

Washington State

(Title IV-B)

Annual Progress and Services Report FY 2013-FY 2014

**Children's Administration
Department of Social and Health Services
June 28, 2013**

Table of Contents

Section I – Introduction	4
Description of State Agency	5
Vision – Mission – Values	5
Section II – Annual Report and Plan-	7
Part 1: Safety	8
Outcome 1: Children are first and foremost, protected from abuse and neglect	11
Outcome 2: Children are safely maintained in their homes whenever possible and appropriate	14
Part 2: Permanency	17
Outcome 1: Children have permanency and stability in their living arrangement	18
Outcome 2: The continuity of family relationships and connection is preserved for children	25
Part 3: Child and Family Well-being	30
Outcome 1: Families have enhanced capacity to provide for their children	33
Outcome 2 and 3: Children receive appropriate services to meet their physical mental and educational need	38
Part 4: Systemic Factors	43
Systemic Factor A: Statewide Information System	43
Systemic Factor B: Court Case Review System	45
Systemic Factor C: Quality Assurance	51
Systemic Factor D: Staff and Provider Training	56
Systemic Factor E: Service Array and Resource Development	56
Systemic Factor F: Responsiveness to the Community	57
Systemic Factor G: Foster and Adoptive Homes Licensing, Approval and Recruitment	60
Section III Chafee Foster Care Independence Program/Education and Training Vouchers	63
Section IV Training Plan	78
Section V Inter Country Adoptions	82
Section VI Foster and Adoptive Parent Recruitment	84

Section VII Adoption Incentive Payments	89
Section VIII Coordination with Tribes	91
Section IX – Update to Health Care Coordination and Oversight Plan	97
Section X – Financial Information	101
Section XI Program Description	106
Section XII Washington State Disaster Plan	109
Attachment List	111

SECTION I: Introduction

- **Description of State Agency**
- **Vision – Mission – Values**
- **Strategic Initiatives**

Introduction

The Washington State Annual Progress and Services Plan is an annual report of progress the Washington state Department of Social and Health Services has made toward meeting goals for the previous fiscal year and a prospective look at plans for the year ahead. In addition to satisfying a federal mandate, the plan describes daily efforts that reflect our agency's commitment to provide quality child welfare services to every child and their family every time.

DSHS submits this report by June 30 each year prior to submitting the state's application for federal funds to support the efforts of state child welfare agencies in providing child welfare services. This report outlines *Updates and Progress* for July 1, 2012 – June 30, 2013, and *Planned Activities* for July 1, 2013 – June 30, 2014.

Description of State Agency

The Washington State Department of Social and Health Services (DSHS) is an integrated organization of high-performing programs working in partnership for statewide impact to help transform lives. The Children's Administration is one of five administrations within DSHS and has the primary responsibility for the public child welfare system, child maltreatment prevention, intervention and promoting child and family well-being.

The activities of Children's Administration impact approximately four percent of the state's population. More than 250,000 individuals benefit from direct or ancillary services provided by Children's Administration annually. These individuals represent approximately ten percent of the entire DSHS client population.

DSHS Vision – Mission – Values

Vision

Safe, healthy individuals, families, and communities

Mission

The Department of Social and Health Services will improve the safety and health of individuals, families and communities by providing leadership and establishing and participating in partnerships

Values

Excellence in Service, Respect, Collaboration and Partnership, Diversity, Accountability

Guiding Principles

Child safety, permanency, and well-being are championed for all children and families regardless of race, ethnicity, or place of residence.

Children belong to communities; their safety, permanency, and well-being are the shared responsibility of parents, caregivers, foster parents, tribes, service providers, and community members.

Practice improvement is built upon data-driven management and outcome transparency both within Children's Administration and to the public.

When it is safe to do so, children are maintained in their family home to avoid out of home placement.

Strategies to safely reduce racial disproportionality and outcome disparity are embedded in all aspects of our work.

Racial Disparity and Disproportionality

Purpose: Reduce over-representation of children of color in the public child welfare system

Summary:

An administration wide effort continues to address racial disproportionality in every area of our work and in all of our initiatives, including the implementation of major legislation and the continuous improvement of Children's Administration's policy and practice.

CY 2011 data shows that disproportionality has increased in initial placement for all groups of children except Native American children. However, there have been improvements in recent years. We note that racial disproportionality in all intakes has decreased between 2009 and 2011 for all groups except multiracial children. Disproportionality in overall intakes declined significantly for Native American (-.51%), Black (-.12%), and Hispanic (-.30%) children, and stayed constant for Asian children. Children's Administration is addressing this issue through training and using data reports that highlight areas of racial disparity and disproportionality, by increasing family engagement and with focused permanency efforts.

Evaluation of strategies and activities to reduce racial disproportionality and disparity is ongoing, and the Washington State Racial Disproportionality Advisory Committee continues to monitor progress in reducing racial disproportionality across the child welfare system.

Activity Updates FY 2013		Status
1.	Implement four racial disproportionality reduction initiatives: (1) increased recruitment of foster caregivers of color; (2) increased documentation of racial, ethnic, and tribal affiliation data; (3) elimination of long-term foster care as a permanent plan, and; (4) mandatory racial disproportionality awareness training.	Ongoing: Implementation began in FY 2013. Expected completion by FY 2014
2.	Develop recommendations for training and best practices informed by the results of an agency assessment that evaluates social, systemic and individual factors that may contribute to disparate treatment of children of color in the child welfare system. CA staff completed the first assessment in January 2011. They were given the assessment again in February 2013 to track improvement.	Ongoing: Assessment results expected in September 2013 Recommendations due in October 2013
3.	Assist in the development of strategies to reduce racial disproportionality in the implementation plan for Family Assessment Response.	Ongoing
FY 2014		
Planned Activities FY 2014		Target Date
4.	Partner with UW Alliance for Workforce Excellence and National Coalition Building Institute to standardize disproportionality awareness trainings for CA staff.	FY 2014
5.	Monitor the implementation of Evidence Based Practices and Programs and their impact on outcomes related to racial disproportionality and disparity.	FY 2014
6.	Develop recommendations for the use of a Racial Equity Assessment Tool in all CA policy and practices.	FY 2014

SECTION II: Annual Report and Plan

Part 1: Safety

Part 2: Permanency

Part 3: Child and Family Well-being

Part 4: Systemic Factors

Part 1: Safety

Washington continues to improve its child protection system. The Child and Family Services Review State Assessment notes continued progress in timeliness of initial face-to-face contact with alleged victims of child maltreatment. The recent FamLink data reports indicate Children's Administration (CA) improved performance to 99% in face-to-face contacts with children in both emergent referrals and non-emergent referrals. Please see page 107 for a description of Child Protective Services.

Washington Data Profile shows that Washington has not yet met the national standard of 94.6% or more for absence of repeat maltreatment within six months. Our performance has decreased from 94.2% in FFY 2011 to 92.5% for FFY 2012. Possible reasons for this decrease may include the downturn of the economy (causing extended reduction in staff, services, and budget, and increased severity of abuse) and effects of population growth and stress of military deployment (increased severity of abuse). Efforts to review, analyze and plan to reduce recurrence of maltreatment have begun. Washington has adjusted its response to repeat maltreatment through:

- CQI plan around the Child Safety Framework practice model
- Efforts to reduce workload duplication
- Streamlining assessment tools
- Identification of additional community resources and supports through FAR development
- Increased requests to the legislature for positions and funding

We are very near the national standard of 99.68% or more for absence of child abuse and/or neglect in foster care with a rate of 99.67%. We continue to monitor this data as key indicators of child safety and as the core mission of the Children's Administration.

CA continues to improve assessing child safety throughout our involvement with the family and strengthen the use of the Child Safety Framework in our child welfare practices. The Safety Framework Quality Assurance plan is in place, being monitored, reviewed and adapted to improve safety outcomes.

Title IV-E Waiver - Family Assessment Response

In FY2012, Washington state received federal approval for a Title IV-E Waiver demonstration project. We completed negotiations with our federal partners on the terms and conditions of the demonstration proposal on September 28, 2012. Our proposal is to develop and implement a Family Assessment Response (FAR) pathway, as described below.

New legislation signed into law on March 30, 2012 requires DSHS to design and implement a Family Assessment Response (FAR) pathway. The FAR pathway is a non-investigative, additional CPS pathway designed to engage and stabilize families, address the basic needs of children to keep them safe and strengthen the family unit. FAR will serve families screened in for low to moderate neglect and physical abuse. Reports of sexual abuse or severe physical abuse or neglect will continue to be investigated. The goal of FAR is to improve child and family well-being, safely prevent out of home placements and support children and families through early intervention.

This legislation allows DSHS to create the Child and Family Reinvestment Account and use the reinvestment to build capacity and purchase services. Revenues for this account will consist of savings from safe reductions in the foster care caseload and per capita costs. CA and the Washington State Office of Financial Management

developed a methodology for calculating savings, which included any relevant provisions of the Title IV-E Waiver. CA reported the proposed methodology to the Legislature on December 1, 2012.

In addition, CA's permanency planning staff are developing strategies to safely reduce the number of children in out of home care and move them to permanent plans.

CA expects to increase the services and concrete supports available to all families using Title IV-B and Title IV-E allowable funds through FAR and Family Support and Related Services. (See [Systemic Factor E.](#)) While the number of families served by the Department is not expected to increase, a diverse array of interventions and concrete supports will be available to families across administration programs.

