

D.S. SEMI-ANNUAL REPORT JANUARY 1, 2024 – JUNE 30, 2024



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INTRODUCTION

The D.S. Lawsuit & Settlement Agreement

The Department of Children, Youth, and Families (DCYF) was sued by Disability Rights Washington (DRW) and a Class of children and youth under the age of 18 who have been removed from their parents or caregivers. The Settlement Agreement, negotiated under the lawsuit, is known as the D.S. Settlement. Under the Settlement Agreement, DCYF has committed to eight System Improvements related to the Class, guided by seven overarching goals to transform child safety and well-being practices. Goals and related System Improvements are described in the D.S. Implementation Plan released on August 2, 2023. The methodology and metrics that used to report DCYF's progress toward successful implementation of the System Improvements and achieving substantial compliance with the requirements of the Settlement Agreement are included in the D.S. Data Addendum released February 2, 2024.

The D.S. Class

- 1) Class Members include Individuals who are or in the future will:
 - Be under the age of 18; AND
 - ii. Be in DCYF's placement during a dependency proceeding under Wash. Rev. Code § 13.34 until the proceeding is dismissed; AND
 - iii. ONE OR MORE OF THE FOLLOWING:
 - a. Have experienced five (5) or more placements, excluding trial return home, in-home dependencies, and temporary placements. Temporary placements mean any of the following: overnight stay with a parent, hospital, respite care, youth camps, on runaway status, or detention. Temporary placements do not include a hotel stay, an office stay, or a night-to-night foster care placement. But an individual shall not be counted to have five (5) or more placements under this section if they have been in the same placement for the last twelve (12) or more months, except if that placement was in a Qualified Residential Treatment Program (QRTP); OR
 - b. Have been referred for or are in out-of-state group care placement, OR
 - c. Have experienced a hotel or office stay in the past six (6) months; OR
 - d. Are awaiting a Children's Long-Term Inpatient Program (CLIP) bed.

Semi-Annual Report Overview

As required by the Settlement Agreement, this semi-annual report provides data regarding the prior six-month period necessary to evaluate DCYF's progress toward meeting the requirements set forth in the implementation plan and data addendum and consistent with the Settlement Agreement. The report includes administrative data¹, narrative updates, identification of successes and challenges and remedial efforts to address challenges. To the extent that language, including dates, in the data addendum are inconsistent with language in the implementation plan the data addendum supersedes the implementation plan.

4.6 Emerging Adulthood Housing Program

The D.S. Settlement Agreement requires DCYF to continue developing and implementing an array of supported housing programs for youth and young adults from ages 16 through 20 years with living unit configurations tailored to the needs of youth, including; 24/7 staffing who provide culturally responsive, LGBTQIA+ affirming, and trauma-informed support and training in independent living skills, transportation for participants to stay connected to their friends and families, and crisis response that includes intensive case management.

Data

The Adolescent Transitional Living Program (ATLP) is the first program to be developed in the Emerging Adulthood Housing Program (EAHP) housing array. Currently two ATLP programs, the YMCA and AKI are fully established. As the array and capacity expand, the additional data outlined in the Data Addendum regarding the EAHP array and data regarding service timeframe, referrals and youth who are not referred or decline the service will be provided in this section.

¹ DCYF has a standard to mask numbers from 1-9 in public reports to prevent any possibility of identifying individuals to protect confidentiality. In the interest of providing as much transparency as possible to support the purpose of this report, we have included numbers from 1-9. The text and details associated with any number from 1-9 were carefully reviewed to verify that the information provided in this report, in combination with any other publicly available information, cannot be used to identify any individual. If information is brought to the attention of DCYF that there is sufficient information available publicly to potentially identify an individual, this report will be modified.

Class Members in ATLP					
Region	Bed Capacity	# of Class			
			Members		
1	TBD	5	N/A		
2	Ohana Crisis Center	5	N/A		
3	360 Academy	5	N/A		
4	YMCA	6	2		
5	Dominion Academy	5	N/A		
6	AKI	8	2		

Data Source: FamLink DS class report 7/5/2024, Program Census 7/1/2024

The beds in the region 4 and region 6 programs are currently full. The data above reflects current class members served as of the most recent class report. Participants in ATLP may have entered the program as class members. As participants progress in the program, they may exit class member status but continue to receive services. As of July 5, 2024, 71% of the youth being served are or were class members. Exiting the class while remaining engaged in the program reflects that youth have achieved stability as they continue to transition to independence.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
Plan for statewide expansion to regions 1, 2, 3 and 5. Providers to be determined, 20 youth capacity over 4 programs.	04/2023	12/2023	Complete	Complete
Establish and revise common ATLP Program Standards. Review contracts for revisions or updates to the statement of work.	03/2023	Ongoing	Complete	Complete. Ongoing review and revision to occur as needed
Assess program delivery and statewide training needs. Establish the process and resources for initial and ongoing training for caseworkers, contractors, and partners statewide.	06/2023	06/2024	Complete	Complete. Assessment and identification of processes complete. Ongoing training will take place for caseworkers

Activity	Start Date	Planned Completion Date	Progress	Status
				and field staff starting Fall 2024 on the Systems Improvement work, the ATLP program, as well as other placement options on the continuum.
Establish referral and acceptance processes to include timeliness, documentation, and CQI.	06/2023	06/2024	Complete	Complete
Contract recruitment for providers in regions 1, 2, 3 and 5	01/2024	Updated from 06/2024 to 09/2024	Delayed – in progress	On track for revised date
Review and evaluate statutes and licensing rules from WA and other states to identify potential statutory changes for ATLP and develop recommendations for the 25-27 biennium.	01/01/24	12/31/24	On Track	In progress
Partner with contracted providers to review, revise, and create and implement program materials.	Initial materials created	Ongoing	Complete	Complete. Initial materials developed. Review and revision to occur as needed.
Assess for a Decision Package for expansion to meet ATLP capacity needs for the 25-27 biennium.	01/01/24	09/01/24	Complete	Complete
The YYAHC Program Manager will review data and reporting protocols related to access and eligibility. They will review eligibility, referral, and placement protocols with subject matter experts (SMEs).	01/2024	Ongoing, bi- annually	Complete	Complete. Process established for ongoing review.

Greyed out activities were completed in a previous semi-annual review period.

Narrative Update

Overall, the EAHP system improvement is on track. There was a delay in implementation of the Adolescent Transition Living Program (ATLP) in region 1 as there was no successful bidder in the procurement, but this is being addressed as described below.



The procurement process for the statewide expansion of the ATLP was successfully completed as planned for regions 2, 3, and 5, resulting in awards to: Ohana Crisis Center in Region 2, 360 Academy in Region 3, and Dominion Academy in Region 5. However, no successful bidder emerged for region 1, resulting in a delayed completion date. DCYF is working to establish a contract with a provider in region 1 for an ATLP, with an anticipated completion date of September 2024. On May 1, 2024, revised contracts were executed with the YMCA and AKI.

The YMCA's program in region 4 added a 6th bed in March 2024. Both the YMCA in region 4 and AKI in region 6 have had full occupancy in their beds. These providers are actively engaged in outreach efforts to assist in managing waitlists and ensure appropriate referrals. They have frequent check-ins to alert the placement desks and caseworkers when there are openings and to create opportunities for the placement teams and caseworkers to share information about youth who may be eligible for the program. The Youth and Young Adult Housing Continuum (YYAHC) Program Manager developed a PowerPoint presentation to educate DCYF caseworkers and external partners about the ATLP program.

The YYAHC Program Manager and DCYF Licensing Division Policy Program Manager are developing a community engagement plan to recruit members for a newly established EAHP workgroup. Members will include community providers, lived experts, and DCYF program representatives to prioritize program development and assist in the landscape analysis, per the D.S. Implementation Plan. This workgroup will also assist in the creation of a new WAC chapter for EAHP programming, aiming to promote independence and normalcy, while ensuring safety and stability for participants.

A team of DCYF representatives met in May and June 2024 to frame a proposal for a DCYF supported training model for DCYF contracted placement providers and their staff that will establish consistent training that reflects priorities for trauma-informed, culturally responsive and LGBTQIA+ affirming care. Currently, most training is provided by the providers for their staff. Consistent training across the placement continuum will help to improve the experience of youth in our system because providers would have common language and understanding. This work will continue through the rest of this calendar year to inform a proposal in alignment with revised licensing WAC as established through the NRM process.

DCYF is drafting a decision package for consideration to secure funding in this next fiscal year to add 10 ATLP beds and increase rates for 10 beds in the Responsible Living Skills Program (RLSP). RLSP is part of the array of services in the Emerging Adult Housing continuum and serves dependent youth when no other services or alternative placements have been successful. RLSP is not for dependent youth whose permanency plan includes return home or family reunification. The program is designed to provide a safe place for young people to learn the skills of independent living.

Quality Assurance

DCYF has developed data collection methods, to support quality assurance including:

- Exit interviews for clients transitioning from programming
- Surveying clients anonymously and capturing minutes in house meetings
- Creating tools to measure progress based on individualized goals and case plans
- Developing tools to record reasons for youth declining referrals

Over the past 6 months, AKI and the YMCA have conducted program self-evaluation surveys for the staff and youth satisfaction surveys for the youth. These feedback loops allow for ongoing refinement and improvement.

Next steps as a result of the program self-evaluation survey:

- Increase staff meetings from bi-weekly to weekly
- Centralize communication platforms
- Develop and enforce a consistent daily schedule for participants based on their individual goals and treatment plans, and in collaboration with the youth
- Clearer guidelines for staff responsibilities
- Provide additional training and professional development for staff
- Encourage proactive and positive interactions with youth

Next steps as a result of the youth satisfaction surveys:

- Continue fostering strong staff-youth relationships
- Provide ongoing training for staff in emotional support and trauma-informed care
- Encourage decision making and provide guidance when needed
- Offer opportunities for youth to take on more responsibilities
- Continue valuing and integrating diverse cultural practices
- Provide cultural competence training for staff
- Offer additional workshops and practical sessions on budgeting, grocery shopping, and other life skills
- Provide resources and support for emotional regulation and boundary-setting
- Facilitate job readiness programs and community resource navigation

Supporting Documentation

- YMCA Client Story
- Emerging Adulthood Housing Program Presentation
- ATLP Data Collection and Quality Assurance Enhancement Plan for 2024

4.7 Professional Therapeutic Foster Care

The D.S. Settlement requires DCYF to develop and implement a contract and licensing category for Professional Therapeutic Foster Care (PTFC). This licensing category is intended to support children and their immediate families when reunification or placement with extended or chosen family is not possible due to the child's developmental disabilities or behavioral health needs.

Data

The PTFC program is still in development. Initial program capacity will be established January – February 2025 with referrals into the program beginning in March 2025. Data for this system improvement will be reported beginning in the August 2025 semi-annual report.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
Youth Engagement	02/2023	06/2023	Complete	Complete
Integration	02/2023	Ongoing	Complete	Complete. Processes for integration will be ongoing
Hold a workgroup with WA State tribes	04/2023	Initial engagement completed 10/2023	Complete	Complete. Tribal representatives and DCYF Office of Tribal Relations participate in the ongoing PTFC workgroup
Provider and Foster Parent Meeting	05/2023	10/2023	Complete	Complete
Youth Listening Sessions	05/2023	10/2023	Complete	Complete
Parent Listening Session and Parent Advisory Group (PAG)	05/2023	12/2023	Complete	Complete

Activity	Start Date	Planned Completion	Progress	Status
	0.0/0.000	Date		
Exploration of Professional Fostering Models	06/2023	08/2023	Complete	Complete
Training - Integration	07/2023	Ongoing	Complete	Complete. Processes for training integration will be ongoing
PTFC Workgroup Development	09/2023	12/2023	Complete	Complete
Program Development Outline	07/2023	06/2024*	Complete	Complete
Establish new licensing rules for professional foster parenting category	07/2023	10/2024*	On track	In progress
Contract Drafted	09/2023	09/2024*	On track	In progress
Review DCYF Child Welfare program policies in consultation with the Intensive Resources Program Manager to identify impacts to current policy and determine if revisions are needed.	02/01/23	Ongoing	Complete	Complete
Establish ongoing PTFC implementation meetings/work groups including individuals with lived experience, providers, foster parents, and other stakeholders and using principles of co-design.	09/01/23	12/2024	On Track	In progress
Establish training plan	12/31/23	06/2024*	Complete	Complete
Communication to DCYF Staff	01/2024	Ongoing	On Track	Ongoing
Training on policy and WAC changes for DCYF staff	01/01/24	Updated from 03/31/24 to 01/2025	Delayed - in progress	On track for revised date
Request for Application (RFA) process started pending finalization of licensing rules.	04/01/24	Updated from 08/01/24 to 10/2024	Delayed – in progress	On track for revised date

Greyed out activities were completed in a previous semi-annual review period.

Narrative Update

The PTFC system improvement is on track. Delays are related to the delay in finalizing the PTFC WAC changes, which are required to establish the contract and provide associated training. DCYF has continued work to develop the statement of work and stage the RFA, identify the training plan for PTFC parents and engage with Child Placing Agencies (CPA). As a result, we are on track for meeting the benchmark of serving youth in Phase 1 beginning in March 2025 as identified in the Data Addendum.

^{*}Date revised in a previous semi-annual review period.

The <u>rules for PTFC</u> went out for stakeholder review and feedback June 2024. They are expected to be finalized October 2024. The PTFC Program Manager and Licensing Division Policy Program Manager meet twice monthly to discuss the PTFC program, rules and policy changes and updates, communication plans with internal and external stakeholders, and PTFC contract development. Timelines for contract development, the RFA process and training on policy and WAC changes have been updated to align with the finalization of the rules.

The PTFC workgroup includes internal and external stakeholders, lived experience experts, and tribal nation representatives. The workgroup consults with boards, commissions, and groups including Indian Child Welfare Sub-Committee, Parent Advisory Group (PAG), and the Washington Association for Children and Families (WACF). The PTFC workgroup assisted in the development of the program outline, training recommendations for PTFC parents, and draft statement of work.

The program outline highlights the program goals and objectives and methods for achieving success. The outline focuses on therapeutic approaches, staffing, training for PTFC parents, and other supports needed to ensure the program thrives.

The PTFC workgroup developed training recommendations for the PTFC parent which include meeting pre-determined competencies, an individualized training plan, coaching, and peer support. The PTFC workgroup looked at existing trainings and the areas of training need to form their recommendations.

Child Placing Agencies (CPA) will support PTFC parents. Engagement with CPAs included participation in the PTFC workgroup as well as regular dedicated meetings to discuss the PTFC program, obtain feedback, and communicate about the process.

The PTFC workgroup will continue to meet until December 2024 or until the purposes of the group have been fulfilled and will provide recommendations for training for DCYF staff, CPA staff, and communication to internal and external partners.

PTFC next steps include finalizing rules and policy, updating the rate model and PTFC budget, implementing the RFA process, issuing contracts and onboarding CPAs. Rate modeling will determine the costs associated with PTFC and the required budget. Once WAC is in place, we will begin the RFA process and establish contracts with CPAs. CPAs will then be able to recruit and train PTFC parents.

Supporting Documentation

• PTFC Program Outline

4.8 Hub Home Model Program

In response to the D.S. Settlement, DCYF will expand implementation of the Mockingbird Family (MBF) Hub-Home Model (HHM) statewide and establish at least one Hub per region whose Hub Home parents have experience caring for young people who currently or previously qualified for Wraparound with Intensive Services (WISe) or Behavior Rehabilitation Services (BRS).

Data

The HHM expanded implementation is still in development. Initial capacity will be determined once the Hub and satellite homes are identified and will be updated monthly. The anticipated timeline to establish the capacity is June 2025 – December 2025 with initial referrals into the program beginning as capacity is established. The revised reporting date for data for this system improvement will be in the February 2026 Semi-annual Report. This revised timeframe is based on the revised dates for establishing Hubs and constellations.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
DCYF completes required MBF pre-contracting activities including Organization Profile Inventory	07/2023	03/2024*	Complete	Complete
Convene a workgroup to develop the program's framework (task will be aligned with MBF Immersion Training).	03/2024* New date 09/2024	Updated from 05/2024* to 12/2024	Delayed	On track for revised dates
Establish quality assurance benchmarks that account for MBF fidelity markers and data.	03/2024* New date 09/2024	Updated from 05/2024* to 12/2024	Delayed	On track for revised dates
Determine Hub and Satellite Home selection criteria	03/2024* New date 08/2024	Updated from 05/2024* to 10/2024	Delayed	On track for revised dates
Develop the training framework for HHG participants	03/2024* New date 09/2024	Updated from 05/2024* to 12/2024	Delayed	On track for revised dates
DCYF and the Hub Home to develop or identify partnerships with existing community organizations that provide support and services vital to the	03/2024* New date 06/2025	Updated from 05/2024* to ongoing	Delayed	This work will begin once Hub

Activity	Start Date	Planned Completion Date	Progress	Status
ongoing well-being and safety of young people placed in the HHGs and bolster their placement stability.				homes are identified and will continue ongoing with the launch of each new constellation
Partner with Mockingbird Family to develop and execute an updated contract with provisions for three CPAs.	02/01/24	Updated from 02/28/24 to 08/2024	Delayed - in progress	On track for revised date
Develop and execute CPA contracts	03/01/24	Updated from 06/01/24 to 03/2025	Delayed - in progress	On track for revised date
CPAs recruit, identify , and train Hub homes	06/01/2024 New date 06/2025	Updated from 12/31/2024 to 12/2025	Delayed	
Launch Hub homes	06/01/2024 New date 06/2025	12/31/2024 Updated from 12/31/2024 to 12/2025	Delayed	

^{*}Date revised in a previous semi-annual review period.

Narrative Update

Implementation of this system improvement is delayed due to delays in the negotiation and execution of the contract with the Mockingbird Society (TMS). Target start and completion dates have been revised to reflect the new timelines. Details regarding the delays and impacts can be found below.

During this review period, TMS and DCYF met weekly to develop a new contract that included updated language related to the D.S. system improvements. Contracting delays are due to the complexity of the contract, addition of proviso funding received this past legislative session, and ongoing revisions and negotiations to ensure both agencies have a shared understanding of the goals, roles, responsibilities and language used in the contract. Previous contracts with TMS did not include clear deliverables with timeframes for delivery and reporting. DCYF worked closely with TMS to develop clear deliverables, timeframes, and reporting requirements which also contributed to the contract delays as this is a change in practice for TMS. The contract is expected to be finalized in August 2024.

TMS contract delays have impacted the execution of the CPA contract. DCYF will provide a draft of the CPA contract to TMS for review and feedback once the TMS contract is finalized. DCYF is currently requesting information from CPAs to identify potential barriers and incentives that could be incorporated into the contract. The 3-6 month procurement process for CPAs is expected to begin in September and CPAs will have 90 days from contract initiation to program launch. To support CPAs and offset potential delays in launching enhanced constellations, DCYF is developing a recruitment plan to identify potential satellite and Hub homes rather than requiring CPAs to initiate recruitment after they are onboarded.

Due to contracting delays, the combined TMS and DCYF workgroup scheduled for June 2024 was postponed, with a TMS immersion workshop now anticipated in September. The DCYF implementation workgroup will begin reviewing current protocols, roles, responsibilities, selection criteria, and fidelity markers in July 2024. Information from the workgroup will be integrated into the MBF immersion workshop. Quality assurance benchmarks, and the training framework for HHG participants will be addressed in the immersion workshop and ongoing implementation workgroups.

During this review period, DCYF hired four full-time Mockingbird Liaisons to support program expansion and implementation. The liaisons are collaborating with existing Hub Homes to provide support, review protocols, identify gaps, gather and analyze data, address fidelity issues, and assist in recruitment. This effort is part of a 3-phase recruitment plan: Phase 1 focuses on ensuring existing Hub home constellations meet fidelity; Phase 2 involves expanding traditional constellations to serve each region, and Phase 3 includes launching enhanced constellations in each region. As part of Phase 1 PTFC, EAHP, and HHM program representatives meet regularly to discuss program intersectionality and develop a combined communication that will be shared to internal staff, caregivers, CPAs, community partners and stakeholders to integrate D.S. system improvements program information.

DCYF established a temporary Data Implementation specialist position for SFY 2025 to support implementation. This position will develop a data analysis plan to assess needs, gaps, eligibility criteria, referrals, and exit criteria for youth in the settlement class, and make recommendations for system improvements.

The Mockingbird program manager is participating in the work to frame a proposal for a DCYF supported training model for DCYF contracted placement providers and their staff that will establish consistent training for providers that reflects priorities for trauma-informed, culturally responsive and LGBTQIA+ affirming care.

4.9 Revising Licensing Standards

In response to the D.S. Settlement Agreement, DCYF has agreed to amend contracts and policies and engage in negotiated rulemaking (NRM) to amend requirements for foster care placements to be more developmentally appropriate and flexible to meet the needs of individual youth.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
Identify key roles for NRM process.	06/2023	08/2023	Complete	Complete
Procure facilitator.	06/2023	08/2023	Complete	Complete
Establish NRM participant groupings to include state agencies, providers, tribal partners, lived experience youth, and lived experience parents.	06/2023	08/2023	Complete	Complete
Begin routine participant communication.	07/2023	Ongoing	On track	Complete and ongoing
Develop and send participant survey for data collection.	07/2023	08/2023	Complete	Complete
Collaborate with participant groupings and facilitator group to design NRM process.	07/2023	09/2023	Complete	Complete
Research and analyze federal and state laws informing rule requirements as well as best practice guidelines for group care standards of care.	07/2023	12/2023	Complete	Complete
Establish workgroup to write proposed rules for a new licensing category to accommodate the adolescent transitional living program (ATLP).	07/2023	12/2023	Complete	Complete
Write updated language for WAC that will not be subject for wholesale change during the NRM process.	07/2023	12/2023	Complete	Complete
 Establish NRM participant group meetings to: Provide education on the NRM process. Identify specific WAC to target during in-person NRM process. Discuss key DS terms/concepts. Select NRM participants. Discuss proposed substitute WAC language 	08/2023	10/2023	Complete	Complete

Activity	Start	Planned	Progress	Status
	Date	Completion		
		Date		
Develop strategies for implementing updated practices, prior to NRM based on workgroup recommendations. The strategies will include	06/2023	Updated from 4/2024* to 08/2024	Delayed – in progress	On track for revised date
communication with foster parents, staff, supervisors, and manager.				
Collaborate with the Alliance and other System Improvement Leads/Teams to update/develop facility/agency/foster parent training for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.	06/2023	01/2025*	On track	In progress
Present implementation strategies to participant groupings for feedback and collaboration to develop updated practice recommendations.	09/2023	Updated from 02/2024* to 09/2024	Delayed – in progress	On track for revised date
Send participant communication, and present in a meeting, notification of practice change recommendations based on collaboration efforts.	09/2023	Updated from 02/2024* to 09/2024	Delayed – in progress	On track for revised date
Facilities, in collaboration with regional licensing, amend facility/agency procedures and implement new practices.	Updated from 03/2024* to 10/2024	Ongoing	Delayed	On track for revised date
Procure facilitator – Foster Care NRM preparation	10/2023	Updated from 12/2023 to 06/2024	Complete	Complete
Negotiate rule requirements and language with representation from the following participant groupings at a minimum: Tribal partners Youth with lived experience Parents/guardians with lived experience Court/Advocacy groups DDA staff Commerce staff Child Welfare staff Licensing staff DDA providers BRS providers BRS providers CRC providers CRC providers Medically Fragile providers RAC/Maternity providers Private Group Care providers	01/01/24	Updated from 06/30/24 to 09/2024	Delayed – in progress	On track for revised date
Routinely document and report NRM progress	01/01/24	09/30/24	On track	In progress
Write updated rule language	01/01/24	09/30/24	On track	In progress

Activity	Start Date	Planned Completion Date	Progress	Status
Launch updated facility staff e-learning and foster parent CCT training for providing culturally responsive, LGBTQIA+ affirming and traumainformed care.	01/01/24	Updated from ongoing to 01/2025	Delayed	On track for revised date
Develop LD and facility staff training for the interpretation and implementation of amended WAC rules.	01/01/24	09/30/24	On track	In progress
Develop communication plan	01/01/24	02/28/24	Complete	Complete
Identify key roles for NRM process	01/01/24	02/28/24	Complete	Complete
Establish NRM participant groupings	01/01/24	02/28/24	Complete	Complete
Send foster parent and CPA survey for data collection	01/01/24	02/28/24	Complete	Complete
Begin routine participant communication	03/01/24	06/30/26	On track	In progress
Research and analyze federal and state laws informing rule requirements as well as best practice guidelines for foster care standards of care.	03/01/24	09/30/24	On track	In progress
Write updated language for WAC that will not be subject for wholesale change during the NRM process.	03/01/24	09/30/24	On track	In progress
Collaborate with participant groupings and facilitator group to design NRM process.	03/01/24	09/30/24	On track	In progress
Establish workgroup to write proposed rules for a new licensing category to accommodate Professional Therapeutic Foster Care (PTFC).	03/01/24	09/30/24	On track	In progress
Establish NRM participant group meetings to: O Provide education on the NRM process O Identify specific WAC to target during inperson NRM process O Select NRM participants O Discuss proposed substitute WAC language	04/01/24	09/30/24	On track	In progress

Greyed out activities were completed in a previous semi-annual review period.

Narrative Update

The Revising Licensing Standards System Improvement is on track for implementation of final group care rules in October 2025 and for the foster care NRM process completion by July 2026. There have been delays related to determining consensus for the group care rules, but the rules are still on track to be in place by October 2025. The delay in procuring the facilitator for foster care rules did not impact the timeline for development and finalization of rules. There has been a delay in finalizing and implementing formal strategies to update practices outside of the NRM process and this is addressed below.

^{*}Date revised in a previous semi-annual review period.

Group Care NRM Representatives have regularly convened since November 2023 to negotiate WAC Chapter 110-145. NRM Representatives have participated in 13 virtual negotiation sessions and 54 breakout sessions facilitated by a third-party facilitator, Public Consulting Group (PCG). They have participated in 78 hours of negotiations, reviewing 92 WAC and achieving consensus on 29 WAC to date.

The NRM team has continued ongoing communication to all group care providers in several areas such as: sharing drafts of proposed amended WAC and opportunities to provide feedback on the Group Care NRM website; encouraging providers to connect with their Group Care NRM representative to view drafts of amended WAC proposals and provide feedback; and sharing contact information for the Group Care NRM shared email inbox, which providers can contact at any time with project-related questions. The NRM team has also communicated through the Group Care NRM website and development and revision of one-pager resources.

Several workgroup meetings were held with The Alliance and DCYF staff to work on options for creating e-learning trainings for group care providers to meet D.S. requirements and review the Caregiver Core Training (CCT) to ensure it met the D.S. requirements. Licensing Division (LD) representatives joined DCYF program representatives in May and June 2024 to frame a proposal for a DCYF supported training model for DCYF contracted placement providers and their staff that will establish consistent training that reflects priorities for trauma-informed, culturally responsive and LGBTQIA+ affirming care. In July 2024 an Issue Paper/Decision Request was submitted to the Leadership Table for a decision on whether or not the proposed direction for training for contracted placement providers was in alignment with DCYF's strategic vision, and to see if the Leadership Table supported continued development of this approach and structure.

DCYF established the Early Implementation Workgroup to highlight current practice related to the seven areas of improvement. Workgroup participants included providers from foster care and group care settings, as well as CPA agency representatives. A draft report is currently under review and will include the following: current practice related to the seven areas of improvement and background content on related WAC or polices, an explanation of barriers faced by group care providers and caregivers and recommendations for practice improvement for both group care and foster care. Completion of this activity was delayed due to conflicting priorities for the NRM team. We submitted the report for leadership review and approval by the end of July 2024 and anticipate that it will be finalized and shared with providers by the end of August 2024. Many providers and foster parents are already incorporating the recommendations based on the workgroup participants efforts and communications.

DCYF held twelve virtual Foster Care NRM orientations from February 20, 2024 through March 7, 2024. The purpose of orientation was to hear details on next steps for the Foster Care NRM project and to understand roles and responsibilities of DCYF, providers and stakeholders. A total of nearly 60 participants attended the orientations. Following the orientation sessions we conducted a survey to obtain additional input, which over 200 participants completed. From

this data, 21 WAC were identified as discussion points for the current foster care listening & learning sessions. Fourteen virtual Listening & Learning sessions were held in June and July 2024 to receive input regarding proposed changes on the 21 identified WAC. Over 120 participants attended the Listening & Learning sessions including caregivers, CPA partners and LD staff. There were two sessions per week, during both the daytime and evening, to provide flexibility for caregivers. The Public Consulting Group (PCG) contract was signed for Foster Care NRM in July 2024.

Recruitment for Tribal partners for both Group Care and Foster Care NRM projects began in July 2023. The NRM team has presented at several meetings including the ICW sub-committee meeting, Tribal Policy Advisory Council (TPAC) meeting and multiple ad-hoc tribal meetings. On July 18, 2024 the NRM team hosted a Group Care NRM Tribal Round Table to engage tribes and receive their input on group care WAC 110-145. DCYF is planning dedicated Listening & Learning sessions with tribal members in September 2024 to receive input on WAC 110-148 changes. The NRM team regularly communicates with the DCYF tribal liaisons and also meets with them during a standing monthly virtual meeting.

Supporting Documentation

- General NRM Fact Sheet: https://www.dcyf.wa.gov/publications-library/LIC 0154
- Youth NRM Fact Sheet: LIC 0142 Group Care NRM Youth Fact Sheet (wa.gov)
- Tribal NRM Fact Sheet: https://www.dcyf.wa.gov/publications-library/LIC 0144
- Group Care NRM Timeline Roadmap

4.10 Kinship Engagement Unit

In response to the DS Settlement Agreement, DCYF will create a Kinship Engagement Unit (KEU). The purpose of the KEU is to implement a family finding model to identify and engage class members' extended family members and friends to support families to safely reunify or stay together. The KEU will be responsible for performing or coordinating 5 main functions. Some of the activities under these functions are currently integrated into other existing or developing services within DCYF. The functions are referenced by number throughout this System Improvement Implementation Plan:

- Conducting initial and on-going family engagement methods that utilize individualized communication methods to enlist support of extended family members and family friends that the child and/or family have identified as trusted and familiar individuals;
- 2. Providing information about available supports and resources for immediate and extended families, including family reconciliation services, evidence-based practices, and the Emerging Adult Housing Program, Hub homes, and Professional Therapeutic Foster Parent options;

- 3. Offering peer support and system navigation support to address barriers to engagement and assist in accessing resources and supports that extended and immediate families need;
- 4. Guiding extended and chosen family placements through the licensure process as requested; and
- 5. Assisting extended and chosen family placements with the requirements of RCW 13.34.065 or 13.34.130 as requested.

Data

Class Members Placed with Kin						
Class Count Children/Youth with Kin %						
Statewide	696*	234	34.0%			

Data Source: FamLink DS Class Report 7/5/2024

Additional data for this system improvement will be reported beginning in the February 2025 semi-annual report.

Report of Progress

Activities

Activity	Start Date	Planned Completion	Progress	Status
		Date		
Develop communication plan	05/2023	09/2023	Complete	Complete
Finalize communication plan	05/2023	04/2024*	Complete	Complete
Develop the Kinship Engagement Unit (KEU) pilot based on System Improvement 4.10 engagement/input section to include the PCG/TOU feedback	06/2023	06/2024*	Complete	Complete
Implementation of KEU Pilot in 2 regions	11/2023	08/2024*	On track	In progress
Printing and dissemination of publications	11/2023	Ongoing	On track	In progress
Assess pilot	10/2024	03/2025*	On track	

Greyed out activities were completed in a previous semi-annual review period.

^{*}Class count for this measure excludes children and youth placed in a trial return home with their parents.

^{*}Date revised in a previous review period.

Narrative Update

The KEU System Improvement is delayed from the dates identified in the Implementation Plan and Data Addendum but is on track for the revised completion dates identified in the February 2024 Semi-annual Report.

Implementation of KEU Pilot

DCYF established, filled, and onboarded the 4 staff positions for the pilots during this review period. The pilots are located in Spokane in region 1 and Vancouver in region 6. These sites were chosen due to class numbers, comparable sizes, and comparable demographics. Local child welfare leadership representatives from the pilot sites have been added to the implementation team to strengthen local support for implementation and help proactively address challenges as they arise.

The KEU staff training plans cover various topics, including FamLink training, mandatory DCYF staff training, an introduction to DCYF Child Welfare and Licensing Division processes, community resources for kinship, the family finding model, available agency and community supports, key contacts, post-permanency support, and SOGIE (sexual orientation, gender identity, and expression).

DCYF is utilizing a child-focused kinship engagement model supported by Family Connection, a technology platform for family search and engagement developed by Connect Our Kids.

KEU staff will:

- Interview the child and/or family to identify individuals as part of their support network. Conduct interviews in the youth's preferred manner (phone, in person, virtual, and text). Engage with children, youth, and families using a trauma-informed approach that incorporates the unique cultural needs of the child.
- Engage with identified supports, including prior failed or denied placements.
- Review case file to search for additional connections.
- Serve as the primary contact for kin to provide resources and help them navigate complex systems as outlined in functions 2-5.
- Utilize <u>Family Connection</u> to create genograms, log engagement, and collaborate with others.

KEU staff will begin direct engagement work with children, youth and families in August 2024.

Communication Plan

The Communication Plan was finalized during this reporting period. It includes but is not limited to:

• Bi-weekly meetings with KEU pilot staff to discuss project objectives, progress updates, feedback, and insights from team members.

- Updates to DCYF staff through Foundations of Practice and the agency's electronic newsletters, while external websites provide information to the public.
- Updates to Tribal partners will occur during biannual ICW subcommittee meetings, as applicable.

Publications

We had anticipated completing the Kinship Guide by spring 2024, however, the revised version did not meet ADA guidelines. We will continue to use the older, approved version until the revisions are finalized, anticipated to be December 2024. KEU staff are encouraged to provide feedback about tools and publications that will enhance their interactions with families.

Assessing the KEU Pilot Project

Assessment of the KEU pilot will inform program changes and whether or not the model should be expanded. During this review period, we collaborated with Connect Our Kids to finalize our baseline data, ensuring that critical data points will be accurately tracked using the Family Connections mapping tool. We collaborated closely with Connect Our Kids to validate data points in the Family Connections mapping tool. Connect Our Kids have generously provided the data base for no-cost including the programming of our data points.

Data collection will include:

- Percent of children/youth who are class members placed with kin
- Number and percent of licensed kinship families caring for a class member
- Number of contacts provided to extended family members and connections with kin will be provided in the first semi-annual report following implementation of the KEU.
- Number and type of support/resources provided
- Number of children/youth who are class members that have at least one supporting connection

Contracts and data share agreements for access to the data base are in process. Due to agency staffing and the vendor lacking a state provider number there have been delays which prevent us from using the actual data base. We anticipate that this will be resolved by October 2024.

Supporting Documentation

- Connect Our Kids Training Academy: https://connectourkids.org/rec-center/
- KEU Training Plan
- Kinship Engagement Unit Communication Plan
- Connect Our Kids Trainings
- <u>Kinship Care: Relatives and Suitable Others Publ</u>ication

4.11 Family Group Meetings

Under the Settlement Agreement, DCYF is required to review and revise shared planning meeting (SPM) and Family Team Decision Making (FTDM) policies and practices, establish a quality assurance process for SPM and FTDM practices and ensure these practices are trauma-informed, culturally responsive, and LGBTQIA+ affirming. In addition, the SPM/FTDM process will fulfill the following five functions of the Settlement Agreement:

- Support and encourage active participation of children and youth, their immediate and extended family members, and other individuals who have trusting relationships with the child and family (collectively the "Family Team") in the SPM/FTDM process, including offering meetings in times and places that are accessible for all members of the Family Team;
- Educate the Family Team about available services and placement options, including family reconciliation services, evidence-based practices, and System Improvements 4.6 Emerging Adult Housing Program, 4.7 Professional Therapeutic Foster Care and 4.8 Hub Homes;
- 3. Elicit and value the child or youth's preferences including, but not limited to, where to live, where to go to school, what treatment or services to receive, what supports are needed for safety, and who is involved in their lives;
- 4. Empower and authorize Family Teams to make and revisit decisions about how and where to best support the child or youth's health, safety, stability, cultural socialization, and relationships with family;
- Provide necessary supports and resources, including those identified in the SPM/FTDMs
 policies and procedures.to meet their needs. PTFC can provide youth stability, offer
 immediate family members and kinship caregivers support, and encourage connection
 to help safely reunify families.

Data

From January 2024 through June of 2024 there were 1,468 shared planning meetings held for class members. Of the 1,468 shared planning meetings, 955 (65%) meetings were held for youth in the age range of 11 to 17 years old, which included 422 (44%) SPMs with youth attendance.

SPM/FTDM Participation							
Total class members with at least	attended at least one		Parents attended at least one SPM		Relatives attended at least one SPM		
one meeting	Count	%	Count	%	Count	%	
653	242	35.43	318	49%	462	71%	

Data source: InfoFamLink, 7/18/2024

An administrative data report indicating who was invited to SPM is not currently available. This has been prioritized for development and the data will be available for the next semi-annual report.

Report of Progress

Activities

Activity	Start Date	Planned Completion Date	Progress	Status
Submit Decision package request for Supplemental Session.	04/2023	08/2023	Complete	Complete
Monthly FTDM/SPM Leads meeting to support practice changes and identify barriers, quarterly Facilitator Community of Practice, Foundations of Practice.	04/2023	Ongoing	On track	Ongoing
Review training for facilitators and utilize existing resources. Facilitators will complete training to support meetings that are trauma-informed, culturally responsive, LGBTQIA+ affirming.	07/2023	Updated from 07/2024 to 08/2024	Delayed	On track for revised date
Update and revise SPM and FTDM policies to include individuals with lived experience and stakeholder input. Process and procedure of placement education and referrals are established for 4.6, 4.7 and 4.8.	09/2023	09/2024*	On track	In progress
Communicate updated policy, procedures, and trainings to field staff through Community of Practice, Foundation of Practice, and field operations memos.	12/2023	Ongoing and reviewed annually	On track	Ongoing
Utilize Foundations of Practice drop-in sessions, training resources, and current quality assurance process for caseworkers and supervisors.	12/2023	Ongoing and reviewed annually	On track	Ongoing
Create workgroup of internal staff for feedback surrounding new contract and training.	4/1/2024	9/1/24	On track	In progress

Greyed out activities were completed in a previous semi-annual review period.

^{*}Date revised in a previous semi-annual review period.

Narrative Update

The Family Group Meetings system improvement is delayed due to the timing of funding from the legislature this past session related to establishing the contract with Evident Change and the additional FTEs, both of which are key components to updating and implementing the model. We are currently on track for the revised implementation dates.

During the 2024 legislative session, DCYF received funding for a Shared Planning Meeting Program Manager, a QA/CQI position, 10 facilitator positions and multiple trainer and supervisor positions. The SPM program manager will solely focus on shared planning meetings. They will be committed to policy, improving practice, and rolling out the new model and overseeing model fidelity. Five of the facilitator positions are immediately going to region 6. The remaining five are on hold as data is being pulled and analyzed. We also received funding to purchase and update the model for our family group meetings practice.

DCYF is finalizing a contract with Evident Change to update our model. The contract will include analyzing our current practice, providing training, and ensuring that youth voice is incorporated in SPMs. We anticipate that the contract with Evident Change will be finalized by September 2024. Once the contract is signed, program review and analysis will begin in October and training will begin once the practice review is complete. We are collaborating with Evident Change to create a facilitation guide for facilitators. We will update meeting guidance materials for families after the contract is finalized and training has begun.

DCYF program staff reviewed the SPM and FTDM policies for updates. We anticipate additional revisions may be needed as the work with Evident Change moves forward. Feedback gathered from the youth, stakeholders, the retention and recruitment team, and Evident Change will be incorporated into the final revisions of the policies. Rather than having multiple policy changes within a short period of time, we are creating a policy memo that will educate and advise staff on the immediate changes that will occur while the policies are being updated. The policy memo will be completed and disseminated to child welfare staff September 2024.

During monthly leads meetings the group reviews a current SPM and provides feedback on strengths, areas of improvement, and accuracy in documentation. We review specific cases as a team to review strengths and areas of improvement to work towards consistency in practice across the state. Beginning in July the Engagement program manager will pull a random sample of class member SPMs across the state to review for consistency in practice. Quarterly Community of Practice meetings continued to be held for facilitators across the state. The twice quarterly case reviews lead by the QA/CQI manager have not begun as the funding for the position was not available until July 2024. We have initiated the process to establish the position. The anticipated hire date is November 2024.

Supporting Documentation

• Evident Change TDM Proposal August 2024

4.12 Memoranda of Understanding (MOU) with Interested Local Hospitals

DCYF is working to develop a consistent communication and collaboration protocol for children and youth discharging from hospitals when their parents/guardians are unwilling or unable to take them home. In collaboration with partners from interested hospitals DCYF will develop a template Memorandum of Understanding (MOU) that establishes a communication and collaboration protocol to prevent the need for out of home placement through timely referrals for pre-placement and reconciliation services. Further, the availability of entering an MOU was communicated to the Washington State Hospital Association (WSHA) with regional contact names listed on the DCYF website.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
	08/2023	Ongoing	Complete	Complete. Process established to work with interested hospitals.
Partner with DCYF Contracts for signature of approved MOU.	09/2023	Ongoing	Complete	Complete. Process established to finalize agreements when they are reached.
	09/2023	Ongoing	Complete	Complete. Tracking system established.

Activity	Start Date	Planned Completion Date	Progress	Status
				There is no data to track yet.
Communicate availability of MOUs through WSHA.	07/2023	Complete	Complete	Complete
Implement communication plan.	09/2023	Complete	Complete	Complete. Initial communication has occurred, ongoing communication efforts will be needed.

Greyed out activities were completed in a previous semi-annual review period.

Narrative Update

Implementation of the framework to implement MOUs with hospitals is on track. To date, no hospitals have entered into an MOU. DCYF will continue efforts to establish MOUs and DCYF has developed and implemented a strategy to strengthen the consistency of child welfare practice related to calls from hospitals.

DCYF's Child Welfare Division identified Regional Hospital Liaisons (RHL). The initial Hospital Liaison meeting was December 1, 2023. This meeting established roles and responsibilities for liaisons to ensure consistent communication across the state. DCYF regional hospital liaisons have met monthly beginning in March 2024 and will continue to meet monthly through September 2024.

Extended negotiations with WSHA concluded March 2024. WSHA sent out the draft MOU template to hospitals in Washington state towards the end of March 2024. Efforts to implement this System Improvement will require ongoing communication strategies, including work with WSHA, directly with hospitals and with DCYF child welfare staff.

One hospital in region 1 requested a meeting with DCYF after receiving the email from WSHA. The RHL and DCYF Mental Health program manager met with them and answered their questions. The meeting went well, and the hospital is deciding if they want to engage in an MOU with DCYF.

Due to lack of hospitals expressing interest in an MOU, DCYF will be reaching out with a follow up email. Each RHL is compiling a list of hospitals in their region. The DCYF Mental Health program manager and the RHL will send communication to the hospitals in the regions; anticipated completion is the end of September 2024.

Statewide and regional Program Managers, RHL, statewide leadership, and regional leadership collaborated to develop a practice memo for child welfare staff to outline and communicate the

procedures for responding to intakes when parents are refusing to pick their children/youth up from the hospital. This guidance will support statewide practice consistency when DCYF receives a call from a hospital. This memo will go into effect September 1, 2024 and was sent to all of Child Welfare staff on July 25, 2024.

Supporting Documentation

- DCYF Practice Memo
- Hospital Memorandum of Understanding (MOU) Draft

4.12 Memoranda of Understanding (MOU) with Juvenile Courts

DCYF is working to develop a consistent communication and collaboration protocol for youth releasing from juvenile detention when their parents/guardians refuse to pick them up. The proposed MOU will establish a communication and collaboration protocol to prevent the need for unnecessary out of home placement through timely referrals for pre-placement and reconciliation services.

Report of Progress

Activities

Activity	Start Date	Planned Completion Date	Progress	Status
Planning meetings to determine next steps	09/2023	12/2023	On Track	Complete
Leadership decision	10/2023	10/2023	On Track	Complete
Plan for next steps	11/2023	12/2023	On Track	Complete
Contribution to DCYF bill analysis for 2024 Session relating to possible legal changes	01/2024	03/2024	Complete	Complete
Collaboration with Hospital MOU leads to develop and implement similar process, including drafting letters and reaching out to partners	05/2024	12/2024	On Track	In Progress
Prepare an issue briefing for Child Welfare Leadership Team	07/2024	11/2024	On Track	In Progress

Greyed out activities were completed in a previous semi-annual review period.

Narrative Update

Implementation of the framework for MOUs with juvenile courts is delayed. DCYF will continue efforts to establish MOUs and DCYF will develop and implement a strategy to strengthen the consistency of child welfare practice related to calls from juvenile courts.

Progress towards an agreed-upon MOU with Juvenile Courts was on hold for the duration of the 2024 Legislative Session due to proposed legislation from the juvenile courts. If the legislation had passed, it would have addressed the jurisdiction issue and removed the need for an MOU. However, that legislation did not pass out of committee. Juvenile courts did not reach out to DCYF to discuss the draft MOU further. DCYF has revised the activities to reflect our updated approach to making these MOUs available and supporting child welfare practice.

DCYF will move forward with the Juvenile Court MOU using the same process that the Hospital MOU team has used. In the upcoming period, we will present the plan to the Child Welfare Leadership Team and request that they designate staff to serve as Regional Juvenile Court Liaisons. We will draft a practice memo for the child welfare staff to understand how to respond to calls from juvenile courts regarding youth who have not been picked up. We will send letters and a copy of the proposed draft MOU to the Juvenile Court Administrators in all 36 jurisdictions reiterating the Department's willingness to partner with them regarding these youth and their families. Activities and timelines have been updated to reflect this work.

Supporting Documents

Juvenile Court Memorandum of Understanding (MOU) Draft

4.12 Youth Narratives, Supports, & Pre-Placement Contact

DCYF will create a formalized process for children and youth to review information that goes out to potential placements, create a narrative about themselves to share with potential placements, and have pre-placement contacts with potential caregivers and that will assist to preserve relationships where possible or to address grief and loss post transition.

Data

Data reporting for this system improvement will begin in the February 2025 semi-annual report.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
Policy identification for process	07/2023	03/2024	Complete	Complete – No policies need to be updated.
Develop policy and procedure language. Work with placement desk supervisors/Area Administrators placement desk workers, FTDM supervisors, Engagement PM at HQ and others identified by Child Welfare Field Operations Leadership to develop new or revise existing policies and procedures. Work with the policy unit and the CWFS program manager to make changes as needed.	10/2023	03/2024	Complete	Complete
Develop protocol for children and youth so that they have the ability to review and or create narratives about themselves for potential placements to review and be offered pre-placement contact with potential caregivers.	10/2023	03/2024	Complete	Complete
Messaging policy changes and protocols.	12/2023	03/2024	Complete	Complete - No policy updates are needed.
Determine the types of training for DCYF staff.	08/2023	03/2024	On Track	Complete. Training determined. Rollout will align with the phased implementation
Develop and implement training and resources.	08/2023	07/2024	On Track	Updated to align with implementation dates for protocol development in the Data Addendum
Train all parties in policy changes and protocols.	08/2023	Updated from 03/2024 to 02/2025	On Track	Updated to align with phased implementation outlined in the Data Addendum

Activity	Start Date	Planned Completion Date	Progress	Status
Training for staff implementing the System Improvement	10/2023	Updated from ongoing to 02/2025	On Track	Updated to align with phased implementation outlined in the Data Addendum
Determine the type of communication necessary for caregivers, youth, families and DCYF staff.	08/2023	03/2024	Complete	Complete. Initial communication determined. Will be reviewed and revised as needed.
In collaboration with DCYF Fiscal and Contracts sections, identify and develop processes and procedures necessary to support payments for preplacement visits.	10/2023	Updated from 12/2023 to 06/2024	Complete	Complete
Develop and implement communication about payment processes to staff and impacted individuals.	12/2023	07/2024	On Track	In progress

Narrative Update

Implementation of Youth Narratives, Supports and Pre-placement Contacts is on track.

During this review period the Referrals and Transitions Program Manager hired the Referrals and Transitions Program Consultant (RTPC). The primary focus for this new position, during the review period, was to learn about the requirements under this system improvement, to complete trainings, to develop resources, share information and develop systems to track outcomes and to develop connections with the regions.

Protocols

Following additional review, we determined that no policy revisions are needed to implement this system improvement. The protocols for all phases of implementation are completed and Phase 1 protocols go into effect on July 1, 2024. The phase one protocols have already been updated based on feedback from staff in the regions that had already started processes to gather youth voice and incorporate it into placement referrals. We anticipate more revisions to the protocols as we move through phase 1.

The protocols and supporting tools that have been developed for Phase 1 will be reviewed and considered for updates at the start of each subsequent phase. Comprehensive protocols and

resources will be finalized when the full implementation of the system improvement is achieved in February 2025.

Transition Support Funding

DCYF finalized the Referral and Transition Funding Protocol. Items funding may cover include travel costs, additional staffing and paying for two placements at the same time while visits are occurring. Information on how to access and receive approval for this funding has been developed. The fiscal team is developing the billing sheet and billing codes. In the interim, transition funds can be accessed through an administrative approval process. Information has been provided to the Intensive Resources Program Consultants and will be shared out widely when the final billing sheet and codes are in place.

Training

The plan for training was updated to align with the phased implementation outlined in the data addendum.

Initial training on the Phase 1 protocols for child welfare staff included meeting with the Youth with Complex Needs Program Manager and the Placement Desk Supervisors from region 4 and region 6 to review the requirements of the protocol and the process for gathering and tracking information.

The Alliance is in the process of updating in-service trainings for child welfare staff to include information on referrals and transitions that will be specific to Child Protective Services (CPS) Investigations/Family Assessment Response (FAR), Family Voluntary Services (FVS), Child & Family Welfare Services (CFWS) and Adoptions. The current dedicated foundational training for placement referrals is being updated to ensure that it reflects the need to have trauma-informed, strength-based referrals that focus on the supports that caregivers can provide to meet a youth's unique needs. Training will include the importance of gathering and including child and youth voice and developing referrals with an understanding that youth will have the opportunity to review them. In addition to the referral component of the training, there will be a section on the importance of transition planning that includes planning to maintain important connections for children and youth

Quality Assurance Activities

Child Information Placement Referral (CIPR)

In partnership with the D.S. QA/CQI Data Analyst, the RTPC developed a tool that can be used to review the CIPR, the document that caseworkers complete when a placement is needed. Staff will be able to use the tool to ensure referrals are strength-based and trauma- informed. The tool will also be used to complete reviews of samples of referrals to help gauge system

wide performance. During the next review period, the program staff will establish a process for selecting samples, completing reviews and reporting outcomes.

Feedback

A small workgroup made up of child welfare caseworkers, placement coordinator supervisors, meeting facilitators and members of the Placement Continuum team met to give feedback on the initial protocols. Feedback was also received informally from the Complex Placement Program Managers and Placement Desk Supervisors from region 4 and region 6. As the phases roll out, DCYF will develop and implement additional methods for feedback, including processes for capturing feedback from youth and caregivers.

Supporting Documentation

- Referrals and Transitions Training Plan
- Referrals and Transitions Communication Plan 2024
- Referrals and Transitions Phase One Protocol
- Referrals and Transitions Phase 2 Protocol
- Referrals and Transitions Phase 3 Protocol
- Referrals and Transitions Final Protocol
- Transition Funding Protocol
- Transition Funding Request and Approval Form
- Transition Funding Information Sheet
- Referrals and Transitions Information PowerPoint

4.13 Qualified Residential Treatment Program

Under the D.S. Settlement Agreement, effective January 1, 2024, DCYF will ensure that all children will have a Qualified Residential Treatment Program (QRTP) assessment prior to placement in a QRTP and every 90 days for the duration of placement in the QRTP.

Data

Quarter	# of Class Members	# with Completed Timely Assessments	% with Completed Assessments	# Who Qualify for QRTP	% Who Qualify for QRTP
01/01/2024 - 03/31/2024	62	60	97%	55	89%
04/01/2024 - 06/30/2024	87	85	98%	81	93 %

Data Source: QRTP tracking log. Count of class members may be duplicated across quarters.

DCYF exceeded the performance outcome of 90% of youth in QRTP being assessed as needing QRTP placement in the second quarter of the semi-annual review period. The Intensive Resources Program Consultants (IRPC) completed QRTP assessments for all class members in each quarter. Assessments were completed timely (within 90 days) at a rate of 97% and 98%. Reasons youth were in QRTP who did not qualify included: youth having an identified transition placement but waiting for things like school breaks, parents to get appropriate housing, ICPC and there not being a foster or relative or fictive kin placement available for step down.

Report of Progress

Activity	Start Date	Planned Completion Date	Progress	Status
Develop a process for qualified individuals doing QRTP assessments to have an opportunity to conduct quality assurance (QA) activities on each other's assessments to aid in consistency and interrater reliability. Qualified Individuals and their supervisors will meet every other week and review a case file and complete a Children's Functional Assessment Rating Scale (CFARS). They will share their scores and review the CFARS manual when there is a discrepancy.	04/2023	06/2023	Complete	Complete and ongoing
Develop a tracking tool and reporting system for Intensive Resources Program Consultants that includes the following information: CFARS scores, list of records reviewed, list of interviews with youth, families and important individuals and method of interview (in-person, virtual), strengths and needs of the child, child- specific short and long-term mental and behavioral health goals, discharge criteria for the youth to be transitioned to a nonresidential or transitional living program and progress towards meeting the discharge criteria.	04/2023	09/2023	Complete	Complete

Activity	Start Date	Planned	Progress	Status
		Completion Date		
Develop a method for collecting feedback from QRTP assessment participants that allows for them to give input on the process. Intensive Resources Supervisors will develop a process for reviewing feedback and using it to inform training needs and process improvements.	06/2023	09/2023	Complete	Complete and ongoing
Newly hired qualified individuals completing QRTP assessments have training in gathering youth and family voice.	08/2023	Ongoing as new staff are hired	Complete	Complete and ongoing
 Monthly supervisory level review of 1 QRTP assessment narrative, from each qualified individual to ensure that it demonstrates that it demonstrates an assessment of: Child, youth and family strengths and needs. The ability or inability to serve the child or youth in a less restrictive setting with supports and services. And that the assessments: 	08/01/23	11/2023	Complete	Complete and ongoing
Implement strategy for qualified individuals doing CFARS assessments to compare their scoring and logic to that of other qualified individuals.	08/2023	12/2023	Complete	Complete and ongoing
Implement new section within the monthly report with QRTP assessment information and recommendations.	10/2023	12/2023	Complete	Complete
Implement identified method for collecting feedback from QRTP assessment participants that allows for them to give input on the process.	10/2023	01/2024	Complete	Complete. Review and revisions will occur as needed
Collect and compare data on how each qualified individual scores on CFARS.	In process	Ongoing	Complete	Complete and ongoing
Continue work with the Partnership, Prevention and Services Quality Assurance/Quality Improvement team to create a process to review QRTP assessments and assessors.	In process	12/2023	Complete	Complete and ongoing
Ensure that current qualified individuals completing QRTP assessments have training in gathering youth and family voice.	07/2023	02/2024*	Complete	Complete

Activity	Start Date	Planned	Progress	Status
		Completion Date		
Identify training to grow child and family interviewing and engagement skills for qualified individuals completing QRTP assessments. Establish a written training plan for qualified individuals. Training Focus: • Engaging youth, families, and supports in a way that allows them to share their voice authentically and safely. • Trauma-informed • LGBTQIA+ affirming • Culturally competent and responsive	02/2023	06/2024*	Complete	Complete
Identify and implement policy revisions required for Behavior Rehabilitation Services Policy 4533 to include revised QRTP timelines, requirements to review primary source documents and interviews, preferably in-person, with children, youth, families, and other supports.	03/2023	Updated from 06/2024 to 10/2024	Delayed – in progress	On track for revised date

Greyed out activities were completed in a previous semi-annual review period.

Narrative Update

The implementation of the QRTP System Improvement is on track. Processes have been developed and implemented and will be used to measure ongoing progress and make improvements as needed to achieve the required outcomes.

DCYF implemented completion of QRTP assessments prior to entry into QRTP and every 90 days in January 2024. This update reflects performance in the first six months of implementation. Supervisors and IRPCs use the data to identify areas of focus to strengthen the process.

Q1: January 2024 – March 2024

IRPCs

- Saw 85% of class members in QRTP placements in-person. Youth declined 5% of the time.
- Completed QRTP assessments every 90 days 97% of the time.
- Consulted with non-professional supports, (parents, family, other non-professional support) 31% of the time.
- Consulted with a professional (Provider, SSS, MH provider, teacher, other) 95% of the time.
- Assessed QRTP discharged criteria 97% of the time.
- Assessed strengths and needs 98% of the time.

^{*}Date revised in a previous semi-annual review period.

- Assessed mental and behavioral health needs and goals 97% of the time.
- Assessed less restrictive settings 92% of the time.

Class members discharged to a less restrictive placement setting 35% of the time. 23% of the time we did not have adequate information, 13% of the time they discharged to a short-term placement, 16% of the time they discharged to runaway status, and 13% of the time they discharged to another QRTP.

Q2: April 2024 – June 2024

IRPCs

- Saw 75% of class members in QRTP placements in-person.
- Completed QRTP assessments every 90 days 98% of the time.
- Consulted with non-professional supports, (parents, family, other non-professional support) 39% of the time.
- Consulted with a professional (MH provider, teacher, other) 86% of the time.
- Assessed QRTP discharged criteria 95% of the time.
- Assessed strengths and needs 98% of the time.
- Assessed mental and behavioral health needs and goals 99% of the time.
- Assessed less restrictive settings 87% of the time.

Class members discharged to a less restrictive placement setting 35% of the time. 16% of the time we did not have adequate information, 17% of the time they discharged to a short-term placement, 16% of the time they discharged to runaway status, 13% of the time they discharged to another QRTP and 3% of the time they discharged to a higher level of care.

The Intensive Resources Program manager is completing the work to identify and implement policy revisions required for <u>Behavior Rehabilitation Services Policy 4533</u> and policy <u>4535</u> <u>Placement – Intensive Services</u>. The revisions to these policies will reflect the practice changes already implemented by the Intensive Resources Team.

Training

Training for supervisors and IRPCs this reporting period included an 8-day training for Motivational Interviewing, the Alliance Training and "Supporting LGBTQ+ Children, Youth and Families". In the next reporting period, IRPCs will complete Trauma-Informed Engagement training being offered by the Alliance and the 3-module Washington state training called "A Path Towards Equity."

Supervisors monitor training participation and completion to ensure current staff who are unable to participate in a planned session complete a future session and new staff complete the trainings as they are hired.

Quality Assurance Activities

During this reporting period several issues were identified and continue to be addressed.

- A data tracking system for all the youth visits was created and has been modified several
 times to better track future visits. IRPC's can now see when and where they are traveling for
 the next 2 years. This will help the IRPC's easily time their visits and continue to do this work
 without individual tracking.
- There are youth who have not wanted to have a visit with the IRPC or share input on their case. The IRPC's are asking the QRTP providers, prior to the scheduled visit, to ask all the youth in their program if they want to be seen. A youth can change their mind at any point. Some youth have declined to talk after previously agreeing; this has been noted after a youth has had a difficult day at school or in the program. In response to this the IRPC's are continuing to use developmentally appropriate engagement and respect the youth's choice not to meet.
- There are multiple cases where youth attorneys, caseworkers, other team members, or youth themselves, do not want to leave their QRTP placement, even when this level of care is no longer needed. The IRPC's are guiding conversations around step-downs to less restrictive settings.
- There are gaps in our information about our youth exiting QRTP. 10% of the time the IRPC did not collect the information. Youth listed with a discharge location of "other" was used 13% of the time in Q1 and 6% of the time in Q2. We will continue to work to better define our discharge options to reduce the use of "other".

Youth Survey

The IRPC team is utilizing surveys to reach out to youth and team members to get feedback about how they are being engaged in their case planning, Child and Family Team Meetings (CFTM) and QRTP assessment contacts. There has been limited participation from youth and the team continues to adapt how they share the survey to increase youth feedback. Eight youth responded and overall, the responses were positive. It has been determined that some of the questions do not provide the team with information that will help them identify and address areas of practice that can be developed. The team is working to review and update this survey.

Monthly supervisor reviews

With two exceptions, every IRPC had a QRTP assessment reviewed every month between January and June 2024. The exceptions occurred in January 2024 when two of the IRPCs did not complete a CFARS as none were due.

Monthly reviews by supervisors were used to consistently give feedback to each individual IRPC to improve the QRTP assessment as well as to enhance and shape practice. This feedback includes both positive notations and addressing areas for improvement. The monthly supervision reviews were for different youth each month. For regions with lower numbers of youth in QRTP, there will be repetition of youth in the next reporting period.

QRTP Assessment Tool

The narrative boxes on the QRTP assessment have been adjusted throughout this reporting period to ensure they are capturing necessary information. To ensure we are capturing the voice of non-professionals, including parents, the narrative boxes will be modified.

Inter-rater Reliability

The IRPC team continued to meet twice monthly to review and score a referral. One IRPC will present a completed BRS referral for the rest of the team to read and score prior to meeting as a team to discuss. The IRPCs rotate taking a turn at providing a referral. This inter-rater reliability work has improved practice and led to more consistent scoring. We are also working with the QA-CQI team to analyze scoring results from the last reporting period to identify differences in scoring so we can improve our processes.

Supporting Documentation

• QRTP Training Plan

Exit Procedure

In making a determination of substantial compliance, the Settlement Agreement specifies that the Court should consider the State's good faith efforts to implement the goals of the Agreement and four additional criteria detailed below.

45 (1) Children and Youth Served by EAHP, PTFC and Hub

Whether 90 % of eligible youth and children referred to or requesting services from System Improvements 4.6 Emerging Adult Housing Program, 4.7 Professional Therapeutic Foster Care and 4.8 HHM program statewide (in accordance with the access and eligibility protocols set forth in the Implementation Plan) are served within 60 days of request or referral.

Data

Emerging Adulthood Housing Programs

Class Members Served in Emerging Adulthood Housing Programs					
	Total Youth Age 16 17	Eligible Youth 7/5/2024	Current Class Members Served 7/2/2024		
Region 1	37	23	N/A		
Region 2	19	13	N/A		

Class Members Served in Emerging Adulthood Housing Programs					
	Total Youth Age 16 17	Eligible Youth 7/5/2024	Current Class Members Served 7/2/2024		
Region 3	20	15	N/A		
Region 4	31	17	2		
Region 5	33	19	N/A		
Region 6	61	35	2		
Statewide	201	122	4		

Programs have only been established in regions 4 and 6. Eligible youth are determined by taking the number of 16- and 17-year-old youth in class minus youth in kinship care, trial return home or identified permanent placements. As indicated in section 4.6 of this report, additional data regarding the 60 day referral timeframe will be provided as the array and capacity expand. Current capacity only meets a very small portion of the potential need.

Professional Therapeutic Foster Care

Class Members Served in Professional Therapeutic Foster Care					
	Total Children and Youth	Eligible Children and Youth 7/5/2024			
Region 1	148	48			
Region 2	79	25			
Region 3	71	22			
Region 4	126	37			
Region 5	112	25			
Region 6	230	47			
Statewide	766	204			

This program is not yet established so no eligible youth have been served. To determine initial eligibility for tracking purposes, DCYF included children and youth receiving BRS placement services, in hotels or leased facilities, or in a hospital in the current class count report.

Hub Homes

Class Members Served in Hub Homes					
	Total Children and Youth Fligible Children and Youth 7/5/2024				
Region 1	148	82			
Region 2	79	49			
Region 3	71	52			
Region 4	126	64			
Region 5	112	58			
Region 6	230	117			
Statewide	766	422			

This program is not yet established so no eligible children and youth have been served. To determine initial eligibility for tracking purposes, DCYF included the number of children and youth in class minus youth in kinship care, trial return home or identified permanent placements in the current class count report.

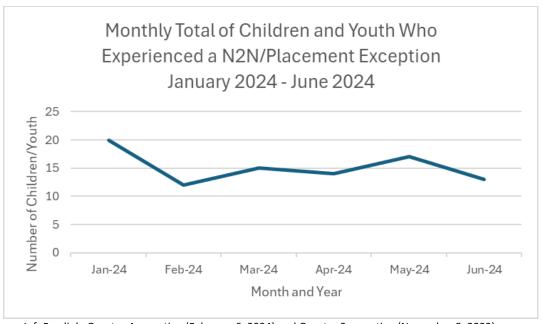
45(2) Elimination of Night-to-Night Foster Care Placements and Placement Exceptions

This exit criteria requires DCYF to eliminate the use of night-to-night (N2N) foster care placements and placement exceptions other than in the event the youth returns to or enters DCYF custody between the hours of 10 pm to 6 am and DCYF must use a placement exception for the remainder of the night. DCYF will eliminate the use of night-to-night foster care placements and placement exceptions by December 31, 2024.

Data

Count of Class Members in N2N/Placement Exceptions								
	Region							
	Region 1 Region 3 Region 4 Region 5 Region 6 Total							
July 2023 – December 2023	3 10 25 14 67 119							
January 2024 - June 2024	2	5	25	17	15	64		

Data Source: InfoFamlink, 2023 Quarter 3 (November 8, 2023) and Quarter 4 (February 6, 2024); 2024 Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024) and Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024) Children and youth may be duplicated across reporting periods.



Data Source: InfoFamlink, Quarter 4 reporting (February 6, 2024) and Quarter 3 reporting (November 8, 2023)

Note: Monthly counts represent the unique number of children experiencing a N2N/placement exception during the month. Children may be represented in more than one month.

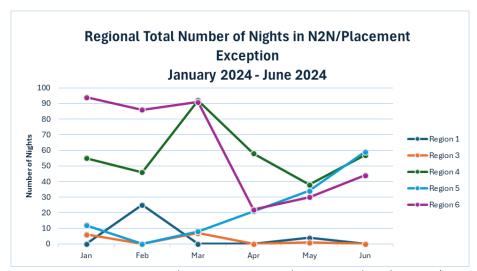
Type of N2N/Placement Exceptions Experienced by Children and Youth January 2024 June 2024							
Placement Type			Reg	ion			
	Region 1	Region 3	Region 4	Region 5	Region 6	Total	
Leased Facility	2	1	24	12	14	53	
Night-to-Night	0	1	2	8	3	14	
Placement Refused Hotel	0	1	1	1	0	3	
Placement Refused Leased Facility	0	0	5	5	1	11	
PlcmntExc-Hotel	1	3	1	1	1	7	

Data Source: InfoFamlink, Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024.) and Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024).

Note: Children and youth can experience multiple types of N2N/Placement Exceptions and may be counted in more than one placement type.

Total Number of Nights in N2N/Placement Exceptions January 2024 June 2024						
Placement Type	Region 1	Region 3	Region 4	Region 5	Region 6	Total
		Region 5				
Leased Facility	25	1	324	106	362	818
Night-to-Night	0	1	5	19	3	28
Placement Refused	0	1	1	1	0	3
- Hotel						
Placement Refused	0	0	5	7	1	13
- Leased Fac						
PlcmntExc-Hotel	4	11	11	1	1	28
Grand Total	29	14	346	134	367	890

Data Source: InfoFamlink, Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024.) and Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024).



Data Source: InfoFamlink, Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024.) and Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024).

From January 2024 to June 2024, the number of unique children and youth who experienced a N2N/Placement Exception decreased by 35%. Leased facility placements makeup 92% of the N2N/Placement Exceptions children and youth are experiencing. 2% of children and youth experience a N2N/Placement Exception due to declining a placement. 3% of children and youth experienced a hotel placement for the reporting period. Region 6 had a 53% decrease for the reporting period. Overall, from January 2024 to June 2024, there was a 4% decrease in total number of N2N/Placement Exceptions experienced by children and youth.

The distribution of nights is as follows:

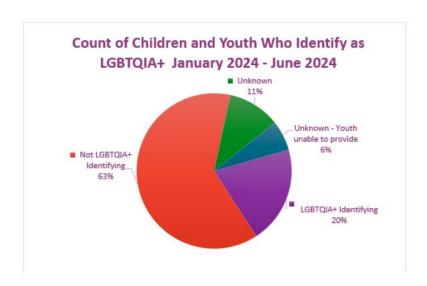
Distribution	Distribution of Nights January June 2024					
Range of Nights	Total Children/Youth					
1 to 2	18					
3 to 5	13					
6 to 10	9					
11 to 20	13					
21 to 30	4					
31 to 60	4					
61 to 91	2					
91 & up	1					
All	64					

Data Source: InfoFamlink, Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024.) and Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024).

Note: The number of nights represents the total number of nights from January 224 – June 2024, which may not be consecutive.

Of the 64 children and youth who experienced a N2N or placement exception from January 2024 to June 2024, 63% (40 children or youth) experienced ten nights or less and 17% (11 children or youth) experienced greater than 20 N2N or placement exceptions.

LGBTQIA+



Data Source: Regional monthly reports for January 2024, February 2024, March 2024, April 2024, May 2024, June 2024.

From January 2024 to June 2024, 13 children and youth (20%) identified as lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual (LGBTQIA+) and 40 children and

youth (63%) did not identify as LGBTQIA+. The LGBTQIA+ identity of the remaining children and youth, 4 (6%) are unknown as they were unable to report their status due to cognitive or developmental delays and 7 (11%) were unknown. In the previous semi-annual reporting period, there was a commitment to collect and evaluate data focused on children and youth LGBTQIA+ status with the goal to decrease the number of children and youth whose LGBTQIA+ status was unknown. There was an 81% decrease in the number of unknown children and youth LGBTQIA+ status from the previous semi-annual reporting period (36 children and youth) to the present semi-annual reporting period (7 children and youth).

Educational Status

Children and Youth Education Status January 2024 June 2024					
Education Status Number of Children Percentage of and Youth Children and You					
Enrolled/Participated in School	38	59%			
Enrolled/Refused to Participate	3	5%			
Enrolled/Unable to Participate	4	6%			
Due to Systemic Barriers					
Seeking GED	6	9%			
Not Enrolled	9	14%			
School Not in Session	4	6%			

Data Source: Regional monthly reports for January 2024, February 2024, March 2024, April 2024, May 2024, June 2024. Note: Participation in education is inclusive of pre-school and pre-kindergarten enrollment. Systemic barriers is inclusive of distance from school and staff support.

Children and Youth Education Format January 2024 June 2024					
Education Number of Percentage of Format Children and Children and Youth					
In-person	30	47%			
Virtual	3	5%			
Hybrid	3	5%			
Not Applicable	28	43%			

Data Source: Regional monthly reports for January 2024, February 2024, March 2024, April 2024, May 2024, June 2024.

From January 2024 to June 2024, 45 children and youth (70%) were enrolled in school, which includes four children and youth who were not participating due to systemic barriers and three children and youth who refused to participate. Of the three youth who were enrolled in school and refused to participate, one youth refused because they did not want to go to school when

they relocated, and the other two youth did not provide additional reasoning for their refusal. Of the four youth who could not participate due to systemic barriers, one youth was on a waitlist for transferring to online school, one youth was working with a Treehouse advocate for specific supports in attending school, and two youth were not a feasible distance to be transported to school. For the nine (14%) children and youth not enrolled in school, four youth were chronically on the run, two youth were refusing to enroll and participate in school, one youth was in detention, one youth was not enrolled prior to coming into care and then turned 18 years old, and one youth's family culture did not support them being enrolled in school.

Shared Planning Meetings

From January 2024 to June 2024, of the 36 children and youth required to have a Shared Planning Meeting (SPM) held within three business days of the fifth consecutive night, 35 (97%) were completed timely and one (3%) was completed late. The SPM was held one day late due to the youth experiencing a N2N or placement exception on a Friday night and not being able to schedule due to staffing issues. Of the 33 children and youth required to have a SPM every 10 business days until the youth is reunified or a long term placement is identified, 33 (100%) were completed timely. Of the 14 children and youth that required a SPM within two business days of their initial placement refusal, 11 (76%) of the SPM were held timely, 1 (1%) was late and 2 (14%) were not held. One SPM was held late due to staffing/coverage that did not have a facilitator available. Due to the missed SPM, there has been a process established within the region to ensure appropriate coverage is identified for future meetings. One of the SPMs not held was due to a SPM occurring four days prior which discussed placement options in anticipation of a placement disruption while the second meeting was not held as the youth was on the run.

Placement Refusals

From January 2024 to June 2024, there were 14 placement refusals between 13 unique children and youth. Nine (64%) of the 14 placement refusals were due to no access to phone or internet in the proposed placement. The remaining five placement refusals occurred due to wanting a long-term placement, wanting to stay in their current placement, level of restriction, not feeling comfortable with placement and an unknown reason. Eight (57%) of children and youth refused an EPS placement and three (21%) children and youth refused a group home. Of the remaining three children and youth, one refused a foster home, one refused a relative placement, and one placement refusal is unknown.

Report of Progress

Interim Benchmarks

Progress Toward Eliminating N2N or Placement Exceptions As of June 30, 2024							
	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Statewide Total
Interim Benchmark September 2023	2	0	2	15	3	32	54
September 2023 Actual	0	0	3	11	4	22	40
Difference	-2	0	+1	-4	+1	-10	-14
Interim Benchmark December 2023	1	0	1	12	2	28	44
December 2023 Actual	1	0	1	9	4	11	26
Difference	0	0	0	-3	+2	-13	-16
Interim Benchmark March 2024	0	0	0	8	1	21	30
March 2024 Actual	0	0	2	6	3	4	15
Difference	0	0	+2	-2	+2	-17	-15
Interim Benchmark June 2024	0	0	0	5	0	12	17
June 2024 Actual	0	0	0	6	5	2	13
Difference	0	0	0	+1	+5	-10	-4

Data Source: InfoFamlink, D.S. Monthly data reports: October 10, 2023, January 23, 2024, April 9, 2024, and July 8, 2024.

Activities

Activity	Completion Date	Progress	Status
Implement additional SPM/FTDMs for children/youth in night-to-night foster care and exceptions to placement.	Fall 2021	Complete	Complete. Staffings are ongoing as required.
Review procedures for case staffings including internal and external stakeholders for revisions and develop updated communications.	10/2023	Complete	Complete. Revisions as needed
Establish DCYF cross-system liaisons and develop and implement a communication plan for child welfare.	09/2023	Complete	Complete
Develop additional resources to meet intensive resource needs.	Ongoing	On track	Ongoing
Develop strategies for recruiting new providers and supporting existing providers to expand their service continuum.	10/2023	Complete	Complete. Implementation ongoing.
Develop consistent processes for engaging, onboarding, and supporting providers.	10/2023	Complete	Complete

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Activity	Completion	Progress	Status
	Date		
Establish specific caregiver recruitment strategies and	10/2023	Complete	Complete.
outcomes for adolescents and youth with high levels of need.			Implementation
			ongoing.
Establish a contract with an external entity to complete a	05/2024	Complete	Complete.
landscape analysis and develop recommendations for the			Strategy revised
intensive resources placement continuum.			
Establish statewide child welfare criteria and oversight process	09/2023	Complete	Complete
for night-to-night foster care placements and placement			
exceptions.			

Greyed out activities were completed in a previous semi-annual review period.

Narrative Updates

Activities Update

Placement Exception Task Force

During this review period, the Placement Exception Task Force completed electronic case reviews of children and youth who experienced more than 10 nights of N2N foster care placements or placement exceptions, continued to attend 5- and 10-day shared planning meetings, reviewed daily approval forms, met with placement and after-hours staff in each region to understand practice, strengths and challenges related to locating placements, and met with DCYF's Licensing Division (LD) leadership to identify areas where LD could support elimination of N2N placements and placement exceptions.

Task force activities for the coming review period include continued attendance at shared planning meetings and FTDMs, outreach to inactive foster parents to better understand barriers to accepting placement, and partnering with the Licensing Division to determine availability of foster parents on a voluntary no-referral (not taking placements) status. In addition, DCYF's QA/CQI team is supporting a targeted review of 5- and 10- day shared planning meetings focused on engagement with youth and families and documentation of plans and activities to remove barriers to placement.

Resource Development

Targeted Recruitment

DCYF's caregiver recruitment and retention team continues to implement targeted recruitment plans focused on increasing the number of placement resources for youth aged 12 years and older and for children and youth with complex developmental, behavioral health, and physical health needs. A targeted recruitment family (TRF) is a family willing to care children and youth who have these needs.

DCYF has seen a decrease in the number of prospective foster parents applying for a foster care license through DCYF's Licensing Division (LD). Work to understand barriers to the licensing process is underway. LD has partnered with the recruitment and retention team to create a process for engaging TRF who apply for a foster care license that will allow for increased engagement and an expedited process. The new process went into effect July 3, 2024, LD and the recruitment and retention team will monitor the process for efficacy.

Outcome and Data Analysis of the Recruitment Strategies

Success with respect to recruitment strategies can be difficult to ascertain due to a number of factors (i.e. using three databases to capture prospective foster parent information). To address this barrier and work within existing resources, DCYF developed a <u>specialized landing page</u> on the website that allows for additional data collection related to specific campaigns. DCYF launched the school recruitment landing page as an initial pilot. A unique URL and QR code were created and will be added to all publications for the School Recruitment Campaign [Foster the Future]. Targeted distribution of campaign materials will begin September 2024. Data will be pulled and analyzed following the distribution.

DCYF is using social media to reach a variety of communities across Washington state, through paid advertising and frequent content on the Future Foster Parents WA Facebook page. In partnership with the Children's Bureau, DCYF utilized a targeted Public Service Announcement on the need for teen resource families and will continue to use the video as part of the teen recruitment campaign.

DCYF's recruitment and retention team will continue to analyze data associated with the recruitment plans to determine effectiveness and success. This new data collection will provide a baseline for comparison in the future. Plans will continue to be updated and adapted as needed.

We continued to work with current providers and engage new interested providers in supporting and developing contracted resources to meet the needs of children and youth. DCYF continues to work with existing providers to adjust their capacity to meet the needs of specific populations and individual youth. Provider rates for Emergent Placement Services (EPS), which provides short-term emergent care for youth, have been a barrier to developing and retaining providers. The rate analysis completed for this service line demonstrated the need for an increase in payment of approximately \$4000/per bed per month. The legislature approved this increase in the 2024 legislative session and it went into effect July 1, 2024. It is anticipated that this increase will help to stabilize the service line and support development of additional providers. Contracts for EPS providers were updated to require them to have program policies allowing access to cell phones and technology. It is anticipated that this change will increase youth placed in these settings.

Child Welfare Practice

DCYF continues to hold SPM and FTDMs for children and youth with N2N foster care

placements and placement exceptions as reflected in the data above. Each region also maintains a structure to support practice and focus on youth with complex needs. This work supports the support and planning for youth in N2N placements and placement exceptions, but also the prevention of children and youth entering these placement settings.

DCYF continued the statewide review and approval process for use of N2N placements and placement exceptions throughout this last reporting period. Approval is required prior to all N2N placements and placement exceptions, regardless of the time of day the potential need is identified. The process has been revised to allow Regional Administrators to delegate final approval to after-hours administrators if the approval is needed after-hours, weekends or on holidays. Statewide program staff and regional leadership monitor documentation of efforts with follow up as needed. Progress and status is discussed in a monthly meeting with the Deputy Regional Administrators.

Practice Support

DCYF established the developmental disabilities (DD)/mental health (MH) cross-system program consultants in each region. We finalized an <u>informational publication</u> regarding the team was and it is being introduced and presented at regional all staff meetings. The team's participation in the all staff meetings will be completed by the end of 2024.

DCYF has continued to provide case staffing support for children and youth with complex needs in a variety of ways. Regional leads, DD/MH program consultants, and representatives from the Developmental Disabilities Administration (DDA) hold drop in "office hours" for staff consultation. The regions conduct child-specific collaboration staffings for children and youth with complex needs a regional level to problem solve and facilitate access to needed resources. These staffings include DCYF program staff as well as representatives from other agencies and programs. We continue to maintain the state-wide Multi-Systems Rounds (MSR) meeting if placement and resource needs are unable to be resolved at a lower-level. Frequency of these meetings has decreased due to the implementation of other processes to support children and youth with complex needs which have resulted in earlier resolution and identification of resources. The escalation process that includes DCYF and DDA includes regional staff and leadership and more issues are being resolved at the local and regional levels.

Landscape Analysis

DCYF used internal resources to identify current placement availability, utilization and home region for youth. This landscape analysis will be used to inform the development of therapeutic placements (QRTP, treatment foster care, in-home BRS and child-specific programming for children/youth with the highest level of need) and receiving care (temporary, short-term emergent placements).

Meeting the needs of Children and Youth in Placement Exceptions

DCYF continues to maintain practices and resources to meet the needs of children and youth who are in a placement exception. This past review period, DCYF centralized management of the leased facilities under one administrator to support consistency in supports, approach and practice.

Meals

Leased facilities have kitchens facilities on-site and meals are prepared at the facility. Special dietary needs as well as youth preferences are incorporated into meal planning. When children and youth are in hotels or being supervised during the day by DCYF staff, meals are provided from grocery stores that have hot bars or deli meals or from restaurants with healthier options such as salads, sandwiches. In limited circumstances or as a special treat for youth, fast food may be purchased. If a placement in a hotel is needed, staff attempt to use a hotel that has a suite set-up with some ability to cook meals/maintain food on site. Snack foods that are available may include fruit and vegetables, fruit cups, string cheese, trail mix, beef jerky, ramen and healthy beverages.

Activities

Children and youth in placement exceptions have a variety of activities that may be available to them depending on their age, length of stay, staff resources for supervision, and interest. Examples have included: art supplies, puzzles, games, trips to the mall, movies, walks, trips to a park or beach, playing basketball or baseball, going to the library, community cultural events, trips to museums, zoo visits, books/reading, video games, and other requested or suggested youth activities based on interest.

Accommodations

Information regarding special needs that a child or youth may have is obtained from the caseworker, school, Child Health and Education Tracking (CHET) report, Child Information and Placement Referral form (CHIPR) and other team members. This information is used to identify current supports and resources as well as anything specific that will need to be put in place while they are in the placement exception.

Crisis Response

Crisis plans are developed with the caseworker and members of the child or youth's therapeutic team. Staff providing supervision to youth are able to access local mental health crisis response teams, WISe and other therapeutic providers (either current or new referrals), Coordinated Care and other entities to support the youth.

Staff Training

DCYF staff supervising children and youth have historically had Right Response training. In addition, DCYF also has added SPEAR Care Personal Safety and Verbal Craft training. Training is

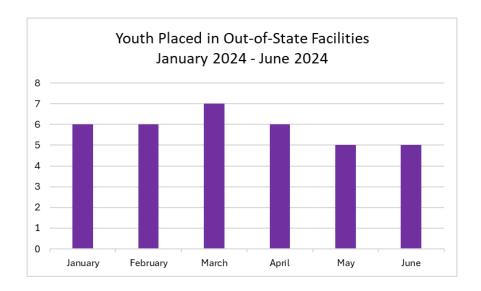
monitored through our training system by the staff's supervisor. Leased facilities have dedicated staff providing supervision. Children and youth in hotels are typically supervised by after-hours staff. Depending on youth characteristics and needs, staff who have not completed training may still supervise a child or youth in a placement exception.

45(3) Placement in Out-of-State Facilities

Under the Settlement Agreement, DCYF is required to report whether the number of placements in out-of-state facilities is kept to 10 or fewer.

Data

During this review period, the number of children and youth placed in out-of-state facilities continued to remain below 10.



45(4) Reduction in the number of children in the class

Whether DCYF as reduced the number of children under the age of eighteen who satisfy class member criteria by the target percentage established in the Implementation Plan.

Data

Reduction in Class						
	Baseline #	Target # Reduction	Target % Reduction	07.05.2024 Performance	07.05.2024 # Reduction from Baseline	07.05.2024 % Reduction from Baseline
Statewide	938	238	25.4%	766	172	18.3%
Age 0-10	386	78	20.2%	278	108	28.0%
Age 11-17	552	160	29.0%	488	64	11.6%

Data Source: FamLink 7/5/2024

DCYF continues to make progress toward the target reduction of 25.4%. For this reporting period, DCYF exceeded the target decrease for the 0-10 age group. The reduction from baseline for the 11-17 year-old age group more than doubled since the January 2, 2024 class report; from 30 youth and 5.4% in January to 64 youth and 11.6% for this reporting period.

Of the 766 children and youth in class on July 5, 2024, 70 or 9.1% were placed with their parents on a trial return home. The breakdown was 39 (14.0%) of the children 0-10 years old and 31 (6.4%) of the youth 11-17 years old.