



D.S. SEMI-ANNUAL REPORT

JULY 1, 2024 – DECEMBER 31, 2024



Washington State Department of
CHILDREN, YOUTH & FAMILIES

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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 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:
 - i. 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. Four ATLP programs were established as of the end of this review period; the YMCA, AKI, Dominion Academy, and Ohana Crisis Center. 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	Program	Bed Capacity	# of Class Members
1	Apple Brooke, LLC-in process	N/A	N/A
2	Ohana Crisis Center	5	2
3	TBD	N/A	N/A
4	YMCA	6	4
5	Dominion Academy	5	2
6	AKI	8	7

Data Source: FamLink DS class report 1/2/2025, Program Census 01/06/2025

As of December 31, 2024, DCYF has established 24 of the planned 34 ATLP beds. 18 of the 24 available beds were occupied as of December 31, 2024. Regions 2 and 5 are still in a ramp up phase for referrals and Region 4 has one vacancy. The data above reflects class members being served as of January 6, 2025. As of that date, 83% of the youth being served are or were class members. Participants of ATLP may have entered the program as class members. As participants stabilize and remain in the program, they may exit class member status but continue to receive services. 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

Activities

Activity	Target Start Date	Target 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
Contract recruitment for providers in regions 1, 2, 3 and 5	01/2024*	09/2024*	Complete	Complete
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.	01/2024	12/2024	Complete	Complete for ATLP. See EAHP section of chart for additional detail.
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

Establish and revise common ATLP Program Standards. Review contracts for revisions or updates to the statement of work.	03/2023	05/2024	Complete	Complete
Establish referral and acceptance processes to include timeliness, documentation, and CQI.	06/2023	06/2024	Complete	Complete
Partner with contracted providers to review, revise, and create and implement program materials.	09/2024	Ongoing	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.	01/2024	09/2024	Complete	Complete
The YYA Housing 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	Process established for ongoing review.
Emerging Adulthood Housing Program (EAHP)				
Establish and implement EAHP workgroup	04/2024	12/2024	Complete	Complete
Workgroup develops recommendations for new service model	04/2024	Revised from 12/2024 to 3/2025	Delayed	In process. On track for revised implementation date.
Review and evaluate statutes and licensing rules from WA and other states to identify potential statutory changes for the EAHP continuum and develop recommendations for the 25-27 biennium.	08/2024	08/2025	In Process	

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The EAHP system improvement is delayed due to the delay in launching the new ATLP capacity related to the licensing process in regions 2, 3 and 5 and challenges with identifying a provider in region 1. As of December 31, 2024, two of the four new providers for the ATLP received their licenses and are open to support youth. Ohana Crisis Center in Region 2 opened on October 24, 2024, and Dominion Academy in Region 5 opened on December 6, 2024. Apple Brooke, LLC has been identified as the ATLP provider in region 1. Apple Brooke, LLC has acquired a residential home, completed renovations, and is working with DCYF’s onboarding licenser to complete their licensing application. The estimated date for Apple Brooke, LLC opening is March 31, 2025. DCYF is identifying next steps related to serving eligible youth in Region 3.

Ohana Crisis Center has three youth in placement as of January 3, 2025. Dominion Academy has two youth in placement as of December 20, 2024, and will have a third placement January 13, 2025. The providers and the program manager are actively engaged in outreach, maintaining communication with local placement desks, and caseworkers to manage waitlists and ensure appropriate referrals.

As the number of class members has decreased, the number of ATLP referrals has decreased. Due to fewer referrals, the program manager reviews the class member list and collaborates with providers, placement teams and child welfare staff to identify youth the ATLP program can support.

While the ATLP program meets the needs of some 16- and 17-year-olds, its structure and programming require a level of independent functioning that may not be suitable for youth with high-level or complex mental health, behavioral health, or developmental needs. We are taking this information into account as part of the development of recommendations for expanding the EAHP continuum.

ATLP provider support meetings started September 2024 following a request by new providers, and occur monthly. Meetings are comprised of support topics for providers, resource sharing, and training. The meeting space is also utilized by new providers to triage situations and ask the more seasoned providers questions about daily operations. The support meetings have been effective in promoting collaboration between providers outside of the regular meeting times.

DCYF established the EAHP workgroup in August 2024. The workgroup is comprised of internal and external stakeholders. The workgroup meets bi-monthly to develop recommendations for ATLP and EAHP programming. Since August 2024, the workgroup has held six meetings, demonstrating a strong commitment to addressing the unique needs of youth ages 16-17. Key focus areas have included identifying the most pressing challenges for this age group, exploring service structures that balance autonomy with necessary safety nets, and determining the essential life skills that should be prioritized in programming to ensure a successful transition into adulthood. The workgroup has identified several key objectives to shape the future of services and supports:

Policy and Licensing Updates

- Assess necessary changes to contracts and WACs to better align facility licensing requirements with program needs.
- Revise WACs to allow for developmentally appropriate adolescent experiences, supporting healthy growth and development.

Program and Service Expansion

- Expand EAHP by creating a service model for youth with higher levels of need exiting placements such as therapeutic foster care, QRTP and CLIP. This service model would prepare youth for their transition into more independent living models, such as ATLP or RLSP.

Review Best Practices

- Review recommendations from the Group Care NRM Workgroup and adapt successful models from similar frameworks.

The workgroup is dedicated to strengthening and improving the existing systems, seeking immediate opportunities to enhance the current infrastructure. This approach aims to lay a stronger foundation, ensuring that when new service options are introduced, they are more likely to succeed. The workgroup has been reviewing recommendations from a variety of sources, including the *Independent Living Transition Planning Report (2023) and University of Washington Systems Assessments*. These sources include insights from lived experts, DCYF program leads, and service providers, and have provided an extensive list of recommendations. The workgroup is actively prioritizing these recommendations to create a stronger foundation for services and to inform the design of a new EAHP service model.

Quality Assurance

DCYF is developing a new monthly report in collaboration with providers that includes census, referral, and exit information, reasons for declining referrals, and other pertinent information related to the providers' programming. The new report will be implemented in February 2025 for all ATLP providers.

In July 2024, the ATLP program manager reviewed data for the time period of January 2024 to June 2024 with the YMCA and AKI to ensure quality assurance (QA) measures are being met.

Starting in January 2025, the program manager will complete data reviews quarterly. For each review, the program manager will aggregate the providers' monthly reports into quarterly summaries and present the findings to the providers during scheduled meetings. The program manager will highlight key trends, compare performance to previous targets, and include relevant monthly details. If necessary, the Program Manager will offer technical assistance to the programs.

Supporting Documentation

- ATLP Contract Statement of Work (SOW)

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. The timelines for the data for this system improvement will be updated based on the timing of establishing the contracts with CPAs. At this time, it is anticipated that data will be available for the February 2026 semiannual report.

Report of Progress

Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
Examine Professional Foster Parent models in other states and countries: <ul style="list-style-type: none"> o Read and review available research articles, data, and subject material o Meet with agencies providing Professional Foster Parenting services o Connect with child welfare professionals in states where Professional Fostering exists o Compile information 	06/2023*	08/2023	Complete	Complete
Hold a workgroup with WA State tribes: <ul style="list-style-type: none"> o Share program information o Hold a listening session with participants o Follow-up regarding interest in future meetings and program development 	04/2023	10/2023	Complete	Complete
Coordinate with other System Improvement Leads/Teams for program integration	02/2023	Ongoing	In Progress	Ongoing
Hold a workgroup with youth currently in DCYF care: <ul style="list-style-type: none"> o Share program information o Share information from interviews with current youth o Hold a listening session with participants o Follow-up with participants regarding interest in future meetings and program development 	05/2023	10/2023	Complete	Complete
Hold a workgroup with lived experience parents: <ul style="list-style-type: none"> o Share program information o Hold a listening session with participants 	05/2023	10/2023	Complete	Complete

Activity	Target Start Date	Target Completion Date	Progress	Status
o Follow-up with participants regarding interest in future meetings and program development				
Collaborate with the Hub Home Implementation Lead/Team, and the Alliance to identify areas of alignment and determine if existing trainings are sufficient or new trainings will be needed	02/2023	Ongoing	In Progress	Ongoing
Develop caregiver training recommendations based on collaborations with the Alliance, Hub Home Lead/Team, and information received through the stakeholder engagement process	07/2023	Ongoing	In Progress	Ongoing
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.	02/2023	10/2024*	Complete	Complete
Program Development Outline drafted and shared	07/2023	06/2024*	Complete	Complete
Communication to DCYF staff about upcoming changes and method for staff to provide feedback and ask questions created.	07/2023	Ongoing	In Progress	Ongoing
Establish ongoing PTFC implementation meetings/ workgroups including individuals with lived experience, providers, foster parents, and other stakeholders and using principles of co-design.	09/2023	12/2024*	Complete	Complete
Collaborate with other implementation teams to create a consistent training agenda across Implementation Plans.	07/2023	12/2023	Complete	Complete
Establish Training Plan	12/2023	06/2024*	Complete	Complete
Write and finalize new licensing rules for the professional foster care category.	07/2023	10/2024*	Complete	Complete
Communication to DCYF staff	01/2024	Ongoing	In Progress	Ongoing
Training on policy and WAC changes for DCYF staff	01/2024	01/2025*	In Progress	On Track
Contract drafted – Statement of Work	09/2023	09/2024*	Complete	Complete
Request for Application (RFA) process started pending finalization of licensing rules.	04/2024	Revised from 10/2024* to 3/2025	Delayed	
Once CPAs become contracted, establish monthly Professional Therapeutic Foster Care Provider Meetings occur and include: o Program Manager o CPA Providers	08/2024	Ongoing	In Progress	Ongoing

Activity	Target Start Date	Target Completion Date	Progress	Status
<ul style="list-style-type: none"> o Professional Foster Parents o Program Support staff 				
Establish targeted recruitment goals with individual CPAs as contracts are established: <ul style="list-style-type: none"> o Number and location of homes o House composition o Training plan and timeframes o Technical assistance and support 	08/2024	11/2024	Delayed	Delayed. Dates will be revised once the contract is finalized and approved.
Once CPA contract is in place, assess progress at 30, 60 and 90 days: <ul style="list-style-type: none"> o Develop and report recruitment strategies o Trainings complete o Check in with individual providers/provide technical support 	09/2024	02/2025	Delayed	Delayed. Dates will be revised once the contract is finalized and approved.

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The PTFC system improvement is delayed.

The PTFC contract is new and innovative. It is taking longer than anticipated to finalize the payment structure and contract needed to create a strong and robust contract and program. PTFC requires the CPA to provide therapeutic services in addition to coordinating services. This is a change for our contracted CPAs and requires our teams building the supports for services to consider these changes in contract development and rate modeling. We anticipate the Request for Application (RFA) will be posted by the end of March 2025. We will update implementation timelines to include contract execution and initiating services to young people and families once the posting is confirmed.

The PTFC work group met twice monthly from January to December 2024 to inform the development of the PTFC program outline, training recommendations for PTFC Parents and CPAs specific to PTFC, LGBTQIA+ affirming, trauma-informed, culturally responsive training recommendations, program communication to DCYF staff, and the PTFC contract statement of work (SOW).

The work group's recommendations will be used in communicating with DCYF staff when the program launches. The D.S. system improvement leads are collaborating to incorporate LGBTQIA+ affirming, culturally responsive, and trauma informed care trainings into the providers' series of

required trainings and are incorporating the recommendations made by the PTFC work group as part of this process.

The new and revised PTFC Washington Administrative Code (WACs) took effect on October 1, 2024. The changes were announced to Licensing Division (LD) staff in September and October 2024. Regional licensors who will be responsible for licensing PTFC parent homes received additional communication in October 2024. LD will provide additional communication and staff support as the program launches.

We have drafted PTFC guidance and it has been incorporated into the Behavior Rehabilitation Services (BRS) policy and procedures with input from the Intensive Resources Unit, Child Welfare leadership, and the DCYF Policy and Rules Office. We anticipate finalizing the BRS policy and procedures during the first quarter of 2025 with staff training to follow.

In spite of the delays to implementation, the program manager has continued to communicate about the program internally and externally. Communication occurred with CPAs regarding the WAC changes in September 2024. Ongoing communication with CPAs occurs monthly with updates to the program timeline, contract development, and implementation. Communication with DCYF and the child welfare placement supervisors began in October 2024 in collaboration with the leads for Mockingbird Hub and the EAHP. Plans are being made with the placement supervisors to meet with the placement teams to discuss the programs increasing stability within the placement continuum in the first quarter of 2025. Communication with Intensive Resources Program Consultants (IRPCs) and their supervisors occurred in June, August and November 2024 with program updates and opportunities to provide feedback, and to review the PTFC SOW draft. PTFC will be incorporated into the BRS referral and intake process once contracts are in place.

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. We will determine initial capacity once the Hub and satellite homes are identified and capacity 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 reporting date for data for this system improvement will begin in the February 2026 Semi-annual Report.

Report of Progress

Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
Complete required MFB pre-contracting activities.	07/2023	03/2024*	Complete	Complete
Convene a workgroup to develop the program's framework (task will be aligned with MBF Immersion Training).	09/2024*	12/2024*	Complete	Initial workgroup complete. Revisions are anticipated. See updated activities chart, below.
Establish quality assurance benchmarks that account for MBF fidelity markers and data.	09/2024*	12/2024*	In Progress	Revisions anticipated. See updated activities chart, below.
Determine Hub and Satellite Home selection criteria.	08/2024*	10/2024* Ongoing	In Progress	Revisions anticipated. See Updated activities chart, below.
Develop the training framework for HHG participants	09/2024*	12/2024* Ongoing	In Progress	Revisions anticipated. See Updated activities chart, below.
Statewide protocols: DCYF and the Hub Home to develop or identify partnerships with existing community organizations that provide support and services vital to the ongoing well-being and safety of young people placed in the HHGs and bolster their placement stability. Examples include CSEC, SUD, mental health, and organizations that serve young people with complex medical or developmental needs.	06/2025*	Ongoing*	In Progress	On Track Incorporated into updated activities chart, below.
Partner with Mockingbird Family to develop and execute an updated contract with provisions for three CPAs. (finalize the contract and out for bid)	02/2024	08/2024*	Complete	Complete
Develop and execute CPA Contracts (signed CPA contracts)	03/2024	03/2025*	Revised	No CPAs responded to the procurement. Activity

Activity	Target Start Date	Target Completion Date	Progress	Status
				removed. See updated activities chart, below.
CPAs recruit, identify, and train Hub Homes	06/2025*	12/2025*	Revised	No CPAs responded to the procurement. Activity removed. See updated activities chart, below.
Launch Hub Homes: Regional launch dates will vary depending on contracted provider's ability to recruit, identify, and train HUB providers. All regions will be available to launch Constellations once contract is in place and HUB providers are identified. DCYF Regional Mockingbird Liaisons will be responsible for HUB's launching and identifying a timeline.	06/2025*	12/2025*	On Track	On Track No CPAs responded to the procurement. Revised to reflect DCYF launched HHG's. No changes to timeline. See updated activities chart, below.

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

Due to the change in approach from CPA managed HHG to DCYF managed HHG, a revised activity timeline has been established in the chart below and will be used moving forward.

Revised Activity Timeline Effective January 2025				
Activity	Target Start Date	Target Completion Date	Progress	Status
Complete required MFB pre-contracting activities.	07/2023	03/2024*	Complete	Complete
Create a revised implementation plan with a new timeline that accounts for DCYF launched HHG's.	12/2024	3/2025		
Review and revise the program's framework with workgroup as needed based on revised implementation plan.	09/2024*	3/2025*		
Review and revise quality assurance benchmarks that account for MBF fidelity markers and data with the workgroup as needed based on revised implementation plan.	09/2024*	3/2025*		
Review and revise core Hub and Satellite Home selection criteria as needed based on DCYF launched HHG's. Baseline criteria will be reviewed/revise by this date. Additional selection criteria will vary based on the needs of the youth and community served.	8/2024*	3/2025* Ongoing		
Develop the training framework for HHG participants based on DCYF launched HHG's. Core HHG training that meets DS requirements and is currently available to all caregivers will be established by this date. Additional trainings recommended by the workgroup will be included in the framework, however, development of additional trainings will be ongoing.	9/2024*	6/2025* Ongoing		
Statewide protocols: DCYF and the Hub Home to develop or identify partnerships with existing community organizations that provide support and services vital to the ongoing well-being and safety of young people placed in the HHGs and bolster their placement stability. Examples include CSEC, SUD, mental health, and organizations that serve young people with complex medical or developmental needs.	06/2025*	Ongoing*		
DCYF recruit, identify, and train Hub Homes	06/2025*	12/2025*		
Launch Hub Homes: DCYF intends on training and launching HHG's as cohorts. This timeline reflects the launch of 6 HHG's (one in each region) that will serve young people that qualify as D.S. class members. In Region 4 an existing HHG may complete additional	06/2025*	12/2025*		

Revised Activity Timeline Effective January 2025				
Activity	Target Start Date	Target Completion Date	Progress	Status
training to provide the same level of care as the new HHG's rather than launching a new HHG to meet the need.				

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

Narrative Update

The HHM system improvement is delayed.

This system improvement is delayed from the timelines established in the implementation plan and data addendum due to delays in the contracting process, however the timeline to launch constellations remains on track for the revised dates from the last review period. DCYF and The Mockingbird Society (TMS) worked diligently this review period to complete all pre-contracting requirements and contract negotiations while working concurrently to draft the Child Placing Agency (CPA) contract. The Department of Enterprise Services (DES) required additional information through a Sole Source Justification (SSJ) as part of the approval process for the TMS contract which slightly delayed the timeline. The contract and SSJ were submitted in September and approved by DES on October 1, 2024.

Prior to the CPA contract going out for procurement the Mockingbird Family Program Manager reached out to CPAs, and presented at multiple CPA provider meetings to identify potential barriers and explore ways to incentivize the contract. At that time the biggest barrier identified was the lack of funding for CPAs. Assisting with recruitment to grow the number of CPA homes was identified as a possible incentive but it did not mitigate the lack of funding. Given the feedback provided by CPAs DCYF was able to adjust the budget to allocate startup funding for CPAs. The contract was revised to include this funding and the procurement for the CPA contract was posted the same day the TMS contract was approved.

DCYF anticipated executing signed CPA contracts in January 2025. DCYF did not receive any bids from interested CPAs within the 45-day procurement process and therefore we were unable to execute signed CPA contracts. DCYF reached out to CPAs after the procurement process to understand the barriers to bidding on the contract. Identified barriers included a lack of guaranteed ongoing funding, the requirement to have currently or previously held a BRS contract, inclusion of kinship caregivers in the model, two available bedrooms for respite, multiple

competing contracts out for bid or in the process of launching, and current agency and staffing resources limiting the area they would be able to cover. Due to the nature of the barriers, we determined that re-procurement would not result in a different outcome. As a result, we are moving forward with DCYF launched and managed Mockingbird constellations. We do not anticipate that this transition will significantly impact the implementation timeline as indicated above.

The TMS Immersion workgroup scheduled for September was rescheduled for November due to contracting delays. In order to minimize delays in implementation, DCYF utilized the time reserved for the TMS Immersion workgroup in September to host a DCYF workgroup in collaboration with TMS to bring together key participants to discuss program framework, D.S. requirements, goals, barriers and implementation timelines. TMS hosted the Immersion workgroup in November to train DCYF workgroup participants on the model and framework and discuss integration of D.S. settlement requirements, fidelity markers and next steps to move forward with implementation. DCYF plans to implement the HHG model utilizing the existing TMS model and core framework. DCYF has drafted updated protocols and procedures to embed in the framework that include D.S. requirements and drafted a tracking system that includes quality assurance benchmarks that account for fidelity markers and data. The intent was to reconvene workgroups in December and include TMS to share working drafts and elicit input and feedback however, since there were no CPA bids on the contract, DCYF postponed the ongoing workgroups to allow time to develop a revised implementation plan and timeline. TMS is partnering with DCYF to review and revise the current drafts while awaiting the workgroups to be rescheduled.

The DCYF provider training workgroup continued to meet regularly to develop a proposal for a DCYF supported training model for DCYF contracted placement providers and their staff that includes training that is trauma-informed, culturally responsive and LGBTQIA+ affirming. A communication plan is in place to share this information with providers. In addition, the Mockingbird program manager is partnering with CaRES and the Alliance to develop the training framework for HHG participants. The Alliance has provided the key components of the caregiver core training for the workgroup to review and is compiling a list of LGBTQIA+ affirming and accepting, culturally responsive and trauma informed trainings that are currently available to all caregivers, along with a list of additional training recommendations while exploring future opportunities for trainings that include coaching and mentoring. The workgroup will review the existing required training and additional trainings available and will use that review to identify any gaps and make training recommendations. Training recommendation from the PTFC caregiver workgroup will also be provided to the workgroup participants to review. The training framework will be centered around the relevant trainings that are currently available with a plan to phase in additional trainings identified by the workgroup. The training framework is expected to evolve with the expansion of the program.

The Mockingbird program manager continues to participate in the PTFC workgroup and meets with the PTFC and EAHP Program Managers regularly to discuss barriers, integrate services and streamline communication.

DCYF and TMS continue to be dedicated to statewide expansion of the HHM and are partnering to problem solve ways and minimize delays in implementation while the implementation plan is being revised.

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. Once new licensing regulations go into effect, these requirements will be reviewed and updated.

Seven specific areas will be addressed at a minimum:

1. Developmentally appropriate autonomy and privacy, including but not limited to developmentally typical access to mobile phones and support or resources necessary to engage in normal social activities with peers.
2. An obligation to facilitate connections to immediate, extended, and chosen family members in accordance with the youth's case plan.
3. A responsibility to support youth to remain in their school of origin in accordance with the youth's case plan.
4. Expectations to provide education, training, and coaching to families of origin and other potential long-term or permanent placements about how to best support the child.
5. Expectations to engage in service or discharge planning.
6. Standards for providing sufficient nutrition and satisfaction of dietary needs; and
7. Training requirements and expectations for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.

Report of Progress Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
Group Care NRM Preparation				
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
Develop and send participant survey for data collection	07/2023	08/2023	Complete	Complete
Early Rule Implementation				
Develop strategies for implementing updated practices, prior to NRM based on workgroup recommendations. The strategies will include communication with foster parents, staff, supervisors, and managers.	06/2023	08/2024*	Complete	Complete
Present implementation strategies to participant groupings for feedback and collaboration to develop updated practice recommendations.	09/2023	09/2024*	Complete	Complete
Send participant communication, and present in a meeting, notification of practice change recommendations based on collaboration efforts.	09/2023	09/2024*	Complete	Complete
Facilities, in collaboration with regional licensing, amend facility/agency procedures and implement new practices.	10/2024*	Ongoing	Complete	Initial communication complete. Ongoing review and revision to occur as needed.
Group Care NRM Development and Hybrid Negotiation				
Begin routine participant communication	07/2023	Ongoing	Complete	Communication processes established and will be ongoing
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

Activity	Target Start Date	Target Completion Date	Progress	Status
Write updated language for WAC that will not be subject for wholesale change during the NRM process.	07/2023	12/2023	Complete	Complete
Collaborate with participant groupings and facilitator group to design NRM process.	07/2023	09/2023	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
Establish Group Care NRM participant group meetings to: <ul style="list-style-type: none"> o Provide education on the NRM process o Identify specific WAC to target during in-person NRM process o Discuss key DS terms/concepts o Select NRM participants o Discuss proposed substitute WAC language 	08/2023	10/2023	Complete	Complete
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	Updated from 01/2025 to 01/2026	Delayed	
Group Care NRM In-person Negotiation				
Negotiate rule requirements and language with representation from the following participant groupings including Tribal partners, providers, individuals with lived experience and agency and community partners.	01/2024	09/2024*	Complete	Complete
Routinely document and report NRM progress.	01/2024	09/2024	Complete	Complete
Write updated rule language.	01/2024	Revised from 09/2024 to 11/2024	Complete	Complete
Launch updated facility staff e-learning for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.	01/2024	01/2026*	Delayed	
Develop LD and facility staff training for the interpretation and implementation of amended WAC rules.	01/2024	Revised from 09/2024 to Ongoing	In Progress	Ongoing

Activity	Target Start Date	Target Completion Date	Progress	Status
Amend DCYF service contracts and policy while collaborating with impacted departments to ensure alignment of rules and practice.	07/2024	Revised from 09/2024 to 01/2026	Delayed	On track for revised date
Finalize amendments to WAC rules.	07/2024	Revised from 09/2024 to 11/2024	Complete	Complete
Group Care NRM Rule Implementation				
Communicate final amended WAC, policy, and contract rules to impacted parties.	10/2024	Revised from 10/2024 to 11/2024	Complete	Complete
Establish monthly zoom provider meetings to discuss implementation strategies, provide change management and technical assistance, process questions/concerns, and provide notification/explanation of DCYF WAC/Contract/practice changes.	10/2024	Revised from 06/2025 to 12/2025	Delayed	
Finalize LD and facility WAC trainings.	10/2024	Revised from 12/2024 to 12/2025	In Progress	On track for revised date
Launch LD and facility WAC trainings.	04/2025*	Revised from 01/2025 to 04/2025	Not Started	
Collaboration between regional licensing and group care facilities to identify necessary facility policy and procedural amendments based on updated WAC, contracts and DCYF policy rules/language.	11/2024	Revised from 02/2025 to 12/2025	In Progress	On track for revised date
Foster Care NRM Preparation				
Procure facilitator.	10/2023	06/2024*	Complete	Complete
Develop communication plan.	01/2024	02/2024	Complete	Complete
Identify key roles for NRM process.	01/2024	02/2024	Complete	Complete
Establish NRM participant groupings.	01/2024	02/2024	Complete	Complete
Send foster parent and CPA survey for data collection.	01/2024	02/2024	Complete	Complete
Foster Care NRM Development & Hybrid Negotiation				
Begin routine participant communication.	03/2024	06/2026	In Progress	On track

Activity	Target Start Date	Target Completion Date	Progress	Status
Research and analyze federal and state laws informing rule requirements as well as best practice guidelines for foster care standards of care.	03/2024	09/2024	Complete	Complete
Write updated language for WAC that will not be subject for wholesale change during the NRM process.	03/2024	Revised from 09/2024 to 05/2025	In Progress	On track for revised date
Collaborate with participant groupings and facilitator group to design NRM process.	03/2024	09/2024	Complete	Complete
Establish workgroup to write proposed rules for a new licensing category to accommodate Professional Therapeutic Foster Care (PTFC).	03/2024	09/2024	Complete	Complete
Establish NRM participant group meetings to (Foster Care): <ul style="list-style-type: none"> o Provide education on the NRM process o Identify specific WAC to target during in-person NRM process o Select NRM participants o Discuss proposed substitute WAC language 	04/2024	09/2024	Complete	Complete
Foster Care NRM In-person Negotiation				
Negotiate rule requirements and language with representation from the following participant groupings including Tribal partners, providers, individuals with lived experience and agency and community partners.	10/2024	03/2025	In Progress	On Track
Routinely document and report NRM progress.	10/2024	06/2025	In Progress	On Track
Write updated rule language.	10/2024	06/2025	In Progress	On Track
Develop LD and facility staff training for the interpretation and implementation of amended WAC rules.	10/2024	06/2025	In Progress	On Track
Launch updated foster parent CCT training for providing culturally responsive, LGBTQIA+ affirming and trauma-informed care.	01/2024	07/2026*	Delayed	

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The Revising Licensing Standards System Improvement is delayed.

The Group Care NRM virtual negotiation sessions concluded at the end of August 2024. The completion of virtual negotiations was delayed for two months to allow the necessary time to fully negotiate some WAC where consensus could not be reached, as well as some new WAC created to meet several D.S. settlement requirements and youth-driven changes. To assist in completing the negotiation process, the NRM team hosted a series of Listening & Learning Sessions in early August with nine different participant groups to identify ways to incorporate flexibility in the new WAC to meet the individualized needs of all the groups. While necessary, this additional time resulted in delays to the timeline for final implementation.

Both group care and foster care NRM teams continue to engage in routine communication using multiple platforms such as email, GovDelivery, and website messaging. We continue to collaborate with internal partners and the Alliance to identify training to meet the core areas of trauma informed, LGBTQIA+ affirming, and culturally responsive care. Although the end date has been extended, this work is moving forward at a pace to meet the needs of licensees when the updated WAC goes live. The Group Care NRM team and members of the Office of Tribal Relations (OTR) hosted two NRM Tribal Roundtables in July and August in which attendees provided input on different group care WAC to help create more culturally and developmentally appropriate rules for tribal children placed in group care settings.

The Group Care NRM team met throughout the fall with Licensing Division leadership to resolve nearly 300 comments received on the draft group care WAC, from 99 different internal and external project partners. During this review period the Group Care NRM team also hosted two separate dinner and dialogue meetings with youth and parents with lived experience NRM representatives to celebrate their efforts and debrief the process to identify aspects that worked well and those that could have been improved to better meet the needs of the group.

In talking with a variety of licensees post-negotiations many of them have begun to update their internal policies and procedures to implement some of the new rules that are set to go live January 1, 2026. The NRM team continues to collaborate with DCYF program leads for internal policy and procedure as well as external contracts to identify areas needing amendments as a result of the new WAC rules. Although the target completion date has been delayed, this is an ongoing process to ensure congruency between policy and procedure, contracts, and WAC.

During this reporting period, in collaboration with both internal and external partners, the Group Care NRM team developed an eight-month training plan. This training plan incorporates a combination of in-person, virtual, and internet-based modalities and is scheduled to begin May 2026 and conclude December 2026. In October 2024, the Group Care NRM team presented this training plan to over 180 LD staff members at the Foster Care Town Hall Meeting and shared the

training plan with external groups via GovDelivery. In November 2024, the Group Care NRM team partnered with DCYF Communications to publish a new [Group Care WAC Training One-Pager](#) to the Group Care NRM website, which includes training details for potential attendees.

The foster care NRM team hosted six listening and learning sessions in July 2024 for foster parents, licensed caregivers, CPA's, tribal CPAs, and LD representatives to dig deeper into WAC that participants identified as needing change. In September 2024, the NRM team established a monthly group for parents with lived experience to go through WAC that will be negotiated each month. The foster care NRM team also hosted four dinner and dialogue events that occurred in September 2024 for community foster parents who indicated interest in being a representative for their region. During these events, foster parents were provided dinner, a presentation outlining the NRM process, negotiation schedule, and NRM principles, followed by a Q&A session. Additionally, monthly meetings with youth with lived experience began in October 2024.

Foster care negotiations kicked off the second week in October 2024 with an orientation facilitated by Public Consulting Group (PCG); negotiations are expected to conclude April 2025. Negotiation representation includes foster parents from each region, Child Placing Agencies (CPA), tribal CPA's, LD assessment, LD safety and monitoring, LD CPA licensors, LD Child Protective Services, youth with lived experience, and parents with lived experience. Once negotiations have concluded, the NRM team will host dinner and dialogue events for both youth and parents with lived experience.

Supporting Documentation

- [PCGs report on group care best practices](#)
- [Early Implementation Report](#)

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:

1. 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			
Report Date	Class Count*	Children/ Youth with Kin	Percentage
1/2/2025	590	181	30.7%
7/5/2024	696	234	33.6%

Data Source: FamLink DS Class Report

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

Class Members Placed with Licensed Kin			
Report Date	Class Count of Children/ Youth Placed with Kin	Children/ Youth Placed in Licensed Kin Homes*	Percentage
1/2/2025	181	123	68.0%
7/5/2024	234	121	51.7%

Data Source: FamLink DS Class Report

*Includes youth with kin who are fully licensed as well as kin who have initial licenses and are completing the licensing process

The kinship placements include 154 unique providers.

Class Members* in Pilot Only (Spokane and Vancouver Offices Only)	
Data Point in Time - December 31, 2024	
Class members Identified in the Pilot (Spokane and Vancouver)	95
Class members placed with kin in the Pilot Area (Spokane and Vancouver)	29
Percentage of Class members placed with kin in the Pilot Area (Spokane and Vancouver)	31%
Class members Engaging with KEU Staff at Pilot Sites (Spokane and Vancouver)	34
Percentage of children/youth served by KEU placed with kin	9%
Number of licensed kinship families caring for class members	3
Percentage of licensed kinship families caring for class members	9%
Percentage of children/youth with at least one connection	68%

Data Source: FamLink DS Class Report 1/9/2024, 7/5/2024, 1/2/2025

*Class count for this measure excludes children and youth placed in a trial return home with their parents. Family Finding Data Pull 1/15/2025.

This chart represents class members at KEU pilot sites. Identified offices were located in region 1 (Spokane Area) and region 6 (Vancouver Area), with a combined total of 95 class members. The current case count for the two sites with four staff are a combined 34 class members. Exclusion criteria included class members not placed with a relative or extended family member (kin). Through KEU engagement efforts, three youth have moved to kinship care.

Family Finding and Connections – Class Members Engaging with the KEU Staff	
(Pilot Only Spokane and Vancouver Offices)	
August 1, 2024 – December 31, 2024	
Type of Connection	Number of Connections
Emotional Support to Caregiver	34
Clothing/Phones	8
Transportation/Travel	25
Childcare	5
Mental Health Counseling for Youth	12
Evidence Based Program (i.e., Triple P, Incredible years)	3
Family Reconciliation Services (FRS)/ Family Preservation Services (FPS)	2
Guiding and supporting through licensing	4
Foster Care Maintenance (Monthly support for Licensed Caregiver)	20

Data Source: Program Manager Tracking Log.

The count of supports and resources provided to class members was based on a single count during the time period of KEU involvement. Some services, such as transportation, are ongoing and were counted only once, not each instance during that time. For ongoing programs like Triple

P, which spans 10 to 14 weeks, we counted only one instance over the period involved with the case. We are exploring additional methods to accurately count support and resources provided to families.

Report of Progress

Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
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
Develop communication plan	05/2023	09/2023	Complete	Complete
Finalize communication plan	05/2023	04/2024*	Complete	Complete
Implementation of KEU Pilot in 2 Regions	11/2023	08/2024*	Complete	Complete
Printing and dissemination of publications	11/2023	Ongoing	In Progress	On track
Assess pilot	10/2024*	03/2025*	In Progress	On track
Submit Decision Package as needed	04/2024	08/2024	Delayed	
Develop the family practice profile as described in the engagement strategy section to include the PCG/TOU feedback. Practice profile to include feedback from data gathered during KEU Pilot.	07/2024	08/2025	In progress	On track

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The KEU System Improvement remains on track with the revised completion dates noted in the February 2024 Semi-annual Report. The KEU pilots were established and have been serving youth in Spokane and Vancouver.

In August 2024, the KEU began serving identified class members in Spokane (region 1) and Vancouver (region 6). The current case count for the two sites is 34 class members combined. The KEU prioritized serving class members not placed with a relative or extended family member (kin) and not in a trial return home (TRH). The low case count and slow case assignment within KEU was a deliberate strategy as the KEU built their caseloads, with case assignments every 3-4 weeks. This timeframe allowed KEU staff to thoroughly immerse themselves in each class member’s file, explore past placements, and data mine for potential future opportunities. Although this process

is slow, it is methodical and thorough, ensuring each child or youth is comprehensively evaluated by one individual.

Kinship Engagement Unit (KEU) Pilot Activities

The KEU has been actively engaging with children, youth, and their families using a child-focused kinship engagement model. These activities reflect DCYF's commitment to a comprehensive and supportive approach in engaging with children, youth, and their families.

The key activities undertaken by the KEU staff include the following:

- Utilization of Family Connection Platform to create genograms, log engagement activities, and collaborate with other professionals. This technology aids in organizing and maintaining detailed records of family connections and interactions.
- Case file review to search for additional connections that may not have been previously identified. This ensures that all potential support options are considered.
- Engagement with DCYF staff and other supports to discuss cases and ensure they thoroughly understand the situation before engaging with families. This process is critical to avoid causing harm and making promises to families that cannot be fulfilled. KEU staff also attend staffings and shared planning meetings, such as Family Team Decision Making (FTDM) meetings, to ensure a cohesive and collaborative approach to supporting the child and family.
- Child and family interviews to identify individuals who can be part of their support network. These interviews are conducted in the youth's preferred manner, including phone, in-person, virtual, or text communication. The approach is trauma-informed and considers the unique cultural needs of each child.
- Engagement with identified supports to re-establish connections and offer support. This includes the identified support network, including individuals from prior failed or denied placements. The goal is to create a robust and reliable support system for the child.
- Serve as a contact for kin to help them navigate complex systems. This support includes functions outlined in sections 2-5 of the kinship engagement protocol.

Communications

Communication activities include:

Bi-Weekly KEU Pilot Staff Meetings to discuss project objectives, progress updates, feedback, and insights from team members. These meetings will transition to a weekly schedule.

Leadership Meetings with child welfare leadership at the pilot sites. These meetings are currently held bi-monthly with a plan to transition to a monthly cadence to maintain effective regional

involvement and support for the pilot implementation. Leadership has been exceptionally helpful in addressing regional questions as they arose.

Updates to the Kinship Caregiver Oversight Committee (KCOC). The KCOC is a statewide oversight board comprised of kinship caregivers (lived voice) and representatives from state and nonprofit agencies that serve kinship caregivers. DCYF made presentations to the KCOC in September 2024 and December 2024 to provide updates on the KEU pilot's progress and obtain valuable feedback.

Updates to Tribal partners will occur during biannual ICW subcommittee meetings, as applicable. Although the KEU was scheduled for presentation in August 2024, it was postponed. Future presentations will be planned to ensure Tribal partners are informed and engaged in the KEU pilot's progress and activities.

Practice supports

As part of the kinship practice supports, a specific Foundations of Practice (FOP) training session titled “Engaging with Relatives and Suitable Persons” was held on 8/13/2024. This session included a brief overview of the various units that assist in the search for relatives and suitable persons. Given that this is a small-scale pilot, the KEU is not extensively promoted statewide. Training for pilot site offices occurred on 9/16/2024 and 9/17/2024. DCYF Policy 4527, Placing with and Supporting Unlicensed Relatives and Suitable Persons was updated in July, 2024.

Publications

Final edits to the Kinship Publication were made in early December 2024. At the time of writing this report, the final proof was approved. Once that is complete the updated publication will be finalized. A Frequently Asked Questions (FAQ) document has been created to help families understand the role and activities of the Kinship Engagement Unit (KEU).

Data Validation and Challenges

KEU staff began entering data into Family Connections in August, ensuring critical data points are accurately tracked using the Family Connections mapping tool. This tool is used to track engagements and types of engagements with class members, families, and other individuals involved in the cases.

In November, after the first data pull, it was observed that the overall engagement numbers appeared inflated. Through a review of the data, it was determined that anytime a people search was conducted, all efforts downloaded into the database were counted as engagement types, regardless of actual contact. For example, simply finding a name counted as an engagement. DCYF defines engagement as either:

- Attempted and having a one-way communication (e.g., leaving a voicemail or sending an email), or
- Two-way communication (e.g., a conversation via phone, text, virtual meeting, or email).

The initial data showed over 4,000 engagement efforts for 30 class members, prompting a review with Connect Our Kids. We discovered that conflicting definitions and additional issues, such as data loss upon saving, duplication, and co-mingling with other contacts, were causing discrepancies. Connect Our Kids has been actively working to resolve these issues, and we will continue to monitor and update as needed.

KEU Pilot and Next Steps

The KEU pilot will end May 31, 2025. We will complete the assessment of the pilot and identify lessons learned during the next review period. This information will inform next steps for implementation and achieving the required outcomes under the settlement agreement.

There have been substantial changes in DCYF practice related to identifying, engaging and supporting kin since the settlement agreement was negotiated in June 2022. Focusing on integrating and aligning these activities, strengthening practice and developing processes for improved quality assurance will increase the likelihood of sustainable practice change regarding kinship identification, engagement and support that will improve outcomes for young people and their families and kin.

During the last review period, DCYF initiated a multi-divisional Kinship Support Project to better understand the relative search process with a goal of improving processes and informing IT changes. The initial phase of the project will wrap up in early 2025 and then we will develop additional projects and activities to strengthen practice. The intent of the project is to strengthen the support available to relatives and caregivers while streamlining processes that ensure the safety of children in care and the support of DCYF direct service staff.

Practices and resources to support kin identification, engagement and support

The following practices and resources continue and address or meet some of the required functions and activities required by the Settlement Agreement and are responsive to the stakeholder recommendations as outlined in the [Implementation Plan](#).

Collectively, these initiatives, resources and activities have significantly enhanced the timeliness, delivery, and support services provided to kinship caregivers. During the next review period, data regarding D.S. class members, data from the KEU pilots and data and details regarding the processes and procedures for the resources listed below as well as general practice expectations and feedback from the contracted stakeholder process completed in 2023 will be used to refine specific strategies to increase kin engagement and reduce practice gaps for D.S. class members.

Caseworkers' Role and Training: Caseworkers continue to serve as the primary relationship for the child, youth and/or family. They support identification of kin, provide initial and ongoing engagement, and share information about supports.

Shared Planning Meetings: Shared planning meetings, including FTDMs, continue to be pivotal spaces for identifying relatives and kin, engaging them as placements or to provide other supports and identifying areas where supports and resources are needed. These meetings involve parents, children, youth, caregivers, kin and other supports to plan for safety, permanency, and well-being. The work that will be done in the Family Group Meeting system improvement as well as the development of strategies to increase kinship engagement in shared planning meetings that will be done under the updated strategies for eliminating placement exceptions and night-to-night placements will strengthen the practice of engaging kin as placement as well as supports.

Relative Search Unit (RSU): The RSU identifies potential relative support for all children and youth under DCYF legal custody. Within 30 days of a child entering state care, the RSU sends letters to notify all adult relatives and documents responses in FamLink. The letter asks relatives about their interest in being a placement option as well as different ways they could provide support. It provides an opportunity to share information about additional family members. Additional follow-up is completed by caseworkers.

Relative Engagement Unit: The Child Welfare Division has 3 dedicated staff who provide statewide support for relative search and follow up in emergent situations or when there has been a placement disruption. These staff support caseworkers by providing direct outreach to relatives identified through the relative search. This resource is available to child welfare staff upon request.

Wendy's Wonderful Kids (WWK): WWK is a statewide, evidence based, child focused recruitment model for finding permanent homes for children in foster care with complex needs and few permanent options by utilizing an extensive family and record search which includes communication with the youth and all who have been involved with the family. This model emphasizes building connections for the child outside of placement. Many of the children and youth served by this program are D.S. class members.

Caregiver Supports: In January 2024, revised foster care rates rolled out for all licensed caregivers. It replaces the old four-level payment system with a seven-level one. The second phase of the Caregiver Support Project started rolling out this year DCYF and has added support and resource coordination for licensed and unlicensed caregivers, including case aide hours for caregivers of children and youth with higher needs. Caregiver Supports was implemented after the Settlement Agreement and Implementation Plan were established.

CaRES Program: The CaRES program provides peer support, system navigation, and information about available supports to all licensed and unlicensed caregivers. CaRES contacts kinship

caregivers with new placements, licensed caregivers when initially licensed and again six months post-licensure, and caregivers who inquire or are referred.

Licensing: The Licensing Division (LD) completes home studies for and licenses caregivers. DCYF has implemented an initial license for kin that allows them to start receiving foster care payments before they are fully licensed. DCYF’s new kinship licensing standards and Kinship Home Study will go into effect in June 2025. LD has two roles within the division that support kin.

Kinship Notification Unit (KNU): when a child or youth is placed with kin, the KNU receives notification. They reach out to the caregiver and provide assistance with initiating the home study process.

Licensors: Once the home study process has been initiated, the LD licensor assists the caregiver through the licensing process and completes the home study and license. Beginning in July 2025, the licensor will continue to hold the case as a maintenance case once the license is issued. In addition, licensors will specialize in either kinship or community foster care, allowing them to focus more fully on the unique needs and requirements for each population of caregivers. This will provide additional continuity of support for licensed kin.

Resource Information: DCYF has enhanced communication resources for kin. The [Kinship Caregivers webpage](#) is continuously updated for easier access to information, resources, and services. Publications are updated and expanded, available electronically and in print, to provide information about supports and resources at the time of placement. Publications are being explored to be more mobile-friendly. Resource information is also provided by caseworkers, CaRES, Caregiver Supports providers, licensing staff and during shared planning meetings.

Supporting Documentation

- [KEU Frequently Asked Questions for Family and Kin](#)

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:

1. 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;

2. 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;
5. 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 July 2024 through December 2024 there were 1031 shared planning meetings held for 558 unique class members. Data was collected and analyzed from DCYF’s FamLink reporting environment and includes all types of shared planning meetings that may have occurred during the reporting period.

Shared Planning Meeting Participation			
Metric	Total	Count	Percentage
Class members who attended at least one meeting (All ages)	558	220	39%
Class members ages 12+ years who were invited to at least one meeting	330	108	33%
Class members ages 12+ years who attended at least one meeting	330	208	63%
Parent of child/youth who is not legally free invited to at least one meeting	421	337	80%
Parent of child/youth who is not legally free attended at least one meeting	421	244	58%
Relative invited to at least one meeting	558	243	44%
Relative attended at least one meeting	558	222	40%

Data source: InfoFamLink, 01/06/2025.

Documentation of individuals invited to SPM is inconsistent and will be an area of focus for improving data integrity during the next review period.

Report of Progress Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
Monthly FTDM/SPM Leads meeting to support practice changes and identify barriers, quarterly Facilitator Community of Practice, Foundations of Practice.	04/2023	Ongoing	In Progress	On track
Update and revise SPM and FTDM policies to include individuals with lived experience and stakeholder input.	09/2023	Updated from 09/2024 to 09/2025	Delayed	
Process and procedure of placement education and referrals are established for 4.6, 4.7, 4.8. (Function 2)	9/2023	Updated from 09/2024 to 09/2025	Delayed	
Communicate updated policy, procedures, and trainings to Child Welfare field staff through Community of Practice, Foundation of Practice, and field operations memos.	12/2023	Ongoing and reviewed annually	In Progress	Ongoing review and revision to occur as needed
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 08/2024 to 07/2025	Delayed	
Submit Decision Package request for Supplemental Session	04/2023	08/2023	Complete	Complete
Utilize Foundations of Practice drop-in sessions, training resources for caseworkers and supervisors.	12/2023	Ongoing and reviewed annually	In Progress	Ongoing review and revision to occur as needed
Establish SPM quality assurance process	12/2023	07/2025	In progress	
Develop practice profile to support skill development for facilitators and caseworkers.	12/2023	Ongoing and reviewed annually. Updated to 12/2025	Delayed	Will start once policy review and revision is complete.
Create workgroup of internal staff for feedback surrounding new contract and training. **	04/2024	09/2024	Complete	Complete

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

*** New Activity identified in previous semi-annual review period.*

Narrative Update

The Family Group Meetings system improvement is delayed.

DCYF was delayed in finalizing the Statement of Work and the Sole Source Contracts Justification for the contract with Evident Change. These have since been completed. Due to the Washington state contracts freeze all contract requests must be reviewed and approved by a DCYF contract review panel. We have narrowed the scope of work covered by the Evident Change contract and are revising processes to utilize the internal program and QA/CQI resources DCYF has received for implementation.

In September 2024, the Child Welfare Assistant Secretary distributed a practice communication to child welfare staff that addressed expectations for inviting youth and their supports to all shared planning meetings, respecting youth's choice whether to participate or speak in shared planning meetings, eliciting and valuing 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, and honoring their preferences as much as possible.

In December 2024, the Engagement program manager led a Foundations of Practice (FOP) for child welfare staff that was also recorded for future viewing. FOPs are hour long virtual learning opportunities for staff to receive new information or refreshers. The FOP incorporated the Assistant Secretary's practice communication and also addressed talking about how relatives and kin were identified to participate, youth preferred pronouns, and family customs. During the FOP we reviewed a definition of Family Team as provided in the Implementation Plan, the five functions outlined in the Settlement Agreement, and resources for staff to gather more information. DCYF has established and filled the facilitator positions and trainer positions received during the last legislative session. We are finalizing the hiring for the Shared Planning Meeting program manager position. The QA/CQI position was posted, and interviews were held, however the preferred candidate took a different position and declined the offer. The position is being reposted, and interviews will be scheduled as soon as the candidate list is received.

The Engagement program manager has continued to facilitate monthly meetings with the SPM leads. During these meetings leads discuss SPM practice and have conversations around D.S. related topics, including implementing change in practice, how to include youth voice in meetings, and how to ensure documentation reflects the work that staff are doing. It is also a time for them to stay connected. The connections lead to cross region collaboration and support as well as improvement in consistency across the state. The leads provided invaluable feedback and insights regarding the FOP and the practice communication. The quarterly Communities of Practice (COP) have continued and are co-led by the Engagement program manager and a seasoned facilitator. Topics during this reporting period included fentanyl and SPMs, updates on Evident Change and transitioning youth.

At all upcoming COPs and leads meetings there will be a standing topic of trauma-informed care and quality assurance. Case examples will be discussed to show best practice in shared planning meetings. Best practice expectations will include relatives and other natural support included in the meetings as well as increased youth attendance and voice captured. Leads will review meeting notes to ensure best practice is being met and findings will be discussed at leads meetings. Documentation, to include who was invited to and attended meetings with a focus on family team members, will also be a standing agenda item at leads meetings.

DCYF has initiated a statewide workgroup to focus on implementation of new strategies to increase participation of relatives and suitable others at shared planning meetings. The Engagement program manager participates in this workgroup and the Shared Planning Meeting program manager will participate once they are hired.

DCYF had delayed implementation of some of the activities in anticipation of the Evident Change contract. Due to the contracting delays, the Department intends to complete the following activities over the next 6 months.

1. The SPM program manager will finalize a guide for facilitators who conduct shared planning meetings to improve practice and consistency in SPM delivery across the state. The guide will include guidance on how to engage youth, parents and other supports such as kin. It will also help staff understand the importance of holding meetings at times that are convenient for the youth and family and ensure the right people are present. Anticipated completion date is 4/2025.
2. The SPM program manager along with the training specialists will finalize a youth flyer, using youth friendly language, to help increase understanding of why these meetings are so important to youth and what their attendance and participation means to their case. DCYF will establish a process for sharing the flyer with youth. Anticipated completion date is 4/2025.
3. All SPM facilitators will complete trauma-informed practice training prior to 07/2025.
4. All SPM facilitators will complete racial equity training prior to 07/2025.
5. The new SPM program manager, along with the Programs and Practice leadership team, will complete a review of current policy, previously recommended changes and feedback from the contracted stakeholder feedback process and draft language to update policy and procedures as needed. Review completion date is anticipated to occur by 6/2025, and language to policy updated by 9/2025.
6. The dedicated SPM trainers will provide ongoing training to all SPM facilitators to improve practice and consistency. Training will include how to engage youth in shared planning meetings to ensure their voice is heard and incorporated into their case plan. Training will

also be provided on how to engage family and relatives and how to ensure we are meeting policy requirements. These trainings will increase statewide practice consistency.

7. We will increase data quality to reflect work being completed in SPM, including FTDMs. Data quality is dependent upon facilitator documentation in FamLink. During the next review period, facilitators will be provided with guidance and feedback regarding documentation to ensure it is completed consistently and accurately reflects the meetings and participants.

Quality Assurance Activities

Qualitative reviews of 36 shared planning meetings across the six regions occurred during this review period. Findings from the reviews indicate that staff are not documenting how and when participants are invited to shared planning meetings. The review also identified capturing youth voice, family/ kin voice and discussing available community resources and services as areas that need improvement. A reference guide is being developed for facilitators and child welfare staff that will address who needs to be invited to meetings such as members of the family team and how to document this, capturing the family team voice and providing more information about available services. The SPM program manager will hold a foundation of practice (FOP) utilizing these guides once they are finalized.

Supporting Documentation

- Child Welfare Practice Communication

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 Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
Communicate availability of MOUs through hospital association WSHA	07/2023	03/2024	Complete	Complete
Regional Hospital Liaisons and HQ Mental Health Program Manager will work together with local hospitals interested in an MOU to outline roles and responsibilities	08/2023	Ongoing	Complete	To date no hospital has expressed interest in entering into an MOU. Process established to work with interested hospitals.
Implement Communication Plan	09/2023	Ongoing	Complete	Initial communication has occurred, and ongoing communication efforts will be needed.
Partner with DCYF Contracts for signature of approved MOU	09/2023	Ongoing	Complete	Process established to finalize agreements when they are reached.
Track the number of hospital MOUs and data from the monthly reports provided by the Development Disabilities and Mental Health Liaison. Analyze data to identify trends. Work with system partners for service delivery and placement support	09/2023	Ongoing	Complete	Tracking system established. There is no data to track yet.

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The Memorandum of Understanding (MOU) with hospitals system improvement remains on track although to date, no hospital has elected to execute an MOU.

DCYF has developed a template Memorandum of Understanding (MOU) that establishes communication and collaboration protocols to prevent the need for out-of-home placement for the children and youth facing complicated discharges from hospitals and parents/guardians who are unwilling or unable to take them home through timely referrals for pre-placement and reconciliation services.

DCYF communicated the availability of entering an MOU to the Washington State Hospital Association (WSHA) that included DCYF regional and headquarters contact names. In turn, WSHA disseminated the communication, along with a letter from Secretary Ross Hunter to hospitals throughout the state of Washington. To date, no hospitals have entered an MOU.

Despite the lack of initial engagement by hospitals or WSHA, DCYF has continued efforts to establish MOUs with individual hospitals while simultaneously developing and implementing a strategy to strengthen the consistency of child welfare practice related to referrals and contacts from hospitals regarding children and youth who were experiencing complications in discharge. DCYF's Child Welfare Division Regional Hospital Liaisons (RHL) along with headquarters staff created a contact list of each hospital, emergency room, and inpatient treatment facility within the state of Washington that could have potential interaction with children and youth. The RHL's have made contact with each of these facilities in efforts to discuss the MOU. Additionally, the RHL's and program managers have been working to provide additional updates to hospitals regarding regional and statewide contact information and updated DCYF practices regarding referrals and staffing options for children/youth experiencing complications in hospital discharges.

To further address consistent protocols and communication, Statewide and Regional Program Managers, RHL's, 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. The guidance supports statewide practice consistency when DCYF receives a call from a hospital. This memo went into effect September 1, 2024.

RHL's and program managers have partnered with the DCYF Integrated Systems of Care 1580 Multisystem Rapid Care Team to participate in weekly meetings with each Managed Care Organization (MCO) to staff individual children/youth who are experiencing complications in their hospital discharge plan. For children/youth experiencing complications in their discharge DCYF has initiated individual staffing's to include utilization of the 1580 Staffing Procedure, Shared Planning Meetings, Family Team Decision Meetings, and individual provider meetings. These staffing's include parents/guardians, the child/youth when appropriate, MCO staff, Health Care Authority (HCA) staff, Developmental Disability Administration (DDA) staff, DCYF staff (included assigned caseworkers, supervisors, regional and statewide program managers), involved providers, and hospital staff. The focus of these staffing's is to eliminate barriers to discharge and to ensure adequate services are in place to assist the child, youth, and family in successful reintegration into their communities.

Supporting Documentation

- [Final Memo: Re Intake Decision Screening](#)
- [Safe and Appropriate Discharges](#)
- [WSHA Second Contact Attempt Letter](#)

- WSHA Contact Attempt from DCYF Secretary

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	Target Start Date	Target Completion Date	Progress	Status
Planning meetings to determine next steps.	09/2023	12/2023*	Complete	Complete
Leadership decision	10/2023	10/2023	Complete	Complete
Plan for next steps	11/2023	12/2023	Complete	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 a similar process, including drafting letters and reaching out to partners.	05/2024	12/2024	Complete	Complete
Prepare an issue briefing for Child Welfare Leadership Team	07/2024	11/2024	Complete	Complete
Implement Communication Plan	12/2023	12/2024	Complete	
Partner with DCYF Contracts for signature of approved MOU (36 sets of signatures – WA has 36 independent juvenile courts)	09/2023	12/2024	Complete	MOU templates are available if a juvenile court is interested in executing the agreement
Track of the number of MOUs with juvenile courts and monitor monthly reports. Analyze data to identify trends and work with system partners for service delivery and placement support.	12/2023	Ongoing	Complete	Tracking system established. There is no data to track.

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The MOU with Juvenile Courts system improvement is on track.

DCYF has developed an MOU template and reached out to engage with juvenile courts to discuss and execute agreements. To date, no juvenile court has entered into an MOU with DCYF.

Over the summer, the MOU language was revised and letters were prepared that mirrored the MOU developed with the hospitals, for consistency in Department agreements with partners.

Child Welfare leaders identified the designated staff who would be the point of contact for each region. MOUs for all the juvenile courts were updated to include contact information for the appropriate regional liaison for each individual court. Child Welfare leadership disseminated a memo to all child welfare staff providing an overview of the practice memo and its requirements. There will also be a session scheduled for staff who have questions about the process and how to manage requests that they receive from juvenile courts. DCYF has committed to taking the actions identified in the MOU regardless of whether there is a signed MOU in place.

Because there is no single entity that has oversight of all juvenile courts in the state, personalized letters were prepared for all juvenile court administrators (JCAs) that provided an overview of the MOU background and DCYF agreements. The personalized letters and a copy of the MOU were sent via email to each juvenile court administrator in December 2024. Five of 33 JCAs responded to the email. Three stated that they were not interested in signing the MOU as written.

A letter to the Washington State Juvenile Court Administrators (WAJCA) association was prepared that outlined the process. The letter was sent on behalf of the DCYF Secretary in December 2024. We received a reply from the WAJCA president that association would discuss the proposal at their January 2025 meeting and respond as a group at that time.

Supporting Documents

- [Letter to WAJCA](#)
- [Letter to JCA](#)
- [Draft MOU](#)
- [Letter to CW Staff](#)

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, have pre-placement contacts with potential caregivers and assist to preserve relationships where possible or to address grief and loss post transition.

Data

Youth Narratives and Referral Review July 2024 – December 2024					
Metric Measured	Total Eligible Children/Youth	Total Offered	Percent Offered	Total Participated	Percent Offered Who Participated
Children/Youth 5+ with opportunity to develop information for referral	39	19	49%	14	74%
Youth 12+ with opportunity to verify referral information	30	17	57%	8	47%

Data source: Referrals and Transitions Log

Children and Youth Transition Planning Metrics July 2024 – December 2024					
Measurement	Total Eligible Children/ Youth	Total Offered	Percent Offered	Total Participated	Percent Participated
Pre-Placement contact between youth and potential caregiver	46	40	87%	30	75%
Plan to preserve relationships	46	40	87%	15	33%
Plan to address youth's grief and loss	46	40	87%	2	4%

Data Source: Referrals and Transitions Log

Data Narrative

During this review period, the phased implementation included children and youth who had five or more nights of placement exceptions, were in QRTP placement and ready to discharge or were in short-term placement. There were 67 class members who met these criteria and 46 of them qualified for referral and transition support. Those that did not qualify were transitioning to a parent, remained in their placement or were not ready to step down from their QRTP. Of the 46 children and youth who qualified, 39 of those youth qualified to add voice to their referral. The seven that did not were transitioning to a placement that did not require an updated placement referral. Of those 39 youth, 30 were age 12 and over and qualified to be offered the opportunity to review their referral. All 46 children and youth qualified for transition planning supports.

DCYF learned a great deal as the phased implementation of referral and transition supports launched during this review period. The planned implementation included the Referrals and Transitions Program Consultant (RTPC) completing the work with children and youth. Some young people did not want to work directly with the RTPC, which meant relying on others to do the work and report on the activities. Continued engagement with caseworkers and shared planning meeting facilitators is a top priority to ensure class members are offered timely referral and transition supports.

Opportunity to Add Voice: 20 youth were not given the opportunity to add voice to their referral. Five youth declined the opportunity. Of the 20 not given the opportunity; 3 were on the run, 7 were not developmentally able to participate, 2 youth ended up not having a referral generated, and caseworkers did not respond in time to allow youth voice to be added for 8 youth.

Referral Verification: Nine youth who should have been offered the opportunity to verify the information in their referral were not given the opportunity. The others declined or it was determined that they were not developmentally able to review, or it would not be in their best interest.

Transition Supports: Four young people were not offered transition supports. Based on the data, DCYF will update the way we ask about how grief and loss supports were discussed. Our current information does not reflect planning efforts but instead when formal grief and loss supports were accessed.

Report of Progress Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
Develop protocol (policy & procedure) for children and youth so that they have the ability to review and or create narratives about themselves and be offered pre-placement contact with potential caregivers.	10/2023	03/2024*	Complete	Complete
Training for staff implementing the System Improvement.	10/2023	02/2025*	In Progress	On track
Develop policy and procedure language. o 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. o Work with the policy unit and the CWFS program manager to make changes as needed.	10/2023	03/2024	Complete	Complete
In collaboration with DCYF Fiscal and Contracts sections, identify and develop processes and	10/2023	06/2024*	Complete	Complete

procedures necessary to support payments for pre-placement visits.				
Develop and implement communication about payment processes to staff and impacted individuals.	12/2023	07/2024*	Complete	On going
Messaging policy changes and protocols	12/2023	03/2024	Complete	Complete
Determine the types of training for DCYF staff.	08/2023	03/2024	Complete	Complete
Develop and implement training and resources.	08/2023	07/2024	Complete	Review/Update as needed
Train all parties on policy changes and protocols.	08/2023	02/2025*	In Progress	On Track
Determine the types of communication necessary for caregivers, youth, families and DCYF staff. (Initial communication determined. Will be reviewed and revised as needed.)	08/2023	03/2024	Complete	Complete
Program Launch.	04/2024	07/2024	Complete	Complete
DCYF will develop and implement a quality assurance process that will assess the impact of this process for youth and caregivers. The process will include feedback from young people and caregivers.	07/2024	Ongoing	Complete	The QA process has been developed and implemented. It will be reviewed for updates and revisions as needed

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

Phase 1 and 2 of implementation were completed and phase 3 is in process. Full implementation is on track to begin February 2025. The phased approach has allowed DCYF to start offering targeted referral and transition supports to children and youth while evaluating and updating processes based on what we learned from implementation.

Quality Assurance Activities

The Child Welfare Referrals and Transitions Advisory group continued meeting to shape and revise the procedures that guide this work. Workgroup members include child welfare placement team representatives, child welfare program managers, child welfare supervisors, FTDM facilitators and those facilitating staffings for youth experiencing placement exceptions. They shared feedback that youth expressed a desire to choose and know the people working with them on their referrals. This is reflected in the most recent version of the procedures and the shifting role of the RTPC.

The Alliance completed updates to the Referral eLearning and that training is now active. A young person viewed the training and provided an impactful video segment that is included in the training. All current social services specialists have been assigned this training, and all new social service specialists will complete it as part of their core training beginning in January 2025. The RTPC has set office hours for anyone needing individual support. The RTPC has also offered and provided all-staff trainings by office and region.

Transition funding is in place and utilization is low but increasing. It has been primarily accessed by youth transitioning from a Behavior Rehabilitation Services (BRS) placement to support paying two providers at the same time or to pay for duplicative services to support a transition home. DCYF has implemented payment codes to allow utilization tracking and we will be able to report on in the next semi-annual report.

Monthly, the RTPC is reviewing placement referrals of class members who have experienced a placement move and referrals where a class member has added their voice to ensure that it has been included. When full implementation occurs, 8 referrals, 4 for each category, will be reviewed each month. The system improvement lead will work with the RTPC and the Referrals and Transitions Advisory group to establish a feedback process for the reviews.

The system improvement leads for Referrals and Transitions and Shared Planning Meetings are partnering to share information and ensure that FTDM facilitators are prepared to support caseworkers in their work to support strong referral and transition practice. The RTPC is working with the Intensive Resources Program Consultants (IRPC) to identify youth in QRTP who are ready for discharge transition support and ensure it is provided. A partnership with NW Adoption Exchange has been started to help youth who are legally free class members in a QRTP and nearing discharge to have support in developing a written or video narrative to share with providers.

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 %
07/01/2024 - 09/30/2024	75	71	95%	67	89%
10/01/2024 - 12/31/2024	84	83	99%	70	83%

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

QRTP Assessment Trends January 2024 – December 2024				
Measurement	Q1 Jan-Mar 2024	Q2 Apr-June 2024	Q3 July-Sept 2024	Q4 Oct-Dec 2024
In-person Contact with Class Members in QRTP Placement	85%	75%	73%	81%
QRTP Assessments Completed Every 90 Days	97%	98%	95%	99%
Consulted with Non-Professional Supports (parents, family, other non-professional)	31%	39%	50%	54%
Consulted with Professional (Provider, SSS, MH provider, teacher, other)	95%	86%	100%	100%
QRTP Discharge Criteria Assessed	97%	95%	95%	95%
Strengths and Needs Assessed	98%	98%	97%	100%
Mental & Behavioral Health Needs & Goals Assessed	97%	99%	96%	100%
Least Restrictive Setting Assessed	92%	87%	91%	94%
Positive Discharge	35%	35%	53%	50%

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

Data Narrative

Of the 14 youth who were in QRTP during this review period who did not qualify for that level of care, 9 had an identified discharge within 90 days, 4 of the youth are ready to step-down but a less restrictive placement has not been identified, and in one case the Department was court ordered not to move the youth from the QRTP placement. That youth has since successfully transitioned to a less restrictive placement.

Intensive Resources Program Consultants (IRPC) continue to focus on engaging parents, relatives, kin and others close to the youth and family (non-professionals) as part of the QRTP assessment process. There was an increase of over 20% in this category in 2024. Strategies to continue to engage this group will be developed, implemented and reviewed during the coming review periods. This positive increase is likely due to several factors. The IRPC’s have been working closely with providers, ensuring they understand and support the expectation that family be involved in every child and family team. The IRPC’s have also been encouraging child welfare staff to include all family and supports in the youth’s team. The QRTP assessment was updated late in the second quarter of 2024 to better capture non-professional involvement.

Positive discharges include, return home, kinship care, licensed foster care, Developmental Disability Administration (DDA) settings, and independent living situations. The other discharge types include detention, on the run, other QRTP’s, and short-term emergent placements. The Intensive Resources Program Manager and Program Specialist continue to work with providers to ensure they have the training and resources to support youth and to support positive discharges.

Report of Progress Activities

Activity	Target Start Date	Target Completion Date	Progress	Status
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	10/2024*	Complete	Completed. Policy and procedure changes are in practice awaiting finalization. The procedures have been updated, are in practice and will be finalized w/policy.
Identify trainings to grow child and family interviewing and engagement skills for qualified individuals completing QRTP assessments. Establish written training plan for qualified individuals. Training Focus: o Engaging youth, families and supports in a way that allows them to authentically and safely share their voice	02/2023	06/2024*	Complete	Complete

Activity	Target Start Date	Target Completion Date	Progress	Status
<ul style="list-style-type: none"> o Trauma-informed o LGBTQIA+ affirming o Culturally competent and responsive 				
Continue work with the Partnership, Prevention and Services Quality Assurance/Quality Improvement team to create a process to review QRTP assessments and assessors.	08/2023	12/2023	Complete	Complete
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
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	Ongoing review and revision to occur as needed.
Ensure that current qualified individuals completing QRTP assessments have training in gathering youth and family voice.	07/2023	02/2024*	Complete	Complete
Newly hired qualified individuals completing QRTP assessments have training in gathering youth and family voice.	08/2023	Ongoing	Complete	Initial training completed. Ongoing as new staff are hired.
Collect and compare data on how each qualified individual scores Children's Functional Assessment Rating scores (CFARS).	12/2023	Ongoing	Complete	Complete

Activity	Target Start Date	Target Completion Date	Progress	Status
Monthly supervisory level review of 1 QRTP assessment narrative, from each qualified individual to ensure that it demonstrates an assessment of: <ul style="list-style-type: none"> o Child, youth and family strengths and needs. o The ability or inability to serve the child or youth in a less restrictive setting with supports and services. And that the assessments: <ul style="list-style-type: none"> o Engage youth, families and support in a way that allows them to share their voice and desires authentically and safely. o Are trauma-informed and culturally competent and responsive. o Include an assessment of the youth and families view of the programming and the program’s level and type of engagement with them. 	08/2023	11/2023	Complete	Ongoing review to occur as needed
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	Ongoing review to occur as needed
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	Ongoing review and revision to occur as needed.

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

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

Narrative Update

The implementation of the QRTP System Improvement is on track.

The activities have been fully implemented with the exception of finalizing the BRS policies and procedures. They will be finalized after the group care rules are completed. The updated procedures are in practice and this delay does not impact the implementation of the system improvement.

Training

During this reporting period, all the IRPC's participated in at least one of the 4 modules and 7 have completed all, of the state-required Path Toward Equity training series. All IRPCs have a plan to complete the full series during the first quarter of 2025.

The newest IRPC's are waiting for the 8-day Motivational Interviewing series to be offered, and they will be signed up once available again. In this reporting period, the IRPC team began meeting monthly with the Motivational Interviewing facilitators as a team to receive ongoing training, in a community of practice setting. The group discusses and works on themes and issues specific to IRPC work such as youth engagement, having hard conversations, etc.

The newest IRPC's will be signed up for required trainings as they become available. Supervisors continue to monitor training participation and completion. This will be the ongoing practice as staff turnover occurs.

Quality Assurance Activities

Youth Survey

During QRTP visits, some youth have responded to questions about engagement when asked by the IRPC but this has not translated to survey responses. Since there have been limited survey responses by youth, the IRPC team has decided to incorporate the youth survey as part of the QRTP in-person visits beginning in January 2025. IRPCs will track response to this change. In addition, BRS providers will be sent the youth survey to provide to youth after CFTMs. The family team engagement survey will continue to be offered after meetings. The overall intent is to increase youth and family responses to help identify and address areas of practice improvement to increase engagement. Responses have been so minimal that meaningful information cannot be extracted. This is an area that will be a priority for the IRPCs during the next review period.

Inter-rater reliability

The IRPC team continues to meet once per month to review and score the same BRS referral for the QRTP assessment. These inter-rater meetings have been helpful in ensuring the IRPC's are scoring assessments consistently. This meeting had been held twice per month but when the Motivational Interviewing facilitated community of practice became available to the IRPC group as a team, the interrater reliability meeting was moved to once per month. The Motivational Interviewing facilitated group is only expected to be available to the IRPC team for another six months.

The FFPSA CQI managers reviewed statewide data containing QRTP assessments completed between January 1 and July 31, 2024. The IRPC supervisor shared with the IRPC's team and each individually how they rated. The review of the team's scoring in the 16 domains found that they scored within +/- 1 point of the unit average in 9 domains and +/-2 in five domains. The CQI team recommended continued inter-rater reliability practice on a quarterly basis; this is still occurring monthly.

Monthly supervisor reviews

The supervisors of the IRPC team continue to review at least one QRTP assessment every month for each IRPC member. This review is used to provide feedback to the IRPC and ensure their assessment is capturing the necessary information for each youth. Ensuring the QRTP assessment is focused on youth engagement and family involvement has been an area of strong progress. The IRPC's continue to work on helping the youth and team identify permanency and next step goals.

QRTP assessment tool

The QRTP assessment tool now includes narrative boxes to list non-professionals, including parents. It is reviewed monthly to ensure that QRTP assessments are completed timely, and that all necessary information has been included. The data from the narrative boxes are used as another method to track youth and family participation in the assessment process.

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 1/2/2025	Current Class Members Served 1/6/2025
Region 1	34	19	N/A
Region 2	20	13	2
Region 3	12	8	N/A
Region 4	23	10	4
Region 5	28	17	2
Region 6	38	18	7
Statewide	155	85	15

Data source: infoFamLink, Quarterly Class Report January 2, 2025 and EAHP Program Census January 6, 2025.

At the end of this review period, programs were established in all regions except region 1 and region 3.

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. Among the 85 youth identified as potentially eligible were 30 who were in therapeutic group care settings and 11 who were in therapeutic foster care settings. Of the 21 youth who were in regular foster care, 18 were assessed as having moderate or complex mental health needs.

Of the 16-17 year old class members who were not eligible for EAHP, 3 were in a trial return home, 57 were placed with relatives, 15 of which were identified as a permanent placement, and 11 were in non-relative identified permanent placements or were in the process of transitioning to a non-relative permanent placement. 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 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 1/2/2025
Region 1	152	40
Region 2	77	21
Region 3	53	17
Region 4	107	29
Region 5	103	25
Region 6	156	44
Statewide	648	176

Data source: infoFamLink, Quarterly Class Report January 2, 2025.

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. As the program is implemented, we anticipate that the number of eligible youth may decline as PTFC may not be the appropriate level of care.

Hub Homes

Class Members Served in Hub Homes		
	Total Children and Youth	Eligible Children and Youth 1/2/2025
Region 1	152	84
Region 2	77	46
Region 3	53	40
Region 4	107	57
Region 5	103	56
Region 6	156	89
Statewide	648	372

Data source: infoFamLink, Quarterly Class Report January 2, 2025.

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. Of the total number of class members, 58 were on a trial return home, 181 were in kinship care, 37 of which were identified as permanent placements, and 36 were in non-relative permanent placements or were transitioning to a non-relative permanent placement.

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 (PE) 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 N2N/PE by December 31, 2024.

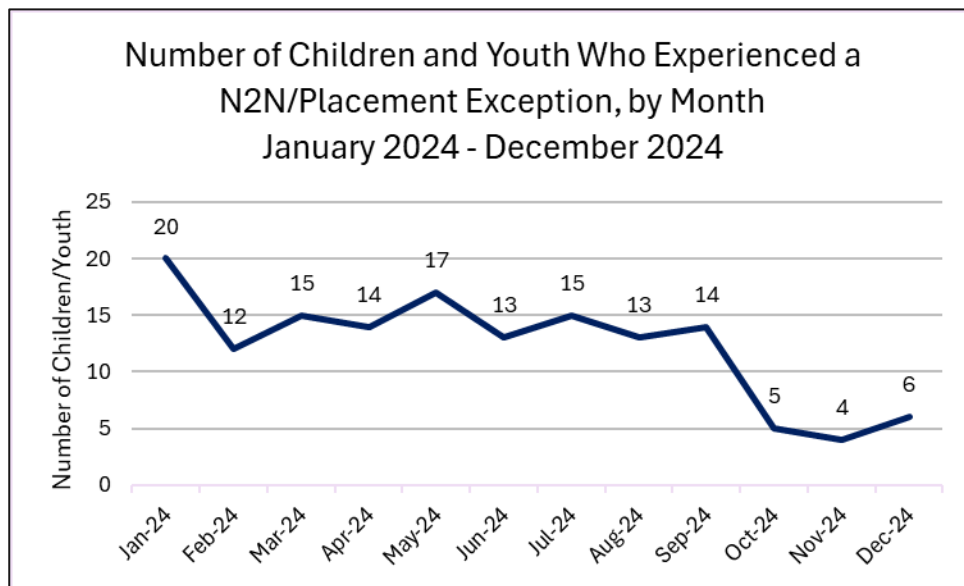
As of December 2024, there was a 93% decline from June 2022 in the number of class members experiencing a placement exception.

Data

Count of Class Members in N2N/Placement Exceptions July 2023 – December 2024						
Reporting Period	Region					Total
	Region 1	Region 3	Region 4	Region 5	Region 6	
July 2023 – December 2023	3	10	25	14	67	119
January 2024 – June 2024	2	5	25	17	15	64
July 2024 – December 2024	3	2	18	11	6	40

Data Source: InfoFamlink, 2023 Quarter 3 (November 8, 2023) and 2023 Quarter 4 (February 6, 2024); 2024 Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024) and 2024 Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024); 2024 Quarter 3 reporting (August 6, 2024, September 9, 2024 and October 9, 2024) and 2024 Quarter 4 reporting (November 8, 2024, December 10, 2024, and January 6, 2025).

Note: Children and youth may be duplicated across reporting periods.



Data Source: InfoFamlink, 2024 Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024) and 2024 Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024); 2024 Quarter 3 reporting (August 6, 2024, September 9, 2024 and October 9, 2024) and 2024 Quarter 4 reporting (November 8, 2024, December 10, 2024, and January 6, 2025).

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/PE Experienced by Children and Youth
July 2024 – December 2024**

Placement Type	Region					
	Region 1	Region 3	Region 4	Region 5	Region 6	Total
Leased Facility	3	1	13	10	6	33
Night-to-Night	0	1	1	1	0	3
Placement Refused Hotel	0	0	0	0	0	0
Placement Refused Leased Facility	0	0	1	5	0	6
PlcmntExc-Hotel	0	0	4	0	0	4

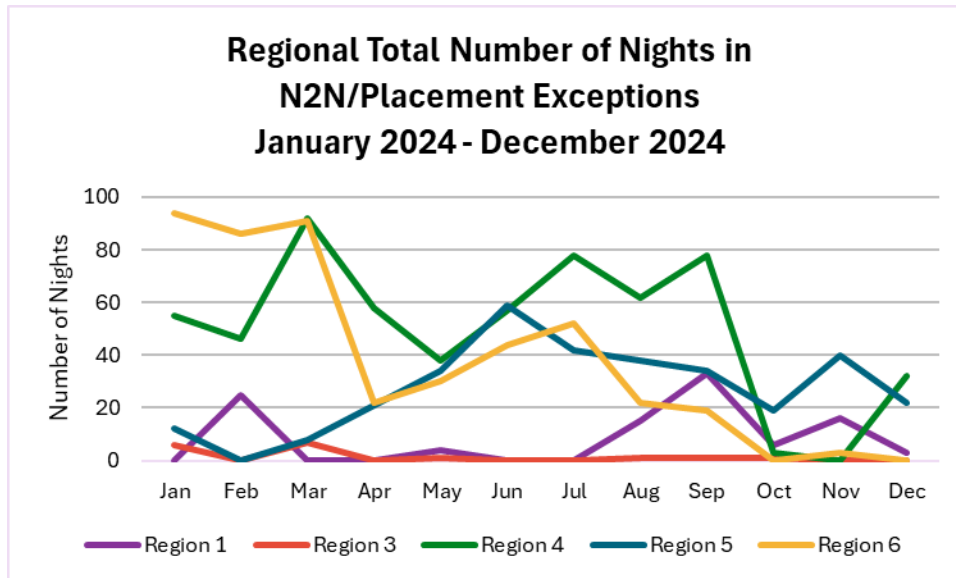
Data Source: 2024 Quarter 3 reporting (August 6, 2024, September 9, 2024 and October 9, 2024) and 2024 Quarter 4 reporting (November 8, 2024, December 10, 2024, and January 6, 2025).

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/PE
July 2024 – December 2024**

Placement Type	Region					
	Region 1	Region 3	Region 4	Region 5	Region 6	Total
Leased Facility	73	1	240	185	96	595
Night-to-Night	0	2	1	3	0	6
Placement Refused - Hotel	0	0	0	0	0	0
Placement Refused - Leased Fac	0	0	1	7	0	8
PlcmntExc-Hotel	0	0	11	0	0	11
Grand Total	73	3	253	195	96	620

Data Source: 2024 Quarter 3 reporting (August 6, 2024, September 9, 2024 and October 9, 2024) and 2024 Quarter 4 reporting (November 8, 2024, December 10, 2024, and January 6, 2025).



Data Source: InfoFamlink, 2024 Quarter 1 reporting (February 5, 2024, March 5, 2024 and April 9, 2024) and 2024 Quarter 2 reporting (May 7, 2024, June 11, 2024 and July 8, 2024); 2024 Quarter 3 reporting (August 6, 2024, September 9, 2024 and October 9, 2024) and 2024 Quarter 4 reporting (November 8, 2024, December 10, 2024, and January 6, 2025).

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.

During this semi-annual reporting period, the number of children/youth who experienced a N2N/PE decreased by 47% and the number of nights children/youth experienced in N2N/PE decreased by 66%. For the 2024 calendar year, the number of children/youth who experienced a N2N/Placement Exception decreased by 60% and the number of nights in N2N/PE decreased by 67%.

There are six unique youth who experienced multiple types of N2N/PE in this reporting period. Of the total 620 nights in N2N/Placement Exceptions from July 2024 – December 2024, 1% (eight nights) placements were refused, 97% (603 nights) were in leased facilities and 2% (11 nights) were hotel stays.

From July 2024 to December 2024, Regions 3, 4, 5, and 6 all experienced decreases in both the number of children who experienced a N2N/PE and the number of nights in N2N/PE. Region 6 had the greatest decrease of 100% in number of children/youth who experienced a N2N/PE and a 100% decrease in number of nights in N2N/PE. Region 4 experienced the second greatest decrease in number of nights in N2N/PE at 59% and a 40% decrease in number of children/youth who experienced a N2N/PE. Region 5 experienced the third greatest decrease in number of nights in N2N/PE at 48% and a 40% decrease in number of children/youth who experienced a N2N/PE.

The distribution of nights is as follows:

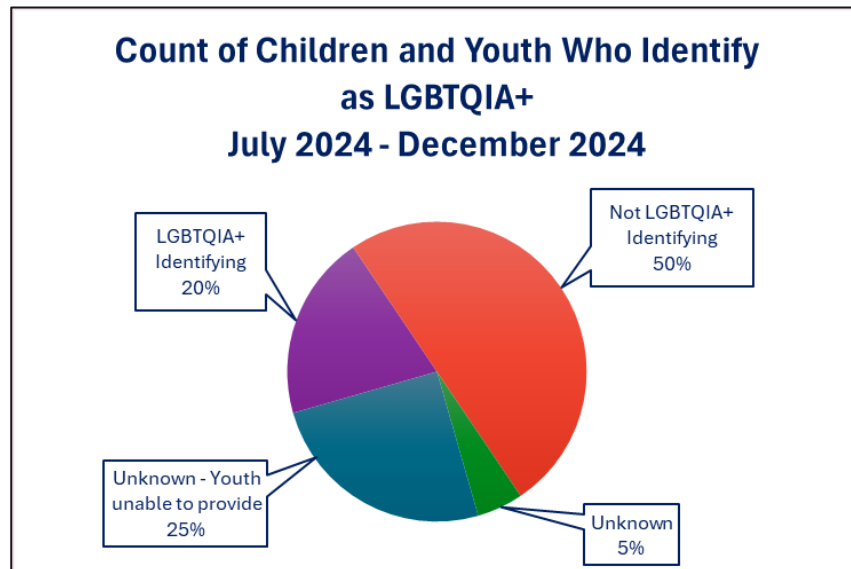
Distribution of Nights July 2024 – December 2024	
Range of Nights	Total Children/Youth
1 to 2	5
3 to 5	9
6 to 10	6
11 to 20	8
21 to 30	4
31 to 60	8
61 to 91	0
91 & up	0
Grand Total	40

Data Source: 2024 Quarter 3 reporting (August 6, 2024, September 9, 2024, and October 9, 2024) and 2024 Quarter 4 reporting (November 8, 2024, December 10, 2024, and January 6, 2025).

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

Of the 40 children/youth who experienced a N2N/PE from July 2024 to December 2024, 50% (20 children/youth) experienced ten nights or less and 20% (8 children/youth) experienced greater than 30 N2N/PE. The highest number of nights spent in a N2N/PE during this semiannual reporting period was 56 nights, which were not necessarily consecutive.

LGBTQIA+



Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

From July 2024 to December 2024, eight children/youth (20%) identified as lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual (LGBTQIA+) and 20 children/youth (50%) did not identify as LGBTQIA+. For the LGBTQIA+ identity of the remaining children and youth, 10 (25%) children/youth LGBTQIA+ status is unknown as they were unable to report their LGBTQIA+ status due to a cognitive or developmental delay or young age and two (5%) were unknown. There continues to be a decrease in the number of children/youth whose LGBTQIA+ status is unknown. From the previous semiannual reporting period to the present semiannual reporting period, there has been a decrease of 71%, from seven children/youth (previous reporting period) to two children/youth (current reporting period).

Educational Status

Children and Youth Education Status July 2024 – December 2024		
Education Status	Number of Children and Youth	Percentage of Children and Youth
Enrolled/Participated in School	18	45%
Enrolled/Refused to Participate	1	3%
Enrolled/Unable to Participate Due to Systemic Barriers	0	-
Enrolled/Unable to Participate for Safety of Others	1	3%
Seeking GED	1	3%
Not Enrolled	8	20%
School Not in Session	11	28%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

Note: Participation in education is inclusive of pre-school and pre-kindergarten enrollment. Systemic barriers are inclusive of distance from school and staff support.

Children and Youth Education Format July 2024 – December 2024		
Education Format	Number of Children/Youth	Percentage of Children/Youth
In-person	13	33%
Virtual	4	10%
Hybrid	1	3%
Not Applicable	22	55%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

From July 2024 to December 2024, there were 20 (50%) children/youth enrolled in school. Of those 20 children/youth enrolled, one (3%) refused to participate and did not provide additional reasoning and one (3%) was unable to participate due to their behavior being a safety threat to peers and school staff. The school was working on a plan to have the youth attend, identified a plan and then the youth was placed in detention. The eight children/youth were not enrolled due to transitions between placements, being on the run, or transferring to/from detention. School was not in session for July and August of this reporting period, which impacted 11 children/youth. Given the intended short-term nature of N2N/PE, if a youth has not been enrolled in school at the time they enter that setting, school enrollment may not occur until they move to their ongoing placement. If they were previously enrolled or the stay in the N2N/PE is extended, efforts to are made to support participation in-person or virtually in their home school or to enroll in the local school district.

Shared Planning Meetings

5-Day SPM Metrics July 2024 – December 2024		
SPM Timeliness	Number of Children/Youth	Percentage of Children/Youth
5-Day SPM Timely	19	48%
5-Day SPM Not Timely	1	3%
5-Day SPM in Other Reporting Period	6	15%
SPM Not Applicable	14	35%
Grand Total	40	100%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

10-Day SPM Metrics July 2024 – December 2024		
SPM Timeliness	Number of Children/Youth	Percentage of Children/Youth
10-Day SPM Timely	21	53%
10-Day SPM Not Occur	1	3%
SPM Not Applicable	18	45%
Grand Total	40	100%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

From July 2024 to December 2024, there were 20 children/youth who were required to have a 5-Day SPM, 95% (19 SPMs) were held within their timeframe. One 5-Day SPM was late due to the youth being on the run; an SPM was held upon her return. There were 22 children/youth who were required to have a 10-Day SPM, 95% (21) were held timely and one (5%) SPM did not occur due to the youth being on the run. The children/youth who were not applicable for a SPM had their SPM held in another reporting period or had a resolution to their N2N/PE prior to five consecutive days.

Placement Refusals

Reason Children and Youth Declined Placement July 2024 - December 2024		
Reason for Decline	Count	Percent
Unable to have phone and/or internet	4	50%
Location	1	12.5%
Other	2	25%
Unknown	1	12.5%
Total	8	100%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

Type of Placement Children and Youth Declined July 2024 - December 2024		
Type of placement settings	Count	Percent
Foster Home	1	12.5%
Therapeutic Foster Home	1	12.5%
Qualified Residential Treatment Program (QRTP)	3	37.5%
Emergent Placement Services (EPS)	1	12.5%
Group Home	2	25%
Total	8	100%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

Placement Refusal Family Team Decision Making Meeting Metrics July 2024 – December 2024		
FTDM Timeliness	Number of Children/Youth	Percentage of Children/Youth
Placement Refusal FTDM Timely	6	75%
Placement Refusal FTDM Not Timely	1	12.5%
Placement Refusal FTDM Not Occur	1	12.5%
Grand Total	8	100%

Data Source: Regional monthly reports for July 2024, August 2024, September 2024, October 2024, November 2024, and December 2024.

Of the 40 children/youth in this reporting period, six unique youth had a total of eight placement refusals; one of the youths had three placement refusals during this reporting period. All three refusals for the QRTP placements were due to inability to access internet or phone. The “other” reasons for refusal were for a foster home and therapeutic foster home as the youth identified that activities, interests and home make-up did not align with what they wanted. The unknown reason for refusal was due to the youth not providing any information as to why they refused and then went on the run. One FTDM did not occur due to the youth being on the run. One FTDM did not occur timely due to separate FTDM’s being held three days prior and nine days after the placement refusal.

Report of Progress
Interim Benchmarks

Progress Toward Eliminating N2N or Placement Exceptions							
As of December 31, 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
Interim Benchmark September 2024	0	0	0	3	0	6	9
September Actual	2	0	1	6	5	1	15
Difference	+2	0	+1	+3	+5	-5	+6

Progress Toward Eliminating N2N or Placement Exceptions As of December 31, 2024							
	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Statewide Total
Interim Benchmark December 2024	0	0	0	0	0	0	0
December 2024 Actual	1	0	0	3	2	0	6
Difference	+10	0	0	+3	+2	0	+6

Data Source: InfoFamlink, D.S. Quarterly data reports: October 10, 2023, January 23, 2024, April 9, 2024, and July 8, 2024, January 6, 2025.

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
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	Ongoing	Ongoing
Develop strategies for recruiting new providers and supporting existing providers to expand their service continuum.	10/2023	Complete	Complete
Develop consistent processes for engaging, onboarding, and supporting providers.	10/2023	Complete	Complete
Establish specific caregiver recruitment strategies and outcomes for adolescents and youth with high levels of need.	10/2023	Complete	Complete
Establish a contract with an external entity to complete a landscape analysis and develop recommendations for the intensive resources placement continuum.	05/2024	Complete	Complete
Establish statewide child welfare criteria and oversight process for night-to-night foster care placements and placement exceptions.	09/2023	Complete	Complete

Only completed activities and activities with deliverables for this reporting period are included. Greyed out activities were completed in a previous semi-annual review period.

Narrative Updates

The update below reflects the activities identified for implementation through December 2024 as well as planned activities moving forward.

Activities Update

Placement Exception Task Force

The task force ended its work in September 2024. The focus for the prior year had been on child welfare practice and understanding the circumstances of youth experiencing placement exceptions. During July – September, the task force continued to attend 5- and 10-day shared planning meetings, reviewed daily approval forms, and leading outreach to inactive foster parents as well as understanding availability of foster parents on voluntary no-referral status.

The taskforce has been replaced by a strategy team that includes leadership representatives from Child Welfare, Licensing, Partnership, Prevention & Services and Government affairs.

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 TRF process was implemented July 3, 2024. At the beginning of December 2024, 66 families were identified as a TRF and received additional engagement. In total there were 122 State General Foster Care Applications submitted in from July to December 2024, 54% identified as targeted.

LD Applications July -December 2024 (State General Foster Care- Non-Kinship)	
Recruiting	10
Applying (Pending)	37
License Complete	14
Withdrawn due to Inactivity	6
Not Started	3
Total Targeted Recruitment Families Applications	70
Total Applications	127

Data Source: InfoFamlink Foster Home Applications by Month Custom Dates 7/1/2024-12/31/2024, WA CAP Data Portal for TRF Indicator.

Outcome and Data Analysis of the Recruitment Strategies

DCYF's recruitment and retention team continues to focus on developing and assessing strategies to recruit prospective foster parents (PFP). In addition to existing strategies and activities, the School Recruitment Foster Care Toolkit [Foster the Future] was finalized in December 2024. The Targeted Recruitment Specialists (TRS) have begun distribution, and data will be pulled and analyzed following the distribution.

DCYF's recruitment and retention team will continue to analyze data associated with the recruitment plans to determine effectiveness and success. DCYF developed a specialized landing page on the website that allows for additional data collection related to specific campaigns. This new data collection will provide a baseline for comparison in the future. We will continue to update and adapt the plans as needed. Calendar year 2024 data will be reviewed during the first quarter of calendar year 2025. We are in the process of developing updated recruitment plans for implementation in 2025.

In November 2024 DCYF's recruitment and retention team began managing all prospective foster parent inquiries in the Statewide Recruitment Information Center (SRIC). Prior to that, this work was managed under a contract with the Alliance CaRES Program. The TRS are now contacting all PFP's who indicate they are interested in caring for young people 12 and older. The team provides PFP's with additional engagement and touch points to support them in the process.

Contracted Placement Resources

DCYF continues to engage current providers and prospective providers in supporting and developing contracted resources to meet the needs of children and youth. This includes engaging with existing providers to adjust their capacity to meet the needs of specific populations and individual youth.

In addition, we continue to work toward developing and sustaining a continuum of emergent placement resources to meet the needs of children and youth. July 1, 2024, we implemented the Emergent Placement Services (EPS) rate increase received from the legislature. The intent of this rate increase is to stabilize the service. It has been well received by our provider community. We also updated the EPS contracts to require program policies allowing access to cell phones and technology and provided the ability to extend a youth's stay in the program if an ongoing resource able to meet their needs was not available. Adding policies related to use of phones and technology addressed one of the barriers to placement that youth identified. Allowing extensions following diligent efforts to locate an ongoing resource, supports stability for youth.

To further support the continuum of emergent placements, we submitted a decision package for the 2025 Legislative Session requesting funding for:

- Group Receiving Care: Serves children under 12 and accompanying siblings up to age 18 and sibling groups with a required 85% acceptance rate. Requested rate increases to fully fund 6 existing beds in region 3 and establish 12 additional beds.
- EPS: Serves youth 12-17 with moderately high to high levels of need with a required 85 percent acceptance rate. Requested 10 EPS beds in western Washington.
- Intensive Group Receiving Care: This would be a new program serving youth 12-17 with the highest level of need and would require a 100% acceptance rate. Requested funding to establish 6 beds; 3 in FY26 and 3 in FY27.

The funding request for these placement resources was included in Governor Inslee’s proposed budget.

Child Welfare Practice

DCYF continues to hold SPM and FTDMs for children and youth with night-to-night foster care stays and placement exceptions as reflected in the above data. Each region also continues to maintain a structure to support practice and focus on youth with complex needs.

DCYF has continued the leadership level review and approval process prior to the use of N2N/PE. Statewide program staff and regional leadership monitor documentation of efforts with follow up as needed. Progress and status is regularly discussed with the child welfare leadership team.

Practice Support

The developmental disabilities (DD)/mental health (MH) cross-system program consultants have continued outreach to ensure child welfare staff are aware of their role and how they can support meeting youth’s complex needs through presentations at regional and office all-staff meetings . The statewide program manager developed and disseminated an [informational publication](#) regarding the team to DCYF staff statewide, via the DCYF Digest, Child Welfare quarterly newsletter, and Caregiver Connection.

The DD Program Manager presented at the Parent Advisory Group (PAG) meeting in September 2024, to present the DD/MH consultant team, and discuss implementation of HB1188, which allows children and youth subject to a dependency proceeding to access Developmental Disabilities Administration (DDA) waiver services as of September 1, 2024. Additional communication about the DDA eligibility process and waiver services was shared with child welfare staff at Foundations of Practice in November 2024.

DCYF has continued to provide case staffing support for children and youth with complex needs in a variety of ways. The escalation process between DCYF and DDA was revised to include regional staff and leadership and more issues are being resolved at the local and regional levels.

Regional leads, DD/MH program consultants, and representatives from DDA meet regularly to discuss shared cases. Many regions also hold routine office hours for staff consultation

The regions conduct child-specific collaboration staffings for children and youth with complex needs at 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.

The 1580 Rapid Care Team meetings have become a primary platform to staff complex cases where placement and resource needs are unable to be resolved at a lower-level. The state-wide Multi-Systems Rounds (MSR) meetings are still an available platform, in circumstances where 1580 staffings are not appropriate and are convened on an ad hoc basis.

Updated Strategies and Activities to Support Elimination of Placement Exceptions

DCYF reviewed the strategies that have been implemented and identified additional areas of practice focus. The strategies and activities are identified below and include some that were previously implemented that will continue as well as new areas of focus. Implementation plans for the strategies/activities will be finalized in the first quarter of 2025.

Strategy	Activity
Strengthen identification of and engagement with kin	Review regional processes for identifying and engaging with kin. Develop and disseminate communication and guidance to support caseworkers.
	Increase kinship participation in shared planning meetings
Improve access to and engagement with developmental disability services and resources	Review, revise and implement staffing procedures that engage regional leads and statewide liaisons and intensive resources consultants to improve earlier engagement with needed services
	Review and update communications as needed regarding the role of the statewide developmental disabilities/mental health program consultants. Implement process for regional leadership and office-level engagement.
	Establish a workgroup to develop strategies for earlier identification children/youth appropriate for DDA eligibility referrals
	Establish processes to support child welfare caseworkers with completing DDA applications if needed
Develop additional resources to meet intensive placement needs	Review and assess resource needs annually. Assessment will be updated in May of each year.
	Engage and recruit providers able/willing to contract for programs to meet specific youth needs
Require high-level leadership approval for access to night-to-night foster care placements and placement exceptions	Maintain regionally-based statewide child welfare leadership approval process for night-to-night foster care placements and placement exceptions.
Streamline access to intensive resources	Educate child welfare staff/communicate ability to access intensive resources (BRS) earlier.
	Update and streamline BRS referral packet.
	Implement Caregiver Retention Framework to use as a guide across all divisions

Strategy	Activity
Establish consistent approaches and guidance for activities that promote caregiver retention.	Develop and implement communication plan and strategies to address caregiver partnership. Support and provide information about resources/supports for caregivers.
Expedite licensing for caregivers willing to care for priority populations of youth	Implement and monitor process for tracking and assessing data related to prospective caregivers willing to care for sibling groups, adolescents and children/youth with complex needs to include licensing completion and subsequent 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 and sandwiches. In limited circumstances or as a special treat for young people, 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, youth, family, 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

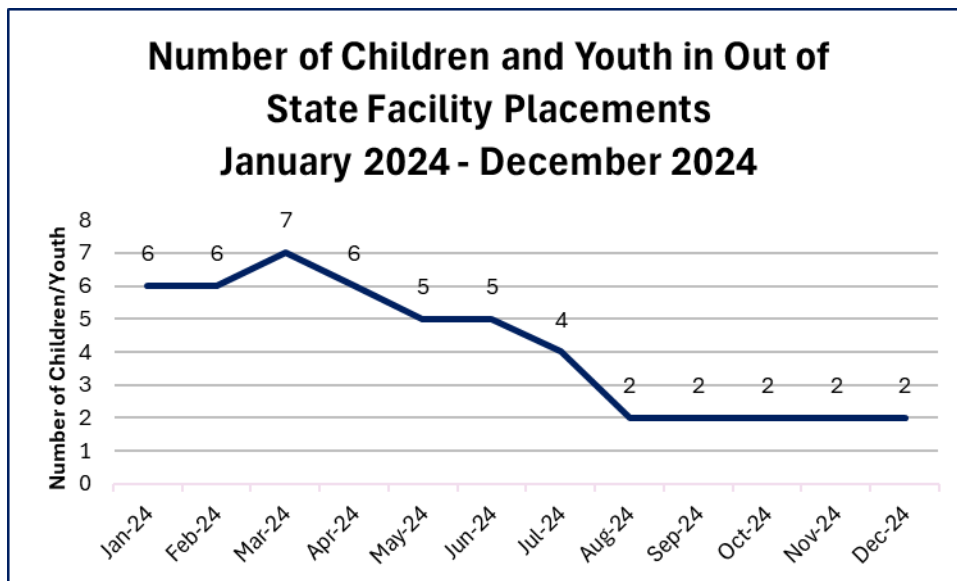
DCYF staff supervising children and youth have historically had Right Response training. In addition, DCYF also has added SPEAR Care Personal Safety and Verbal Craft training. Training is monitored through our training system by the staff’s supervisor. Leased facilities have dedicated staff providing 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 well below 10. Beginning in August 2024, DCYF had 2 children and youth 0-17 placed in out of state facilities on a monthly basis.



Data Source: InfoFamlink, D.S. Quarterly data reports: October 10, 2023, January 23, 2024, April 9, 2024, and July 8, 2024, January 6, 2025.

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	01.02.2025 Performance	01.02.2025 # Reduction from Baseline	01.02.2025 % Reduction from Baseline
Statewide	938	238	25.4%	648	290	30.9%
Age 0-10	386	78	20.2%	250	136	35.2%
Age 11-17	552	160	29.0%	398	154	27.9%

Data Source: FamLink 01/02/2025

For this reporting period, DCYF exceeded the target decreases for overall reduction and the 0-10 age group. The reduction from baseline for the 11-17 year-old age group more than doubled since the July 2024 class report; from 64 youth and 11.6% in July to 154 youth and 27.9% for this reporting period.

Of the 648 children and youth in class on January 2, 2025, 58 or 8.9% were placed with their parents on a trial return home. The breakdown was 39 (15.6%) of the children 0-10 years old and 19 (4.7%) of the youth 11-17 years old.