In the past year, safety improvement highlights include:

- *Adapted new training of our Safety Framework based on internal and external feedback, surveys, central case review and a targeted case review.* CA will develop a QA plan to establish baselines in data areas of Repeat Maltreatment, dependency filings and length of stays in out-of-home care, Safety Assessments, Safety Plans, and Case Planning. We will closely monitor and adapt the plan for more successful outcomes. An expected outcome of the Child Safety Framework QA plan is an increase in the absence of repeat maltreatment.
- *Addressed the issues of consistency and precision of language of the Safety Framework tools* through changes in the SACWIS system. The intake, investigative assessment, family assessment and comprehensive family evaluation will all contain the Safety Framework gathering questions, which are the foundation of assessing safety throughout the life of a case. Training on these changes in FamLink will begin in July 2013 and be available for use by field staff in October 2013. Washington has identified the gathering questions as our foundation of determining and planning for family functioning and child safety, creating consistency and precision works to ensure information sought is on target for making better safety and case planning decisions.
- *Continued using Monthly Performance Data Reports to provide real time data on the Initial Face-to-Face contact (IFF).* This report is designed for staff and managers and allows them to manage their cases proactively and improve performance.
- *Strengthened our child fatality review process and implemented a new practice to review some child near-fatalities and serious injury cases.* The governor signed into law a revision to child fatality review statute effective July 22, 2011 requiring CA to conduct fatality reviews in cases where a child death is suspected to be caused by abuse or neglect. Reviews examine the circumstances around a child's death, evaluate social work practice, and examine child welfare practices, system collaboration, and service delivery to the children and families in order to improve the health and safety of children. The reviews help educate the department on where policy, practice and system improvements are needed.

The Office of Risk Management Critical Incident Review unit achieved the following during FY 2012:

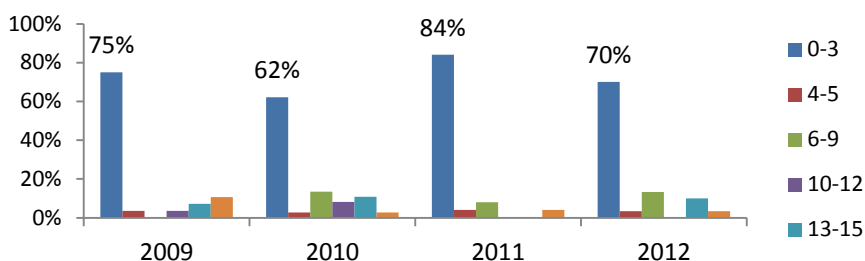
- Initiated Near-Fatality reviews. CA reviews near fatalities when the child's injuries are the result of abuse or neglect and the family received services from the department within 12 months of the near fatal incident.
- Revised the statewide guidelines for conducting Child Fatality and Near-Fatality Reviews
- Developed a protocol with the DSHS Public Affairs Division, for observation of Child Fatality and Near-Fatality Reviews by media representatives
- Invited legislators to participate in Child Fatality and Near-Fatality Reviews
- Established a centralized process to document findings and recommendations from Child Fatality and Near-Fatality Reviews

- Provided training on identification and response to critical incidents to new supervisors, intake social workers, and licensors and Child Protective Services investigators with the Division of Licensed Resources. Lessons learned from fatalities and critical incident cases were included in the training.
- Reviewed 30 fatalities and near fatalities during CY2012. To improve practice, we are incorporating information from these reviews and the results of Central Case Reviews, Targeted Case Reviews, Tort litigation, and Constituent Relations into a revised Lessons Learned curriculum for social service staff, supervisors and managers. Development is in process and will be part of the curriculum in FY2014.

Information from the fatality and near fatality reviews shows:

- Children under age three continue to be the most vulnerable to serious injury or death from abuse. In FY2012, 63% of children who died were five years old and younger.

**Child Fatalities & Near Fatalities with Allegations or Suspicion
of Child Abuse and/or Neglect by Age Group**
CA Fatality/Near-Fatality Review Log
2009 - 2012



Child Fatalities/Near Fatalities with Allegations or Suspicion of Child Abuse and/or Neglect by Age

Region	0-3 Years	4-5 Years	6-9 Years	10-12 Years	13-15 Years	16-17 Years	Total
2009	21	1		1	2	3	28
2010	23	1	5	3	4	1	37
2011	21	1	2			1	25
2012	21	1	4		3	1	30
Total	86	4	11	4	9	6	120

- 53% of child fatalities and near fatalities occurred while the child's case was open.
- Sudden Infant Death Syndrome was the most common cause of death of infants and toddlers age birth to three. These fatalities were often not the result of abuse or neglect.
- Blunt force trauma was the most common cause of death resulting from child maltreatment.

As a result of critical incident findings, our administration took the following actions during the past year:

- Published Safe Sleep information and worked with the Indian Policy Advisory sub-committee on Safe Sleep information for tribes
- Provided training and practice consultation to staff in offices identified as having greater need for practice improvement
- Established a new statewide Early Childhood Development Program Manager position
- Initiated developmental stages training for social service staff

- Communicated and promoted evidenced based services for young children
- Initiated a statewide workgroup to examine our intake, CPS response, safety assessment and safety planning to develop recommendations for a more effective intervention model for children birth through three years. This workgroup will continue through FY2015.
- Initiated work to enhance incident tracking and reporting system for data collection, analysis and reporting. Target date for completion is December 2013.

We are continuing to monitor trends and analyze the data. Strategies will require additional time to fully develop and implement to realize potential results

Children's Administration addresses child safety by using data and tracking information of child maltreatment fatalities and tracking of our most vulnerable children. CA uses the following sources of information relating to child maltreatment fatalities and reports this data to NCANDS:

- Washington state's SACWIS system (FamLink)
- Children's Administration's Critical Incident Reporting System (CAAIRS). CAAIRS is a standalone database of information regarding all critical incidents involving Children's Administration clients and staff, including information on child fatalities
- Child Death Review Teams
- Coroner's Offices
- Medical Examiners Offices
- Law Enforcement agencies
- Washington State Department of Health, which maintains vital statistics data, including child deaths

Safety Outcome 1: Children are first and foremost protected from abuse and neglect

- **Timeliness of initiating investigations of reports of child maltreatment**
 - **Repeat maltreatment**
-

UPDATES AND PROGRESS (FY 2013)

Activity	Status
1. Enhance supervisor support by developing the FamLink supervisor's review desktop screen to save time in conducting a more thorough monthly 100% social worker case review.	Completed: September 2012
2. Develop the framework, tools, policies and procedures to support the new FAR track	Completed: FY 2013
3. Plan for program changes to Intake, Child Protective Services and Family Voluntary Services as a result of the new Family Assessment Response.	Completed: FY 2013
4. Work collaboratively with the Governor's office to revise the Executive Order that supports Child Protection Team (CPT) staffings. The revision allows CPT teams to focus on cases where safety and risk are greatest and the teams input is most impactful.	Completed: FY 2013 Executive Order 12-04, effective July 25, 2012

Activity	Status
5. Family Assessment Response activities, including: <ul style="list-style-type: none"> Reviewed current intake and CPS process and protocols to determine modifications and adjustments needed for FAR implementation Convened Tribal Title IVE Roundtables statewide to discuss FAR Completed business design of Intake and FAR FamLink tools Worked with CRC to develop FAR screening and Intake tool Submitted implementation plan to legislature Submitted Implementation and Design Report to Children's Bureau Provided FAR Overview Training to potential phase-one offices, Area Administrators and CA headquarters staff Released a FAR quarterly newsletter and video for CA staff and stakeholders Submitted 2nd Quarterly Report to the Children's Bureau Evaluated Office Readiness Assessment Plans from potential phase 1 offices Released Request for Proposal for contracted Title IV-E evaluator Selected phase 1 offices for initial FAR implementation 	Completed: May 2013

FY 2014

PLANNED ACTIVITIES (FY 2014) - *Outcome 1 - Children are first and foremost, protected from abuse and neglect*

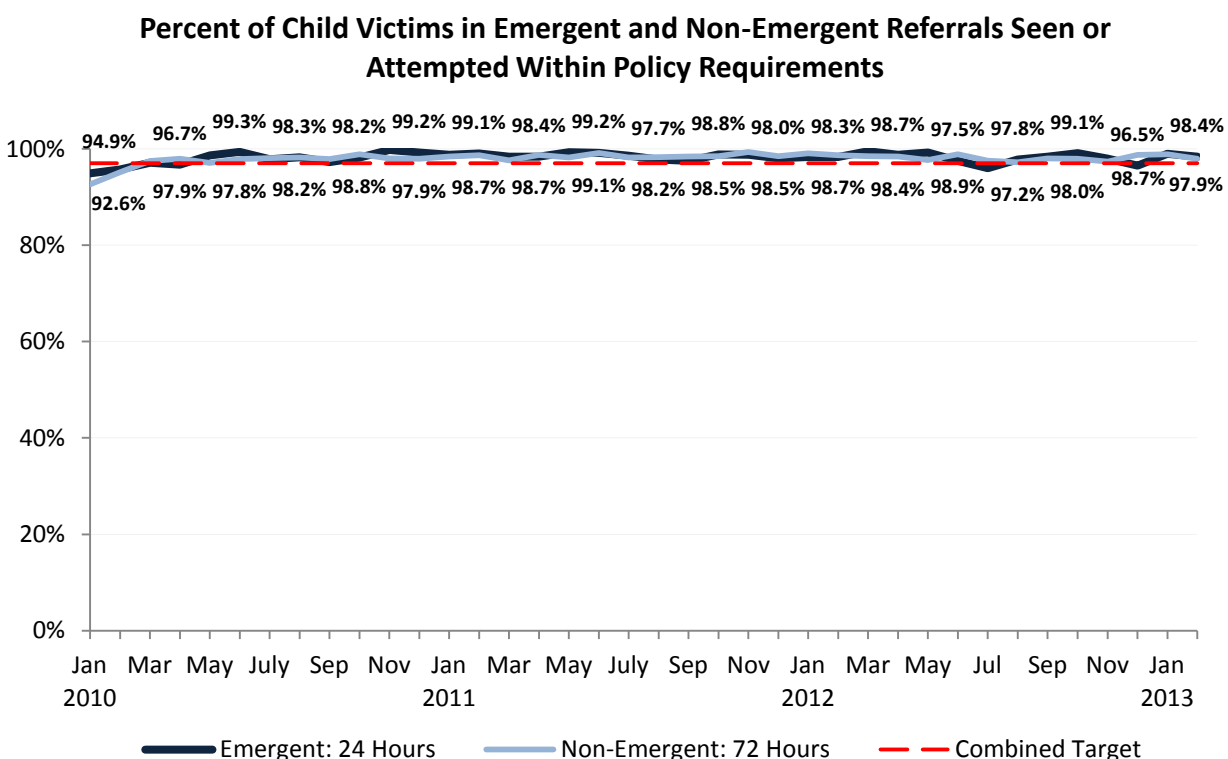
Activity (2014)	Target Date
1. Develop standardized process to document, respond, and track status of recommendations identified from QA/CQI reports and activities.	August 2013
2. Update training and coordinate with Training Alliance to provide Lessons Learned training to social workers, supervisors, and managers. Training is based on findings from critical incidents, Tort claims, and case review.	FY2014 and Ongoing Development in Process
3. Strengthen QA and CQI system using framework provided by the Children's Bureau with focus on child safety.	FY2014
4. Form workgroup to examine intake, CPS response, safety assessment and safety planning. Develop recommendations for more effective intervention model focusing on children birth through three years.	FY2014 - 2015
5. Redevelop and implement 'Lessons Learned' training to social service professional staff.	FY2014 and ongoing
6. Family Assessment Response activities, including: <ul style="list-style-type: none"> Develop FAR and FamLink training and training tools Execute contract with Title IV-E project demonstration evaluator Train the trainers for FAR/FamLink tools training Train CA staff and stakeholders on new FAR/FamLink tools in FamLink Train FAR phase 1 offices and stakeholders on FAR policy and process FAR Phase 1 Implementation 	June – July 2013 August 2013 August 2013 August – October 2013 November – December 2013 January 2014

7. DSHS Secretary's CPS streamlining Project - Four groups of CPS, CFWS, FVS, FRS, IT and clerical workers will meet for three days to find ways to streamline processes and develop action plans designed to achieve immediate results	Begin June 2013
8. Meet quarterly with Training Alliance to review and discuss performance data to assess and identify potential training improvement needs and monitor progress	FY 2014 and Ongoing
9. Strengthen process to track status of recommendations and effectiveness of implemented strategies identified through QA/CQI reports and activities internally and externally (e.g. central case review, critical incidents)	August 2013

Data – Item 1

Timeliness of initiating investigations of reports of child maltreatment

Table 1 – In January 2013, social workers accomplished visits or attempts for timely face-to-face visits in January 2013 for 99% of alleged victims in CPS referrals (emergent and non-emergent combined)



Data source: FamLink run data 5/6/13

Data – Item 2

Repeat Maltreatment

Washington Data Profile

FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
92.7%	93.9%	93.7%	93.7%	94.2	92.5

Data Source: FFY2011 Data Profile

Maltreatment in Foster Care

Washington Data Profile

FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
99.77%	99.62%	99.82%	99.80%	99.81%	99.67

Data Source: FFY2011 Data Profile

Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.

- Services to families to protect children in the home and prevent removal into foster care
- Risk assessment and safety management

UPDATES AND PROGRESS (FY 2013) - Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.

Activity	Status
1. Continue to monitor and train supervisors and managers on child safety assessment practices (Child Safety Framework) to monitor quality assurance benchmarks at the region and office level. Update policy and staff training as needed to improve safety outcomes for in home and out of home cases.	Ongoing
2. Complete Development and Implement Quality Assurance plan.	Completed: FY2013
3. Develop social service professional competencies in Child Protection Services for family engagement in identifying safety threats, gathering sufficient and pertinent information to assess safety, ongoing safety assessment, analyzing, and safety planning.	Completed: November 2012, updated March 2013

FY 2014

PLANNED ACTIVITIES – *Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate.*

Activity (FY 2014)	Target Date
1. Incorporate a focus on child safety throughout Performance Based Contracting – delayed to FY2014 by rescission of RFP for Family Support and Related Services.	FY 2014
2. Continue to refine and implement QA and CQI for Safety Framework.	FY2014

Data – Item 3

Services to families to protect children in the home and prevent removal into foster care

CY 2010 / 2011 Central Case Review Questions

Q: <i>Were actions taken to provide or arrange appropriate services to the family targeted at the safety threats to the child?</i>	2010* Statewide Results	2011 Statewide Results
	65% 34 cases	86% 97 cases

Q: <i>If a child(ren) returned home, or remained in the home, were services offered or provided?</i>	2010* Statewide Results	2011 Statewide Results
	90% 20 cases	93% 41 cases

Data Source: Children's Administration's Central Case Review

*During 2010, CA redesigned the Case Review Tool therefore only 3 and 4th quarter were reviewed.

For CY 2012, the questions above were redesigned

Q: <i>If the child was removed from the home without providing services, the removal was necessary to ensure the child's safety.</i>	CY 2012 Statewide Results
	100% 65 cases

Q: <i>Appropriate services were offered or provided to the family targeted at safety threats to protect the child and safely prevent removal or re-entry.</i> <i>In-Home Cases were 77% (97 of 126 cases) Out-of-Home cases were 79% (86 of 109 cases)</i>	CY 2012 Statewide Results
	78% 235 cases

Data Source: Children's Administration's Central Case Review

CY 2012 In-home services – For cases not meeting requirements, Family Preservation Services were usually provided, but often other services such as chemical dependency, mental health or domestic violence services were not offered or discussed. CA will develop plans to improve performance in FY2014.

Data – Item 4

Risk Assessment and Safety Management

Historical Central Case Review Questions

Were efforts made to adequately assess and address the risk and safety concerns for the child(ren)?

- Q: *If the child was in out-of-home care, was there adequate response to the risk of harm or safety concerns in the child's out-of-home placement?*
- Q: *If the child was in out-of-home care, was there an adequate response to the risk of harm or safety concerns during visitation with family members?*

Risk of Harm	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	2011 Statewide Results
Central Case Review	71%	70%	79%	75%	87%

Data source: Children's Administration Central Case Review

*The 2010 case review data for Item #4 - based on 95 cases completed during 1st quarter 2010.

2010/2011 Revised Central Case Review Questions

Q: During the time the case was open in CPS, were safety threats adequately addressed?	2010 Statewide Results	2011 Statewide Results
	79% 85 cases	87% 213 cases

Q: During the time the case was open in FVS, were safety threats adequately addressed?	2010 Statewide Results	2011 Statewide Results
	74% 35 cases	89% 65 cases

Q: During the time the case was open in CFWS, were safety threats adequately addressed?	2010 Statewide Results	2011 Statewide Results
	88% 65 cases	91% 166 cases

Q: Were safety threats regarding the child's out of home caregiver adequately addressed?	2010 Statewide Results	2011 Statewide Results
	88% 16 cases	82% 33 cases

CY 2012 Central Case Review questions:

Q: Safety threats were adequately identified, assessed and controlled In-Home Cases were 71% (94 of 132 cases) Out-of-Home cases were 85% (212 of 251 cases)	2012 Statewide Results
	80% 383 cases

CY 2012 In-home cases - of cases that did not meet requirements, in some a safety plan was not developed or was not complete; in other cases there was inadequate monitoring and oversight. CA is working with the NRC Coordination Center and Region X concerning pending technical assistance related to safety.

Q: Safety threats regarding the child's out-of-home caregiver were adequately identified, assessed and controlled	2012 Statewide Results
	93% 255 cases

Part 2: Permanency

Washington State achieved two of the four national standards in FFY 2012 for the Child and Family Services Review (CFSR) composite measures of permanency. Washington ranked 1st out of 47 states for Timeliness of Adoptions and 14th out of 51 states for Permanency for Children and Youth in Foster Care for Long Periods of Time. More of a struggle in FFY 2012 was Placement Stability and Timeliness and Permanency of Reunification standards. While Children's Administration (CA) is succeeding in some areas of Permanency, more work is needed to achieve better outcomes for Reunification and Placement Stability.

Highlights of performance and activities related to permanency in the past year include:

- Washington ranked 23rd out of 47 states on the national ranking of state composite scores for *timeliness and permanency of reunification*. Washington is continuing work towards achieving permanent plans by engaging families through Solution Based Casework (SBC), Family Team Decision Making Meetings and partnering with families to develop individualized case plans.
- *Exits to reunification* fell in FFY 2012 to 64% from 70.4% in FFY 2011 of children discharged from foster care reunified in less than 12 months. The median stay was 8.3 months in FFY2012, which is an increase of 3.2 months from FFY2011 where the median stay was 5.1 months. Washington identified exits to reunification as an area for improvement in the coming year.

Washington has experienced a decrease in the number of children entering foster care in recent years even while Washington's population has continued to grow. Children's Administration has reduced the number of children entering foster care by focusing on engagement and working with families to safely maintain children in their home. Consequently, the families that do have children enter foster care have challenges that are multi-faceted and complex and require a lengthy intervention to safely reunify children and parents. CA's reports of longer exits to reunification reflect the challenging families that CA is serving. CA continues to increase focus on family engagement to improve timely exits to reunification through Family Team Decision Making meetings (FTDMs), Solution Based Casework (SBC) and development of individualized case plans with the family.

- *Foster Care Re-entry* performance continues to improve from 13.8% in FFY 2011 to 10.1% in FFY 2012 due to our continued focus on FTDMs.
- *Timeliness to Adoption* performance improved with Washington ranked 1st out of 47 states in the national ranking of state composite scores in FFY 2012. CA focused efforts on expediting adoptions for children who are legally free through the Expedited Adoption Project and the use of Permanency Round Tables focused on children in care the longest.
- There has been a *decrease in the number of adoptions* over the past two years (FY 2012 and 2013). This in part may be due to the strong focus on permanency that began in 2009. The number of finalized adoptions in 2012 is consistent with the numbers from 2001-2008, prior to the permanency push. The decrease may also be due in part to the implementation of the Unified Home Study, which occurred Statewide in September 2012. CA is identifying barriers to adoption and establishing a work plan to move towards increasing adoption outcomes.
- *Placement Stability* performance in Washington ranks 11th out of 51 states. Of children in foster care, at least 8 days but less than 12 months, 84.8% had two or fewer placements in FFY 2012. CA continues to support foster parent's through a Statewide Caregiver Support Improvement Plan, which was implemented in FY 2011. CA also continues to involve foster parents in FTDM's to strengthen consistency and participation in the placement decisions of children in care
- Children's Administration and 21 Housing Entities across the state formed a partnership through a Memorandum of Understanding (MOU) in August 2012 for housing assistance to families and youth

involved with Children’s Administration. The MOU provides housing assistance to 211 families to support reunification efforts, prevent out-of-home placement and assist youth who are exiting care. The MOU supports Children’s Administration permanency goals to safely reunify children with their families and partner with the community to achieve these objectives.

- The targeted case review data shows an increase in the frequency of twice monthly contact between siblings separated in out-of-home care. The most recent case review resulted in 75% compliance with this measure. Social workers continue to partner with caregivers to preserve and maintain the continuity of sibling relationships.

CA is helping social workers to appropriately record sibling visits to document accurately their work and the visits and contact siblings have with each other. We have also asked caregivers for their help in the documentation of sibling contacts.

- Case review data measures children in out-of-home care placed with their siblings who are also in out-of-home care whenever possible. The department’s efforts have resulted in an increase in performance to 87% of siblings placed with all siblings during this review period. Ongoing efforts in recruitment, retention and placement services coordination have helped maintain sibling connections while in out-of-home care.

The focused training efforts with the Deputy Regional Administrators leading training for supervisors and other staff in the region has shown some success in raising the percentage of siblings placed together. Washington is also showing some very strong movement forward in placing siblings together within the first 30 days of a placement episode when they cannot be placed together during the initial removal event.

Permanency Outcome 1: Children have permanency and stability in their living arrangement

- **Foster care re-entries**
 - **Stability of foster care placement**
 - **Permanency goal for child**
 - **Reunification, guardianship or permanent placement with relatives**
 - **Adoption**
 - **Permanency goal of other planned living arrangement**
-

UPDATES AND PROGRESS (FY 2013)

Activity	Status
<p>1. Continue to increase staff and caregiver awareness of the Foster Parent Critical Support and Retention Program.</p> <p>Foster Parent Critical Support and Retention services were included in CA’s statewide contract for Recruitment and Retention of Foster Families, which we awarded to Olive Crest – Fostering Together in October 2012.</p>	<p><i>On-going</i></p> <p>Olive Crest developed informational materials, approved by CA, to help improve awareness of the service.</p> <p>Contract staff attend various foster parent meetings to share information about the services to support caregivers, including the Critical Support and Retention program. They also meet with CA staff to discuss the supports and benefits offered through this program.</p> <p>CA continues to work to with Olive Crest to improve awareness and use of this support service.</p>

Activity	Status
2. Continue FTDM training with tribes and RAIOS so they can conduct FTDMs for tribal cases. Working agreements will be in place for the "loan" of CA Facilitators when needed.	Completed in 2013 and on-going
3. Continue partnership with Casey Family Programs to conduct Statewide Permanency Round Tables (PRT) in FY 2013. Community Partners including CASAs and GALs attend PRT trainings and participate as consultants at PRTS and PRT values training for AAGs, Court Officers and Judges.	Completed and on-going PRT sessions addressed the permanency needs of 188 children and youth. Began planning for Tribal PRTs in FY2013 with participation of IPAC representatives.
4. Expand capability of holding Permanency Roundtables across the state.	Completed and on-going CA Staff and Community Partners participated in the first round of Casey Family Program PRT Train the Trainer program in February 2013 and May 2013 to expand our training capacity for PRT sessions.
5. Implement ongoing improvements to statewide practices for Family Team Decision Making Meetings (FTDMs): a. Work with the Training Alliance to add FTDM on-line training as a requirement for completion of Social Worker Academy. b. Continue to increase consistency of FTDM meetings by training back up facilitators in each office and using ongoing facilitator observation and feedback using a consistent statewide observation tool. c. Provide consistent and uniform infrastructure to support, supervise and provide technical assistance to FTDM facilitators, social work staff and family engagement efforts. d. Increase adherence to FTDM policy through quality assurance activities.	Completed: FY2013 The FTDM on-line curriculum is part of the field training for all academy participants. They will also be required to attend an FTDM during their field training weeks. Twenty-one back up facilitators were trained statewide and an observation tool is in use by FTDM supervisors. All regions have hired FTDM facilitator supervisors. They are responsible for ongoing training of facilitators, data review for number of meetings held and/missed, ongoing FTDM education for staff, evaluation of facilitators using the observation tool, and reporting practice trends to regional administration.
6. Use curriculum provided by the NRCA to provide Multi Ethnic Placement Act (MEPA) training to CA staff statewide.	Completed: October 2012 and on-going through the Training Alliance curriculum

FY 2014

PLANNED ACTIVITIES (FY 2014) - *Permanency Outcome 1: Children have permanency and stability in their living arrangement*

Activity (2014)	Target Date
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Activity (2014)	Target Date
1. Partner with Casey Family Programs to conduct Permanency Round Tables for 120 children or sibling groups, 40 cases per region, who meet specific criteria, such as: <ul style="list-style-type: none"> Ten of the 40 cases per Region will be ICW cases / DSHS-CA Custody Cases Only Large Sibling Groups Runaways that need permanent connections Longest Length of Stay Cases selected by Region CA will continue to monitor PRT Action Plans to determine the effectiveness of the PRT process and highlight both successes and barriers in achieving permanency	FY 2014
2. Permanency Roundtables for tribal youth in CA custody will continue. CA and Casey will offer training to tribes to conduct PRTs for tribal jurisdiction cases planned for 2014	FY 2014
3. See Chafee section for ongoing activities related to the stability of youth in foster care.	

Data – item 5

Foster Care Re-Entries

Washington Data Profile reports in FFY 2012, only 10.1% of all children discharged from foster care to reunification re-entered foster care within 12 months, well below the national median of 15.0 %.

FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
18.8%	16.0%	14.3%	15.5%	13.8%	10.1%

Data Source: FFY2012 Data Profile

Data – Item 6

Stability of foster care placement

The stability composite has three individual measures based on the percent of children with two or fewer placement settings and their length of time in care. Washington's performance for FFY 2012 exceeded the national median for children placed less than 12months, 12 to 24 Months and 24 Months – or more.

Placement Stability: Percent of Children with 2 or fewer placement settings				
Time in Care	National Median	Washington's Performance		
		FFY 2010	FFY 2011	FFY 2012
Less than 12 Months	83.3%	85.5%	83.2%	84.8%
12 to 24 Months	59.9%	67.4%	67.5%	67.7%
24 Months - or more	33.9%	39.3%	37.4%	39.8%

Data Source: FFY2012 Data Profile

Data - Item 7

Permanency goal for child

Historical Central Case Review Question

Two Central Case Review questions were rolled into item #7 measurement:

1. *Were all permanency goals appropriate to the child's individualized needs, and were they established in a timely manner?*
2. *Was a petition to terminate parental rights filed if the child was in out-of-home placement for 15 of the most recent 22 months, or compelling reasons were documented in the current ISSP?*

Permanency Goal for Child	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results
Central Case Review	84.0%	85.0%	79.0%	85%

Data Source: Children's Administration Central Case Review

*The 2010 case review data for Item #7- based on 69 cases completed during 1st quarter 2010.

For CY 2011, the Case Review Tool did not measure question #1

For CY 2012, the questions above were measured in two questions

Current Central Case Review Questions

Q1: Were all permanency goals appropriate to the child's Individualized needs, and were they established in a timely manner?	2011 Not measured	2012 Statewide Results
	N/A	95% (253 cases)

Q2: Was a petition to terminate parental rights filed if the child was in out-of-home placement for 15 of the most recent 22 months, or compelling reasons documented in the current ISSP?	2010 Statewide Results	2011 Statewide Results	2012 Statewide Results
	84% 50 cases	81% 73 cases	78% 120 cases

Data - Item 8

Reunification, guardianship or permanent placement with relatives

Washington Data Profile shows that in FFY 2012 performance for timely reunification declined. The timeliness of reunification composite is composed of three timeliness measures and Washington's performance is below the national median on these measures.

Children's Administration focused for the past several years on Family Team Decision Making meetings (FTDM's) and Solution Based Casework. This focus resulted in a decrease in the number of children coming into care as CA workers and supervisors plan with families to safely maintain children in their home. As a result, the families involved in a dependency matter with CA have more complex and challenging needs,

requiring a longer time to reunify. CA continues to address the decline in children returning home timely with FTDM's and Solution Based Casework.

CA implemented the Child Safety Framework in November 2011 to inform and guide child safety decisions throughout the life of a case. The Safety Framework requires workers consistently to consider whether children are safe to reunify with their family or whether there continues to be safety concerns. This change in practice of reflecting upon whether children are safe rather than focusing on whether parents have completed services will ultimately result in timely reunifying families when appropriate to do so.

Measure	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Percentage of exits to reunification in less than 12 months (national median: 69.9%)	63.8%	63.8%	69.6%	72.3%	70.4%	64.0%
Median length of stay (national median: 6.5 months)	5.6 Months	7.0 Months	4.4 Months	2.4 Months	5.1 Months	8.3 Months
Percentage of all children entering foster care for the first time and reunified in less than 12 months (national median: 39.4%)	25.2%	36.0%	32.7%	30.6%	31.7%	21.2%

Data Source: FFY2012 Data Profile

Historical Central Case Review Question

Q: Were actions taken to achieve the permanency goal of reunification, guardianship or third party custody or guardianship timely?

Exits to Reunification, Guardianships, and Third Party Custody	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	2011 Statewide Results
Central Case Review	72.0%	71.0%	67.0%	69%	76%

Data source: Children's Administration's Central Case Review and FamLink

*The 2010 case review data for Item #8 - based on 49 cases completed in the first quarter of 2010.

Current Central Case Review questions

The Case Review Tool measures data for Item #8 by asking the following two questions.

Q: If the primary permanency goal was reunification, were actions taken to achieve the goal in a timely manner?	2010 Statewide Results	2011 Statewide Results	2012 Statewide Results
	74% 42 cases	87% 71 cases	83% 143 cases
Q: If the primary permanency goal was third party custody or guardianship, were actions taken to achieve the goal in a timely manner?	20% 5 cases	29% 17 cases	35% 23 cases

Data – Item 9

Adoption

Washington Data Profile shows that Washington’s performance in completing timely adoptions exceeded the national standard and has the highest composite score nationally. This composite has three components, two of which directly measure the timeliness of adoptions.

- **Component A:** *Timeliness of Adoptions of Children Discharged from Foster Care*; has 2 measures:

Measure	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Percentage of exits to adoption in less than 24 months (national median: 26.8%)	27.1%	24.5%	18.4%	24.2%	29.3%	38.2%
Median length of stay (national median: 32.4 months)	31.3 Months	31.8 Months	33.4 Months	32.6 Months	31.5 Months	27.5 Months

- **Component B:** *Progress Toward Adoption for Children in Foster Care for 17 Months or Longer*; has 2 measures:

Measure	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Percentage of children in care 17 months or more, that are adopted at the end of the year (national median: 20.2%)	21.3%	20.6%	25.0%	27.9%	31.4%	26.7%
Percentage of children in care 17 months or more achieving legal freedom within 6 months (national median: 8.8%)	14.8%	15.3%	12.8%	14.5%	14.6%	14.9%

- **Component C:** *Progress Toward Adoption of Children Who are Legally Free for Adoption:*

Measure	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Of all children who became legally free for adoption in the 12 month period prior to the year shown, what percent was discharged from foster care to a finalized adoption in less than 12 months of becoming legally free?	50.5%	48.2%	46.6%	60.2%	64.7%	78.7%

Data Source: FFY2012 Data Profile

Central Case Review

Q: If the primary goal was adoption, were actions taken to achieve the goal in a timely manner?

Adoptions Within 24 Months	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	CY 2011 Statewide Results	CY 2012 Statewide Results
Actions taken to achieve permanency goals of adoption timely	44.0%	43.0%	61.0%	59%	68%	70%

Data source: Children's Administration's Central Case Review

*The 2010 case review data for item #9 - based on 41 cases completed in the 1st 3rd and 4th quarters 2010.

Data – Item 10

Other planned living arrangement

Washington Data Profile: *Permanency for Children and Youth in Foster Care for Long Periods of Time;* Washington's performance is ranked 14th of the 51 states. This composite has two components that measure permanency for children and youth in foster care for long periods of time.

- **Component A:** *Achieving Permanency for Children in Foster Care for Long Periods of Time;* has two measures:

Measure	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Percentage of children in care for 24 months or more exiting to permanency prior to their 18 th birthday (national median: 25.0%)	30.0%	31.9%	32.9%	35.7%	40.5%	35.4%
Percentage of children with parental rights terminated exiting to permanency (national median: 96.8%)	93.8%	93.3%	95.0%	97.0%	95.7%	96.6%

- **Component B:** *Growing up in Foster Care;* has one measure:

Measure	FFY 2007	FFY 2008	FFY 2009	FFY 2010	FFY 2011	FFY 2012
Percentage of children who age out of care without a permanent plan (national median: 47.8%; lower score is preferable)	52.0%	49.9%	47.5%	53.8%	54.1%	51.6%

Data Source: FFY2012 Data Profile

Central Case Review Question

Q: Were timely efforts made to achieve the permanency goal, or a concurrent goal of long-term foster care, or a plan for independent living for youth 14 years and older?

Other planned living arrangements	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	CY 2011 Statewide Results	CY 2012 Statewide Results
Central Case Review	76.0%	67.0%	50.0%	60%	100%	89%

Data source: Children's Administration Central Case Review

*The 2010 case review data for Item #10 - based on a sample size of 10 cases completed during 1st quarter 2010

Q: Were services offered to successfully transition the youth from out-of-home care to adulthood in a developmentally appropriate way for youth 15 years and older?	2010 Statewide Results	2011 Statewide Results	2012 Statewide Results
	100% 5 cases	72% 25 cases	65% 26 cases

Central case review found that in some of the cases the social worker made a referral but there was no documentation that ILS had begun. In other cases, the worker launched the IL assessment in FamLink but little information was input or the assessment did not include an ILS plan. We are conducting targeted case reviews and after reviewing the findings will develop strategies to address the issues.

Data reported from Independent Living Providers

The total number of youth receiving Independent Living and Transitional Living services has increased almost every year to a high in contracted year 2012 of 2,662 youth served.

Youth Services by *Contracted Year						
	2007 Statewide	2008 Statewide	2009 Statewide	2010 Statewide	2011 Statewide	2012 Statewide
Number Children That Received Independent Living Services	911	1,091	1,124	1,076	970	1,198
Number Children That Received Transitional Living Services	690	882	1,098	1,441	1,333	1,464

Data Source: Data from Independent Living Providers for the *contracted year (September 1st – August 31st)

Permanency Outcome 2 – The continuity of family relationships and connections is preserved

- Visiting with parents and siblings in foster care
- Proximity of foster care placement
- Placement with siblings
- Relative placement
- Relationship of child with parents

UPDATES AND PROGRESS (FY 2013)

Activity	Status
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Activity	Status
1. The three CA regions received “Pathway to Permanency & Sibling Placement” training by Dr. Richard Delany, an internationally known clinical psychologist and speaker. This training supported CA’s efforts to improve sibling placement and sibling visit outcomes for Braam	Completed September 2012
2. DLR requested all current licensed foster parents to consider safely increasing their licensed home capacity to accommodate sibling groups and worked with interested foster parents. CA also published an article in the Caregiver Connection describing the importance of keeping siblings together while in out of home care.	Completed: October 2012
3. CA worked with Independent Living contracted providers to explore strategies to increase sibling connections with youth in foster care. IL providers reported that most siblings are unaware that they can ask their social worker for help to find and facilitate contact with a “lost” sibling. Providers published an article in the IL newsletter and Caregiver Connection directed to teens about the importance of maintaining sibling relationships and talking to their social worker about finding and contacting siblings. IL providers agreed to document sibling connections in the IL assessment in FamLink.	Completed: November 2012
4. CA HQ Braam Leads provided a train the trainers to Deputy RA’s and AA’s on sibling placement and sibling visits and contacts, policy changes and new procedures that support increasing Braam outcomes for sibling placement and sibling visits and contacts. The regional leaders provided regional training to their supervisors and workers to increase regional, office and unit accountability. This training helped to increase compliance of Sibling Placements from 69% for January - June 2012 to 89% for July - December 2012. Sibling Visits and Contacts also saw an increase in compliance from 38% to 75% during the same time.	Completed: November 2012 Completed: December 2012
5. Develop online FamLink management report for staff and managers that documents siblings who have twice-monthly visits/contacts.	In Process: Scheduled release by June 2013
6. CA changed the payment methodology to increase support for contractors providing long distance parent/ child/sibling visits. This change provides mileage reimbursement for long distance sibling visits. Since this change providers are able to facilitate long distance sibling visits.	Completed: January 1, 2013
7. Create a sibling visit e-mail template for social workers to send to caregivers monthly to document sibling visits/contacts and return to Social workers to copy into Case Notes in FamLink. This template will help track and document sibling visits and contacts that are not facilitated by CA and provide documentation of informal contact between siblings such as telephone calls, SKYPE and e-mail.	Completed: April, 2013
8. Statewide caregiver support plan is focused on improving communication and notice to caregivers of hearings and shared planning meetings: Notification of hearings to Caregivers was improved in FY2013 through the FamLink court hearing 30 day alert to social workers. Available as of December 2012, it provides a notice for workers to send to caregivers with information about the court date. Due to budget issues the Tips for Caregivers card is now scheduled for reprinting in FY2014. Local offices are printing as needed. Develop online FamLink management report for participation in Shared Planning meetings.	Ongoing In process: Scheduled release for FY 2014

Activity	Status
Emphasize through the monthly Caregiver Connection newsletter the Notification of Caregivers about court hearings and discuss at the quarterly statewide Foster Parent Consultation Team meetings.	
9. Review by statewide quality assurance team of sibling visit data and efforts to place siblings together when entering out-of-home care. Make recommendations to leadership: <ul style="list-style-type: none"> to increase connection between siblings separated in out-of-home care that align placement practices and increase outcomes. 	Ongoing: Monthly QA reports discussed at Deputy RA meetings and provided to the statewide QA/CQI team.
10. Conduct quarterly meetings with Regional Leads for Placement Service to identify barriers and propose solutions to increase performance placing siblings together in out of home care. Regional Placement Leads discuss ways to align placement practice and share resources to increase sibling placements.	Ongoing
11. Monthly Quality Assurance Regional Teams will review 10 cases monthly, randomly selected by Headquarters staff from each Region to increase compliance for sibling visits and contacts.	Ongoing

FY 2014

PLANNED ACTIVITIES (FY 2014) - *Permanency Outcome 2 – The continuity of family relationships and connections is preserved*

Activity (2014)	Target Date
1. Increase from 75% to 85% the early notification to tribes who are identified by the parents	FY 2014
2. Provide training to field staff to increase the use of comprehensive ICW ancestry charts to identify potential relatives	FY 2014

Data – Item 11

Proximity of foster care

Children's Administration continues to keep children in their original school when placed in out-of-home care. There has been a ten percent decrease from 2009 to 2012 in the number of foster youth enrolled in school that had to change schools when:

- placed during the school year; or
- he/she moved while in placement during the school year

Changes in School Placement	2008 (SY2006/2007)	2009 (SY2007/2008)	2010 (SY2008/2009)	2011 (SY2009/2010)	2012 (SY2010/2011)
OSPI and FamLink Information	20.0%	21.8%	17.3%	15.1%	11.7%

Data Source: OSPI & FamLink

Data – Item 12

Placement with siblings

In FY2012, we changed the methodology of measuring performance to using a targeted case review because of documentation issues. In FY2012, performance increased to 72% for siblings placed with all other siblings. We continue to improve in this measure. In Jul – Dec 2012 our performance was at 87%.

Sibling Placements	FY 2007 Statewide	FY 2008 Statewide	FY 2009 Statewide	FY 2010 Statewide	FY 2011 Statewide	FY 2012 Statewide
Percent of Siblings Placed With All Other Siblings	58.3%	56.7%	60.9%	64.5%	62.3%	72.2%

Data source: Braam Revised Settlement and Exit Report Semi-Annual Performance Report March 31 2012

Data – Item 13

Visiting with siblings in foster care

In FY2012, we changed the methodology of measuring performance to using a targeted case review because of documentation issues. In FY2012, only 32% of siblings had documented visits. However, we improved dramatically in the first half of FY 2013 (Jul – Dec 2012) to 75% of siblings with visits. We believe much of this improvement is due to an increased focus on better documentation in FamLink.

	CY 2007 Statewide	CY 2008 Statewide	FY 2009 Statewide	FY 2010 Statewide	FY 2011 Statewide	FY 2012 Statewide
Percent of Siblings placed apart who had 2 or more monthly visits/contacts	48%	52%	53%	52%	50%	32%

Data - Item 14

Preserving connections

Central Case Review Questions:

Q: Were efforts made to discover the child(ren)'s American Indian/Alaska Native/ Canadian Indian status?

Q: If the child(ren) was believed to have American Indian/Alaska Native/ Canadian Indian status, was the tribe(s) or the Bureau of Indian Affairs (BIA) contacted to determine the child(ren)'s Indian status?

Q: If the child(ren) was determined to be American Indian/Alaska Native/ Canadian Indian, were there active efforts to include the child(ren)'s Tribe(s) in case planning including placement preference?

Q: If this was a Limited English Proficiency (LEP) or American Sign Language (ASL) family, were translation and/or interpretive services provided?

Q: Was inquiry made with both sides of the family to discover if the child had American Indian/Alaska Native/Canadian Indian status?	2010 Statewide Results	2011 Statewide Results	2012 Statewide Results
	84% 129 cases	85% 319 cases	72% 493 cases

Q: If the parent or relative indicated American Indian/Alaska Native/Canadian Indian status, was the Tribe(s) or the Bureau of Indian Affairs (BIA) contacted to determine the child's Indian status?	2010 Statewide Results	2011 Statewide Results	2012 Statewide results
	71% 49 cases	73% 97 cases	75% 133 cases
Q: If the Tribe determined the child to be American Indian/Alaska Native/Canadian Indian, were there ongoing active efforts to include the Tribe(s) in case planning?	2010 Statewide Results	2011 Statewide Results	2012 Statewide Results
	85% 20 cases	82% 28 cases	84% 44 cases
Q: If this was a Limited English Proficiency (LEP) or American Sign Language (ASL) family, were translation and/or interpreter services provided?	2010 Statewide Results	2011 Statewide Results	2012 Statewide Results
	73% 11 cases	55% 20 cases	29% 42 cases

Data source: Children's Administration Central Case Review

The 2012 Central Case Review found that of 502 cases reviewed, 42 were applicable to LES/ASL services. Twelve cases were fully compliant, 23 were partially compliant and seven were non-compliant. In the 23 partially compliant, an interpreter was used for some interviews but not for other situations and it was not documented that the family no longer wanted or needed an interpreter. In other cases some documents were not translated, and in others there was conflicting documentation as to whether the family was LEP. CA identified translation and interpreter services in the 2012 Case Review report as a statewide area needing improvement and will develop plans to address this issue in FY 2014.

Data – Item 15

Relative Placements

Q: Were actions taken to identify and assess relatives as a placement resource?

Relative Placement	2007 Statewide	2008 Statewide	2009 Statewide	2010 Statewide	2011 Statewide	2012 Statewide
FamLink (State Fiscal Year) July 15 of the year	38.4%	38.7%	37.8%	37.2%	38.1%	39.5%

Data source: Children's Administration FamLink, point in time data

Part 3: Child and Family Well-Being

The healthy development of children in out-of-home care is a fundamental priority of the Children's Administration (CA). *The Final Report: Washington Child and Family Services Review for the State of Washington* recognized high performance in the area of Child Well-Being. The report noted physical health as a strength for Washington State. In the past year, CA has continued to make improvements in multiple areas affecting child and family well-being.

Highlights of the past year include:

- *Monthly social worker visits with children* – On September 30, 2011 the Child and Family Improvement and Innovation Act was signed that revised requirements relating to the submission of data and performance standards for monthly caseworker visits with children in foster care. Using the new method of calculating visits, our performance for calendar year 2012 is 96%, exceeding the national target of 90%. Using monthly FamLink reports, CA continues to communicate performance and follow up with regions, offices, supervisors, and social workers. When measuring performance based on a calendar month snap shot, recent FamLink data shows CA at 95% performance in social worker monthly visits.
- *Meeting the physical health needs of children* – The 2012 Annual Case Review Report showed a decrease from 88% in 2011 to 72% in 2012 of the cases that CA assessed and addressed the physical health needs of the child. Almost all cases that were not achieved were because of the lack of documentation that Well Child Exams and/or dental exams occurred during the past year. We will review this data in detail to determine if this is a statewide issue or a local practice issue and will develop a plan to address the decline in documentation after a thorough review of the data.
- *Timely receipt of EPSDT examinations* – Data from the CA's Child Health and Education Tracking (CHET) Database shows continued improvement in the timely receipt of EPSDT examinations completed within 30 days of a child entering out-of home care. The latest annual data shows an overall completion rate of 96% in FY2012, an increase from 93% in FY 2011.
- *Meeting the educational needs of children in care* - The 2012 Central Case Review reported that in 91% of the cases reviewed for 2012, CA assessed and addressed the education needs of the child, which is the same as was reported in 2011. A monthly quality assurance activity was begun which focuses on the efforts a social worker makes to address the educational needs of school age children and youth.
- *Extended foster care* – In 2011 and 2012, the Washington State Legislature created legislation to support the Federal Fostering Connection Act of 2008. As of February 1, 2013, 196 youth have taken advantage of the extended foster care program.

It is the intent of the Washington state legislature to implement all of the Federal Fostering Connection Act of 2008. In the 2013 legislative session, legislation was passed enacting one of the three remaining elements of the Federal Fostering Connection Act; participating in a program or activity designed to promote or remove barriers to employment.

Challenges to child and family well-being include:

- *Cultural awareness and competencies when working with families* –CA continues efforts to increase cultural awareness and competencies in social workers through increased efforts to address racial disproportionality (as noted in the [Racial Disparity and Disproportionality](#) strategic initiative) and education regarding cultural awareness. In addition to using Building Bridges workshops to address cultural competency, the following is occurring:

- CA developed on-line training called Cultural Competence in Case Planning. Efforts are made to ensure cultural competency is addressed and included in the ISSP (Individual Service & Social Plan) for dependency cases.
- CA held Permanency Round Tables in FY2013 and are planned for FY2014 for 120 cases meeting specific criteria. Cultural consultants are required to be on the panel to advise as teams review these cases for permanency.
- For 2013, CA will continue to meet and work with the state contractor for retention & recruitment of foster homes, Olive Crest Agency, to assist them with fulfilling the task of recruiting & retaining families of color.
- The Fatherhood Engagement Program is a statewide program implemented to work with fathers to get them involved with their children. The program provides education and support as they learn how to navigate through the child welfare system.
- *Involvement of families and caregivers in the case planning process* –As CA improves our Family Team Decision Making model we expect to see further improvement in involving families, youth, and service providers in case planning and service development. We also restructured case planning meetings based on a set of specific principles and stakeholder input.
- *Improving high school graduation outcomes* – The FY 2012 annual Educational Outcomes of Foster Youth Graduation report shows the graduation rate for foster youth in 2011 who were in foster care from 9th grade through 12th grade was 61%, compared to 50% in FY2010. This represents 19 students of the 31 who remained in placement statewide continuously through four years of high school.

For the class of 2010, 50% of children in care from 9th through 12th grade graduated from high school in four years, compared to 73% of all students. Including extended graduation and GED completion, this increases the percentage to 60% which is a substantial improvement. These percentages vary because there are so few children in care from 9th through 12th grades.

During the 2010-11 school year, less than 12% of children in out-of-home foster care changed schools when placed with or moved to non-relatives. This is an improvement of about 1% from the year before, and well below the target.

Services for children age birth to five:

Children's Administration is committed to providing services that are developmentally appropriate for the children we serve. Below is specific information on demographics and developmentally appropriate services focused on younger children.

1. The average number of children birth to five in out of home care over the last four fiscal years has been 4,093 with a low of 3,963 in 2010 and a high of 4,252 in 2012. In FY2013 and 2014 we expect the number of children in out of home care will remain close to the average.
2. FamLink data is used to track demographics and characteristics of children birth to five years old, including:
 - Region/Office child was placed from
 - Age
 - Gender
 - Race/ethnicity
 - Placement Type
 - Length of stay in out-of-home placement

3. Children's Administration requires social workers to assess and identify the child's overall well-being needs and distinct individual developmental needs while placed in out-of-home care. The social worker's on-going assessment is used to match children to a permanent family who have the skills and abilities to meet the short and long-term needs of the child.

CA staff use the Child Health and Education Tracking (CHET) Program to assess children from *birth to five* years old to identify short and long-term well-being needs of the child when initially entering out-of-home care. If developmental or mental health concerns are identified, a direct referral is made to local service providers. Information is shared with caregivers and social workers and is used by social workers to develop an effective case plan and help identify an appropriate placement for the child.

Social workers use the following services to identify and address the well-being needs of the child that can support the child's plan for permanency:

- Early Support for Infants and Toddlers – Washington State's IDEA Part C Program that serves children birth to three
- ChildFind – Referrals are made for children age three to five when developmental concerns are identified. 34 CFR 300.111 (a)(1)
- Head Start/Early Head Start – Federally funded program available to children age three to five that addresses children's social-emotional and developmental needs
- Early Childhood Education Assistance Programs – State funded program for services for children birth to three. Provides a comprehensive assessment for children when developmental concerns are identified, and provides support and interventions as needed
- Medicaid Treatment Child Care (Title XIX) – Provides assessment and therapeutic interventions for developmental and mental health needs in a daycare environment
- Fostering Well-Being Care Coordination Program – Provides care coordination services to children with complex health, mental health, and developmental needs
- Foster Care Assessment Program – Provides a comprehensive assessment for children experiencing challenges to permanency
- The child's assigned Social Worker convenes a Shared Permanency Planning Meeting at least every six months to discuss various aspects of the child's case and provides oversight for the child's well-being and developmental needs as they relate to achieving permanency.
- The child's assigned Social Worker uses an Individual Service and Safety Plan to update the court on the child's well-being, development and progress towards permanency
- Evidence Based Programs that support permanency and reunification of the family
 - Parent Child Interactive Therapy
 - Incredible Years
 - Nurse Family Partnerships
 - Promoting First Relationships
 - Triple P (Positive Parenting Program)
 - Homebuilders
 - SafeCare

4. Healthy attachments influence a child's experiences and set the foundation for positive stable long-term relationships that shape the architecture of a young child's brain and early development and throughout

their adulthood. Children's Administration is dedicated to providing safe, permanent, healthy, social, and emotional attachments for all children served by CA, including small children under the age of five.

Children's Administration's framework that specifically focuses on children under five years old includes the following highlights from the past year:

- Hiring of the Early Childhood Development Program Manager in November 2012.
- Ongoing review of and building on current policies to ensure alignment with early childhood development research and brain science.
- Ongoing collaboration with Department of Early Learning, Thrive by Five and other providers to increase access to evidence based home visiting programs statewide.
- Ongoing collaboration with the Department of Early Learning and other partners to increase enrollment in Head Start and ECEAP. Initial investigation indicates that there is an under utilization of these programs by child welfare.
- Ongoing collaboration with the Alliance for Child Welfare Excellence and Casey Family to create new social worker core training on child development which will highlight the best current science concerning brain development. This is one of the first steps in embedding a set of values in policy and practice with an early learning orientation.
- Ongoing collaboration with external early childhood experts and our partners to expand staff and caregivers skill base through ongoing training opportunities in order to ensure that safety, permanency, and the social emotional well being needs of children in out-of-home care are met at critical developmental junctures.

CA strengthened its assessment of safety and safety plan development and monitoring through the Child Safety Framework, which helps social workers identify and control present and impending safety threats to children, including infants, toddlers and young children.

DLR uses the home study as an assessment to determine for what age groups foster families can provide the best care. When there is an allegation involving inappropriate care of small children, the licenser reassesses the license to be sure that the children the family is licensed to care for best match the ability of the foster family. In addition the department may restrict the number, age, range, or gender of children a foster home is licensed to serve up to the maximum allowed. For example, the maximum foster parent to child ratio for children age 0 – 2 is two children under the age of two, which includes the foster children and the foster parents own children.

CA partners with the University of Washington to provide training to social workers, supervisors, and caregivers on social work practice and various issues related to children in out-of-home placement, including early childhood development. We reviewed and added curriculum for new workers, which is being field tested in Region 1 beginning in April 2013.

Well Being Outcome 1: Families have enhanced capacity to provide for their children's needs

- **Needs and services of child, parents, foster parents**
- **Child and family involvement in case planning**
- **Caseworker visits with child**
- **Worker visits with parents**

UPDATES AND PROGRESS (FY 2013)

Activity	Status
1. Develop audit reports to inform managers of staff's use of FamLink in key practice areas, including monthly visits with children and youth.	Completed and Ongoing: FamLink released the Supervisory Review Tool in FY2013. This tool has been positively received by supervisors in all program areas across the state.
2. Implement Statewide Caregiver Support Plan and individualized support plans for caregivers caring for children with special needs (e.g. Medically Fragile).	Ongoing – See Permanency Section- Outcome 2
3. Expand the Region 2 Father Engagement Project: <ul style="list-style-type: none"> Expand the project from King County to all of Region 2 Provide Father Engagement training to all staff Engage tribes by discussing the feasibility of developing Father Engagement programs within the tribes 	Completed: Program is expanding statewide making resources available to social workers via the internet. Completed: June 2012 Ongoing
4. Keep siblings connected when separated in out of home care by using the placement coordinator quality assurance workgroup created in March 2012. This workgroup will review sibling placement data and make recommendations to CA leadership on ways to increase sibling connections.	Completed and Ongoing

FY 2014

PLANNED ACTIVITIES (FY 2014) - *Well-being Outcome 1: Families have enhanced capacity to provide for their children's needs*

Activity (2014)	Target Date
1. Begin phasing in Family Assessment Response and the resources that will help strengthen families' ability to safely provide for their children's needs.	January 2014 - Initial offices online
2. IV-E waiver dollars will be reinvested in front-end services to try to support families keeping their children safely at home. Successful service integration will hopefully support families to safely care for their children without further agency involvement.	FY2014

Data - Item 17

Needs and services of child, parent and foster parent

Central Case Review Questions:

Q: Were efforts made to assess the father and the mother's needs?

Q: Were appropriate services offered or provided to address the identified needs?

Were actions taken to assess the mother's needs and offer or provide appropriate	2010 Statewide** Results	CY 2011 Statewide Results	CY 2012 Statewide Results

services to address her needs? Were actions taken to assess the father's needs and offer or provide appropriate services to address his needs?	Overall average: 74% Mothers: 82% Fathers: 64%	Overall average: 79% Mothers: 86% Fathers: 71%	Overall average: 68% Mothers: 75% Fathers: 60%
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Data source: Children's Administration Central Case Review

**The 2010 case review data for these questions are based on 152 cases.

Children's Administration will continue to stress the importance of assessing needs and offering services to both the mother and the father through trainings taking place throughout the year.

Foster Parent Survey

The annual [Foster Parent Survey](#) conducted by Washington State University in FY 2012 measures whether caregivers (licensed and unlicensed) feel they receive adequate support from the department for their role as a foster parent. As noted in the table below, CA continues to improve on this measure.

Foster Parent Survey - Washington State University	CY 2007 Statewide Results	CY 2008 Statewide Results	FY 2009 Statewide Results	FY 2010 Statewide Results	FY 2011 Statewide Results	*FY 2012 Statewide Results
Percent of caregivers (licensed and unlicensed) reporting adequate information about foster children	73.5%	71.7%	75.4%	81.4%	82.7%	N/A
Percent of caregivers (licensed and unlicensed) reporting adequate support for their role	74.9%	75.3%	71.1%	75.7%	77.3%	79.0%

*In FY2012, the survey no longer asks the question of whether caregivers feel they receive adequate information about the children in their care. However, the survey did gather the comments made by foster parents in the survey.

Data - Item 18

Child and family involvement in case planning

Central Case Review Questions:

Q#1: Were efforts made to involve the mother in the case planning process on an ongoing basis?

Q#2: Were efforts made to involve the father in the case planning process on an ongoing basis?

Q#3: Were efforts made to involve the child in the case planning process on an ongoing basis?

In 3rd and 4th Quarter 2010 and in CY2011, the tool measured questions #1 and #2. Beginning in CY2012, case review began measuring efforts to engage the child in the case planning process

Q: Were efforts made to involve the mother in the case planning process on an ongoing basis?	2010 Statewide** Results	2011 Statewide Results	2012 Statewide Results
Q: Were efforts made to involve the father in the case planning process on an ongoing basis?	Overall average: 4% Mothers: 82% Fathers: 64%	Overall average: 76% Mothers: 83% Fathers: 66%	Overall average: 67% Mothers: 75% Fathers: 49%
*Q: Were efforts made to involve the child in the case planning process on an ongoing basis?			Child: 74%

Date Source: Children's Administration Central Case Review

**The 2010 case review data for ongoing efforts to engage the mother, father(s) in case planning - based on 150 cases CA addressed the decrease in statewide results for this measure in 2013 through:

- Implementation of the **Fathers Matter** outreach program, which provides tools and resources to social workers to help engage fathers in the lives of their children involved in the public child welfare system
- New data reports to more accurately reflect a social workers efforts to engage parents and children in the case planning process including:
 - An ad hoc report that tracks mother, father and child involvement in Behavioral Rehabilitation Services, Foster Care Assessment Program, Multi-disciplinary Staffing, LICWAC and Family Team Decision Making case planning meetings or staffings.
 - An enhancement to the InfoFamLink report due in CY 2014 will allow routine access to data regarding frequency of and participation in case planning and shared planning meetings.
 - A new FamLink report due in CY 2014 will track the mother, father and child participation in post-placement FTDM.

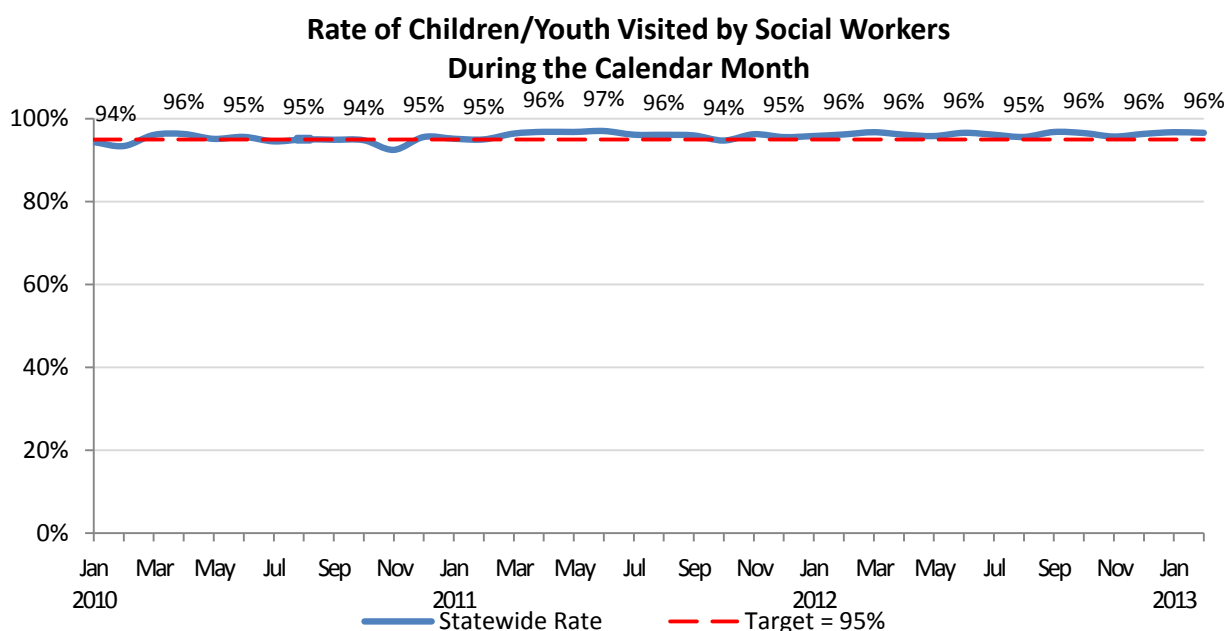
Data - Item 19

Case worker visits with child

For FY2012, as calculated by the new federal guidelines, social workers completed a monthly visit for over 96% of the children in care during FY 2012, exceeding the federal target of 90%. CA visited over 89% of the children in their home, exceeding the federal target of 50%.

When viewing the data with a **month-to-month** look, for the period of January 2010 through January 2013 FamLink data shows that CA continues to exceed the federal target with 96% of children receiving a monthly visit by their social workers.

We believe this increase in performance resulted from monthly quality assurance monitoring of visits by the assigned CA social worker **every calendar month** until the case is closed. Monthly health and safety visits are required for all children in CA custody, their caregivers, parents as well as those who are served by Family Voluntary Services and Family Reconciliation Services social workers.



Data Source: FamLink run date 5/7/13

Central Case Review Question

Two Central case review questions to roll up to the Item #19 measurement:

Q: Was there a monthly in-person visit between the social worker and the child?

Q: Was the quality of the visits sufficient for ongoing assessment of the safety, permanency, and well-being of the child?

Social Worker Visits with Child	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	CY 2011 Statewide Results
Central Case Review	39.0%	35.0%	53.0%	80%	93%

*The 2010 case review data for Item #19 - based on 186 cases

For CY 2012, Case Review measured the two questions individually.

Social worker visits with Child	CY 2012 Statewide Results
Central Case Review	82% (368 cases)
Quality of Visits with Child	CY 2012 Statewide Results
Central Case Review	71% (359 cases)

Data - Item 20

Case worker visits with parents

Central Case Review Question

Q: Was there a monthly in-person visit between the social worker and the mother and the father?

Q: Was the quality of the visits sufficient to address issues pertaining to the safety, permanency, and well-being of the child?

Social worker visits with the mother/father	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	2011 Statewide Results	2012 Statewide Results
Central Case Review	30.0%	20.0%	21.0%	21%	Not measured	31%

*The 2010 case review data for Item #20 - based on 85 cases completed during 1st quarter 2010.

For CY 2012, case review separated the data for the monthly visits with the mother and the father

Social worker visits with Mother	CY 2012 Statewide Results
Central Case Review	38% 335 cases

Social worker visits with Father	CY 2012 Statewide Results
Central Case Review	22% 257 cases
Quality of visits with Mother	CY 2012 Statewide Results
Central Case Review	81% 297 cases
Quality of visits with Father	CY 2012 Statewide Results
Central Case Review	77% 185 cases

- Case review data in CY 2012 shows an increase in performance in the frequency and quality of visit with parents.
- This increase in performance resulted from the implementation of new policy in April 2012 requiring all known parents or legal guardians involved in shelter care, dependency proceedings or voluntary services must receive face-to-face monthly visits by the assigned CA social worker. These visits will occur **every calendar month** until the case is closed, the child becomes legally free or the court determines that reasonable efforts towards reunification are no longer required. For in-home and out-of-home cases, "parents" include the child's biological parents, the child's primary caregiver(s) who the child lives with or from whom the child was removed.
- The Parent Visit Report in FamLink tracks monthly in-person visits between the social worker, mother, and father. This new report provides monthly compliance with this measure.

Well-Being Outcomes 2 and 3: Children receive appropriate services to meet their educational, physical, and mental health needs

- Educational needs of the child
- Physical health needs of the child
- Mental/behavioral health of the child

UPDATES AND PROGRESS (FY 2013)

Activity	Status
1. Increase timely receipt (completed within 30 days of entry into care) of education and health records (Child Health and Education Program)	Ongoing: CA continues to show improvement – overall completion rate of 94% in FY2012, up from 91% in FY2011.
2. Maintain school district agreements.	Ongoing
3. Increase the number of children given an Early Periodic Screening Diagnosis and Treatment (EPSDT) exam within 30 days of entry to care. Continue efforts to increase timely annual EPSDT exams by 1)assisting caregivers to identify a medical provider to complete the EPSDT exam on time 2)implementing a case review of children	Ongoing: The overall completion rate in FY2012 is 96%, which is an increase from 93% in FY2011. This is an ongoing effort. CA provides periodic communications to caregivers and social workers to remind them of this policy. CA completed case reviews for FY 2011 and FY2012, looking at annual EPSDT and mental health/substance abuse treatment and

Activity	Status
who receive an annual EPSDT to identify trends and target efforts to improve performance.	screening received by children in out-of-home placement. Rates were FY 2011 - 92% and FY 2012 – 90%.
<p>4. Work with OSPI and Washington State Institute for Public Policy (WSIPP) to access comprehensive data on education outcomes for foster youth, including on-time graduation and extended graduation (+5 years).</p> <p>Continue Education Advocacy Program services.</p>	<p>Ongoing: CA continues to work on initiatives to understand and improve overall educational outcomes, including:</p> <ul style="list-style-type: none"> • Establishing a data share agreement that provides data to local schools on student foster care status. • Monthly quality assurance activity to monitor the efforts social workers are making to address the educational needs of school age children and youth. • Revisions to the Education Advocacy Program contract: In FFY 2014 there will be a change in the program model with an increased focus on serving high school seniors.
5. Implement the Birth to Five Early Childhood Development framework.	Ongoing: Position for a three year Early Childhood Program manager was posted and filled as of November 1, 2012.
6. Continue ongoing training with phase one and two of legislative requirement for the extended foster care program.	Ongoing
7. Work with the Department of Health, Thrive by Five, Department of Early Learning, and Casey Family Programs to expand training opportunities statewide regarding executive functioning and the best of brain science.	Ongoing
<p>8. Implement case review process for medically fragile children in out-of-home placement to ensure:</p> <ul style="list-style-type: none"> • Child receives ongoing and appropriate health care. • Child's caregivers have a plan to address training and support needs related to caring for the medically fragile child. 	<p>Ongoing: Children's Administration completes a medically fragile case review every 6 months.</p> <p>Case review results for January 2012 to June 2012 = 100% Case review results for July 2012 to December 2012 = 91%</p>
9. Develop on-line report of Medicaid billing data through collaboration of Fostering Well-Being Program and Health Care Authority (HCA), Washington's Medicaid state agency. Report will be available to health care providers, and only for children in out-of-home placement.	Ongoing
10. Update Washington's plan for oversight of prescription medications as required by the Fostering Connections to Success Act of 2008. The plan relies upon the partnership between DSHS and the state's Medicaid agency to maximize expertise and resources to safely, adequately, and appropriately address the health and mental health care needs of foster children.	<p>Ongoing: The Medicaid payment system (Provider One) implemented edits in July and August 2012 to support the safe prescribing of psychotropic medications. Edits are based on:</p> <ul style="list-style-type: none"> • Too many (poly pharmacy) • Too much (appropriate dosages) • Too young (age of the child)

PLANNED ACTIVITIES (FY 2014) - Outcomes 2 and 3: Children receive appropriate services to meet their educational, physical, and mental health needs

Activity (2014)	Target Date
Practice, Program, and Service Enhancements	
1. