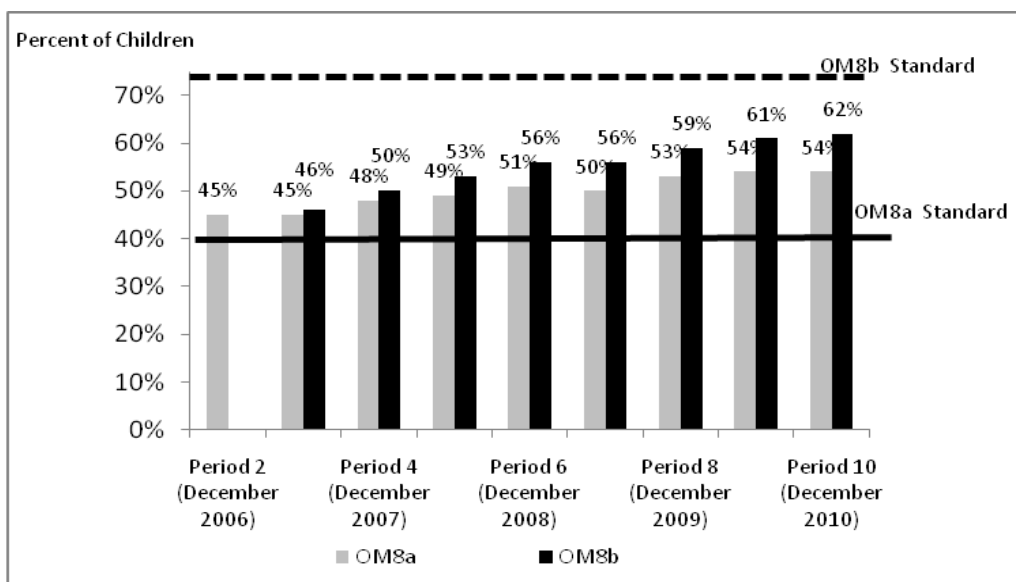
Table IV-4 provides the performance detail for Period 10. Figure IV-6 displays the State’s performance over the eight reporting periods to which the Consent Decree standards apply. Figure IV-7 illustrates the exit outcomes for all children who have entered State custody since the start of the Consent Decree.

Table IV-4
Outcome 8
Children Entering DFCS Custody on or after October 27, 2005
Who Exited to Permanency by December 31, 2010

	Children who entered custody on or since October 27, 2005	
Number of children in cohort	6475	
Exits as of June 30, 2010	8(a)	8(b)
Reunification within 12 months	2737	2737
Permanent Placement with Relatives within 12 months (still in state custody)	0	0
Permanent Legal Custody within 12 months (custody transferred from DFCS)	502	502
Permanent Legal Custody between 12 and 24 months (custody transferred from DFCS)		245
Adoption within 12 months	10	10
Adoptions between 12 and 24 months		104
Guardianship within 12 months	275	275
Guardianships between 12 and 24 months		133
Total Exits for Outcome Measurement	3524	4006
Percentage Exiting for Outcome Measurement	54%	62%
Number Exited to Permanency but not in required time frame	835	
Other exits (transfer to other counties, emancipation, etc)	643	
Total number exiting	5484	
Remaining number in cohort on December 31, 2010	991	
Demographics of those still in DFCS custody at December 31, 2010	Average length of stay: 19 months	
	Median length of stay: 15.5 months	
	Average Age: 8.7 years	
	44% female, 56% male	

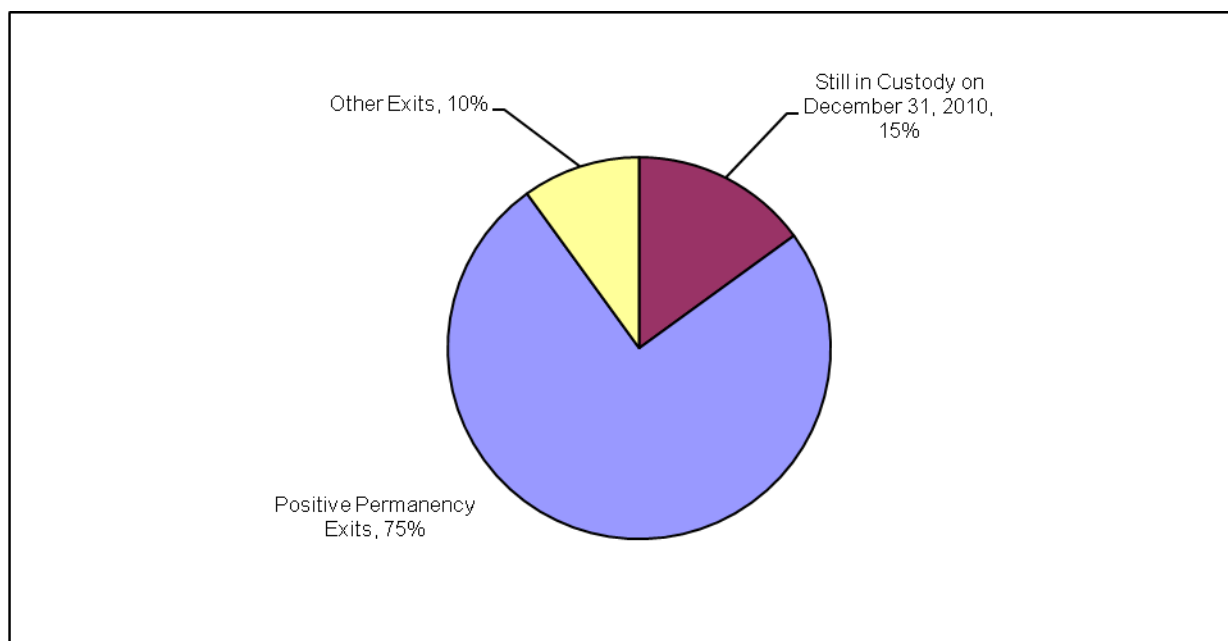
Source: SHINES, and county tracking systems.

Figure IV-6
Nine Reporting Periods of State Performance on Outcome 8:
Permanency for Children Entering Foster Care since October 27, 2005



Source: State data systems, IDS and SHINES

Figure IV-7
Foster Care Outcomes of 6475 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 performance in Outcomes 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 10, but the specific impact of any one strategy has not been tracked. More likely, the improvements reflect the cumulative effect of multiple efforts.

As described in the Period 9 Monitoring Report⁴⁷, Fulton County established an “Adolescent Unit” in April 2010 (Period 9). The unit is designed to prepare adolescents for positive permanency and their transition into adulthood. Both counties report convening more multi-participant, facilitated meetings to review the permanency progress and barriers of the longer-staying children. They report convening approximately 100 such meetings in Period 10. In June 2010 (Period 9) DeKalb created its own in-house unit of three staff and one supervisor to complete Child and Family Assessments.

Both counties have also contracted for services with Youth Villages and the Multi-Agency Alliance for Children. The counties report that these two resources have served 54 children from the Outcome 8 cohort to date.

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 Decree⁴⁸ was finalized in October 2005. 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. Interpretation and Measurement Issues

No new interpretation issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 9

⁴⁷ See Dimas, J. T. and Morrison, S. A., Period IX Monitoring Report, *Kenny A. v Perdue*, December 2010 for more description of the strategies and resources to be employed by the Counties during Period 10.

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

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

and 10 is based on the entire population of children in each of the two previously described cohorts.

b. State Performance

• The State Fell Short of the Outcome 9 Threshold

Of 74 children who had been in State custody up to 24 months as of October 27, 2005 and were still in custody on June 30, 2010, 18 children (**24%**) had positive permanency exits during the period July 1 through December 31, 2010.⁵⁰ This is the same as the State's Period 9 performance. 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 49 children from the Outcome 9 cohort still in custody on December 31, 2010.

As noted in Table IV-5, 45 percent of the 49 children remaining in custody were under the age of 12. The average age was about 12 years, the average length of stay was almost six years, and 57 percent of the children were male. In addition, there were 11 sibling groups remaining in this cohort.

• The State Fell Short of the Outcome 10 Threshold

Of the 66 children who had been in State custody for over 24 months as of October 27, 2005 and remained in custody on June 30, 2010, 15 children (**23%**) exited to positive permanency during the period July 1 through December 31, 2010. The performance threshold for this outcome is 35 percent. This was an improvement from Period 9, when 18 percent of the Outcome 10 cohort exited to positive permanency, and represented the best performance since Period 2 when the outcome threshold was surpassed with 36 percent. Another eight children exited DeKalb and Fulton custody for reasons other than positive permanency during Period 10, leaving 43 children from the Outcome 10 cohort still in custody on December 31, 2010.

As noted in Table IV-5, seven percent of the 43 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 9.6 years. There are four sibling groups among the 43 children remaining in this cohort. As with Outcome 9, the majority of children remaining in the Outcome 10 cohort (56%) were male.

Figures IV-8 and IV-9 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.

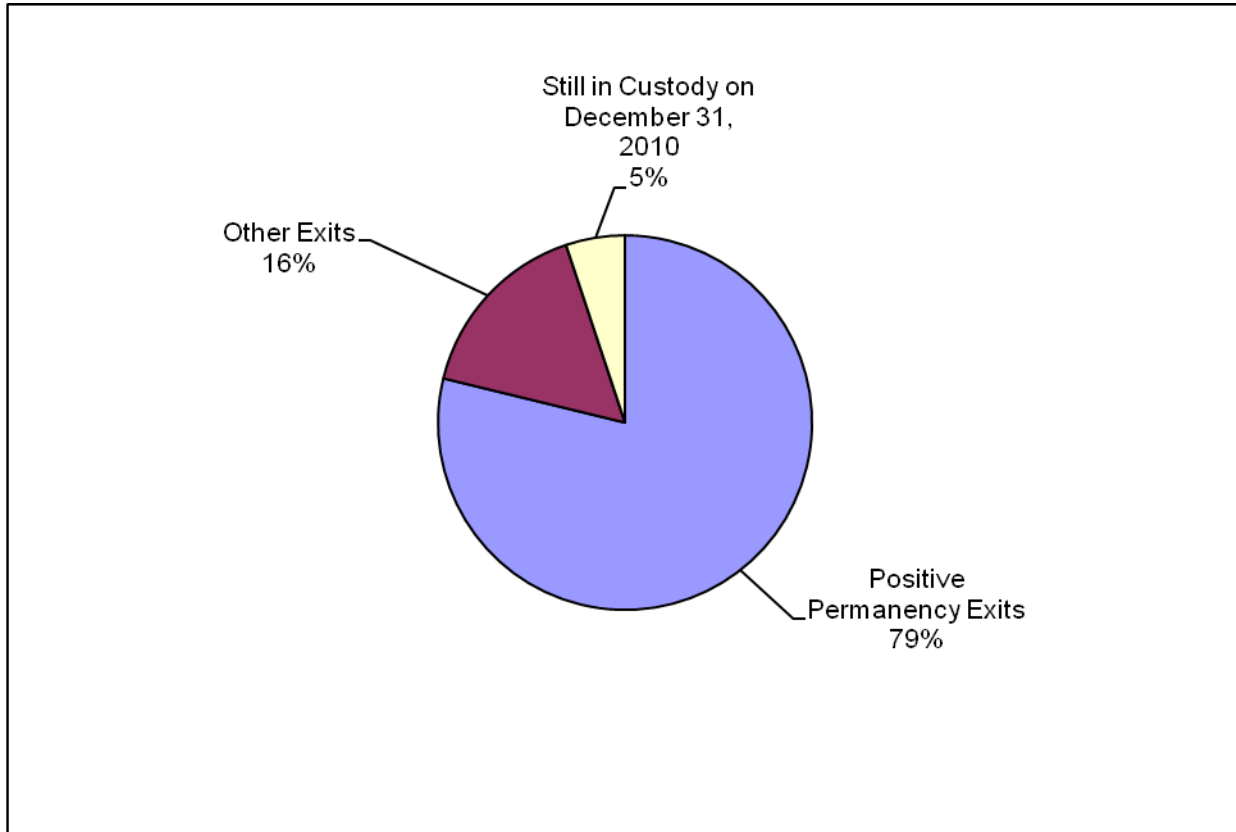
⁵⁰ "Positive permanency exits" refers to reunification, permanent placement with relatives, permanent legal custody, adoption or guardianship.

Table IV-5
Outcomes 9 and 10
Remaining Children Who Entered DFCS Custody before October 27 2005 and Who Exited to
Permanency July 1 through December 31, 2010

	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> <u>than</u> 24 months and still in custody on October 27, 2005 (Outcome 10)	Total
Number of children in cohort	74	66	140
Permanency Exits			
Reunification	4	1	5
Adoption	14	13	27
Guardianship		1	1
Live with other relative			
Permanent Placement with relatives			
Total for Outcome Measurement	18	15	33
Percentage exiting for Outcome Measurement	24%	23%	24%
Other exits (transfer to other counties, emancipation, etc)	7	8	15
Total number exits	25	23	48
Remaining number in cohort December 31,, 2010	49	43	92
Characteristics of those children remaining in custody on December 31, 2010			
Proportion under the age of 12	45%	7%	
Average length of stay	70.55 months(5.9 years)	115.63 months (9.6 years)	
Median length of stay	68 months (5.7 years)	107 months (8.9 years)	
Average age	12	15	
Percent female	43%	44%	
Percent male	57%	56%	

Source: SHINES, and county tracking systems.

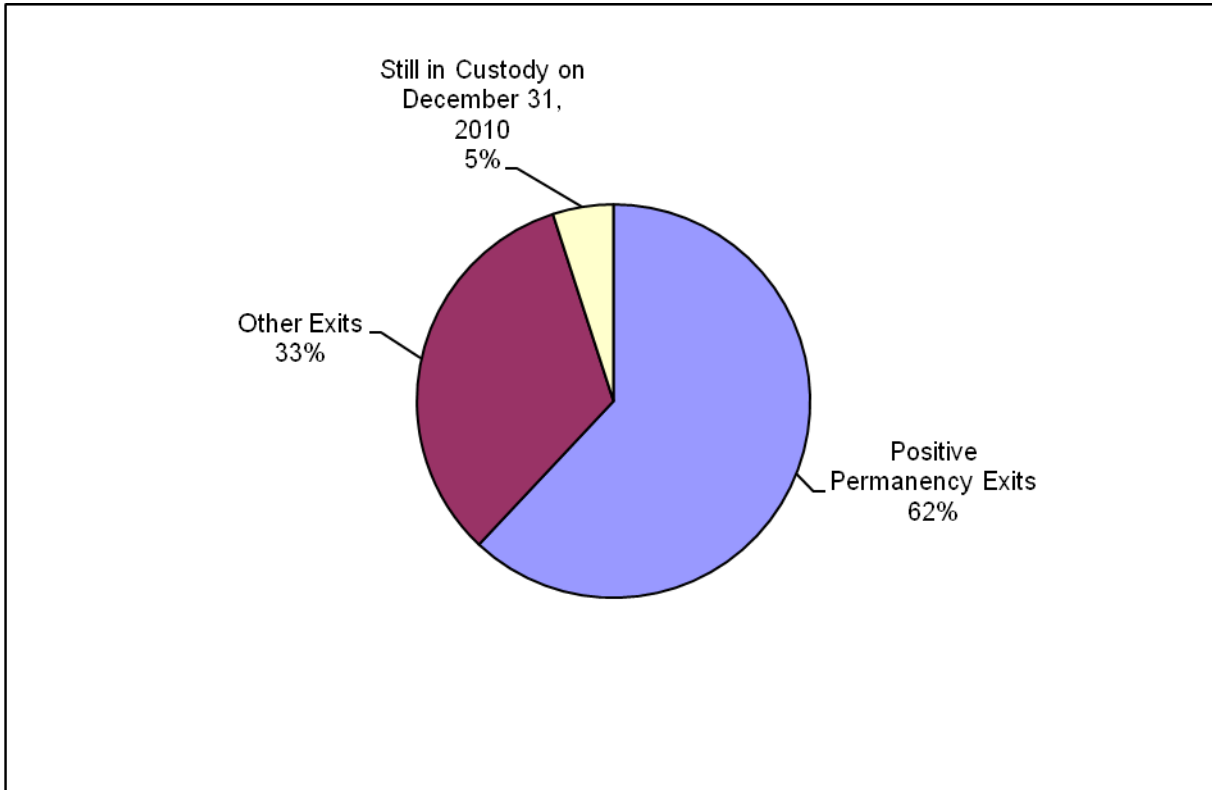
Figure IV-8
Outcome 9
Foster Care Outcomes of 1448 Children in Custody Up To 24 Months Before
October 27, 2005*



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 has been reduced to account for children who exited before Consent Decree as they were identified.

Figure IV-9
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 was reduced to account for children who exited before Consent Decree as they were 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 July 1 and December 31, 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 origin. It is similar to one of the national permanency outcomes established by the U.S. Department of Health and Human Services.⁵²

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

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/cwo5/appendix/appendixb.htm>.

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 11 is based on the entire population of children whose parents had their parental rights terminated any time between July 1 and December 31, 2009. The 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 July 1 and December 31, 2009, the parental rights of the parents of 101 children were terminated or relinquished. Of these 101 children, 60 children, **(59%)** 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 9 performance of 54 percent.

As reflected in Table IV-6, another six children (8%) achieved permanency through adoption but not within the stipulated 12-month time frame. All six were adopted within 14 to 16 months. Custody of one child was given to relatives the day the parental rights were terminated and 34 children remained in DFCS custody. Figure IV-10 displays the State's Outcome 11 performance for the seven reporting periods to which the Consent Decree standard applied.

As part of an agreed-upon curative action plan between the parties, the State 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 the 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 for 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. The team is projecting further performance improvement in Periods 11 and 12 as they are currently working with the children who were legally freed for adoption in 2010 and the beginning of 2011.

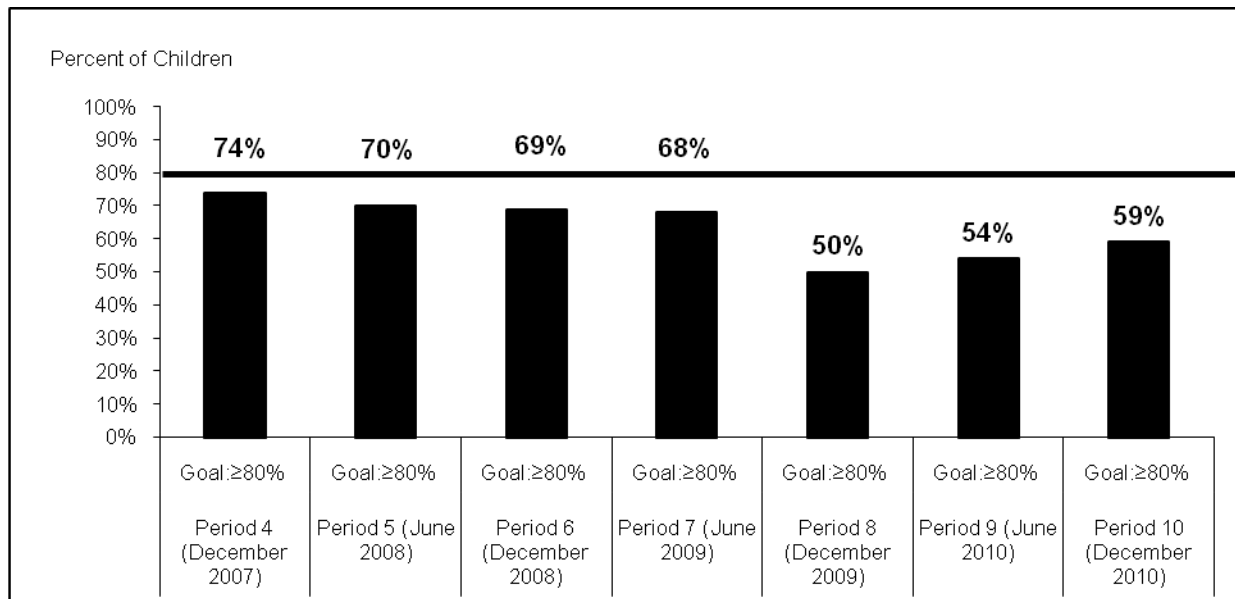
⁵³ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, August 23, 2010 and September 22, 2010.

Table IV-6
Status as of December 31, 2010 of Children with Parental Rights Terminated between
July 1 and December 31, 2009
N=101

	Number	Percent	Cumulative Percent
Adoption finalized within 12 months	60	59%	59%
Guardianship	0		
Adoption or Guardianship finalized within 13 months			
Adoption or Guardianship finalized within 14 - 16 months	6	6%	65%
Custody to relatives for purposes of adoption (granted within 12 months of TPR)	0		
Custody to relatives within 12 months of TPR	1	1%	66%
Awaiting adoption as of January, 2011	34	34%	100%
Total	101	100%	

Source: State reporting from SHINES.

Figure IV-10
Seven 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 –December 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 within one 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 entering foster care during the period within 12 months of having previously left custody.⁵⁴ Outcome 4 sets the same numerical standard as the national standard established by the U.S. Department of Health and Human Services as part of its child welfare monitoring responsibility.⁵⁵ However, the federal standard has generally applied to children who returned to custody after being reunified and the Consent Decree standard applies to all children, regardless of their previous discharge reason. In addition, the Federal methodology for assessing the permanency of reunification has evolved over time and now calculates the number of re-entries as a percentage of the children *exiting* care in a given period, rather than as a percentage of the children *entering* care. That is, the federal analysis of the permanency of reunification now asks, *of all children discharged from foster care to reunification in the 12-month period prior to the year shown, what percentage reentered care in less than 12 months from the date of discharge?* The federal rationale for the methodological change is that a longitudinal measure of reentry into foster care is a more direct measure than the original reentry measure.⁵⁶ The Accountability Agents, however, have not changed the measurement methodology.

a. Interpretation and Measurement Issues

No new interpretation issues were encountered in Period 10. 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 375 children who entered foster care through adjudication at any time between July 1 and December 31, 2010. The State used SHINES to produce a report of the children experiencing a re-entry into foster care in Period 10. This list was verified by the Accountability Agents.

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

⁵⁵ See the Information Memorandum at http://www.acf.hhs.gov/programs/cb/laws_policies/policy/im/2001/im0107.htm.

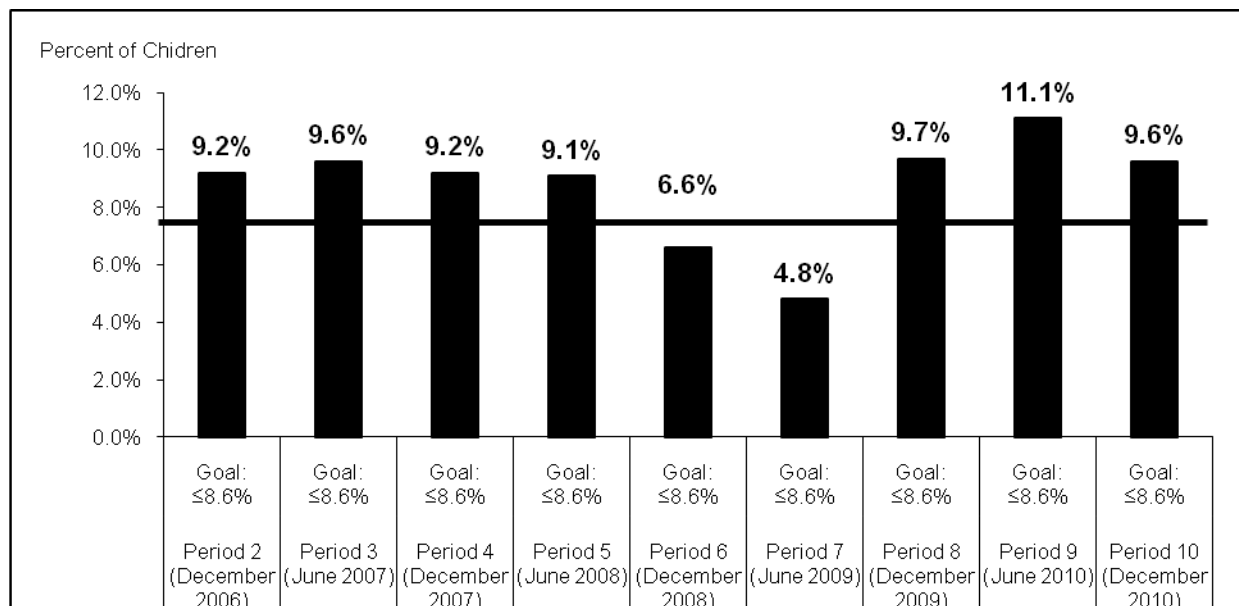
⁵⁶ See the Child Welfare Outcomes 2004-2007: Report to Congress at <http://www.acf.hhs.gov/programs/cb/pubs/cwo04-07/index.htm>.

b. State Performance

• The State Fell Short of the Outcome 4 Threshold.

Of the 375 children who entered foster care between July and December 2010, 36 children (9.6%) 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 10 performance is a substantial improvement over the Period 9 performance of 11.1 percent. Figure IV-11 displays the State's Outcome 4 performance over the nine reporting periods to which the Consent Decree standard applied.

Figure IV-11
Nine Reporting Periods State Performance on Outcome 4:
Foster Care Re-entry within 12 Months of Previous Exits



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

c. Operational Context

As part of an agreed-upon curative action plan between the parties to reduce the rate of re-entry,⁵⁷ the State and counties have undertaken certain actions and continued to study re-entry's root causes to support formulation of practice improvement strategies. In the past, families that received continued court-ordered supervision were transferred to the caseloads of Family Preservation case managers. Starting in Period 10, DeKalb County designated dedicated Family Preservation staff to receive these post-foster care cases which is a change from its previous case

⁵⁷ See Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, September 2, 2010.

assignment practice. Previously, families who are reunited with a protective order would have been assigned to a family preservation case manager based on a case assignment rotation basis. In addition, DeKalb has held four meetings with the Department of Juvenile Justice (DJJ) to discuss youth who are involved with DJJ and DFCS. Fulton County has sought to preserve case manager continuity by having foster care case managers continue arranging or providing services to families whose children exit Fulton County custody but remain under court-ordered supervision.⁵⁸ Fulton has also met with Juvenile Court judges to discuss the re-entry issue, among others. The re-entry rate for both counties has improved over Period 9. In Period 10, Dekalb had a re-entry rate of 9.4 percent compared to 11.2 percent in Period 9 and Fulton had a re-entry rate of 9.7 percent in Period 10 compared to 10.9 percent in Period 9. Case reviews conducted by the counties indicate that a substantial portion of the children who re-enter care are children who were returned to their parents with continued court-ordered supervision under protective orders, or with court-ordered after care services. Delving into the dynamics of re-entry continues to be a priority topic in the Accountability Agents' semi-monthly G2 meetings with the counties.

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.⁵⁹

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 14 is based on the entire population of 78 children who were adopted between July 1 and December 31, 2009 (Period 8) to allow for the 12 month follow-up period.

b. State Performance

- **The State Surpassed the Outcome 14 Threshold.**

Within the group of 78 children adopted between July 1 and December 31, 2009, no child is

⁵⁸ See re-entry analyses by Accountability Agents and counties supporting these actions in Dimas, J. T. and Morrison, S. A. Period VIII Monitoring Report, *Kenny A. v Perdue*, July 2010, and Period IX Monitoring Report, *Kenny A v Perdue*, December 2010.

⁵⁹ See p. 34, Outcome 14, of the Consent Decree.

known to have re-entered the State's custody by December 31, 2010. The outcome performance threshold is no more than 5 percent. The State has surpassed this outcome measure in every reporting period.

Outcome 15 – Permanency Actions for Children Reaching Their 15th 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.⁶⁰

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.⁶¹

The Consent Decree Outcome 15 stipulates that by Period 4 (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 against both parents or legal caregivers, as applicable; or 2) documented compelling reasons documented in the case record as to why such action is not in the best interest of the child.⁶²

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. 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 in Period 10, reached or exceeded their 15th month in custody out of the previous 22 months. As in previous periods, the Accountability Agents reviewed the compelling reason provided for each child and compared it to past information. Information provided by the counties was also verified using data from the Period 10 review of 175 randomly-selected foster care case records.

During Period 10, there were 865 children who had reached or surpassed their 15 month in custody out of the previous 22 months. Of these children, 279 (32%) were discharged by the end of the reporting period but were included in the analysis. A group of 85 children (10% of

⁶⁰Adoption and Safe Families Act, see also Social Services Manual Chapter 1000, Section 1002.7, Georgia Department of Human Services.

⁶¹ See Social Services Manual, Section 1002.12.3, 1002.17, and 1013.11, Georgia Department of Human Services.

⁶² See p. 34, Outcome 15, of the Consent Decree.

865), was excluded from the Outcome 15 performance measurement based on the placement of these children with relatives, as allowed under Federal law.

b. State Performance

- **The State Surpassed Outcome 15 Threshold**

By December 31, 2010, **98 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 a slight decline from the 100 percent achieved in Period 9, but it is the fifth consecutive period that the State has met or surpassed this outcome measure. Table IV-7 summarizes the different components of the counties' Period 10 performance, drawn from the data in their tracking systems. Figure IV-12 displays the State's performance on Outcome 15 for the nine reporting periods to which the Consent Decree standards applied.

The 279 children discharged by the end of the reporting period were distributed across every category displayed Table IV-7. For example, among the 124 children who had a compelling reason of *expected reunification within six months*, 51 children (41%) actually were discharged during the period. As another example, 104 of the 268 children (39%) who were legally free for adoption exited care, most to finalized adoptions. In addition, the State moved to terminate parental rights on behalf of some children who previously had compelling reasons for such action not to be taken. Their circumstances had changed such that there no longer was a compelling reason not to file for termination of parental rights.

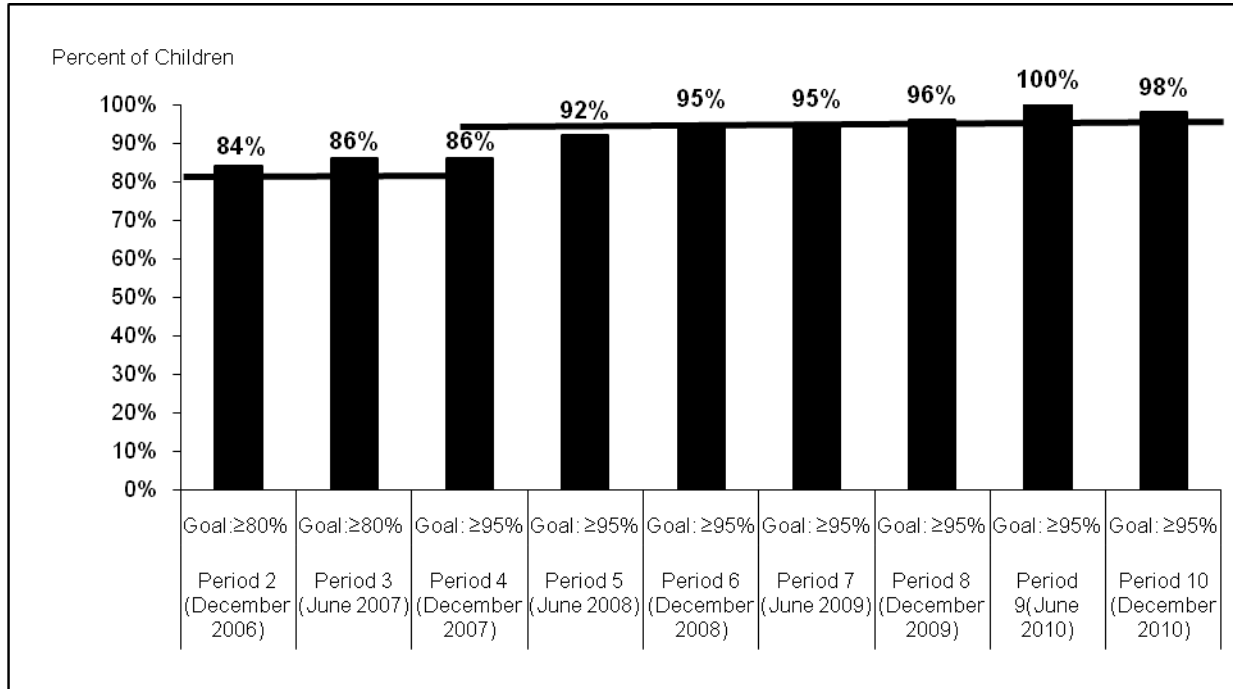
The Outcome 15 analysis highlights an interesting pattern in the data on children free for adoption. The pool of children at the end of the reporting period legally free for adoption and in custody 15 or more of the previous 22 months appears to decrease in even numbered reporting periods and to increase in odd numbered periods (it was 267 by the end of Period 7; 190 by the end of Period 8; 265 by the end of Period 9; and 164 by the end of Period 10. Similarly, at the end of Period 10, 28 percent of the children who had spent 15 or more months of the previous 22 in foster care were legally free for adoption, compared to 35 percent of all such children at the end of Period 9, 25 percent of all such children at the end of Period 8, and 31 percent of all such children at the end of Period 7. This pattern may be a result of several factors (including State efforts to find permanency for these children and children reaching the age of 18 and leaving State custody) but it seems likely also to reflect the cyclical nature of the adoption process as many adoptions are finalized on National Adoption Day in November, which falls in the even-numbered reporting periods.

Table IV-7
Status of Children Who Had Been in DFCS Custody 15 of the previous 22 months
As of December 31, 2010

Category		Total		
		Number	Percent	Cumulative
Children who reached or surpassed their 15 th month in custody of the last 22 months between July 1 through June 30, 2010.*		865		
Excepted subpopulation (s):				
<i>Children placed with relatives</i>		85		
<i>The State has not made reasonable efforts to reunify the family</i>		0		
Number of Children for Outcome 15 Measurement		780		
Parental Rights of Both Parents have been terminated or relinquished.		268	34%	
DFCS has filed a petition to complete the termination of the parental rights of both parents where applicable.		100	13%	47%
There is a documented compelling reason for not terminating parental rights.		395	51%	98%
Reasons cited	Number			
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.	124			
The child is a specified age (14) or older and objects to being adopted.	85			
The child has severe emotional or behavioral problems or a serious medical condition and reunification remains an appropriate goal.	12			
The child has a permanency goal other than adoption and is expected to achieve that goal within 12 months of establishing the goal.	141			
Parents are deceased, or have voluntarily relinquished rights.	3			
The child is an unaccompanied refugee minor as defined in 45 Code of Federal Regulations 400.11.	6			
The child is a child of a teen mother who is also in the State's custody.	17			
Other circumstances.	7			
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 had not yet been filed as of December 31 or date of discharge.		17	2%	100%

Source: SHINES and County tracking systems; *279 children were discharged from this pool during Period 10; they are distributed across all categories;

Figure IV-12
Nine 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-December 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 reviewed by the court or designated panel within six months of entering foster care and every six months the child is in custody thereafter.⁶³ Outcome 27 stipulates that at least 95 percent of the children are to have timely semi-annual reviews of their case plan.

- **Interpretation and Measurement Issues**

There were no new interpretation or measurement issues in Period 10. The measurement of Outcome 27 is based on the sample of 175 children in foster care at any time between July 1 and December 31, 2010. The outcome 27 analysis was applicable to 130 children who had been in custody six months or more. This represents 74 percent of the sample of 175 children in foster care. Conclusions drawn from the subsample of 130 are subject to a margin of error of ± 8 percent.

⁶³ See p. 7, paragraphs 4A.4 and pp. 7-8, paragraphs 4B.1-6, and p. 37, Outcome 27, of the Consent Decree.

b. State Performance

- **The State Fell Short of the Outcome 27 Threshold**

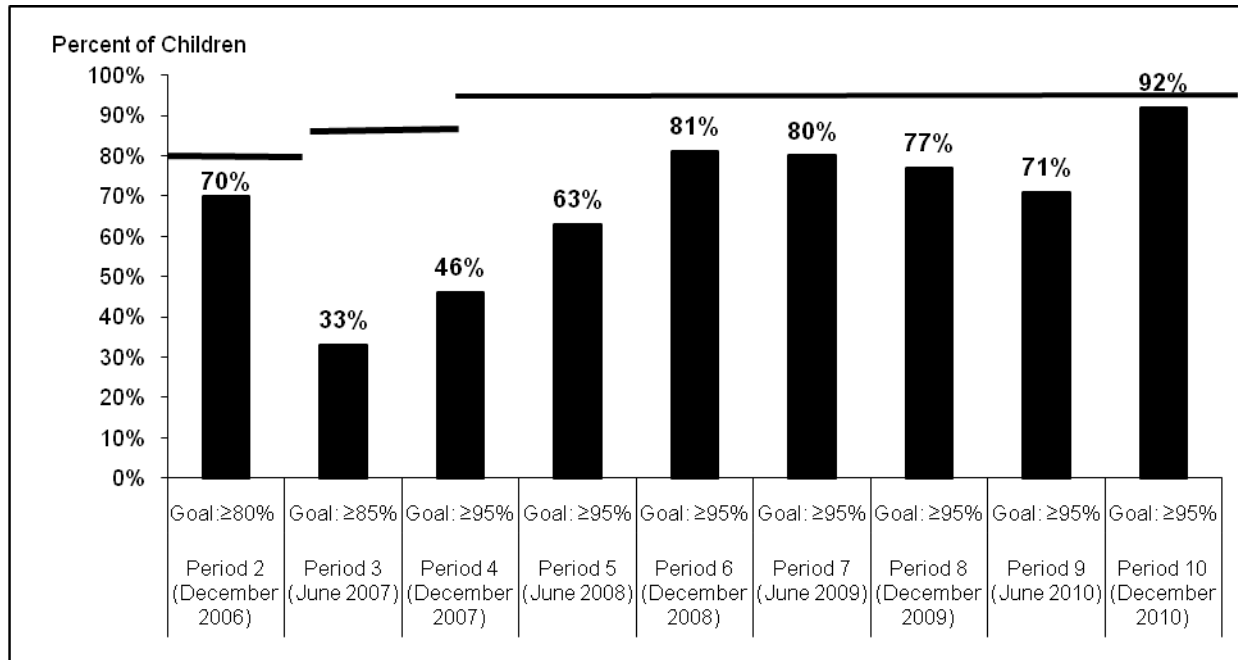
Of the 130 children in the foster care sample that were in custody for six months or more by the end of the reporting period, case file documentation indicates that 119 (92%) had documented timely case plan reviews completed by the Juvenile Court or Juvenile Court Review Panel (JCRP), or a timely request for such a review. The Outcome 27 performance threshold is 95 percent. The Period 10 performance is the State's best to date and the observed difference between the Period 9 performance of 71 percent and the Period 10 performance is greater than the margin of statistical error for the subsample. The Accountability Agents attribute improved performance to improved case file documentation.

Among the remaining 11 children requiring reviews who did not receive a timely review or a timely request for review, seven children (5% of 130) had a plan reviewed but not within six months of entry or the previous case plan review and 4 children (3% of 130) had only one review in the 12 months between January 1 and December 31, 2010. Figure IV-13 displays the State's performance for the eight reporting periods to which the Consent Decree standards applied.

The State's declining performance on Outcome 27 prior to Period 10 was the subject of a curative action agreed to by the parties that took effect in Period 11, January-June 2011.⁶⁴ Under this curative action, both counties are establishing better approaches to ensuring the documentation of the reviews are appropriately entered into SHINES. With these measures in place, the State has a greater opportunity of achieving the Outcome 27 standard in Period 11.

⁶⁴ Correspondence from Ira P. Lustbader, Children's Rights, to Brenda King Woodard, Georgia Department of Human Services, February 3, 2011.

Figure IV-13
Nine 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

Each of the 130 children in the subsample of foster care children who had been in custody at least six months (100%) had their case plans reviewed by either the Juvenile Court or the JCRP in the most recent 12-month period (sometime between January 1, 2010 and December 31, 2010). These included the reviews considered timely for Outcome 27 as well as those that were not timely. Reviews were also held for four children who had not yet been in custody six months. Together with the 130 reviews for children who had been in custody at least six months, they provided a total of 134 reviews from which information about aspects of the review process could be gleaned. Among the 134 reviews, DFCS sought a permanency plan change for 23 children (17%). There were court orders documenting court approval for 90 (67%) of the 134 plans reviewed. The case files of the remaining 44 children (33%) did not contain court orders specifically indicating approval or rejection of the plans by the court. Table IV-12 provides additional information documented in the case files for these 134 case plan reviews.

Table IV-8
Characteristics of Six-month Case Reviews
n= 134

(most recent plans reviewed between January –December 2010)

Characteristic			Number	Percent
Participants				
Birth Mother			43	32%
Birth Father			20	15%
Child			34	25%
Relative caregivers/ Extended Family Members/ Informal Supports			28	21%
Foster parents/placement providers			28	21%
DFCS case manager			114	85%
DFCS supervisor			26	19%
Other DFCS representative			12	9%
CCFA provider			0	0
Private agency social worker			20	15%
Medical and mental health professionals			0	0
Parents' attorney(s)			40	30%
SAAG (Special Assistant Attorney General)			73	54%
Child's advocates (attorney, Guardian Ad Litem, CASA volunteer)			102	76%
Elements Evaluated/Considered				
Necessity and appropriateness of child's placement			82	61%
Reasonable efforts made to obtain permanency			100	75%
Degree of compliance with specific goals and action steps			83	62%
Progress made in improving conditions that caused removal			49	37%
Changes that need to be made to plan			6	4%
County recommendations			20	15%
Parent recommendations			3	2%
JCRP conducted review (percentage based on n=134)			60	45%
Total JCRP reports submitted (percentage based on n=60)	38	63%		
Number of reports with Panel findings (percentage based on n=38)	38	100%		
Number of reports with Panel recommendations (percentage based on n=38)	38	100%		
Number of reports with County findings (percentage based on n=38)	15	39%		
Number of reports with County recommendations (percentage based on n=38)	16	42%		
Court conducted review (percentage based on n=134)			74	55%
Plan adopted by Juvenile Court (percentage based on n=134)			90	67%

Source: Case Record Review, February-March 2011.

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.⁶⁵ These hearings are held to determine whether the State is making reasonable efforts to help children achieve permanency.

a. Interpretation and Measurement Issues

There were no interpretation or measurement issues in Period 10. The measurement of Outcome 28 performance is drawn from the sample of 175 children in foster care at any time between July 1 and December 31, 2010. The outcome 28 analysis was applicable to 104 children (59%) in the sample of 175 who had been in custody 12 months or more. Conclusions drawn from the subsample of 104 children are subject to a margin of error of ± 9 percent.

b. State Performance

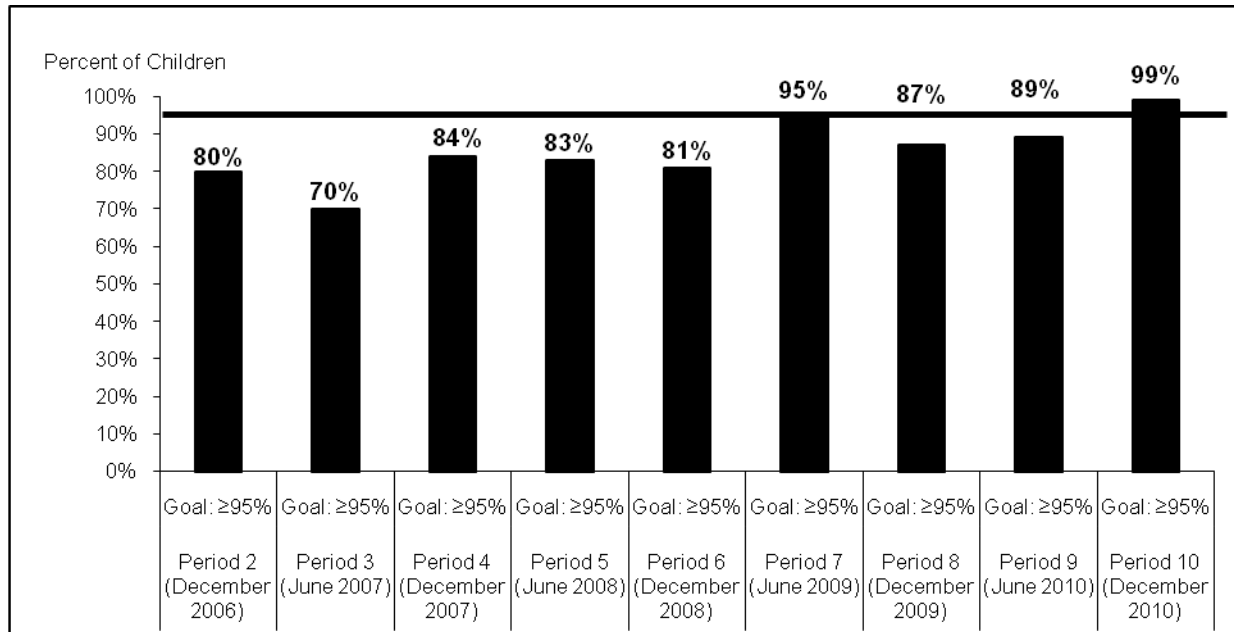
- **The State Surpassed the Outcome 28 Threshold**

For Outcome 28, 103 (99%) of the 104 children in the foster care sample who had been in custody for 12 months or more had timely permanency hearings held by the Juvenile Court upon reaching their 12th month in care, or a timely request for such a hearing. The performance threshold for Outcome 28 is 95 percent. The Period 10 performance is the State's best performance to date but the observed change from Period 9 is within the subsample's margin of statistical error.

During Period 10, 100 children had at least one 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. Figure IV-14 illustrates the State's performance for this Outcome over the nine reporting periods to which the Consent Decree standard applied.

⁶⁵ See p. 9, paragraph 4B.10, and p.37, Outcome 28, of the Consent Decree.

Figure IV-14
Nine Reporting Periods of State Performance on Outcome 28:
Timely Permanency Hearings



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

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

Placement with relatives has been demonstrated to help children have placement stability⁶⁶ 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. Placement with Relatives

Of the 175 children in the foster care sample, 40 children (23%) were placed with relatives on December 31, 2010 or the last date the children were in custody. This rate is the same as in the Period 9 sample. Children placed with family were in a combination of relative homes, relative homes licensed and reimbursed for foster care, and parental homes.

2. DFCS Permanency Reviews at the 13th or 25th month in custody.

In Period 9, the DFCS Permanency Unit modified the information it collects and tracks about permanency review practice. In addition to the typical information on goals, concurrence, family team meetings, etc., the Permanency Review Unit started gathering a variety of information around “Permanency Plan and Agency Actions” and “Services and Family Engagement”. The Accountability Agents have included in this report State data about the participants involved in case planning at the 13th and 25th month. This is now the second period these data have been tracked so trends can begin to be examined moving forward.

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. Table IV-9 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 July and December 2010. A total of 144 cases were reviewed during Period 10. Key findings from state-tabulated data include the following:

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.

⁶⁹ The information was not independently verified by the Accountability Agents in Period 10. Period 8 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.

- The proportion of cases in which the State reviewers concurred with the county permanency plan decreased in Period 10 as the reviewers concurred with 58 percent of the case plans compared to 62 percent in Period 9.
- The proportion of cases with current case plans increased, with 69 percent of 144 cases in Period 10 having current case plans compared to 67 percent in period 9.
- The practice of convening a Family Team Meeting (see Table 10) before a review appears to have declined since Period 9. In Period 10, 36 percent of the 144 cases in which FTMs were applicable had Family Team Meetings within 90 days of the 13th month review and in Period 9, 42 percent had had such meetings.

Table IV-9
13th Month Permanency Review Implementation
July 1 through December 31, 2010
N=144

	Number	Percent
Total Cases Reviewed by State Permanency Reviewers	144	100%
Reviewer Concurrence with goal and plan	83	58%
Permanency Goal		
Reunification	102	71%
Permanent placement with relative	7	5%
Adoption	18	13%
Guardianship	12	8%
Another planned permanent living arrangement	5	3%
Totals	144	100%
Cases with current case plans (Court sanctioned/approved)	99	69%

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

Table IV-10
Family Team Meetings Convened for 13th Month Permanency Reviews
July 1 through December 31, 2010
N= varies

	Number	Percent
Cases with “Family Team Meetings” (FTM) within the last 90 days (percentages based on the number of applicable cases =144)	52	36%
FTMs with mothers involved (percentages based on the number of FTMs held—excludes cases where there was a TPR, non-reunification, the mother’s whereabouts were unknown throughout the life of the case, or the mother was deceased—n=48)	30	63%
FTMs with fathers involved (percentages based on the number of FTMs held—excludes cases where there was a TPR, non-reunification, the father’s whereabouts were unknown throughout the life of the case, or the father was deceased—n=41)	5	12%
FTMs with relatives involved (percentages based on the number of FTMs held and potential relatives to invite-- n=26)	9	35%
FTMs with foster parents involved (percentages based on the number of FTMs held and number of children with foster parents-- n= 17)	23	62%
FTMs had recommendations specific to Child/Family needs (percentages based on N=50—in two cases there was no FTM form in SHINES and a TPR had been granted)	42	84%

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

Table IV-11 summarizes family and caretaker involvement in case planning as identified in the 13th month permanency review and reported by the State. The information about involvement is different from that reported about Family Team Meetings as it considers 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. The assessment by permanency reviewers was based on all documentation in the case file that indicated parental and/or youth involvement. Although a total of 144 cases were reviewed during Period 10, the applicable number of cases varies for each category based on several factors. Excluded cases included those in which parental rights were terminated, the parents’ whereabouts were unknown, or the parent was deceased. In addition, cases with children too young to participate in case planning were excluded. Key findings from state-tabulated data include the following:

- 96 percent of substitute caretakers participated actively in case planning. This is similar to Period 9 (95%).
- 97 percent of children old enough to participate in case planning were actively involved; a dramatic increase from the Period 9 rate of 71 percent.
- 94 percent of mothers were actively involved in case planning compared to 84 percent in Period 9.
- Fathers were the group with the lowest active participation in case planning (73%), but this was a substantial increase from the Period 9 rate of 49 percent.

Table IV-11
13th Month Permanency Review: Engagement in Case Planning
July 1 through December 31, 2010
N=varies

	Number	Percent
Active involvement in the case planning process		
Child (n=94)	91	97%
Mother (n=113)	106	94%
Father (n=80)	58	73%
Caretaker (n=141)	135	96%

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 July and December 2010 and who remained in custody throughout the 25th month. A total of 90 staffings were held. Table IV-12 provides a summary of the data related to these staffings. Reported findings include:

- The permanency review team concurred with the County's permanency plan in 77 percent of the cases (69 children).
- In Period 10, 49 percent of plans had a goal of reunification, an increase from the Period 9 rate of 33 percent.
- In Period 10, 23 percent of plans had a goal of adoption – a decrease from the Period 9 rate of 36 percent at the 25th month.
- The proportion of children with current case plans was 51 percent (46 children). This is a decline from Period 9 in which 63 percent of the case plans were reportedly current.

Table IV-12
25th Month Permanency Review Implementation
July 1 through December 31, 2010
N=100

	Number	Percent
Total Cases Staffed	90	
Reviewer Concurrence with county plan	69	77%
Permanency Goal		
Reunification	44	49%
Permanent Placement with relative	14	16%
Adoption	21	23%
Guardianship	7	8%
Another planned permanent living arrangement	4	4%
Totals	90	100%
Cases with current case plans (Court sanctioned/approved)	46	51%

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

Table IV-13 summarizes family and caretaker involvement in case planning at the 25th month permanency review, as reported by the State. Although a total of 90 cases were reviewed during Period 10, the applicable number of cases for family involvement varies for each category based on several factors. Cases excluded were those in which parental rights were terminated, the parent's whereabouts were unknown, or the parent was deceased. In addition, cases in which children were too young to participate in case planning were excluded. Key findings from state-tabulated data include the following:

- All caretakers (100%) participated actively in case planning. This has increased from 97 percent participation in Period 9.
- 85 percent of mothers were actively involved in case planning; an increase from 78 percent in Period 9.
- 95 percent of children old enough to participate in case planning were actively involved. This is a dramatic increase from 63 percent in Period 9.
- Fathers were the group with the lowest active participation in case planning (55%), a slight decline from the 58 percent of fathers participating in Period 9.

Table IV-13
25th Month Permanency Review: Engagement in Case Planning
July 1 through December 31, 2010
N=varies

	Number	Percent
Active involvement in the case planning process		
Child (n=57)	54	95%
Mother (n=60)	51	85%
Father (n=44)	24	55%
Caretaker (n=90)	90	100%

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 104 children were adopted between July 1 and December 31, 2010. According to data obtained from the Office of Adoptions, 100 (96%) of those children were receiving or were scheduled to receive monthly Adoption Assistance benefits and Medicaid. This is a slightly larger proportion than in Period 9. All families receiving monthly adoption assistance are also eligible to receive additional benefits to cover non-recurring expenses. They may apply for reimbursement of non-recurring expenses of up to \$1500 once the adoption is finalized. Timely reimbursement is somewhat dependent on how quickly families are able to obtain the signed adoption decree and submit the application to DFCS. Among the 100 families, 26 percent had received these benefits by December 31, 2010. Given this unusually low proportion for the reporting period, the Accountability Agents requested more information about potential causes. According to the State, an error related to incorrectly categorizing case circumstances in SHINES caused a time lag in processing the non-recurring expenses submitted by families. The State reports this error has been corrected. A review of a small number of the adoptions in July, August and September indicates that the families affected by the error did eventually receive reimbursement.

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 6 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 10. This part also includes charts which display the State's performance trends over the applicable reporting periods to date.

Table V-1
Well-Being Outcomes

Children Experience Stable Placements and Worker Continuity	Period 10 Performance
Outcome 17: At least 95% of all children in care shall have had 2 or fewer placement moves during the prior 12 months in custody.	94%
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%
Outcome 20a: At least 96.25% of the total minimum number of twice monthly face-to-face visits between case managers and all class member children required by Section 5.D.1.b during the reporting period occur. ⁷⁰	97.8%
Outcome 20b: At least 96.25% of the total minimum number of twice monthly private , face-to-face visits between case managers and all class member children required by Section 5.D.1.b during the reporting period occur. ⁷¹	98.3%
Outcome 22: At least 95% of the total minimum number of monthly case manager-caregiver visits required during the reporting period occur. ⁷²	98%
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.	58%
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.	77%

1. Children Experience Stable Placements and Worker Continuity: Outcomes 17, 18, 20 and 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

⁷⁰See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

⁷¹ Ibid.

⁷² Ibid.

that at least 95 percent of children in custody have two or fewer placement moves during the most recent 12 months in custody.⁷³

b. Interpretation and Measurement Issues

No new interpretation issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 17 performance is based on the sample of 175 children in foster care at any time between July 1 and December 31, 2010.

a. State Performance

• The State Fell Short of the Outcome 17 Threshold

For Outcome 17, 165 children (94%) of the 175 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 10 performance is a modest improvement over the Period 9 performance of 92 percent and represents the State's best performance to date; although the change is within the margin of statistical error for the sample. Table V-2 provides a breakdown of the number of placement moves experienced by the children in the foster care sample. Documentation in the files of four of the 10 children with more than two moves attributes the multiple moves to diagnosed conditions (ADHD, bi-polar). Documentation in the files of another three of the 10 children indicated that behaviors coupled with runaway behavior or moves among relatives were the reasons for moves. For another three children there were other individual reasons for the multiple moves. State and county efforts to convene placement disruption meetings and other efforts to maintain placement stability may have contributed to the observed improvement. Figure V-1 illustrates the State's performance over the nine reporting periods to which the Consent Decree standards applied.

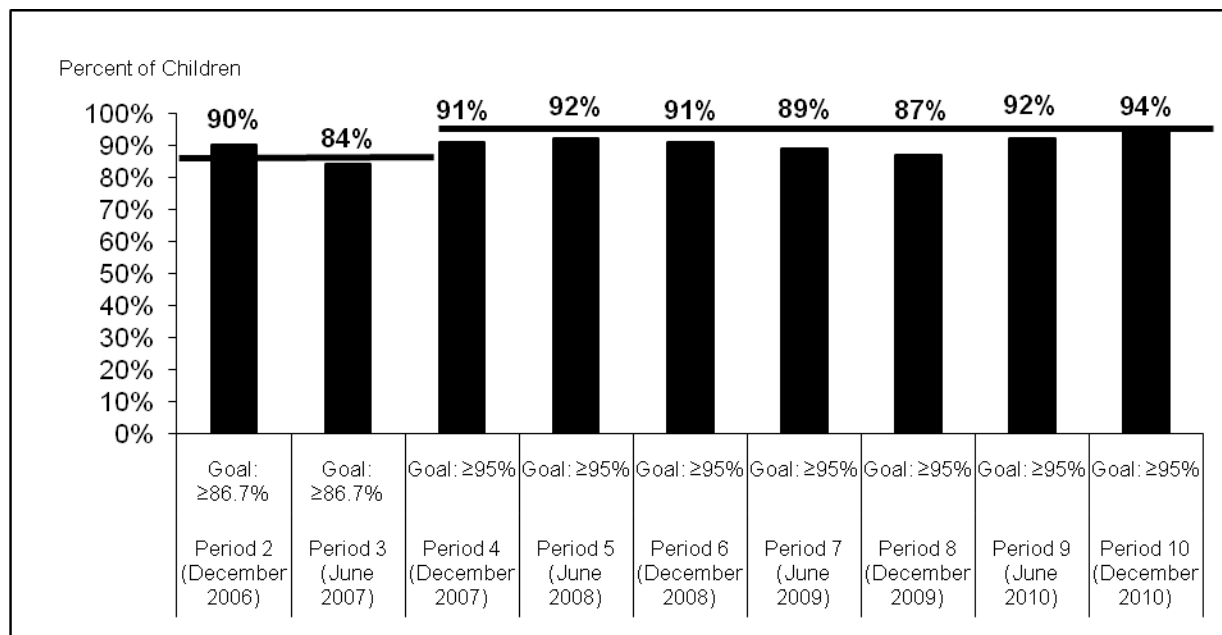
⁷³ See p. 35, Outcome 17 of the Consent Decree.

Table V-2
Number of Placement Moves Experienced by Children in the 12 months prior to
December 31, 2010 or the Last Date of Custody
n=175

Number of Moves	Number	Percent	Cumulative Percent
No Moves	92	53%	
One Move	54	31%	83%
Two Moves	19	11%	94%
Subtotal	165		
Three Moves	5	3%	97%
Four Moves	2	1%	98%
Five Moves	2	1%	99%
Six Moves or more	1	1%	100%
	175		

Source: Case Record Review, February-March 2011.

Figure V-1
Nine 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-December 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.⁷⁴

a. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. Measurement in Period 10 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 performance is based on the entire population of children in DeKalb and Fulton county custody on December 31, 2010.

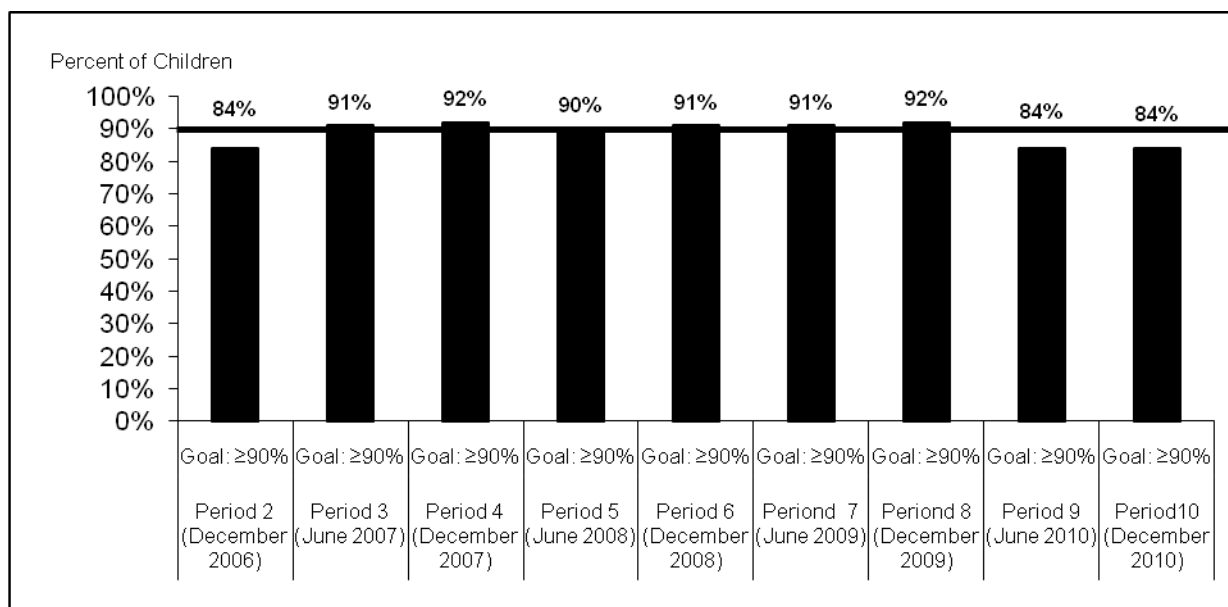
b. State Performance

- **The State Fell Short of the Outcome 18 Threshold**

For Outcome 18, 905 (84%) of the 1083 children in custody on December 31, 2010 had 2 or fewer placement case managers since January 1, 2010, once the allowable exceptions were taken into account. The performance threshold for this outcome is 90 percent. This is the same as the Period 9 performance. 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 nine reporting periods to which the Consent Decree standard applied.

⁷⁴ See p. 35, Outcome 18, of the Consent Decree.

Figure V-2
Nine 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-December 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.”*⁷⁵

a. Interpretation and Measurement Issues

In November 2010 the parties reached agreement on a revised standard for case manager visits with children. Starting with Period 10, Outcome 20 has two parts. Outcome 20a requires at least 96.25 percent of the total minimum number of private monthly case manager visits to children in custody required during the period to occur. Outcome 20b requires at least 96.25 percent of the total number of twice monthly visits to children in custody required during the period to occur.⁷⁶

⁷⁵See p.19, Section 5D of the Consent Decree.

⁷⁶See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

This modification changes several aspects of the original stipulation. Previously, in Periods 2 through 9, the unit of analysis for Outcome 20 was the child and the stipulation required 95 percent of the children be visited by their case managers twice a month, each and every month in the 12 months preceding the end of the reporting period. Furthermore, one of the two visits had to be a private visit in the child's placement setting. To measure performance in previous periods, the Accountability Agents had to use a case file review of a sample of the children in care. Starting with Period 10, under the new stipulation, the unit of analysis is the case manager visit with the child. Case managers are still required to visit children twice every month and one of the visits is still to be in private, but the private visit does not have to occur in the placement setting. As indicated, the stipulation now has a standard for the percentage of completed twice monthly visits and a standard for monthly private visits.

For nearly five years, county Quality Assurance staff have been assessing the quality of the visit documentation monthly and maintaining a data base of all required and completed case manager-child visits. This tracking system has enabled the counties to calculate the percentage of required visits that were completed by individual case managers, supervisory units, and program administrator. In Period 10, the State generated a report from the county data bases for all children in custody during Period 10. Thus, the Accountability Agents no longer have to rely on a case file review of a sample of children in foster care and starting in Period 10 can now report on the State's performance with all children. The Accountability Agents verified the State report by randomly sampling 10 percent of the children in custody each month during Period 10 and collected information about all applicable visits (sibling, parental, and case manager.) This information was compared with the information in the county system and discussed with county representatives. The Accountability Agents are satisfied that the State report on case manager visits with children is accurate.

b. State Performance

- **The State Surpassed the Outcome 20a Threshold**
- **The State Surpassed the Outcome 20b Threshold**

Case managers completed **97.8** percent of the required monthly private visits (Outcome 20a) and **98.3** percent of the required twice-monthly visits (Outcome 20b) in Period 10. The threshold for each outcome is 96.25 percent. Due to the changes in the standard and in the measurement methodology that took effect in Period 10, comparative data for previous periods is not available.

Outcome 22 – Case Manager Visitation with Substitute Caregivers

The Consent Decree requires case managers to visit once a month with placement caregivers.⁷⁷ 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. Interpretation and Measurement Issues

In November 2010 the parties reached agreement on a revised standard for case manager visits with substitute caregivers. Starting with Period 10, Outcome 22 requires at least 95 percent of the total minimum number of monthly case manager visits to substitute care givers required during the period occur.⁷⁸

Similar to the changes made to Outcome 20, the new stipulation changes the unit of analysis for Outcome 22 from the caregiver to visits and the time frame for performance is limited to the required visits in the period. Previously, in Periods 2 through 9, the unit of analysis for Outcome 22 was the caregiver and the stipulation required 95 percent of the caregivers to be visited by the child’s case managers each and every month in the 12 months preceding the end of the reporting period. As with Outcome 20, the Accountability Agents had to employ a case file review of a sample of the children in care to measure performance in previous periods. Starting with Period 10, as indicated, the standard is a percentage of completed monthly visits to caregivers in the reporting period.

Using the visit data base maintained by County Quality Assurance staff previously described in Outcome 20, the State generated a performance report for the period. The Accountability Agents verified the State report by randomly sampling 10 percent of the children in custody each month during Period 10 and collected information about all applicable visits (sibling, parental, and case manager.) This information was compared with the information in the county system and discussed with the county representatives. The Accountability Agents are satisfied that the State report on case manager visits with care givers is accurate.

b. State Performance

- **The State Surpassed the Outcome 22 Threshold**

For Outcome 22, 98 percent of the required monthly case manager visits to substitute caregivers in Period 10 occurred. The performance threshold for this outcome is 95 percent. Due to the

⁷⁷ See p. 36, Outcome 22 of the Consent Decree.

⁷⁸ See *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

changes in the standard and in the measurement methodology that took effect in Period 10, comparative data for previous periods is not available.

2. Children and Youth Receive the Services They Need: Outcomes 24 and 30

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.”⁷⁹ 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 analysis 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.

a. Interpretation and Measurement Issues

Appendix B provides a summary of previously resolved interpretation and measurement issues. For calendar year 2010, the measurement of Outcome 24 performance is based on all youth aged 18 or older who exited care any time between January 1 and December 31, 2010 and, as of December 31, 2010, had not returned to care to take advantage of independent living services. Supporting documentation for the educational achievement of these youth is maintained by the counties, the State Department of Education, and the Technical College System of Georgia. The Accountability Agents reviewed the supporting documentation, maintained by the counties and state, including copies of diplomas and appropriate educational certificates.

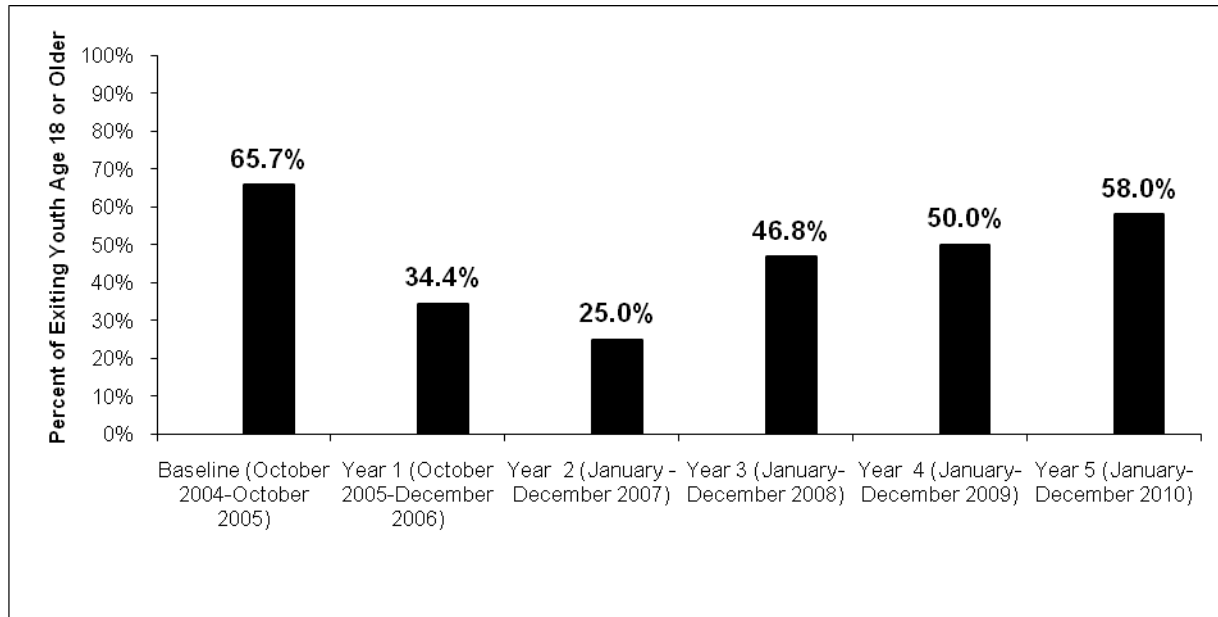
b. State Performance

• The State Fell Short of the Outcome 24 Threshold

The State reports that 65 of 112 exiting youth (58%) who left DFCS care at age 18 or older between January 1 and December 31, 2010 graduated from high school or achieved a GED. Although this performance is below the baseline, it is the State’s best performance since the baseline year. It is about 11 percentage points higher than the results for 2008 and eight percentage points higher than 2009. Figure V-3 displays the State’s performance compared to the baseline for the five years since the baseline measurement was taken.

⁷⁹ See p. 36, paragraph 24 of the Consent Decree.

Figure V-3
State Performance on Outcome 24 Compared to Baseline:
Educational Attainment of Youth Exiting DFCS Care (High School Diploma or GED)
 (October 26, 2004 to December 31, 2010)



Source: County Records, State Department of Education, Technical School of Georgia.

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.⁸⁰ 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. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. The measurement of Outcome 30 performance is based on the sample of 175 children in foster care at any time between July 1 and December 31, 2010.

Among the 175 children in the sample, 168 children had one or more case plans in their records. Six of the seven children who did not have case plans in the files had been in custody 30 or fewer days during the review period. The seventh child exited after 45 days. Of the 168 plans, 146 (87%) were current – they had been developed within the seven months prior to December

⁸⁰ See p 38, Outcome 30 of the Consent Decree.

31, 2010 or to the child's discharge date. Another 22 (13%) were seven to 12 months old. Six children had no needs identified in their plans, thus the outcome performance is based on 162 children who had plan-identified needs. The statistical margin of error for a subsample of 162 children remains +7 percent.

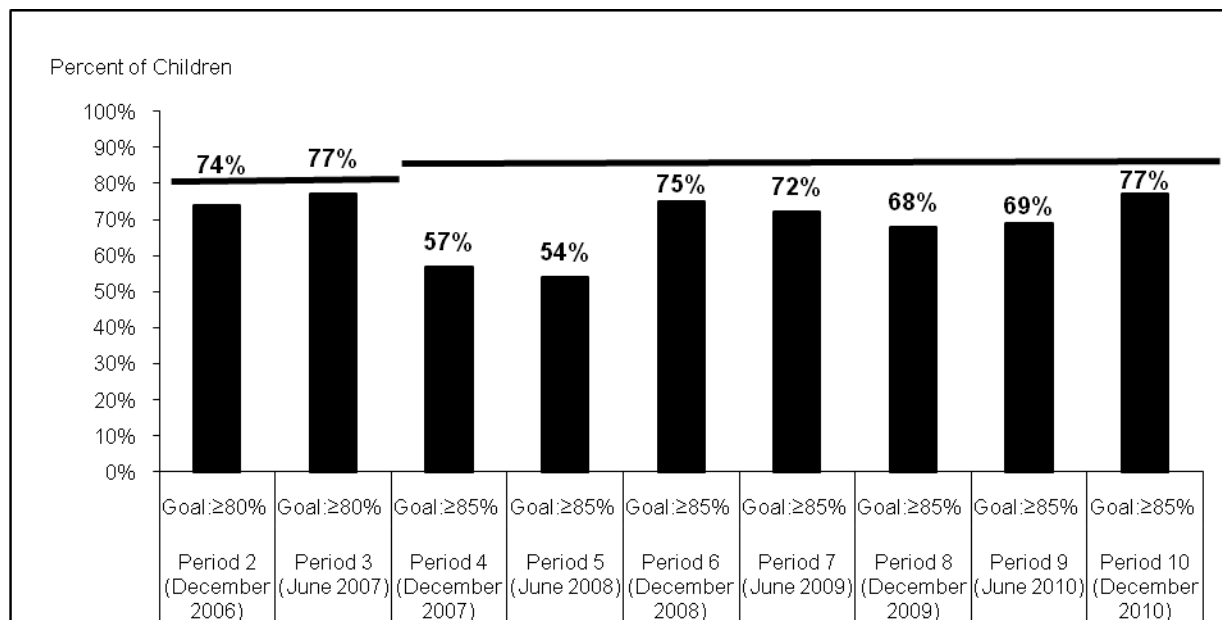
b. State Performance

• **The State Fell Short of the Outcome 30 Threshold**

Based on case file documentation and reviewer judgment, **124 children (77%)** of 162 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 10 performance is an improvement over the Period 9 performance of 69 percent and arrests the downward performance trend occurring since Period 6. The observed difference, however is within the statistical margin of error for the sample. Figure V-4 displays the State's performance over the nine reporting periods to which the Consent Decree standards applied.

Table V-3 provides a breakdown of the needs identified and the percentage of needs met in each category. All children had routine medical, dental health and educational/developmental needs cited in their plans. The percentage of children who appear to have mental health needs documented is similar to the 80 percent in Period 9.

Figure V-4
Nine 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-December 2010

Table V-3
Needs Identified in Most Recent Case Plans and Degree Needs Met as of
December 31, 2010 or last Date of Custody

Children with Case Plans n=168			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)	162	96%	All Identified Needs Met (n=162)	124	77%
Frequency of different identified needs			Frequency of different needs being met		
Medical	162	100%		149	92%
Dental	162	100%		144	89%
Mental Health	126	78%		119	94%
Educational/ Developmental	162	100%		154	95%
Other	6	100%		6	100%

Source: Case Record Review, February-March 2011

c. Operational Context

DFCS case plans usually contain a series of standard goals. One such standard goal is “*DFCS will ensure that the medical, dental, educational, and psychological needs of the child are met.*” Part of ensuring that this goal is achieved requires a child to have timely, routine health examinations, including physical, dental, and psychological assessments. It also means that if a child has an Individualized Education Program⁸¹ (IEP), it should be current. The schedule for health and dental exams is indicated in Section 6 of the Consent Decree⁸² and DFCS policy⁸³. Another part of achieving this goal requires addressing the needs identified in the examinations and IEPs. For example, if a health exam identifies a potential vision problem and follow-up with an ophthalmologist is recommended, it is the State’s responsibility to see that the child is examined by an ophthalmologist. Likewise, if a dental examination identifies tooth cavities requiring fillings, it is the State’s responsibility to see that the child receives the appropriate follow-up dental care.

⁸¹ For a description of the policies and rules applying to the Georgia Individualized Education Program, see http://public.doe.k12.ga.us/_documents/doe/legalservices/160-4-7-.06.pdf.

⁸² Per Section 6, physical health examinations are to be completed in accordance with the requirements of the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Health Check Program and dental exams are to be annual.

⁸³ DFCS policy regarding meeting the service needs of children is in Section 1011, Chapter 1000 of the Social Services Manual.

In assessing whether the standard case plan needs are being met, the Accountability Agents, through the case record review, look for timely examinations and appropriate follow-up where indicated. The case records of the children who appeared to have unmet needs for Outcome 30 reflected the following circumstances:

- Overdue dental examinations;
- No follow-up dental treatment or cavities, teeth restoration, bone loss, and gum disease.
- No medical exam or insufficient exams for age of child;
- No follow-up treatment-/consultation/additional screening as recommended for vision, physical therapy;
- No developmental assessment completed or overdue developmental assessments;
- No current Individualized Education Program;
- No follow-up treatment/consultation/additional assessment as recommended for enuresis, play therapy, family therapy.

As part of the agreed to curative action plan between the parties, the State strengthened or initiated several activities in Periods 9 and 10 that are designed to ensure children are getting their needs appropriately identified and addressed. These activities included:⁸⁴

- 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. This review found that as many as 306 examinations (medical, dental, developmental, or psychological) were overdue or there were outstanding treatment issues.
- 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, 2011.⁸⁵
- Full implementation of 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.
- Continued supervisory oversight.
- Communication with substitute caregivers regarding the importance of regular, timely health checks, this included meetings and correspondence with caregivers and reminders to foster parents.
- Increased use of the dental van to expand dental appointment capacity.
- Fulton had staff training on the schedule and components of the Early and Periodic, Screening, Diagnosis, and Treatment (EPSDT) Health Check Program.

⁸⁴ 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.

⁸⁵ The status of this effort was discussed at a meeting of the parties on February 15, 2011.

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- 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 in the Passport.
 - 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.

The Accountability Agents did not assess the implementation of all of these activities but can confirm that the Health Check Report produced from SHINES is operational and Fulton County conducted EPSDT training. The State submitted reports to the plaintiff’s counsel as required. However, in the file review of a sample of 175 children in foster care, the Accountability Agents identified 13 children (7%) who appeared to have needs identified before November 2010 but did not have those needs met by February 2011. In following up with the counties, the Accountability Agents learned that eight of these children had treatment appointments by the end of May 2011. Five children were to have appointments in June 2011.

The SHINES Health Check Report should help the State make and keep timely health and dental appointments for children and keep them on the appropriate schedule for their ages. Based on a child’s age and date of entry and the EPSDT schedule for the child’s age, the report automatically prompts case manager action and indicates when routine examinations are overdue. However, the report does not prompt action related to follow-up care or recommended consultation based on the results of routine medical and dental examinations. Vigilant case manager and supervisory oversight is necessary to make sure these actions are not overlooked.

In addition, it appears that the counties continue to struggle with timely documentation of completed health and dental assessments. The completed health action may be listed on the health log in a file, but uploading the supporting documentation into SHINES may not happen for several months.

B. The Placement Experience

This section describes characteristics and placement practices identified in the case record review of 175 children in foster care during the period July 1 through December 31, 2010. This includes the placement environment, the use of temporary placement settings, and case manager visits to children in new placements. Data on children under the age of 12 in congregate care placements is based on the entire universe of such children.

1. Placement Setting

There have been no significant changes to the placement process from that reported in the first monitoring report. Table V-4 provides the distribution of children among placement settings found in the case record review. When the different family settings are combined, 146 children (83%) in the sample were in family settings on December 31, 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. Twenty-eight children (16%) were in congregate care settings including residential treatment facilities, group homes, skilled nursing facilities and special psychiatric hospitals. One youth was in a detention/correctional facility.

Table V-4
Placement Settings of Children in DFCS Custody
on June 30, 2010 or the last day of custody (or before running away)
(n=175)

Placement Type	Frequency	Percent	Category Percent
Family Settings			83%
Foster Home (DFCS or Private Agency Supervised)	106	61%	
Relative Home (Foster and non Foster Home)	34	19%	
Parents/Guardian/Fictive Kin	6	3%	
Congregate Care Settings			16%
Emergency Shelter/Assessment Center	0		
Group Home	11	6%	
Residential Treatment Facility/ Child Caring Institution/ Specialty Hospital	17	10%	
Other			<1%
Regional Youth Detention Center (RYDC)/ County Jail, personal care home	1	<1%	
Total	175	100%	

Source: Case Record Review, February – March 2011.

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

Sixty-two children (35%) in the sample of 175 children in foster care experienced one or more placement settings during Period 10. The proportion of children experiencing a new placement or placement change is similar to that observed in the Period 9 sample. For those experiencing a move, there was evidence that case managers attempted to minimize the emotional trauma of the most recent move for 38 of the 62 children (61%). Twenty-three of the 62 children experienced more than one new placement setting in Period 10 and the record review collected information about trauma-minimizing efforts related to the prior placement move. Among these 23 children, it appeared that case managers attempted to reduce the trauma of the earlier move for fifteen children (65% of 23). Trauma minimizing efforts included placing children with siblings, parents and relatives; conducting transition interviews and transition visits; having explanatory conversations with the children and foster parents; offering comforting words and actions during the move; placing with a foster family who has same primary language and helping children to pack personal belongings.

3. Use of Emergency or Temporary Placements

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.⁸⁶

The case record review did not find any children who experienced more than 23 hours in one of the counties’ assessment centers during Period 10. As part of an agreed upon curative action program, the State agreed to provide the Plaintiff’s Counsel with notification of any instances of overstay at the Fulton County Family Resource Center (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 overstay since May 2010.⁸⁷ Two children experienced temporary or respite foster homes. For one child the stay was less than 30 days. For the other child, it appears the placement in a respite foster home after a disruption became a regular placement as the child was still in the placement as of April 2011.

4. Informing Caregivers and Providing Appropriate Clothing

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.⁸⁸ As the Accountability Agents learned in Period 3, 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

⁸⁶ See p. 16, paragraph 5C4.c of the Consent Decree.

⁸⁷ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children’s Rights, August 23, 2010.

⁸⁸ See p. 19, paragraph 5C.6d of the Consent Decree.

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. The additional files maintained by the placement units were not reviewed for Period 10. Among the 62 children in the sample of 175 children in foster care who had an initial and/or a new placement during the period (excluding children returned to parents), case managers appeared to have provided medical information to the substitute caregivers of 14 children (23% of 62) and education and mental health information to 4 care givers (6% of 62). Based on the 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 27 (43% of 62) children.

5. Case Manager Visitation with Children Who Experienced a New Placement

The Consent Decree stipulates a frequent case manager visit schedule for the first eight weeks of a new placement.⁸⁹ 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 62 children in the sample who entered and/or changed placements during the reporting period. The circumstances of five children precluded starting the required visits during the review period.⁹⁰ Of the 57 children⁹¹, the file documentation indicated that all requirements were met for 27 children (47% of 57). Another 11 children (19% of 57) missed one of the required additional visits. The majority of the remaining children (17 of 19) had at least half of the required visits. Two children had fewer than half of the required visits. The visitation pattern is arrayed in Table V-5.

⁸⁹ See p. 19, paragraph 5D.1 of the Consent Decree.

⁹⁰ Three children experienced their most recent placement between December 23 and December 31; one child ran away upon being placed; one child was placed with a relative in Florida through ICPC on December 15, 2010.

⁹¹ Conclusions drawn from a subsample of 57 children has a margin of error of +/-13%.

Table V-5
Pattern of Case Manager Visits with Children in the First 8 Weeks
of a New Foster Care Placement
n=57

Degree of Required Visits	Number of Children	Percent
All requirements met for period of time child in placement	27	47%
Missed one week of requirement (equivalent of 5 visits in addition to the two required in-placement visits over the 8 week period)	11	19%
Missed two weeks of requirement (equivalent of 6 visits in addition 8 week period with at least 2 in-placement visits)	4	7%
Half of the requirements (equivalent to 4 visits in 8 weeks)	13	23%
Less than half of the required visits	2	4%
Total	57	100%

Source: Case Record Review, February-March 2011.

The pattern of case manager visits in the first 8 weeks of a new placement for a child appears to be improving. Although the sample size is very small for comparison, in Period 9 26 percent of the children requiring visits in the first 8 weeks of placement received all the required visits. In Period 10, both counties initiated efforts, such as weekly follow-up with supervisors, to improve performance in this area. However, these activities did not begin until late in Period 10, therefore it is likely they were not the cause of the observed improvement. The activities will lay the ground work for improvement in Period 11.

- **Use of Congregate Care**

The Consent Decree has several restrictions related to the use of group care.⁹² Between July 1 and December 31, 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. No children under the age of 12 were placed in group homes or child caring institutions except as allowed by the Consent Decree stipulations.

During the period, a total of four children under the age of 12 were placed with their mothers in group care settings designed for teen mother transitional living or older mothers with children. The capacity of these settings ranged from 18 to 48 beds.

On December 31, 2010, 11 children under the age of 12 remained in group care settings or psychiatric residential treatment facilities with eight children in facilities with more than 12 beds. Among the eight children, seven (88%) were young children placed with their teenage mothers, and one 11-year old child (12%) was hospitalized in a 40-bed psychiatric residential treatment facility (PRTF) due to a serious emotional condition. According to the State, the

⁹² See p. 16-17, paragraph 5C.5f of the Consent Decree.

continued need for in-patient treatment in a PRTF is reviewed every 30 days and reauthorized as necessary.

Although DFCS does not consider psychiatric hospitals to be “placement settings,” DFCS has supplied documentation to the Accountability Agents that these placements have been reviewed and authorized.⁹³ Table V-6 summarizes the State’s actions with regard to the Consent Decree stipulations.

Table V-6
Children Younger Than Age 12 in Group Care Settings
July1 through December 31, 2010

Children under the age of 6						
Reason for placement	Number placed as of June 30, 2010		Number newly placed between July 1 and December 31, 2010		Number still placed as of December 31, 2010	
	Bed Capacity		Bed Capacity		Bed Capacity	
	≤12	>12	≤12	>12	≤12	>12
With mother	5	2		4	3	7
Service Need	2					
Total	9		4		10	
Children aged 6 to 12						
	Number placed as of June 30, 2010		Number newly placed between July 1 through December 31, 2010		Number still placed as of December 31, 2010	
	Bed Capacity		Bed Capacity		Bed Capacity	
	≤12	>12	≤12	>12	≤12	>12
		4*				1*
Total	4*				1*	

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

*Children hospitalized in psychiatric residential treatment facilities (PRTF).

⁹³ The Accountability Agents did not verify the appropriateness of these arrangements or the certification of need.

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.⁹⁴ As a means of “*strengthening and rebuilding families to bring about the child’s early return*”⁹⁵ 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 considers the State’s practice as reflected in state and county-reported data and the case record review of 175 children in foster care during Period 10.

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.⁹⁶ Other initial activities include health and dental screening and mental health or developmental assessments.⁹⁷ 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 10, the State used SHINES data to report that 388 children entered custody, but not all remained in care beyond a few days. Among the 295 children who were in custody nine days or more, the county tracking systems indicated that 239 children (81%) received timely Family Team Meetings (FTM). Another 34 children (12%) had FTMs but they were not convened within the first nine days. An additional 22 children (7%) did not appear to have had a FTM. The proportion of timely FTMs was smaller than the Period 9 level of 87 percent and the proportion of children that had a Family Team Meeting convened at all declined somewhat as well from 99 percent in Period 9 to 92 percent in Period 10. Figure V-5 illustrates the Period 10 findings.

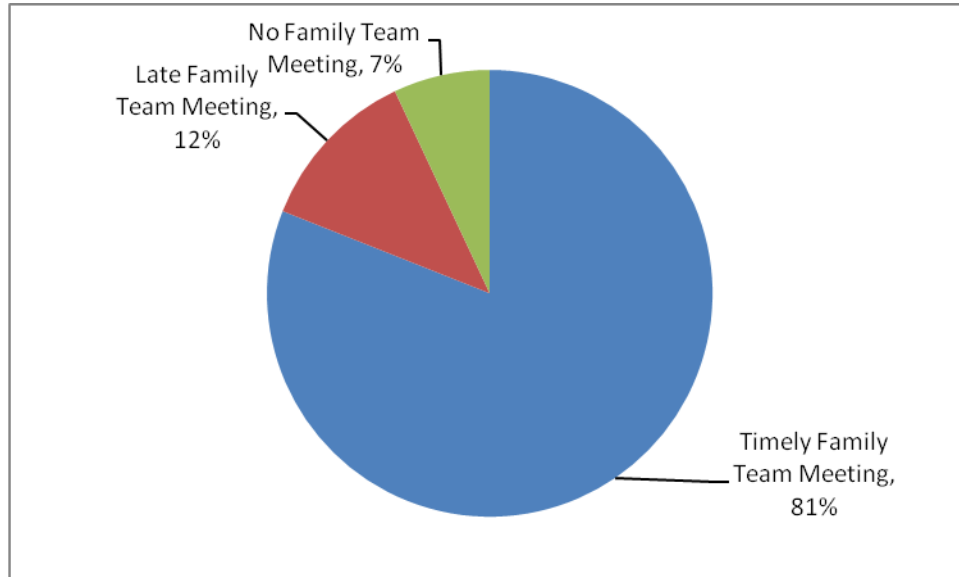
⁹⁴ See p. 4, principle 7; pp. 20-21, section 6; p.38, Outcome 30 of the Consent Decree; See also Social Services Manual Section 3060, Georgia Department of Human Services.

⁹⁵ See Social Service Manual 3060, Georgia Department of Human Services.

⁹⁶ See pp 5-7, section 4A of the Consent Decree.

⁹⁷ See p. 20, Section 6.A. of the Consent Decree.

Figure V-5
Initial Family Team Meetings at Foster Care Entry
July 1-December 31, 2010
N=295 (all children remaining in custody 9 days or more)



Source: County records

b. Initial Health and Dental Screenings

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 10 sample of 175 children, there was a subsample of 31 children who entered care during the period and remained at least 10 days. However, two children were hospitalized the entire episode and, therefore, were not included in the analysis, reducing the subsample to 29 children. The margin of statistical error for a subsample of 29 children is approximately ± 18 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.⁹⁸

Of the children in this subsample of 29, 25 (86%) had documented health screens within 10 days of entering care. When the ten-day time frame is relaxed, all children received an initial health screen. For those children whose health screens fell outside the 10-day window, the elapsed time ranged from 12 to 16 days. This performance is a considerable improvement over Period 9 and other previous periods.

⁹⁸ The Accountability Agents are conducting a separate record review to collect information about practice in the first 60 days after a child enters custody. The results of this review will be published in a separate, supplemental report.

Thirteen children (45% of 29) had a documented dental screen within 10 days. However, the total proportion receiving an entry dental screening was 97 percent. The 15 children who received their initial dental screens late received them 14 to 55 days after entering care. One child who entered care in November 2010 had not had a dental screen by December 31, 2010. Again, this is an improvement over the Period 9 performance.

Some of the improvement in this area may be attributed to the implementation of the Health Check Report from SHINES that helps case managers and supervisors track the due date for health and dental screens and document their completion.

Table V-7
Initial Health and Dental Exams at Foster Care Entry:
July1-December 31, 2010
n=29

<i>Screen</i>	Number	Percent	Cumulative Percent
<i>Initial Health Screen At Foster Care Entry</i> (n=29 from sample)			
Received within 10 days	25	86%	
Received, but not within 10 days (12 to 16 days)	4	14%	100%
Total	29	100%	
<i>Initial Dental Screen At Foster Care Entry</i> (n=29) (includes infants for a "gum check")			
Received within 10 days	13	45%	
Received, but not within 10 days (14-55days)	15	52%	97%
No initial dental screen received by December 31, 2010	1	3%	100%
Total	29	100%	

Source: Case record review, February-March 2011.

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.⁹⁹ 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.¹⁰⁰ Within the sample of 175 children in foster care in Period 10, there were 18 children who entered care on or after June 1, 2010, were in custody at least 30 days, and were younger than age four.¹⁰¹ There were 17

⁹⁹ See p. 20, paragraph 6A.3 of the Consent Decree.

¹⁰⁰ See p. 20, paragraph 6A.3 of the Consent Decree.

¹⁰¹ 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 June 2010 and, therefore, had sufficient time for identified needs to be addressed in Period 10.

children in the foster care sample who entered DFCS custody on or after June 1, 2010, remained in care 30 days or more, and were age four or older. This information is included in Table V-8.

Among the 18 children under the age of four, 16 had completed developmental assessments, 11 within 30 days. Five exceeded 30 days and were completed between 34 to 90 days. Two children had not received a developmental assessment by December 31, 2010.

Among the 17 children that were over the age of four and had been in custody 30 days or more, 16 had a mental health assessment. Ten children had their assessments within 30 days and six had the assessment completed between 32 and 160 days after entering. One child who had entered foster care in August 2010 had not received an initial mental health assessment by December 31, 2010.

Table V-8
Initial Developmental or Mental Health Assessments at Foster Care Entry:
June 1-December 31, 2010
n=varies depending on the assessment

<i>Assessment</i>	Number	Percent	Cumulative Percent
<i>Initial Developmental Assessment</i> (children younger than age 4) (n=20)			
Received within 30 days	11	61%	
Received, but not within 30 days (34-90 days and unable to determine)	5	28%	89%
No initial Developmental Assessment received	2	11%	100%
Total	18	100%	
<i>Initial Mental Health Assessment</i> (children age 4 and older) (n=17)			
Received within 30 days	10	59%	
Received, but not within 30 days (32-160 days)	6	35%	94%
No Initial Mental Health Assessment	1	6%	100%
Total	17	100%	

Source: Case record review, February-March 2011

d. Initial Case Plans

All 25 children entering custody during the reporting period and remaining more than 30 days had an initial case plan developed by December 31, 2010 or their last date in custody. In addition, one child who was in custody less than 30 days had a case plan developed. Twenty of the 26 were completed within 20 to 30 days of entering care and six were completed within 39 and 78 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 screenings¹⁰² in accordance with the Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT)/Georgia Health Check Program standards.¹⁰³ DFCS' performance with respect to meeting these standards is discussed below. The case record review of 175 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 173 children in the sample of 175 children. Analysis was not applicable for two children who were medically fragile and were receiving constant medical attention while in custody. For the 173 children, all but one had at least one documented health screen. The one child who did not have a health screen entered in Period 9 and was in custody 13 days before exiting care in July 2010. Overall, 167 children (96%) of the 173 appeared to be current with their "well child" visits on December 31, 2010 as a result of receiving a health screen on schedule prior to July 1, 2010 or during reporting Period 10; or receiving a health screen between July 1 and December 31, 2010 that brought them up-to-date. This is a substantially greater proportion than in Period 9 when 78 percent of the sample was current with their health screens by the end of the period. The remaining seven children (4% of 173) appeared to be overdue for an exam, even if they had received one or more in Period 10. The specific findings are provided in Table V-9.

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 173 children who had at least one documented health screen, 61 (35%) of the most recent health screens may have been missing one or more required EPSDT components. These 61 exams were most often missing documentation of required height, weight, blood pressure measurement, required laboratory work or vision and hearing testing.

See the discussion of Outcome 30 performance earlier in this chapter for a description of the curative actions related to health and dental screenings agreed to by the parties and the State's implementation of those actions by December 31, 2010.

¹⁰² See p. 30, paragraph 13A in the Consent Decree.

¹⁰³ See p. 20, paragraphs 6A 1 and 2, and p.21, 6B, paragraphs 1-8 of the Consent Decree.

Table V-9
Status of Periodic Health Screening for Children*
July 1 through December 31, 2010
n=173

Component and Action	Number	Percent	Cumulative Percent
No health screen required during period, children current with health check-ups during entire period	39	23%	
Children receiving timely health screens (according to EPSDT schedule) between July 1 and December 31, 2010	113	65%	88%
Children receiving a health screen between July 1 and December 31, 2010 received later than recommended schedule	14	8%	96%
Children receiving one or more of the required health screens between July and December 2010, but were still behind schedule as of December 31, 2010	1	1%	97%
Required well child health screen(s) between July 1 and December 31, 2010 not received	6	3%	100%
TOTAL	173	100%	

Sixty-one of the 173 most recent exams received appeared to be missing some EPSDT components.

Source: Case record review, February-March 2011.

As reflected in Table V-10, routine dental screening was assessed for 128 children because 47 children were under the age of three through December 31, 2010.¹⁰⁴ For the 128 children,¹⁰⁵ dental screens appeared to be current for 119 children (92%) by December 31, 2010. This is a larger proportion than in Period 9 when 83 percent of the sample was current with dental exams by the end of the period. Among the nine children who were still due a dental exam during the period, five had had at least one exam in 2009 but none in 2010, and four children, ranging in age from 13 to 15, had not received an exam since entering care in 2010. They had been in custody 15 days to 7 months as of December 31, 2010 or the date they were discharged. Twenty-six of the 119 of the dental exams considered timely did not have documentation of sealants, x-rays, teeth cleaning, or a combination of these three components.

¹⁰⁴ 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.

¹⁰⁵ Conclusions drawn from subsample of 128 have a margin of error of +/-8%.

Table V-10
Children Age 3 and Over Receiving Periodic Dental Screening*
July 1 through December 31, 2010
n=128

Component and Action	Number	Percent	Cumulative Percent
No annual EPSDT dental exam required during period, children current with annual requirement during entire period	46	36%	
Children receiving a timely annual EPSDT dental exam during period (includes initial exams of children under age 3)	73	57%	93%
Required annual dental exam not received as of December 31, 2010	9	7%	100%
TOTAL	128	100%	

Source: Case record review, March-April 2011. *Twenty-six of the 119 timely exams did not have documented x-rays or cleaning or both.

3. Periodic Developmental and Mental Health Assessments

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 10, 18 children had documented developmental assessments in addition to the 16 children who received an initial assessment. Another 29 children had documented mental health assessments in addition to the 16 children who received an initial assessment.

4. On-going Attention to Development and Education

Thirty-four children in the sample had one or more developmental and/or educational need identified between July 1 and December 31, 2010. Five children needed speech therapy. Academic assistance was needed by ten children. Eight children had developmental delays and five children needed to be further evaluated. Others needed vocational services, special education and learning disabilities programs.

Other indicators of developmental or educational needs are Supplemental Security Income (SSI) benefits and Individualized Education Programs (IEPs). Eight children in the sample appear to be receiving SSI benefits and 37 had IEPs. Twenty-four (65%) of the 37 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, 95 children (54% of 175) were aged 7 or older by August 31, 2010 and were in DFCS

custody sometime during a portion of the school year. Among the 92 children, 91 (99%) were enrolled in school or a GED program in the second half of 2010 and one youth was a runaway. Among the 91 enrolled, however, two children (2%) experienced gaps in school enrollment as a result of runaway behavior. Within the foster care sample, 80 children (46% of 175) were younger than age 7 on August 31, 2010. Fifty-eight of these children (73% of 80) were enrolled in a kindergarten, pre-school or another developmental program.

5. 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 10¹⁰⁶:

- 35 (30%) of the 116 children who received regular (initial or periodic) health screening during Period 10 had health needs identified. Among these 35 children, the documentation in their files indicated that 26 (86% of 35) had received appropriate treatment or treatment was scheduled for all the needs identified during Period 10. One child (3% of 35) appeared to have had some, but not all needs met. Six of the 35 children (14%) 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, follow-up for anemia, and other diagnostic tests or referrals. Two of the 11 children that received documented discharge medicals also needed follow-up diagnostic referrals.
- 25 (34%) of the 73 children who had a dental health screening during Period 10 had dental needs identified. Eleven children (44% of 25) had all their needs met. Of the 14 children with unmet needs, untreated cavities were the primary issue; other children required oral surgery for tooth restoration, extraction, and further assessment.
- 23 (68%) of the 34 children who had developmental or educational assessments in Period 10 had identified needs. All of the needs for 20 of the 23 children (87%) were being addressed up through the end of December. Two children were not receiving tutoring services and one child had not received an evaluation for special education.
- 38 (84%) of the 45 children who had mental health assessments in Period 10 had identified needs. All of the needs for 27 of the 38 children (71%) were being addressed. Another five (13% of 38) had some of their needs addressed or services scheduled by December 31, 2010 and another two (5%) appeared to have none of their needs met. The two children with unmet needs were not receiving recommended play therapy or individual psychotherapy.

¹⁰⁶ Conclusions drawn from subsamples of 38 or smaller have margins of error of $\pm 16\%$.

6. Response to Emerging Needs Between Routine Well-Child Visits or Scheduled Assessments

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.

- 44 children (25%) of the 175 children in the sample experienced emerging physical health needs during the reporting period. All but two children appear to have had these needs met. Both children needed glasses. One had broken her glasses and the other child discussed getting glasses with (his or her) case manager and foster parent. Neither obtained glasses during the period.
- One child (less than one percent) of the 175 children in the sample experienced acute dental needs during the reporting period and those needs were treated.
- 26 children (15%) of the 175 sample experienced acute or emerging mental health needs during the reporting period. All 26 children had those needs met.

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.”¹⁰⁷

The foster care case record review of 175 children collected some limited information on the experience of children who had reached their 18th month in custody before or during Period 10. Within the sample of 175 children, 81¹⁰⁸ (46%) had been in custody 18 months or more. Among the 81 children, 27 (33%) were aged 14 or older and eligible for Independent Living Program (ILP) services. Twenty-one of the 27 (78%) appeared to be receiving such services. Another six youth (22%) had Written Transitional Living Plans (WTLP) but did not appear to be receiving ILP services.

¹⁰⁷ See pp 11 and 12, Section 4.F paragraph 3, of the Consent Decree.

¹⁰⁸ Conclusions drawn from a subsample of 81 are subject to a statistical margin of error of +/-11%.

Seventy-eight of the 81 children (96%) had meetings between July and December 2010 to review the appropriateness of their permanency goal and effectiveness of services they are receiving. Most youth (46) had case plan reviews convened by the Judicial Citizen Review Panel, but 30 youth had additional meetings. The meetings had a range of results. Most meetings did not change the case plans, but 13 children had services revised as a result and nine had revised permanency goals.

Thirteen of the 81 children (16%) were discharged before December 31, 2010. Three of the 13 children were discharged by the court against the recommendation of DFCS. Among the remaining 10 discharges, eight appeared to have had discharge planning; seven children had an identified discharge meeting and discharge planning for another child 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”¹⁰⁹ and that all children receive a health screen within 10 days of discharge.¹¹⁰ 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.¹¹¹

Analysis of the curative action performance in Period 10 is based on information from two sources. First, within the sample of 175 foster care children, 42 children¹¹² (24% of 175) had been discharged by December 31, 2010. The discharges of 9 children (21% of 42 discharged) however, were excluded from the analysis because the presiding judge discharged the children without prior notice to DFCS. The 33 remaining discharges from the foster care sample were augmented with information from a separate, on-line case record review of 58 children who were discharged between July and December 2010.¹¹³

¹⁰⁹ See p.10, Section 4.C.6 in the Consent Decree.

¹¹⁰ See p. 21, Section 6.B.6 in the Consent Decree.

¹¹¹ Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children’s Rights, February 15, 2010 and September 22, 2010.

¹¹² This number includes the children who had been in custody 18 months or more and reported on separately in the previous section.

¹¹³ The Accountability Agents initially drew a random sample of 11 percent of the 600 discharges in Period 10. This equaled 67 children. However, as these cases were reviewed, 4 children (6% of 67) were excluded. Two were excluded because they were discharged against the recommendations of DFCS. Another was excluded because his discharge was due to his death and the final exclusion was because the discharge date was wrong in SHINES. Another five children were excluded from the analysis because they were also in the sample of 175 children. None of the children included in the analysis had their cases dismissed at the 72 hour detention hearing.

- **Discharge Planning**

In the sample of 33 children, there was documentation of discharge planning for 29 children (88% of 33). In 5 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 24 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, 51 children and youth (88% of 58) had some form of discharge planning. Thirteen of the 51 children and families had meetings with the case managers or a discharge staffing; 20 children and families appeared to be planning over a series of visits; 10 had a Family Team Meeting; and eight children had an adoption placement staffing. This information is included in Table V-11.

While the information from each data source is not entirely comparable, it does consistently indicate that some type of discharge planning occurred with 88 percent of the children and families. This is an improvement over Period 9. 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-11
Discharge Planning in Period 10

Discharge Planning	Discharges in the case record review sample n=33*		Sample of Monthly Discharges n=58**	
	Number	Percent	Number	Percent
Discharge planning through one-on-meeting with case manager	8	25%	13	22%
Discharge planning in a Family Team Meeting	11	33%	10	17%
Discharge planning over a series of visits with children and family	5	15%	20	34%
Other type of meeting (internal staffing, discharge staffing)	5	15%	8	14%
No documented discharge planning	4	12%	7	12%

Source: *Case Record Review, February-March 2011; **SHINES, 10 percent of monthly discharges in Period 10
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 educational 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 family preservation services under a protective order.

- **Discharge Medicals**

In the sample of 33 children discharged by December 31, 2010, 11 had discharge medicals and all but one was completed within 10 days of discharge. The eleventh exam was completed 18 days before discharge. Scheduling of all but one of these 11 exams was discussed during discharge planning. Another 10 medicals were discussed during the discharge planning and there was no documentation of planned medicals for 12 of the 33 children. The information is summarized in Table V-12.

In the on-line record review, 38 children (66% of 57)¹¹⁴ had discharge medicals. Scheduling a discharge medical was discussed in the discharge planning for another five children (9% of 57). No reference to discharge medicals was found in 15 records (26% of 57). This information is summarized in Table V-12.

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 25 percent to 36 percent of the children for whom discharge is anticipated. This is an improvement over Period 9. In addition, it is worth noting that Routine Health exams were received by nine of the children discharged up to three months before discharge and another eight children had routine medicals three to six months before discharge.

¹¹⁴ One discharged child exited care to adoption and the child's records were sealed before the final discharge planning meeting or discharge medical could be confirmed, thus that child was removed from the analysis of discharge medicals.

Table V-12
Discharge Medicals in Period 10

Discharge Medicals	Discharges in the case record review sample n=33*		Sample of Monthly Discharges n=57**	
	Number	Percent	Number	Percent
Discharge medicals scheduled during discharge planning	10	30%	5	9%
Evidence of discharge medicals received	11***	33%	38	66%
No evidence of discharge medicals scheduled or received	12	36%	14	25%
TOTAL	33	100%	57	100%

Source: *Case Record Review, February- March 2011; **SHINES, 10% of monthly discharges in Period 10.

***Ten of these medicals were discussed in discharge planning

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 VI-1 below provides the measured performance summary for each infrastructure-related Outcome. 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 10. Charts are used to illustrate the performance trends emerging over ten periods.

Table VI-1
Strengthening Infrastructure Outcomes

Effective Oversight of Placement Settings	Period 10 Performance
Outcome 25: At least 98% of all foster placements serving class member children shall be in full approval and/or licensure status.	98%
Outcome 31: No more than 10% of all foster family home placements serving class member children at any time during the reporting period shall 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.	2%
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.	85%
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.	1%

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 SHINES.

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. To facilitate more timely completion of the Accountability Agents' reports, the Parties agreed in October 2010 to replace the previous Outcome 25 measure with a revised measure that uses *the placement* as the unit of analysis and which can be extracted from a single, automated data source – SHINES.¹¹⁵ Outcome 25, as revised, stipulates that “By the end of the tenth reporting period, at least 98% of all foster placements serving class member children shall be in full approval and/or licensure status. In computing this percentage, each placement shall be weighted by the approved and/or licensed capacity of that placement.”¹¹⁶

a. Interpretation and Measurement Issues

The revised Outcome 25 language contains the phrase “*By the end of the tenth reporting period...*” this makes it clear that it is intended as a point-in-time measure to be taken at the end of the reporting period. The revised measure also states: “*In computing this percentage, each placement shall be weighted by the approved and/or licensed capacity of that placement.*” To operationalize this weighting scheme, the Outcome 25 measure uses as the denominator the licensed or approved capacity of all placement settings with a class member in care on the last day of the reporting period, and as the numerator, the licensed or approved capacity of all such placements that were in full approval or licensure status on the last day of the reporting period. Measurement of Outcome 25 performance is based on the entire universe of out-of-home care placements subject to a DHS licensure or approval process and therefore has no margin of statistical error.

b. State Performance

- **The State Met the Outcome 25 Threshold**

At the end of Period 10, 544 of the 555 placements subject to a DHS approval or licensure process (98%) were in full approval and/or licensure status. These placements had an approved or licensed capacity of 2542 children, while the approved or licensed capacity of all placements with a child in care on December 31, 2010 was 2583 children; yielding an Outcome 25

¹¹⁵ The original Outcome 25 measure used *the child* as the unit of analysis, and therefore required the use of multiple data sources (some of which were manual) to link individual children to the approval status of the placements in which they resided.

¹¹⁶ See p. 4, *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

measurement of **98.4 percent**. Although the Outcome 25 measurement methodology changed as described above, Period 10 represents the fourth consecutive reporting period in which the Outcome 25 performance threshold of 98 percent was met or surpassed. The State's Period 9 performance on Outcome 25 was 98 percent. Additional detail on this measurement appears in Table VI-2.

One hundred percent of the placement capacity of child-caring institutions (including group homes) was found to be in "full approval status," that is, to have been fully approved by the relevant licensing and approval processes. The full approval rate for DFCS-supervised foster home capacity was 98 percent, and that of provider-supervised foster homes was 97 percent. The full approval rate for non-foster relative placement capacity was 94 percent. Given the change in methodologies from Period 9 to Period 10 and the margin of statistical error of +/- 8 percent for the placement sub-sample upon which the Period 9 data were based, no comparison to Period 9 full approval rates for the various placement types is provided. Figure VI-1 displays the State's performance on this outcome over the nine reporting periods to which the Consent Decree standards applied.

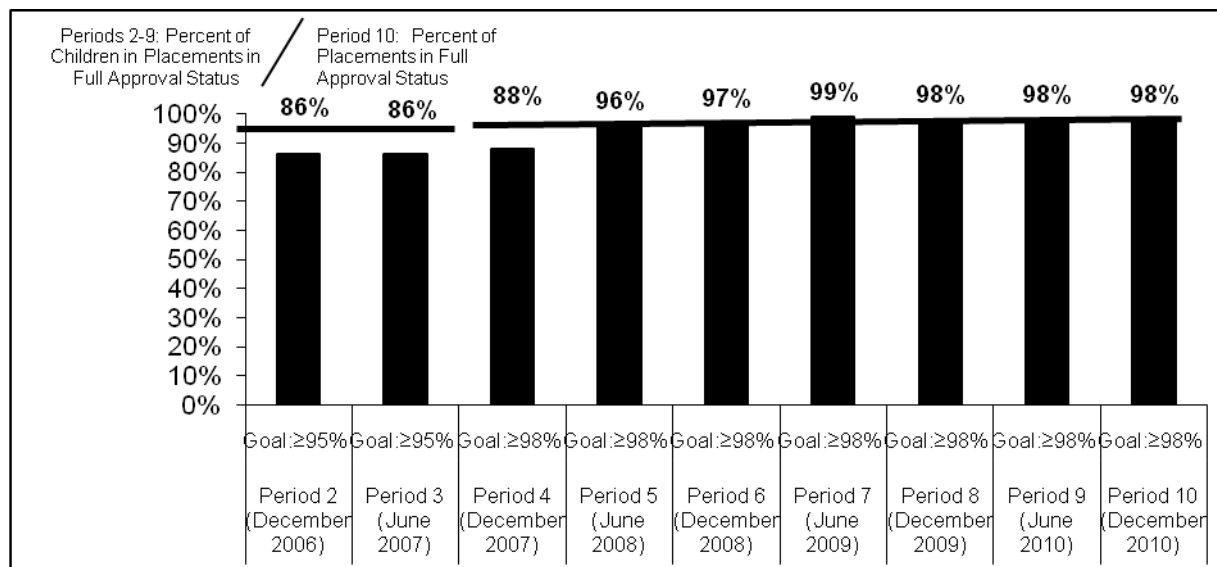
Table VI-2
Outcome 25 – Placements^a in Full Approval Status

Placement Type	Number of Placements with a Class Member in Care on 12/31/2010	Number of Placements with a Class Member in Care on 12/31/2010 that were in Full Approval Status	Overall Capacity of Placement Settings with a Class Member in Care on 12/31/2010	Capacity of Placements with a Class Member in Care on 12/31/2010 that were in Full Approval Status	Capacity of Placements in Full Approval Status as a Percentage of Overall Placement Capacity
Relative Placement	76	73	122	115	94.3%
DFCS-supervised Foster Home	144	142	325	317	97.5%
Provider-supervised Foster Home	275	269	850	824	96.9%
Child Caring Institution ^b	60	60	1286	1286	100.0%
Total	555	544	2583	2542	98.4%
^a Excludes 44 children in state custody on 12/31/2010 that were in settings with no relevant approval process (37 children were placed with a birth parent/guardian, four were in Metro YDC, one in Augusta YDC, one in the Cobb County Jail, and one in a specialty hospital). ^b Effective 1/30/2011 all "Group Homes" were reclassified in SHINES as Child Caring Institutions.					

Data source: Georgia SHINES.

Figure VI-1

Nine Reporting Periods of State Performance on Outcome 25: Children Placed in Settings that are in Full Approval and/or Licensure Status



Sources - Periods 2-9: Placement file reviews, Georgia's ICPC records, child placing agency records, and SHINES; Period 10: SHINES.

Outcome 31 – Foster Home Capacity Limits

Outcome 31 seeks to limit the number of children placed in individual foster homes. To facilitate more timely completion of the Accountability Agents' reports, the Parties agreed in October 2010 to replace the previous Outcome 31 measure with a revised measure that uses *the placement* as the unit of analysis and which can be extracted from a single, automated data source – SHINES.¹¹⁷ Outcome 31, as revised, stipulates that “By the end of the tenth reporting period and continuing thereafter, no more than ten percent of all foster family home placements serving class member children at any time during the reporting period shall exceed the capacity limits referenced in Section 5.C.4.e. of this Consent Decree...”^{118,119}

¹¹⁷ The original Outcome 31 measure used *the child* as the unit of analysis, and therefore required the use of multiple data sources (some of which were manual) to link individual children to the point-in-time census of the foster homes in which they were placed.

¹¹⁸ See p. 4, *Kenny A. v Perdue*, Stipulated Modification of Consent Decree, 1:02-CV-01686-MHS, effective November 22, 2010.

¹¹⁹ 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.

a. Interpretation and Measurement Issues

The revised Outcome 31 language contains the phrase *“By the end of the tenth reporting period...”* this establishes that it is intended as a point-in-time measure to be taken at the end of the reporting period. The revised measure also states: *“....all foster family home placements serving class member children at any time during the reporting period...”* which indicates that the universe of placements to be considered consists of any family foster home in which a class member child resided at any time during the reporting period. To operationalize this language, the Outcome 31 measurement first identifies the universe of family foster homes in which a class member child resided at any point during the reporting period, and then considers for outcome measurement the point-in-time child census of those family foster homes that had a class member child in care on the last day of the reporting period. The point-in-time used for measurement of Outcome 31 in Period 10 was December 31, 2010. As the Outcome 31 measure is based on the entire universe of family foster homes that had a class member child in care on the last day of the reporting period, it has no margin of statistical error.

b. State Performance

- **The State Surpassed the Outcome 31 Threshold**

Of the 685 family foster homes that had a child in care at any point during the period July 1 to December 31, 2010, 419 (61%) continued to have one or more children placed in them on December 31, 2010. Only eight of these 419 foster homes (**2%**) exceeded the Consent Decree’s capacity limits. Outcome 31 permits up to 10 percent of such homes to exceed the capacity limits specified in Section 5.c.4.e. Although the Outcome 31 measurement methodology changed as described above, Period 10 was the ninth consecutive reporting period in which the Outcome 31 threshold was met or exceeded.

In Period 10, all but one of the 16 family foster homes (3 DFCS-supervised; 13 provider-supervised) that exceeded the three-foster-child capacity limit did so due to the placement of sibling groups. However, eight of these homes (1 DFCS-supervised; 7 provider-supervised) qualified for the sibling group exception enumerated in Section 5.c.4.e. since no children other than the sibling groups resided in those homes. No family foster home in Period 10 exceeded the six-total-children capacity limit specified in Section 5.c.4.e. 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 nine reporting periods to which the standards applied.

Table VI-3

Outcome 31 – Foster Homes Exceeding Capacity Limits

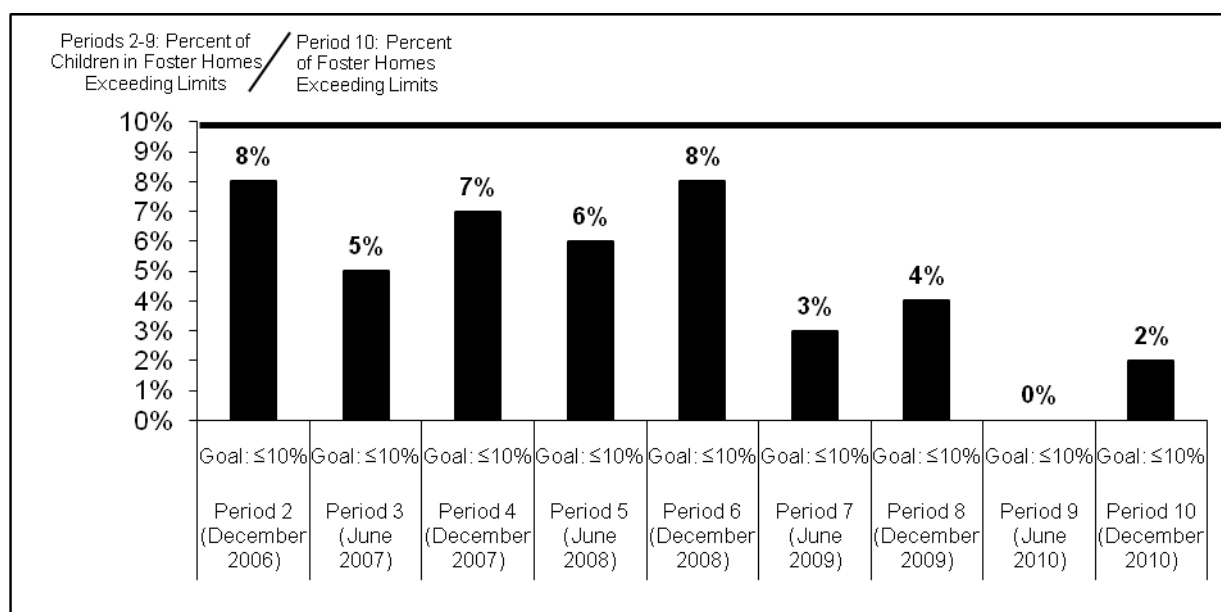
n = 419

Placement Type	Foster Homes with One or More Children in Care at Any Time During Period 10	Foster Homes with One or More Children in Care on 12/31/2010	Foster Homes with > 3 Foster Children on 12/31/2010	Foster Homes with > 6 Children in Total on 12/31/2010	Foster Homes with > 3 Foster Children and/or > 6 Children in Total on 12/31/2011
DFCS-supervised Foster Homes	238	144	2	0	1.4%
Provider Supervised Foster Homes	447	275	6	0	2.2%
Total	685	419	8	0	1.9%

Data Source: SHINES

Figure VI-2

**Nine Reporting Periods of State Performance on Outcome 31:
Children are Not in Foster Homes Exceeding Specified Capacity Limits**



Sources - Periods 2-9: Period Case Record Reviews July 2006-June 30, 2010; Period 10: Georgia SHINES.

2. Timely and Complete Court Orders for Placement Authorization: Outcomes 26 and 29

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.¹²⁰ 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.¹²¹ 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.

All children in State custody after the Consent Decree's effective date 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. Interpretation and Measurement Issues

No new interpretation or measurement issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. Measurement of Outcome 26 performance is based on a record review of a sample of 175 children in foster care. During the Period 10 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. The case record review team also made additional efforts to obtain court order documentation to ensure an accurate assessment could be made. For those children in the sample who entered before October 27, 2005, only the annual permanency review orders were included in the analysis.

¹²⁰ See pp 36-37, Outcome 26 of the Consent Decree.

¹²¹ Ibid.

b. State Performance

• The State Fell Short of the Outcome 26 Threshold

For Outcome 26, 148 children (85%) of the 175 children in the Period 10 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 10 performance is an improvement over the Period 9 performance of 80 percent, but it is within the statistical margin of error for the sample. It is the State's best performance to date. Figure VI-3 displays the State's performance on Outcome 26 over the nine reporting periods to which the Consent Decree standards applied.

The Accountability Agents believe the improved performance is related to both county and state level efforts and extensive efforts by the case file review team to obtain necessary documentation from the counties during the review. As part of an agreed-upon curative action plan among the parties¹²², the counties are:

- using Model Court Orders¹²³ to provide guidance for appropriate language in orders;
- randomly spot-checking files to make sure case managers have received the court orders;
- maintaining master lists of court order information to improve follow-up; and
- providing lists of IV-E eligible children due a permanency hearing each month to the Special Assistant Attorneys General (SAAGs).

Apart from county actions, the State Education and Training Section designed an online training to help SAAGs ensure that IV-E language remains in ongoing court orders, timely permanency hearings are held and that permanency "reasonable efforts" wording is in court orders.

These efforts appear to be working to improve practice and recent performance. The majority (71%) of gaps in court orders appear to be from actions prior to 2010. Among the 27 records that did not meet Outcome 26 standards, the following pattern emerged:

- 9 initial removal orders did not have child-specific language; six (67%) of the nine were foster care entries before 2010.
- 5 60-day determinations were either missing child-specific language or did not occur within 60 days; three (60%) of the five were from foster care entries before 2010.
- 13 permanency hearings were either not held, there was no court order in file, the orders were missing appropriate language, or the court found that DFCS had not made

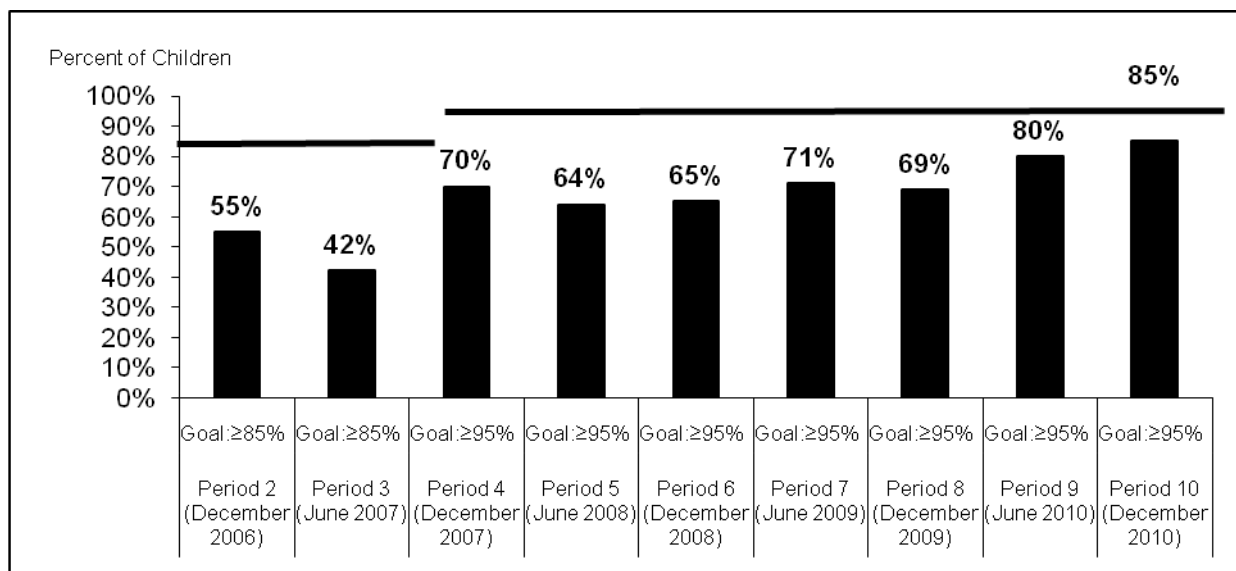
¹²² Correspondence from Brenda King Woodard, Georgia Department of Human Services, to Ira P. Lustbader, Children's Rights, August 23, 2010 and September 22, 2010.

¹²³ See <http://childwelfare.net/resources/JuvenileCourtOrders/> a website established by the Barton Child Law and Policy Center for examples of model court orders.

reasonable efforts to finalize permanency; 11 (85%) of the 13 were from permanency hearings held before 2010.

The ability to determine IV-E funding eligibility for the 14 children for whom there was a problematic initial order or a 60-day determination has been lost for the entire length of their current foster care episode. However, eligibility can still be determined and potential reimbursement claimed, albeit with some loss, for the 14 children for whom there was a problematic permanency review order. If the analysis had used only the most recent permanency review order, the State's performance would have been at 90 percent.

Figure VI-3
State Performance on Outcome 26:
Court Orders Contain Required Language to Support IV-E Funding Claims
For Nine Reporting Periods (January 1, 2006 to December 31, 2010)



Source: Review Period Foster Care Case Record Reviews

Outcome 29 – Lapses in Legal Custodial Authority

The Consent Decree strives to limit the proportion of children for whom DHS/DFCS custodial authority lapses.¹²⁴ 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.

¹²⁴ See p 37, Outcome 29 of the Consent Decree.

a. Interpretation and Measurement Issues

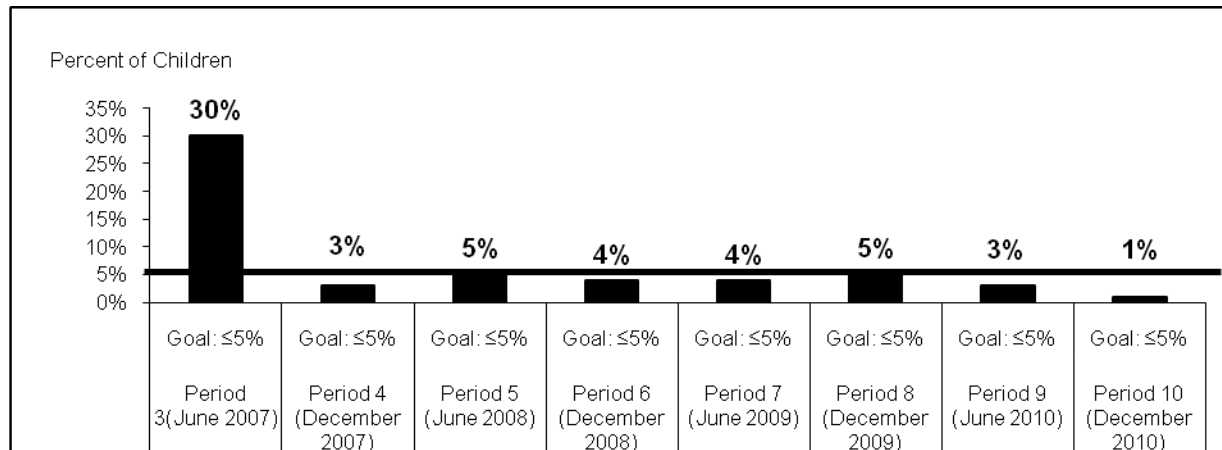
No new interpretation issues were encountered in Period 10. Appendix B provides a summary of previously resolved interpretation and measurement issues. Measurement of Outcome 29 performance is based on 99 children in the sample of 175 children in foster care. These 99 children had been in custody 12 months or more and were still in the temporary custody of the State. The margin of statistical error for this subsample is +/- 10 percent.

b. State Performance

- **The State Surpassed the Outcome 29 Threshold**

In Period 10, it appears that DFCS had a lapse in custody for one child out of 99 (1%). The outcome threshold is no more than 5 percent. This is an improvement over the Period 9 performance of 3 percent and is the State's best performance to date. Figure VI-4 illustrates the proportion of children in DFCS custody with custody lapses over the eight reporting periods to which the Consent Decree standard applied.

Figure VI-4
Eight 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-December 2010

B. Caseloads

1. Caseload Sizes

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 Investigators (CPS Investigations)	Respond to and investigate reports of child maltreatment. These individuals may also respond to reports of families in need who are considered candidates for “diversion” services.	12 cases (the equivalent of 12 families)
Family Preservation (Child Protective Services On-Going) Case Managers	Provide services to and supervise the safety of children who are not taken into state custody and remain in their own homes.	17 cases (the equivalent of 17 families)
Permanency Case Managers ¹²⁵	Provide services to the children and families of children who are in the State’s custody.	15 cases (the equivalent of 15 children)
Adoptions Case Managers	Provide services to children whose parents’ parental rights have been terminated and who have the permanency goal of adoption.	16 cases (the equivalent of 16 children)
Specialized Case Managers	Provide services to the children and families of children who have been in state custody 18 months or more.	12 cases (the equivalent of 12 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

¹²⁵ The State has 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 December 31, 2010

In December 2010, **98** 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. Three case managers were over the caseload caps that apply to case managers that have not yet been certified, and only one case manager exceeded the caps set by the Consent Decree. Three of the four exceeded the limit by one case and a fourth worker, an uncertified agency veteran, had 10 cases. This is a substantial improvement over the Period 9 performance of 69 percent. In addition, the number of cases not assigned to an active case manager decreased by 50 to four, and all four were temporarily assigned to supervisors pending assignment to case managers. This is the State's best performance to date in meeting the caseload caps.

The Accountability Agents interviewed 60 case managers and 17 supervisors in January and February 2011 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 July 1 and December 31, 2010. These interviews confirmed the accuracy of the SHINES caseload report provided to the Accountability Agents.

According to the case managers and supervisors interviewed, the caseload sizes stabilized below the caps for most workers during Period 10 and were remaining below the caps in early 2011.

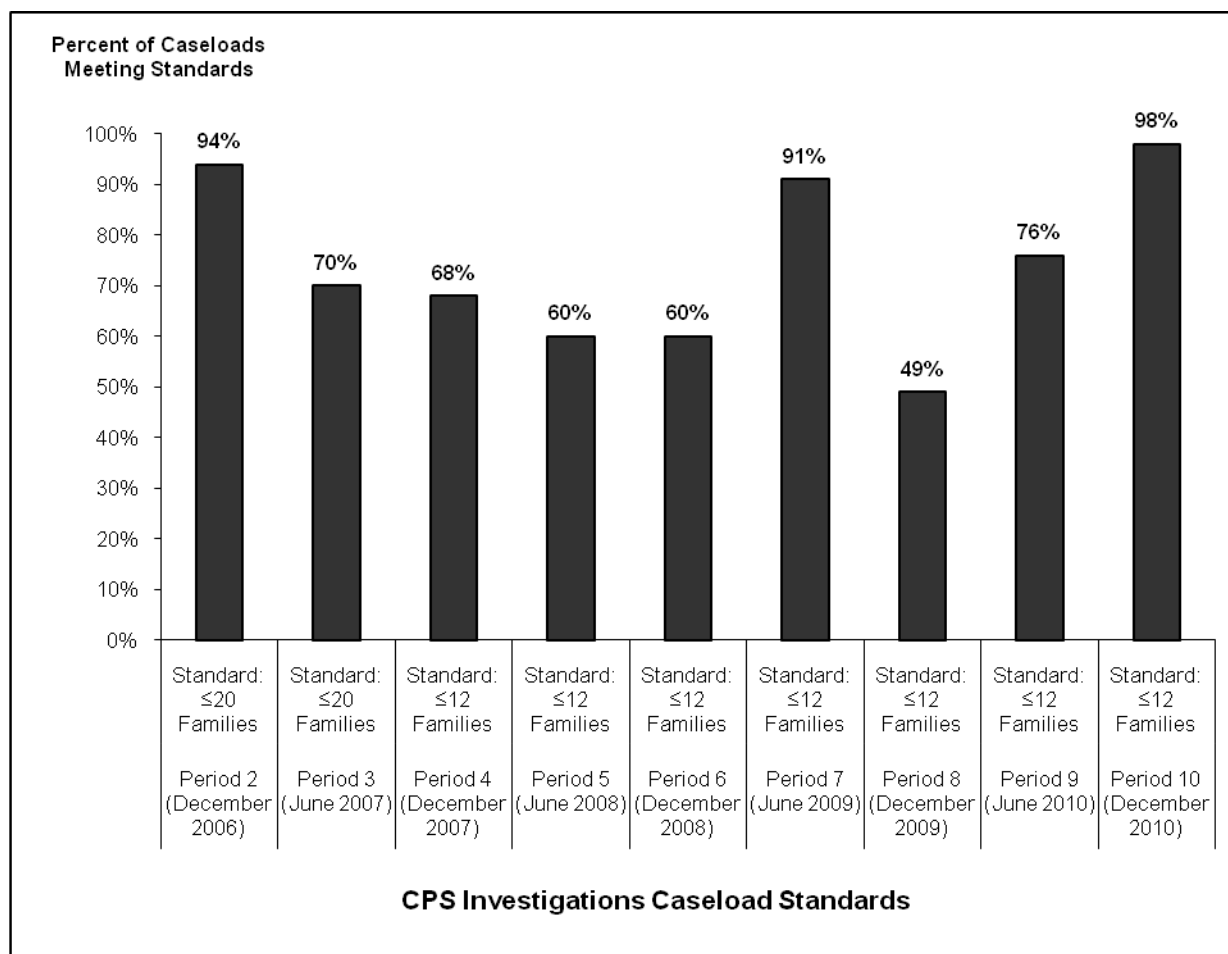
Table VI-5
DeKalb and Fulton County Caseload Status December 2010

Case Manager Function	Target Caseload Cap: Number of cases	Number of Active Staff on 12/31/10 ¹	Number of Active, On-leave Staff on 12/31/10 ²	Actual Performance				
				Meeting Cap 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	52	0	51	98%	1	2%	1
Family Preservation	17 families	33	0	32	97%	1	3%	3
Permanency Case Manager	15 children	33	0	31	94%	2	6%	0
Specialized Case Manager ⁴	12 children	58	0	58	100%			0
Adoption Case Manager	16 children	27	0	27	100%			0
Total		203	0	199	98%	4	2%	4
Sources: SHINES; county personnel systems for leave and separation information								
Notes:								
¹ Active staff are those staff that were not on leave of absence on December 31, 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.								
² Active staff on leave at December 31, 2010 but leave anticipated to be more than 30 days.								

Child Protective Services Caseloads

In December 2010, 98 percent of the ***CPS investigation*** caseloads were at or under the caseload cap of 12 families. The one case manager with a caseload over the cap had 13 cases. This is a substantial improvement over Period 9 when 76 percent of the case managers had caseloads at or under the cap, and represents the State's best performance on CPS caseloads to date. One case was assigned to a supervisor pending assignment to a case manager. Figure VI-5 illustrates the proportion of CPS investigation caseloads meeting the Consent Decree standards over the nine reporting periods to which the standards applied.

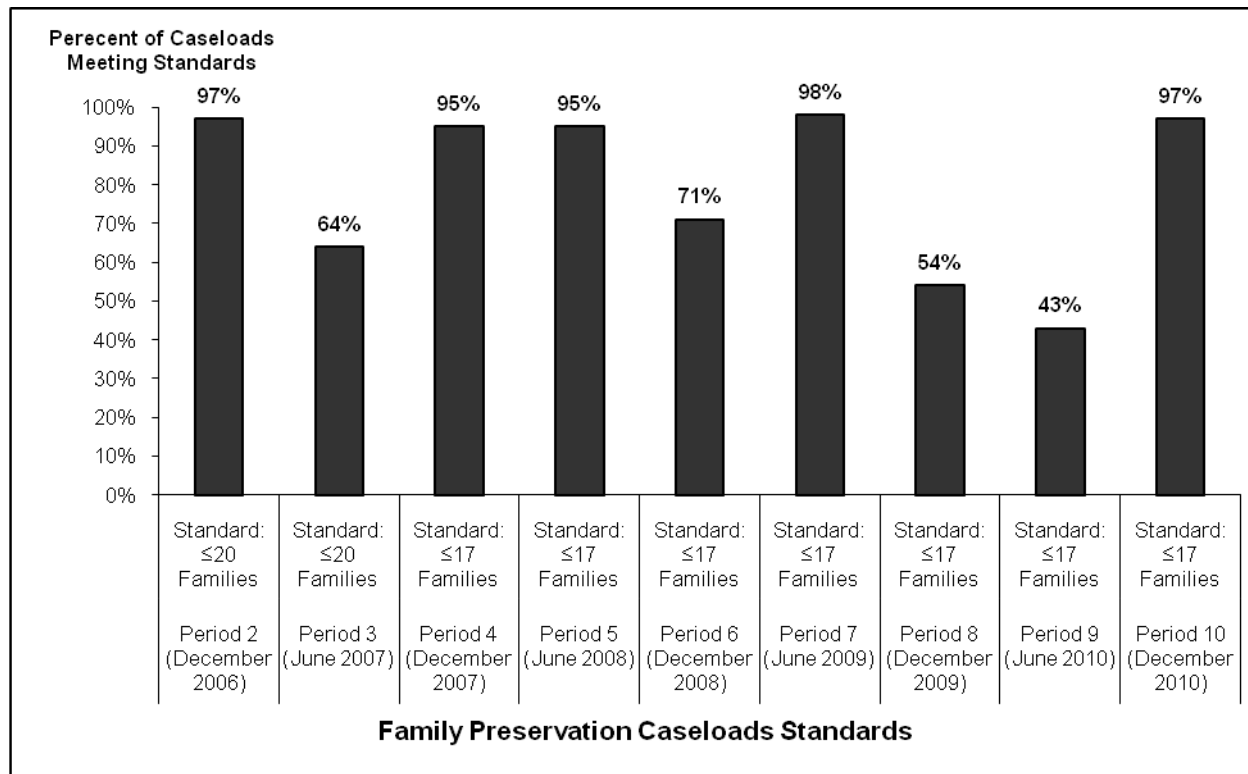
Figure VI-5
Nine Reporting Periods of CPS Investigation Caseloads
Percent of Caseloads Meeting Standards



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

Among the case managers who provide *family preservation (on-going, in-home child protective services)*, 97 percent had caseloads of 17 or fewer families. This is a substantial improvement from the State's Period 9 performance of 43 percent. The one case manager who exceeded the cap had 10 cases but was not certified. This was a more senior individual who had become a case manager before the certification requirements but had not been a direct, front line case manager for several years. Three cases were assigned to supervisors pending assignment to case managers. Figure VI-6 illustrates the proportion of Family Preservation caseloads meeting the Consent Decree standard over the nine reporting periods to which the standards applied.

Figure VI-6
Nine Reporting Periods of Family Preservation¹²⁶ Caseloads
Percent of Caseloads Meeting Standards



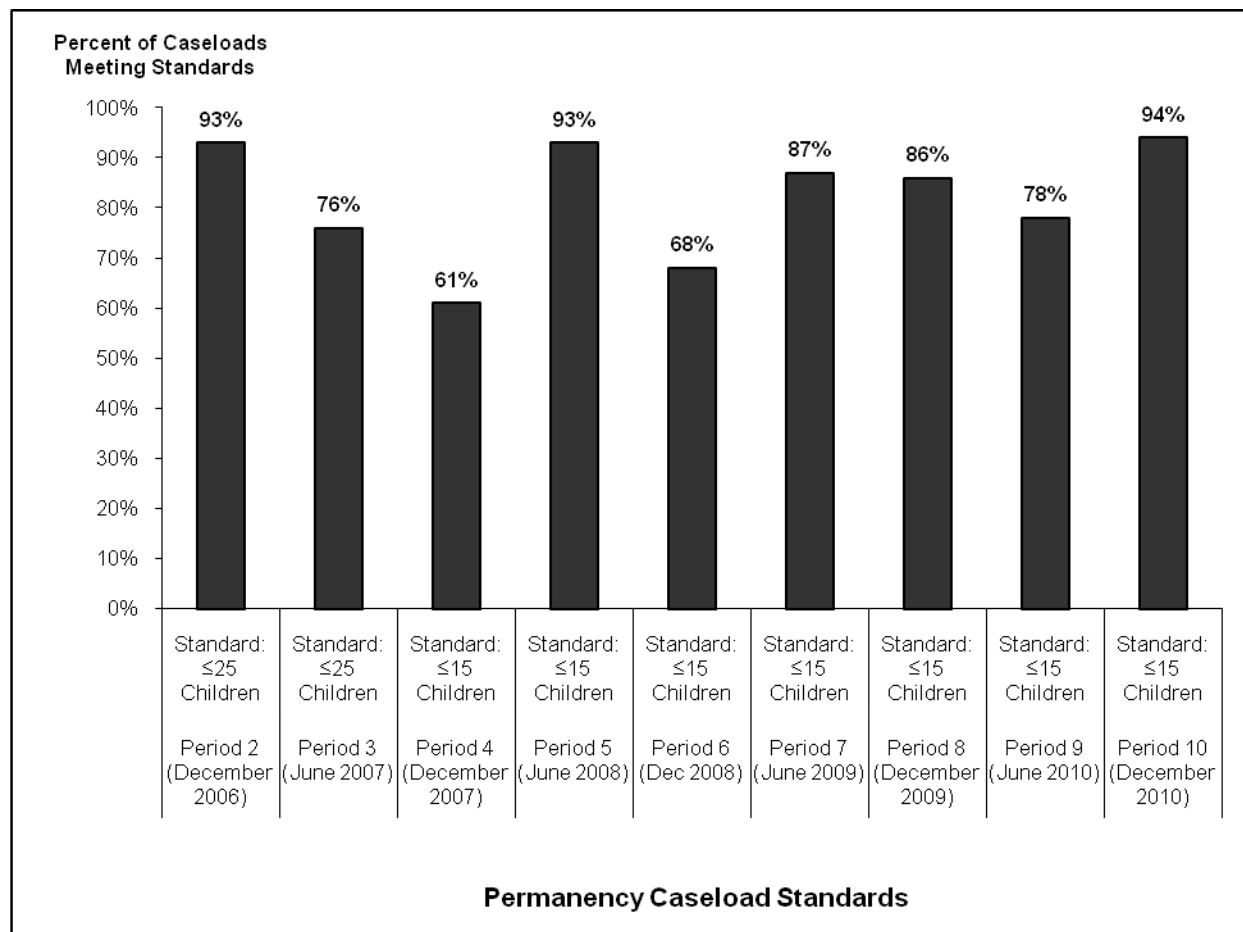
Source: State data bases: SHINES; county personnel systems for leave and separation information. July 2006-December 2010.

Permanency Caseloads

In Period 10, 94 percent of the “regular” *permanency caseloads* were at or under the caseload cap of 15 children. This is a substantial improvement from Period 9 when 78 percent of the caseloads were at or under the cap, and represents the State’s best performance on permanency caseloads to date. The two case managers who exceeded the cap were provisionally certified case managers who each had seven cases instead of six. Figure VI-7 illustrates the proportion of regular permanency caseloads meeting the Consent Decree standards over the nine reporting periods to which the standards applied.

¹²⁶These cases were formerly referred to as “on-going CPS”.

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

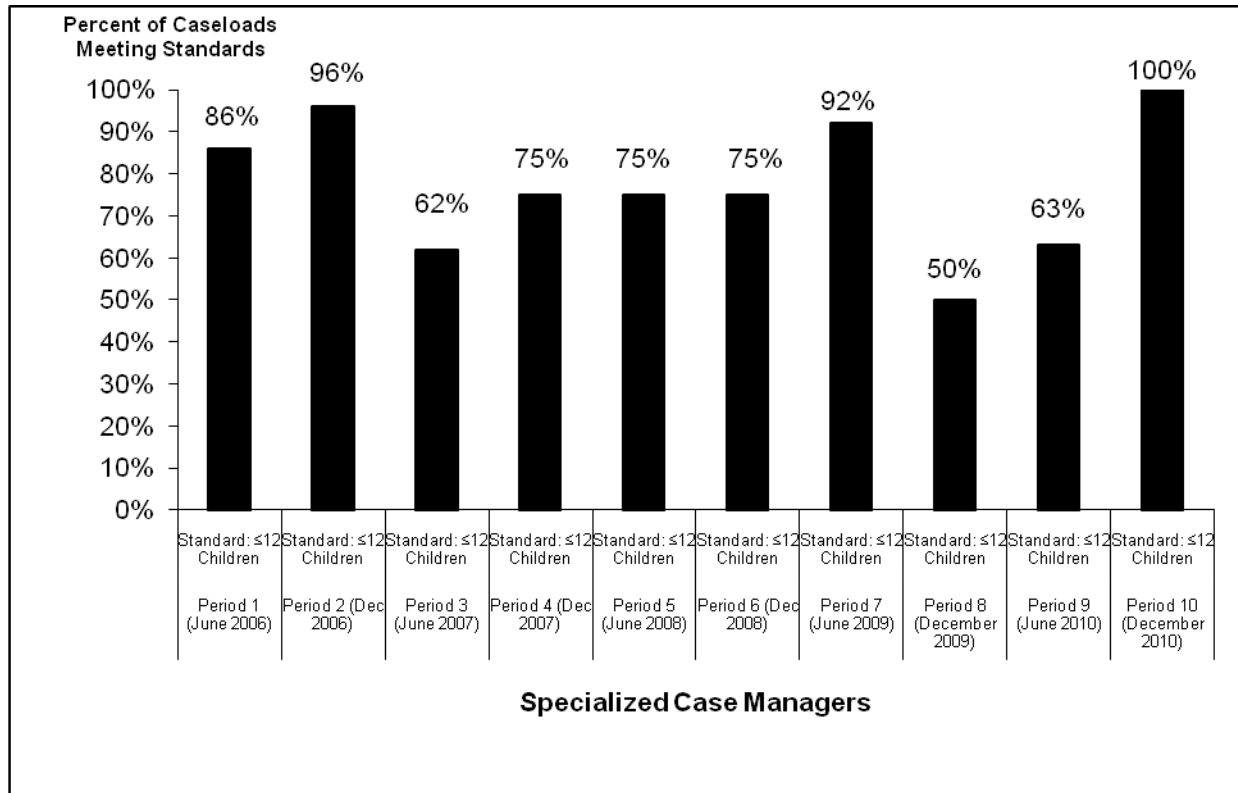


Source: State data bases: IDS and SHINES; county personnel systems for leave and separation information. July 2006-December 2010

Compliance with the designated *specialized caseload* standard improved substantially compared to Period 9, with 100 percent of the caseloads having 12 or fewer children. The State's Period 9 performance was 63 percent. Period 10 represented the State's best performance to date for specialized caseloads. DeKalb County has made a commitment to keep all of its permanency case managers to caseloads of 12 or fewer children to allow them all to "focus on removing barriers to permanence"¹²⁷ and to provide greater case manager continuity for those children who do reach their 18th month in custody. Figure VI-8 illustrates the proportion of specialized caseloads meeting the Consent Decree standard over the ten reporting periods to which the standard applied.

¹²⁷ See the Consent Decree, Section 4.F.1., page 11.

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

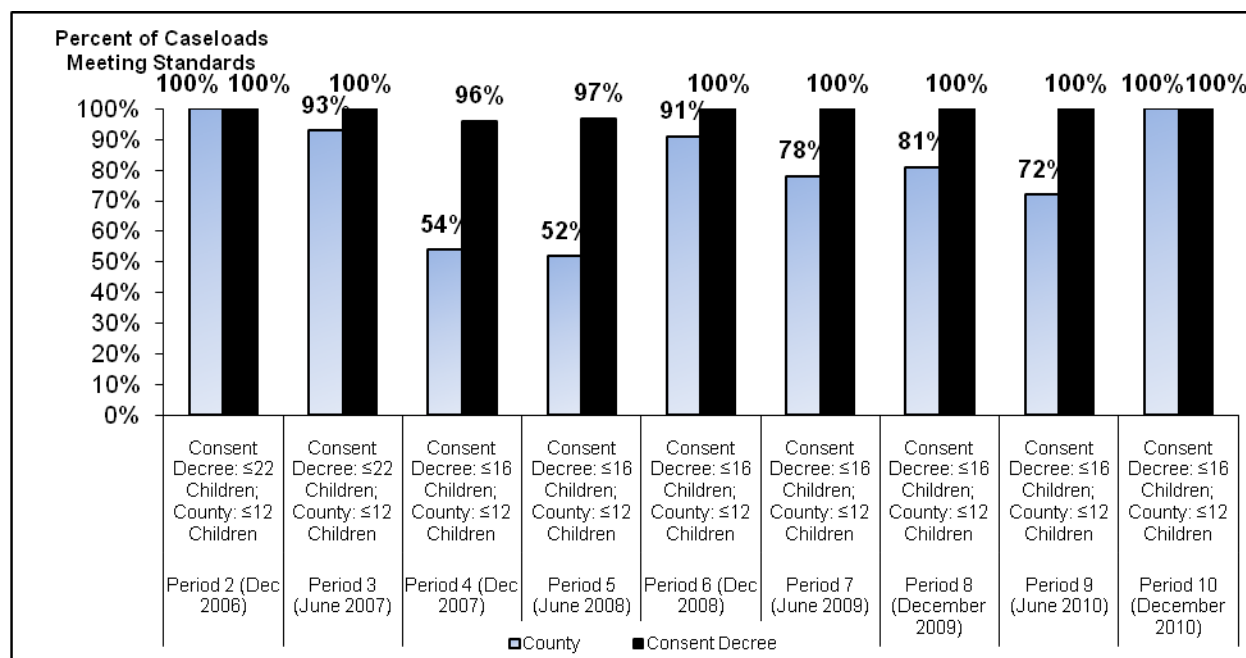


Source: State data bases: IDS and SHINES; county personnel systems for leave and separation information. January 2006-December 2010

County performance on the *adoption caseloads*, as measured by the counties' self-imposed limits,¹²⁸ reveals that 100 percent of the adoption caseloads have 12 or fewer children. This is an improvement from the 72 percent achieved in Period 9. Figure VI-9 illustrates the proportion of adoptions caseloads meeting the Consent Decree standards over the nine reporting periods to which the standards applied.

¹²⁸ 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
Nine 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-December 2010.

2. Supervisory Ratios

In addition to caseload caps, the Consent Decree establishes supervisory ratios. Each supervisor should supervise no more than five case managers at any one time.¹²⁹

As shown in Table VI-6, in December 2010, **100 percent** of the supervisory units had a ratio of five workers or fewer to one supervisor. In Period 9, 96 percent of the units had the required ratio. One unit had a supervisory vacancy and it was supervised by an administrator. Two units were supervised by individuals who were in the process of taking the supervisory training, but had not yet been appointed as supervisors by December 31, 2010. A few units are included that do not typically have assigned open cases because members of the units did have open cases in December. These units include an after-hours response unit, a home evaluation unit, and an internal assessment unit.

¹²⁹ See p. 23, Section 8.B.2 in the Consent Decree.

Table VI-6
DeKalb and Fulton County Supervisory Ratios at December 31, 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)	26	26	100%		
Permanency*	11	11	100%		
Adoption	8	8	100%		
Specialized Case Management	15	13	100%		
Total	60	58	100%		

*One unit was supervised by an administrator.

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

C. Building Workforce Skills

The Consent Decree has several training requirements.¹³⁰ 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 Section¹³¹

There have been no changes in the leadership of the Education and Training Services (ETS) section since Period 4.

2. Staff Preparation and Professional Development

The State reported that the Education and Training Services Section (ETS) engaged in several activities in Period 10. Table VI-7 provides a summary of some of the new curricula and projects during the period.

¹³⁰ See pages 25 and 26 of the Consent Decree for the complete description of the requirements.

¹³¹ 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.

Table VI-7
Newly Developed Curricula for DFCS Professional Development and Education and Training Projects during Period 10

Target Audience	Curriculum/Activity
Special Assistant Attorneys General (SAAG)	<i>Online training</i> designed to help the SAAG (who represents DFCS in court) identify IV-E language to meet the ASFA requirements, ensure that IV-E language remains in ongoing court orders, timely permanency hearings are held and that permanency “reasonable efforts” wording is in court orders.
Case Managers	An <i>online legal training</i> component has been developed and is being piloted. This online component will take the place of Legal I training and will be used as a pre-training activity to prepare staff for the mock trial court room training of Legal II.
	DFCS initiated <i>Child Trauma Welfare Training</i> using the “Child Welfare Trauma Training Toolkit” developed by the Child Welfare Committee of the National Child Traumatic Stress Network. Two pilots of the program were completed by November 2010 and regional training for case managers and supervisors began in January 2011. The regional training is facilitated by DFCS Permanency Expeditors teamed with Georgia State Professional Excellence Trainers. The Child Welfare Trauma Training Toolkit is designed to teach basic knowledge, skills, and values about working with children who are in the child welfare system and who have experienced traumatic stress. It also teaches how to use this knowledge to support children's safety, permanency, and well-being through case analysis and corresponding interventions tailored for them and their biological and resource families.
	<i>Substance Abuse Training</i> with Region 3 (Bartow, Gordon, Floyd, Polk, Paulding and Haralson Counties) using the National Center on Substance Abuse and Child Welfare curriculum titled “Helping Child Welfare Workers Support Families with Substance Abuse, Mental, and Co-Occuring Disorders.”
Supervisors	On-going <i>Supervisor Learning Circles</i> as part of the supervisor capacity development. Starting in July, these circles have been meeting monthly.

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

Target Audience	Curriculum/Activity
<p style="text-align: center;">Family Team Meeting Implementation</p>	<p>Two quarterly <i>Statewide Support Team Meetings and Advanced Training for Facilitators</i> were opportunities to provide information, training and support to those who are responsible for the FTM process. Private providers and other community partners were invited and encouraged to attend. In August 2010, participants worked on developing plans to address commonly identified barriers to engagement of family, staff, and private providers. The October 2010 session included a panel with family members and their support team discussing how and why the FTM process worked to bring about changes leading to successful case closure, identifying DFCS' strengths and needs. A second panel from the Colquitt County DFCS office presented best practice implementation that led to positive outcomes for their county.</p>
	<p>In November 2010, a <i>Family Team Meeting Learning Lab</i> was held for the Management and FTM staff of Fulton County and DeKalb County DFCS. The purpose of the two-day site visit was to observe and discuss how best practices related to the Family Team Meeting process have been applied in Colquitt County. Fulton and DeKalb staff worked on action plans for their counties incorporating some practices that could be effectively replicated.</p>
<p style="text-align: center;">State and County Leadership</p>	<p><i>Leading the Pieces</i>, a leadership capacity building course includes two three-day classroom sessions with two weeks in between. Topics of the classroom instruction are based on the Leadership Competency Framework developed by the National Child Welfare Workforce Institute (NCWWI). The four competencies addressed are Leading Change, Leading in Content, Leading People and Leading for Results. In the two weeks between the units, participants complete specific Leadership Building Activities. By completing these activities, participants continue to explore concepts discovered in the classroom. The Leadership Building Activities enhance leader skills through reading specific articles and responding to other participants and the course facilitator, skill assessments and implementing specific tools.</p>
	<p>An online training "<i>Transfer of Learning and Performance Improvement</i>" continued to be developed. This training will be available to regional leadership (Regional Director, Field Program Specialist) and county leadership (County Directors, Program Directors, Administrators and Supervisors) regarding their role in impacting performance changes in the Agency through the transfer of learning process and their leadership. The content was reviewed statewide by management staff and will be revised and made available spring 2011.</p>
	<p><i>4 Disciplines of Execution</i> is a leadership training based on the work of Stephen Covey. It is intended to teach how to focus on top priorities and get the critical things accomplished. This training was conducted with the leadership in both Fulton and DeKalb counties in October and November 2010.</p>

3. New Supervisor Qualifications

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.¹³² Accordingly, all supervisors in Period 10 assigned since the Consent Decree either had a BSW or a Master's degree in Social Work (MSW) and two or more years of experience.

4. Pre-Service and On-going Training Hours

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 10 had received the supervisory pre-service training prior to the end of the period. Three supervisors and one acting supervisor were scheduled to complete supervisory pre-service training by the end of April 2011 but another supervisor had not yet been scheduled for the training. Overall, 98 percent of the case managers and 88 percent of the supervisors received the required pre-service or annual 20 hours of professional development. In the interviews with 60 case managers and 17 supervisors in January and February 2011, 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.

5. Case Manager and Supervisor Certification

Table VI-8 summarizes the certification status available from the State at the end of December 2010 for social service case managers and supervisors in Fulton and DeKalb counties. As shown, 194 case managers (96%) and 40 supervisors (67%) had achieved full certification as of December 31, 2010. This compares to 87 percent of the case managers and 74 percent of the supervisors in Period 9. All of the remaining (19) supervisors or acting supervisors of case-carrying units were expected to be certified by the end of June 2011. The Accountability Agents used the previously described case manager and supervisory interviews to obtain information to verify the reported certification status.

¹³² See p. 26 of the Consent Decree.

Table VI-8
Certification Status of Case Managers and Supervisors in
DeKalb and Fulton County DFCS as of December 31, 2010

Position Title	Fully Certified	Results Pending	Provisional	Not Certified	Total*
Case Managers					
CPS Investigators	49		3		52
CPS On-Going Case Managers	32			1	33
Permanency Case Managers	29		4		33
Adoption Case Managers	26		1		27
Specialized Case Managers	58				58
TOTAL	194		9	1	203
Supervisors					
CPS (Investigations and On-Going)	14			12	26
Permanency	6			5	11
Adoption	8				8
Specialized Cases	12			3	15
TOTAL	40			20	60

Source: Compiled from data supplied by county training coordinators. One lead worker acting as supervisor is included as an uncertified supervisor. *Includes workers who were on extended leave on December 31, 2010

D. Assuring Needed Services Are Available

During Period 10, the counties continued their foster home retention and recruitment efforts. Table VI-9 summarizes county progress by December 31, 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 also reportedly lost a total of 33 homes in the two counties. At the same time, the foster care population has declined by half since the advent of the Consent Decree, reducing the anticipated demand for foster homes.

During Period 10, Fulton reported opening nine new homes. However, the county also closed 22 homes during the period. Six of the homes closed at the foster parents' request citing personal reasons. Another eight 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. No homes closed due to maltreatment-related issues. Three families moved from the area. DeKalb reported opening 17 homes but closing 38 homes. Fifteen of the 38 closures were the result of a voluntary decision by foster parents. Another 11 homes closed as a result of finalized adoptions – foster parents desiring to close their homes after adopting children in their care.

Private agencies in both counties reportedly lost capacity as well during Period 10. In Period 9, the Office of Provider Management reported private agencies had 242 foster homes in DeKalb County and in Period 10 that number had decreased by 27 to 215 homes. Likewise the private agencies had 124 homes in Fulton County in Period 9 and 118 homes at the end of Period 10

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 that homes identified by the State as being open actually are open.

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

County	Baseline – As of March 31, 2008		Status on December 31, 2010		Progress: Net Gain or (Loss)		Goals (total capacity)	
	Beds	Homes	Beds	Homes	Beds	Homes	Beds	Homes
DeKalb								
<i>County Supervised Homes</i>	418	209	358	181	-60	-28	798	308 to 339
<i>CPA Supervised Homes*</i>			332	215				
Total			690	396				
Fulton								
<i>County Supervised Homes</i>	504	238	302	155	-202	-83	594	328
<i>CPA Supervised Homes*</i>			332	118				
Total			634	273				

Source: DeKalb and Fulton County reporting and the Office of Provider Management.

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.6¹³³ and Section 11.¹³⁴ The State performed extremely well in Period 10 and maintained or further advanced many of the significant improvements documented in Periods 5 - 9 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.

The review of 160 foster home records sought evidence in each record that the home was in compliance with applicable standards at the end of the reporting period. Data from the foster home record 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 HIPAA 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.

¹³³ Ibid, pp. 16-19.

¹³⁴ Ibid, pp. 26-28.

However, the existence of uniform standards by itself cannot ensure children in care are safe and well. Therefore, the review of foster home records 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 very similar to Period 9.

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 9 and 10.

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 9. The file review found evidence that for most approval standards, 98 percent or more of the homes reviewed were in compliance. This is similar to Period 9, for which most of the approval standards were met by 99 percent or more of the homes reviewed (although the change is within the sample's margin of error). Compliance appears to have remained about the same (± 2 percentage points) for 15 of the 16 requirements and to have declined slightly for one requirement (5 percentage points) – although all changes observed for Period 10 were within the sample's margin of error.

Table VI-9
Foster Care Approval and Licensing Standards
n = 160

Foster Care Screening, Licensing, Training, and Investigative Requirements	Documentation found indicating requirement met	
	Period 9	Period 10
Family assessment completed	100%	100%
Sex Offender Registry checked for foster parents	100%	100%
Timely annual re-evaluation (no lapses)	100%	100%
Pre-service foster parent training requirements met	99%	100%
Timely Criminal Record Checks for foster parents	99%	100%
Gender of children in home never varied from that approved	99%	99%
Comprehensive medical report for each foster parent	99%	99%
Age of children in home never varied from that approved	98%	99%
Number of children in home never exceeded approved capacity	99%	98%
Timely Criminal Record Checks for other adults in the home	98%	97% ^a
Sex Offender Registry checked for other adults in the home	96%	97% ^a
CPS history has been checked	98%	97%
No violations of agency discipline or other foster care policies	99%	97%
Comprehensive Drug Screen for Foster Parents	98%	96%
Appropriate health statements for other adults in the home	100%	95% ^a
Ongoing foster parent training requirements met	93%	93%

Source: Foster Home Record Reviews for Periods 9 and 10.

^a As these measures are based on a sub-sample of 39 foster homes, they have a margin of statistical error of $\pm 15\%$.

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 10 record review demonstrates that the improvement documented in Periods 5 - 9 has been maintained for virtually all of the 16 approval and licensing standards. Period 10 marked the fourth consecutive period in which the compliance rate for each of the 16 approval and licensing standards exceeded 90 percent.

2. Prohibition of perpetrators of substantiated maltreatment to be foster parents

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 excellent.

The State's performance in preventing foster parents from using corporal punishment was found to be excellent. Of the 160 foster home files reviewed for Period 10, none (0%) had confirmed incidents of corporal punishment during the 12 months ending December 31, 2010. Similarly, there were no confirmed incidents of corporal punishment identified in the Period 9 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. Two homes in the sample of 160 (1%) were found to have prior substantiations of maltreatment and to be open during the reporting period. The nature of these previous substantiated reports and the reasons the homes were allowed to remain open are detailed below.

- Home 1 is a DFCS-supervised foster home that was also reviewed in Period 8 as part of that foster home sample and the incident summarized below is also described in the Accountability Agents' Period 8 report. In November 2004 the couple's adopted son was the subject of a substantiated maltreatment report that occurred at school. Although, the report was opened in the name of the adoptive mother, neither foster parent was the alleged perpetrator in this report, nor have they ever been the subject of a CPS report.
- Home 2 is a provider-supervised foster home that was also reviewed in Period 8 as part of that foster home sample and the incident summarized below is also described in the Accountability Agents' Period 8 report. Prior to the home's initial approval by the

supervising CPA, the foster mother had two substantiated maltreatment cases in her name. The first involved her birth son and took place in a group home in which he was placed by the Department of Juvenile Justice (DJJ). As in the case of Home 4 above, the report was opened in the birth parent's name per DFCS standard operating procedure pertaining to cases in group homes, but she had no role in the alleged maltreatment. The second substantiated case was for inadequate supervision involving the foster mother's 10 year-old birth daughter and an eight-year old foster child placed in her home. The children were working on a map of the route between their school and home for a school project and went outside without the foster mother's permission to capture street names. They were seen near their subdivision entrance by a neighbor who reported the matter to DFCS. The county DFCS office put a safety plan in place with the foster mother's cooperation, but also substantiated the report of inadequate supervision.

There were no foster homes in the sample of 160 that had substantiated allegations of maltreatment during the current reporting period.

Given the importance of preventing perpetrators of substantiated maltreatment from becoming or remaining foster parents, the Accountability Agents vetted these cases very carefully. In the case of Home 1, the foster parents in question had nothing to do with the substantiated maltreatment report listed in their names; their association with it is strictly a function of DFCS' record keeping protocols. In the case of Home 2, two errors combined to result in an individual with two previous child maltreatment substantiations being approved as a foster parent.¹³⁵ As described above, this individual had nothing to do with the first report in her name, and the second report, after being thoroughly reviewed by the Accountability Agents and State Central Office staff, appears not to have warranted a substantiation of maltreatment. It appears to have been a relatively minor infraction in an otherwise good and safe foster home and a safety plan was immediately put in place and agreed to and acted upon by the foster parent.

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) requires all CPAs to run a "CPS clearance" on all prospective foster parents through the DFCS Social Services ICPC Unit to ensure they do not have a previous history of substantiated maltreatment.

OPM officials indicate they are implementing a new process for following-up on instances in which the CPS clearance run by the ICPC unit returns a previous history of substantiated maltreatment. Under the new process, the ICPC Unit will refer any CPS clearances on prospective foster parents that produce a history of substantiated maltreatment to the State

¹³⁵ The errors that were made in the CPS history check for this foster parent are described in detail in: Dimas, J. T. and Morrison, S.A. *Period VIII Monitoring Report*, Kenny A. V. Perdue, July 2010, pp. 145-147.

Special Investigations Unit (SIU) for assessment of the previous CPS history and of the circumstances surrounding any such substantiated reports. SIU will notify OPM of the results of its assessment and OPM will issue a decision on whether the prospective foster home may be used for the placement of Children in DFCS custody. This new process is expected to be fully operational in Period 11.

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 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 106 provider-supervised foster homes sampled that had a class member in care at any point during the reporting period, 106 (100%) were overseen by CPAs that had a valid license on December 31, 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. However, OPM has not approved any new CPAs since December 2009 or any new CCIs since January 2010, pending the completion of a statewide needs assessment (which is in-process) to determine what types of additional provider services are needed.

During Period 10, a total of 63 CPAs (supervising approximately 1000 foster homes) were approved by OPM for the placement of children in DFCS custody and had one or more such children placed through them (three additional agencies had no children in DFCS custody in placement during Period 10). These CPAs varied in size:

- 18 were "Small Agencies" (6 or fewer foster homes);
- 21 were "Medium Agencies" (7 to 20 foster homes);
- 16 were "Large Agencies" (21 to 30 foster homes); and,
- 8 were "Extra Large Agencies" (31 or more foster homes).

During Period 10 OPM conducted "comprehensive reviews" of a portion of these CPAs' administrative offices and visited a sample of the foster homes they supervise to interview children, review files for compliance with contract provisions, and to inspect physical plant.

- OPM conducted comprehensive reviews of 22 (92%) of the administrative offices of Large and Extra Large CPAs (those with more than 20 foster homes) during the first half of Period 10 and visited 108 of the foster homes they supervised. During the second half of Period 10, comprehensive reviews of six (25%) of the Large and Extra Large CPA administrative offices were conducted and 30 of the foster homes they supervised were visited.

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- OPM conducted comprehensive reviews of 15 (38%) of the administrative offices of Small and Medium CPAs (those with 20 or fewer foster homes) during the first half of Period 10 and visited 31 of the foster homes they supervised. During the second half of Period 10, comprehensive reviews of three (8%) of the Small and Medium CPA administrative offices were conducted, and six of the foster homes they supervised were visited.
 - During the second half of Period 10, OPM also conducted 89 “Safety Reviews” of CPA foster homes and 85 Safety Reviews of CCIs, in addition to the Comprehensive Reviews 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.
 - All safety reviews are unannounced. All Comprehensive Reviews (and the foster home visits associated with them) are announced; however the files to be reviewed during Comprehensive reviews are unannounced.

Other initiatives undertaken or continued by OPM during Period 10 (several of which focused specifically on reducing maltreatment in care), included:

- Continuation of the monthly “Provider G” meetings modeled on the State’s successful G9 and G2 meetings and facilitated by the DHS Commissioner. The Provider G meetings use data related to maltreatment in care and other issues to prompt discussion of the contributing factors and the collaborative development of strategies to address problem areas. During Period 10 these meetings emphasized reducing maltreatment in care, increasing placement stability, and meeting the needs of older youth.
- Development and testing of new tools and practices related to performance-based contracting, monitoring the quality of care, and contract compliance. Field testing of the new monitoring tools began in December 2010 and continues at present.
- Appointment of a Contracts and Risk Manager responsible for identifying and analyzing areas of risk to the safety and well-being of children placed with CPAs or CCIs. The Contracts and Risk Manager uses statistical analysis, data mining, past performance, and other child welfare and agency reports to produce reports and presentations that outline findings and make recommendations for change; and manages the creation and monitoring of OPM’s contracts.

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 102 foster homes sampled that had a child in care on December 31, 2010, 101 (99%) were within the Consent Decree's capacity limits at that point in time. Of these 102 foster homes, 95 (93%) had three or fewer foster children in them on December 31, 2010 and six homes (7%) 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, 102 of the 102 foster homes that had a child in care on December 31, 2010 (100%) were within that limit. Finally, all of the foster homes (100%) with a child in care on December 31, 2010 had three or fewer children under the age of three in them. All these capacity compliance rates are similar to the Period 9 rates of 98 percent within the overall capacity limits, 100 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 100 percent of the foster homes reviewed that the pre-service training requirements had been met. This is similar to the Period 9 rate of 99 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 the same as the Period 9 rate of 93 percent. 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.¹³⁶ The Final Report of this Task Force was delivered in January 2010.¹³⁷

¹³⁶ See pp. 14-15, paragraphs 2-7 of the Consent Decree.

¹³⁷ See Georgia Department of Human Services, Division of Family and Children Services, *Rate Reimbursement Task Force Final Report*, January, 2010.

In acting on the RRTF recommendations, the State reported implementing performance based contracts beginning July 1, 2010 and a one-year Memorandum of Understanding (MOU) with the Department of Behavioral Health and Developmental Disabilities (DBHDD). The State anticipates making revisions to the performance based contracting process and measures starting in July 2011. The MOU details the scope and deliverables for child and adolescent mental health services provided to children in DFCS custody and, according to the State, it will be re-executed in State Fiscal Year 2012.

2. Data Requested from Private Providers

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 pre-service 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 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 90, 60, and 30 days, and weekly thereafter, 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. These enhancements are currently in development and are expected to go live by the end of Period 11.

3. Case Management and Training

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”¹³⁸ meet certain criteria including educational credentials, pre-service training, certification, and on-going professional development. State efforts to ensure compliance with this requirement proceeded slowly, culminating in an assertion of non-compliance made by Plaintiff’s Counsel after Period 9.

The Parties are presently engaged in discussions about the continued applicability of this provision to provider staff, and appropriate steps to be taken to remedy the situation. The Accountability Agents will continue to monitor this issue and will discuss its disposition in future reports.

4. The Office of Residential Child Care Continues to Conduct Unannounced Inspections of Licensed Placement Settings

Section 9.D. of the Consent Decree specifies that ORCC will make at least one unannounced inspection per year of all licensed Child Placing Agencies (CPAs) and Child Caring Institutions (CCIs) to review all relevant aspects of their operations, and will also make annual unannounced inspections of five percent of each licensed CPA’s family foster homes or a total of 10 homes (whichever is greater, or to all the foster homes supervised by CPAs with fewer than 10 total foster homes) to review all relevant aspects of their operations.¹³⁹ The State reports that there were 215 licensed CCIs and 91 licensed CPAs in Georgia at the end of December 2010. This represents a 12 percent decrease in the number of licensed CCIs and a three percent increase in the number of licensed CPAs compared to Period 9, reflecting the State’s continued movement away from the use of congregate care facilities in favor of family-based care.

During the period July 1 through December 31, 2010, ORCC reports that 99 of the 215 CCIs (46%) and 43 of the 91 CPAs (46%) were due for re-licensure. Each of these 99 CCIs and each of the 43 CPAs received at least one unannounced inspection from ORCC during that period. In addition, ORCC made a total of 452 unannounced visits (235 of which were unsuccessful) to conduct 217 unannounced inspections of the family foster homes operated by 25 of the 43 CPAs due for re-licensure (the remaining 18 CPAs due for re-licensure had either no foster homes, or no children in care during Period 10.) Detail on these unannounced family foster home inspections appears in Table VI-10.

¹³⁸ See Section 10.B. 4.a.-d. in the Consent Decree, pp 25 and 26.

¹³⁹ See Section 9.D. of the Consent Decree, p. 24.

Table VI-10
ORCC Unannounced Annual CPA Family Foster Home Inspections
n = 91 CPAs

91 CPAs	Licensed in Georgia as of 12/31/2010
43 CPAs	Due Re-licensure in Period 10
11 CPAs	Adoption or Home Study Only (no family foster homes ; no inspection required)
6 CPAs	No Placements During Period 10 (no inspection required)
1 CPA	Undergoing License Revocation (no family foster homes ; no inspection required)
25 CPAs	Requiring Annual Unannounced Family Foster Home Inspections
0 CPAs	Subject to 5% of Foster Homes Annual Unannounced Inspection Requirement
20 CPAs	Subject to 10 Foster Home Annual Unannounced Inspections Requirement
	14 CPAs (70%) Received Required Foster Home Inspections During Period 10
	6 CPAs (30%) to Have Required Foster Home Inspections Completed During Period 11
5 CPAs	With < 10 Foster Homes (Subject to 100% Annual Unannounced Inspection Requirement)
	4 CPAs (80%) Received Required Foster Home Inspections During Period 10
	1 CPA (20%) to Have Required Foster Home Inspections Completed During Period 11
5 CPAs	Re-licensed in Period 9 Had Required Annual Unannounced Family Foster Home Inspections Completed in Period 10
4 CPAs	Subject to 10 Foster Home Annual Unannounced Inspections Requirement
	4 CPAs (100%) Received Required Foster Home Inspections During Period 10
1 CPA	With < 10 Foster Homes (Subject to 100% Annual Unannounced Inspection Requirement)
	1 CPA (100%) Received Required Foster Home Inspections During Period 10

According to ORCC, the inspections conducted during Period 10 suggested a need for:

- Foster homes and CPAs to improve their consistency in implementing the policies and procedures promulgated by the CPA;
- 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; 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. Data integrity problems appear to be diminishing and work continues to bring the system into full compliance with federal standards.

A major enhancement to SHINES in Period 10 was the capacity to track and report on foster care youth data as required by the federally legislated John H. Chafee Foster Independence Program.¹⁴⁰ As a result of this legislation, the U. S. Department of Health and Human Services, Administration for Children and Families was required to establish the National Youth in Transition Database (NYTD). The purpose of the system is to track the independent living services provided to youth and to provide a means of measuring state performance in operating independent living programs for youth making the transition from foster care to self-sufficiency. Georgia, through SHINES, now has the capacity to report service and outcome data for youth who leave foster care. The system will also be used by selected youth to periodically complete an on-line survey for additional tracking of individual outcomes.

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.

I. Maximizing Federal Funding¹⁴¹

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.¹⁴² As a gauge of this activity, the following discussions summarize federal and state funding patterns over the last several years. To date the Accountability Agents have not found any evidence that the State is supplanting state dollars with increased federal reimbursement.

Since the Consent Decree became effective in October 2005, the baseline for future comparison of state expenditures is Federal Fiscal Year 2006 (October 1, 2005-September 30, 2006) for Title IV-B and State Fiscal Year 2006 (July 1, 2005 – June 30, 2006) for Title IV-E. Slightly different time periods are being used because of the different reporting requirements for Titles IV-B and

¹⁴⁰Public Law 106-169 established the program at section 477 of the Social Security Act.

¹⁴¹ See Dimas, J.T. and Morrison, S. A. *Period I Monitoring Report, Kenny A. v. Perdue*, November 2006 for background on Title IV-E.

¹⁴² See p. 31, Section 14 of the Consent Decree.

IV-E. Georgia submits annual financial reports to the Federal government for Title IV-B and quarterly cost reports for Title IV-E.

1. Comparison of Title IV-B Federal and State Funding Distribution

Table VI-10 provides a comparison of the baseline and most recent year of federal and state IV-B expenditures based on the annual cost reports. The comparison reveals no increases in State and Federal IV-B expenditures between October 2009 and September 2010.

Table VI-10
Title IV-B Funding
Federal Fiscal Year 2006, 2007, 2008, 2009, and 2010 Financial Reports
(October 1, 2005 – September 30, 2010)

	State	Federal	Total
Federal Fiscal Year 2006	\$ 3,123,871	\$ 9,371,613	\$ 12,495, 484
Federal Fiscal Year 2007	\$ 3,162,131	\$ 9,486,392	12,648,523
<i>Percent change</i>	+1%	+1%	+1%
Federal Fiscal Year 2008	\$ 3,222,070	\$ 9,666,210	\$12,888,280
<i>Percent change over 2007</i>	+2%	+2%	+2%
Federal Fiscal Year 2009	\$3,265,672	\$9,797,015	\$13,062,687
<i>Percent change over 2008</i>	+1%	+1%	+1%
<i>Percent change over 2006</i>	+5%	+5%	+5%
Federal Fiscal Year 2010	\$3,259,017	\$9,777,051	\$13,036,068
<i>Percent change over 2009</i>	0%	0%	0%
<i>Percent change over 2006</i>	+4%	+4%	+4%

Source: Georgia IV-B Financial Status Reports, submitted December 11, 2006, November 6, 2007, November 4, 2008, December 29, 2009, November 8, 2010 to the U.S Department of Health and Human Services.

2. Comparison of Title IV-E Federal and State Funding Distribution

Table VI-11(a, b, and c) summarize the most recent years of federal and state IV-E expenditures and the changes between State Fiscal Year 2010 (July 2009-June 2010) to the baseline year of July 1, 2005 through June 30, 2006 based on the quarterly expenditure reports submitted to the federal government for each State fiscal year. The comparison of IV-E expenditures reveals overall increases in expenditures by both the state and federal governments since the baseline year. State expenditures increased by 5 percent and federal expenditures increased by 35 percent between state fiscal years 2006 and 2010.

The most significant increase for both State and Federal expenditures appears to be in foster care training. However, the expenditures for State Fiscal Year 2010 include claims for eligible IV-E training contract expenditures made March-June 2009 that had not previously been claimed because the State was engaged in negotiations with the federal government as to the applicable reimbursement match rate. No IV-E training contract expenditures incurred in State Fiscal Year 2009 had been submitted until the last quarter of State Fiscal Year 2010 (quarter ending June 30, 2010.) State and Federal foster care maintenance payments also increased since

the baseline year. The increase, despite the declining foster care population, may reflect a combination of factors. One factor may be the state's improved ability to claim more federal reimbursement from the IV-E program due to a policy clarification in June 2009¹⁴³ and increasing its "penetration rate" (see discussion below and Figure IV-6.) Another factor is the increased federal funding for foster care and adoption assistance through the American Recovery and Reinvestment Act (ARRA). This legislation increased the federal reimbursement and lifted some previous IV-E eligibility restrictions for certain populations.

The decreased State and Federal expenditures on SACWIS represent the most significant decreases since the baseline year. This decrease is appropriate as the State has completed the design and development of its SACWIS (the SHINES system) and is now in the operational phase. Additional Federal reimbursement is only available for system design and development. System operations costs are now part of the general program administration expenditures.

Funding available through the ARRA legislation has provided additional financial resources for adoption assistance payments, replacing state dollars with federal dollars. Therefore, the State expenditures for Adoption Assistance have decreased while Federal expenditures increased. The State anticipates that State expenditures for adoption assistance payments will return to its Fiscal Year 2008 expenditure level after the sunset of the ARRA provisions in 2011.

¹⁴³ See Dimas, J.T. and Morrison, S. A. Period VII Monitoring Report, Kenny A. v. Perdue, January 2009 for a description of the policy issue.

Table VI-11a
Title IV-E Funding:
State Expenditures
for State Fiscal Years 2006, 2007, 2008, 2009 and 2010

Title IV-E Funding Category	SFY 2006 (July 2005- June 2006) <i>Baseline Year</i>	SFY 2007 (July 2006- June 2007) <i>Year 1</i>	SFY 2008 (July 2007- June 2008) <i>Year 2</i>	SFY 2009 (July 2008- June 2009) <i>Year 3</i>	SFY 2010 (July 2009- June 2010) <i>Year 4</i>	<i>Year 4 over Baseline Year Change</i>
Adoption Assistance Payments	18,796,102	19,073,837	18,561,904	16,685,892	14,673,275	-22%
Adoption Administration	6,522,392	7,886,253	6,753,761	4,8522,461	6,270,452	-4%
Adoption Training	175,215	237,802	139,894	51,342	42,259	-76%
Adoption subtotal	\$25,493,709	\$27,197,892	\$25,455,559	\$21,589,695	\$20,985,986	-18%
Foster Care Maintenance Payments	12,830,120	10,804,756	20,536,434	22,479,552	15,693,136	+22%
Foster Care Administration	32,892,589	27,845,512	38,827,744	39,607,332	40,418,471	+23%
Foster Care Training	97,199	104,675	399,841	639,250	224,245	+131%
SACWIS	2,006,645	5,221,541	8,166,422	735,155	1,259	-100%
Foster Care subtotal	\$47,826,553	\$43,976,484	\$67,930,441	\$63,461,289	56,337,111	+18%
Title IV-E State Expenditure Total	\$ 73,320,262	\$71,174,376	\$93,386,000	\$85,050,984	\$77,323,097	+5%

Source: DHS/DFCS quarterly expenditure reports submitted to the U.S. Department of Health and Human Services

Table VI-11b
Title IV-E Funding:
Federal Expenditures*
for State Fiscal Years 2006, 2007, 2008, 2009 and 2010

Title IV-E Funding Category	SFY 2006 (July 2005-June 2006) <i>Baseline Year</i>	SFY 2007 (July 2006-June 2007) <i>Year 1</i>	SFY 2008 (July 2007-June 2008) <i>Year 2</i>	SFY 2009 (July 2008-June 2009) <i>Year 3</i>	SFY 2009 (July 2009-June 2010) <i>Year 4</i>	<i>Year 4 over Baseline Year</i> Change
Adoption Assistance Payments	28,864,149	30,490,022	31,424,146	34,196,743	36,182,653	+25%
Adoption Administration	6,522,392	7,886,254	6,753,762	4,852,462	6,270,453	-4%
Adoption Training	525,646	713,409	419,687	154,028	126,776	-76%
Adoption subtotal	\$35,912,187	\$39,089,685	\$38,597,595	\$39,203,233	\$42,579,882	+19%
Foster Care Maintenance Payments	19,706,811	17,284,001	34,840,478	45,947,054	38,703,783	+96%
Foster Care Administration	32,892,586	27,845,515	38,827,749	39,607,338	40,418,475	+23%
Foster Care Training	291,600	314,029	1,199,526	1,917,753	672,732	+131%
SACWIS	2,006,646	5,221,541	8,166,422	735,155	1,260	-100%
Foster Care subtotal	\$54,897,643	\$50,665,086	\$83,034,175	\$88,207,300	\$79,796,250	+45%
Title IV-E Federal Expenditure Total	\$90,809,830	\$89,754,771	\$121,631,770	\$127,410,533	\$122,376,132	+35%

Source: DHS/DFCS quarterly expenditure reports submitted to the U.S. Department of Health and Human Services

*Federal expenditures displayed here are before adjustments for child support payments received by the State

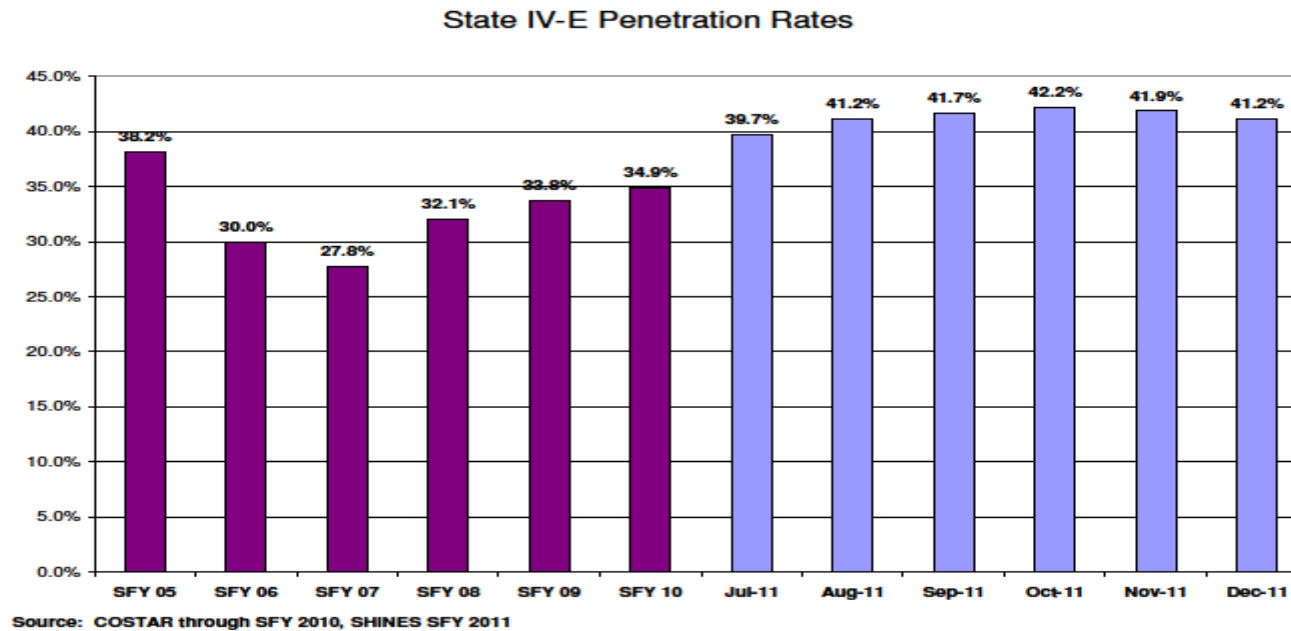
Table VI-11c
Title IV-E Funding:
Total Expenditures
for State Fiscal Years 2006, 2007, 2008, 2009 and 2010

Title IV-E Funding Category	SFY 2006 (July 2005- June 2006) <i>Baseline Year</i>	SFY 2007 (July 2006- June 2007) <i>Year 1</i>	SFY 2008 (July 2007- June 2008) <i>Year 2</i>	SFY 2009 (July 2008- June 2009) <i>Year 3</i>	SFY 2010 (July 2008- June 2009) <i>Year 4</i>	<i>Year 4 over Baseline Year Change</i>
Adoption Assistance Payments	47,660,251	49,563,859	49,986,050	50,882,635	50,855,928	+7%
Adoption Administration	13,044,784	15,772,507	13,507,523	9,704,923	12,540,905	-4%
Adoption Training	700,861	951,211	559,581	205,370	169,035	-76%
Adoption subtotal	\$61,405,896	\$66,287,577	\$64,053,154	\$60,792,928	\$63,565,868	+4%
Foster Care Maintenance Payments	32,536,931	28,088,757	55,376,912	68,426,606	54,396,919	+67%
Foster Care Administration	65,785,175	55,691,027	77,655,493	79,214,670	80,836,946	+23%
Foster Care Training	388,799	418,704	1,599,367	2,557,003	896,877	+131%
SACWIS	4,013,291	10,443,082	16,332,884	1,470,310	2,519	-100%
Foster Care subtotal	\$102,724,196	\$94,641,570	\$150,964,616	\$151,668,589	\$136,133,361	+33%
Title IV-E Total	\$164,130,092	\$160,929,147	\$215,017,770	\$212,461,517	\$199,699,229	+22%

Source: DHS/DFCS quarterly expenditure reports submitted to the U.S. Department of Health and Human Services

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 was consistently 40 percent or better in the last five months of Period 10.

Figure VI-6
State IV-E Penetration Rates
SFY 2005 through December 2010 (the first half of State Fiscal Year 2011)



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.¹⁴⁴ 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.

<i>Table VII-1 Repeat Maltreatment</i>			
<i>Reporting Period: July 1, 2010-December 31, 2010</i>			
		DEKALB	FULTON
a) Number of children during the reporting period experiencing substantiated maltreatment		331	619
b) the number of children in a) of this item who also experienced maltreatment during the preceding 12 month period		18	47
Percentage of children who had substantiated maltreatment during the preceding 12 months		5.4%	7.6%

¹⁴⁴ 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 July 1, 2009 – December 31, 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 8.) The Accountability Agents' verification approach is discussed in Appendix B.

<i>Table VII-2 Diversions with Subsequent Substantiated Maltreatment</i>			
<i>Reporting Period: July 1, 2009 –December 31, 2009</i>			
		DEKALB	FULTON
a) Number of cases in each county during the reporting period in which there was a referral into DHS's diversion program		338	782
b) the number of cases in a) in which there was substantiated maltreatment within 11-365 days after referral to DHS's diversion program		30	54
Percentage of cases in which there was substantiated maltreatment within 11-365 days of referral into DHS's diversion program		9.5%	6.9%

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.

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- **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:**
Initial Stipulation:
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.

Revised Stipulation:

Children who have one or more siblings in custody with whom they are not placed shall be provided a visit 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. By the end of the tenth reporting period, at least 90% of the total minimum number of required monthly sibling-group visits shall have taken place during the reporting period. Visits among siblings in excess of the required one visit per month shall be excluded when calculating this percentage.

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, by the end of the third 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 six-month 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:** Visitation(worker-child)
Initial Stipulation
- 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.

Revised Stipulation

- By the end of the tenth reporting period:
 - (a) At least 96.25% of the total minimum number of twice-monthly face-to-face visits between case managers and all class member children required by Section 5.D.1.b during the reporting period shall have taken place. Visits to any child in excess of the required minimum number of two visits per month shall be excluded when calculating this percentage.

(b) At least 96.25% of the total minimum number -monthly private, face-to-face visits between case managers and all class member children required by Section 5.D.1.b during the reporting period shall have taken place. Visits to any child in excess of the required one private visit per month shall be excluded when calculating this percentage.

- **Outcome 22:** Visitation (worker-caregiver)

Initial Stipulation:

- 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.

Revised Stipulation:

- DCFS placement case managers shall visit each child's foster parent, group care, institutional or other caretaker at least one time each month. By the end of the tenth reporting period, at least 95% of the total minimum number of required monthly visits by case managers to caregivers during the reporting period shall have taken place. Visits to any caregiver, with respect to the same child, in excess of the required one visit per month shall be excluded when calculating this percentage.

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:** Placements not in full approval status:

Initial Stipulation:

- 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.

Revised Stipulation:

- By the end of the tenth reporting period, at least 98% of all foster placements serving class member children shall be in full approval and/or licensure status. In computing this percentage, each placement shall be weighted by the approved and/or licensed capacity of that placement.

- **Outcome 31:**

Initial Stipulation:

- 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.

Revised Stipulation:

- By the end of the tenth reporting period and continuing thereafter, no more than ten percent of all foster family home placements serving class member children at any time during the reporting period shall exceed the capacity limits referenced in Section 5.C.4.e of this 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 home, or a total of six(6) children in the home, including the foster family's biological and/or adopted children.

7. Timely and Complete Court Orders

- **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 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
- **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 10

Four primary sources of information were used to assess the State of Georgia’s progress during Period 10, July-December 31, 2010. The challenge for data collection and analyses in Period 10 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. State Data Systems

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. Much 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 visits, 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 31, 2010. 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 July 1 and December 31, 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 July 1 and December 31, 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 July 1 and December 31, 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	77	77	77	Not applicable
Foster Homes	653	160	160	+/- 7 percent
Children in Foster Care	1588	175	175	+/- 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 November 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 January and February 2011 and the foster home file review in March 2011. 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: 31 percent of Maltreatment in Care Investigations cases; 33 percent of Placement cases; and 31 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	.992
Foster Homes	.984
Foster Care	.998

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 Review	Number of cases sampled but not read as part of the review and reason why they were not read	
Maltreatment in Care Investigations	Investigation not completed between July 1 and December 31, 2010	0
	Coding error, this is not a maltreatment in care referral/report	3
	Case was "opened on report" (no maltreatment was alleged)	2
	Case record cannot be located	0
	No child in the legal custody of Fulton and Dekalb Counties was involved in this report	7
	Other	8
	Total	20
Foster Homes	Coding error in SHINES, this home was not open between July 1 and December 31, 2010	0
	No children were placed in this home between July 1 and December 31, 2010	1
	No children in the legal custody of Dekalb or Fulton County DFCS were placed in this home between July 1 and December 31, 2010	2
	Private agency did not supply necessary files	0
	Case record cannot be located	1
	Oversight of foster home transferred to another county	0
	Other	2
	Total	6

Table B-3, continued
Case Records Drawn for Original Sample, Not Revieweded

Target of Review	Number of cases sampled but not read as part of the review and reason why they were not read	
Children in Foster Care	Child not in foster care anytime July 1 and December 31, 2010	1
	Child not in the adjudicated legal custody of Fulton or Dekalb counties July 1 and December 31, 2010	2
	Child's file has been sealed as result of finalized adoption	13
	Child living in another state, file has insufficient information to review adequately.	0
	Child age 18 before July 1, 2010.	0
	Case timeframe too short (child in care 8 days or less)	9
	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.	1
	This is a duplicate of child in sample.	1
	Other	2
	Total	29

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 10.

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.¹⁴⁵ 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

¹⁴⁵ 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 a reporting period. In other words, what percentage of the children in care on June 30/December 31 of a given year after 2005 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..."¹⁴⁶ 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 July 1 and December 31, 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

¹⁴⁶ 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 10 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."¹⁴⁷ 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;

¹⁴⁷ 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.”¹⁴⁸ 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.”¹⁴⁹ 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 measure¹⁵⁰ 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

¹⁴⁸ Social Services Manual, Chapter 1000, Section 1002.3.2, Georgia Department of Human Services.

¹⁴⁹ See p. 3, Definition T, of the Consent Decree.

¹⁵⁰ See the following Federal internet site:

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 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.¹⁵¹ 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 same day. 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 10. 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.

¹⁵¹ 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 175-180 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*”¹⁵² between children and parents “*to progress toward reunification*”¹⁵³ 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.¹⁵⁴ Second, a plan for parental

¹⁵² See p. 36, Outcome 21, of the Consent Decree.

¹⁵³ Ibid.

¹⁵⁴ Social Services Manual, Section 1009.3 Georgia Department of Human Services.

visitation should be a part of every Case Plan.¹⁵⁵ Third, “when agency resources allow, visitation shall be scheduled at two-week intervals unless the court has specified another visitation arrangement.”¹⁵⁶ 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 re-establishes 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.¹⁵⁷ 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.

¹⁵⁵ Social Services Manual, Section 1009.4 Georgia Department of Human Services.

¹⁵⁶ Social Services Manual Section 1009.5, Georgia Department of Human Services.

¹⁵⁷ Annie E. Casey Foundation, Elders as Resources Fact Sheet, *Basic Data: Kinship Care*, 2005, found at <http://www.aecf.org/upload/PublicationFiles/FactSheet.pdf>.

Outcome 23 was measured in Periods 2 through 9 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.¹⁵⁸ 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

¹⁵⁸ See p. 35, paragraph 18, of the Consent Decree.

supervisor or program administrator was not counted as the primary individual responsible for 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 was measured through information collected from the case record review in Periods 2 through 9. 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 was measured using a case record review of a sample of children in foster care during the period in Periods 2 through 9. 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. The third measurement year was January 1 to December 31, 2008. The fourth measurement year was January 1 to December 31, 2009. The fifth measurement year was January 1 to December 31, 2010.

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 . The measurement approach of this Outcome changed in Period 10. In Periods 2 through 9, measurement of this outcome was based on a subset of the 175-180 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 measurement was based on the subset of children from the placement sample that were in foster home placements on the last day of the reporting period in Periods 2 through 9. 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.”¹⁵⁹ Section 5.c.4.e. also enumerates certain exceptions to these capacity limits.¹⁶⁰ 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.

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.

¹⁵⁹ See Kenny A. Consent Decree, p. 38.

¹⁶⁰ Ibid, p.16.

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 10 report is the ninth 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. Data Capture and Input

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.¹⁶¹

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. File Matching Algorithms

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 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

¹⁶¹ 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.

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 1095 children in the custody of DeKalb and Fulton counties on December 31, 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 December 31, 2010
N=1095*

Gender	Percent of Children
Male	55%
Female	45%
Total	100%

Source: Georgia SHINES

*Includes youth under the age of 18 placed voluntarily in DFCS as well as those adjudicated into custody.

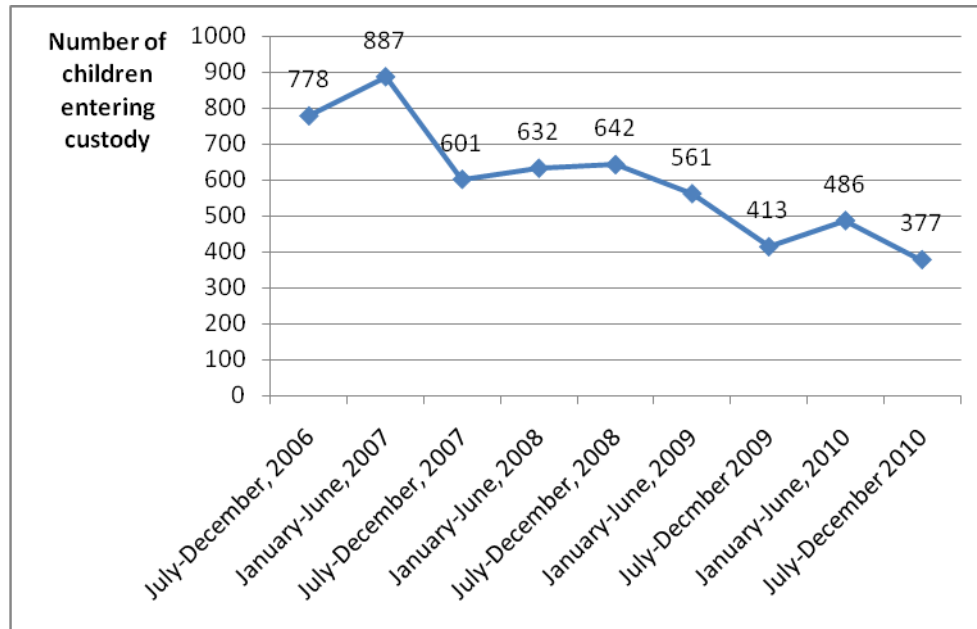
Table C-2
Age of Children Remaining in Custody on December 31, 2010
N=1095*

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	17%
Ages 16 to 17 years	18%
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.

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.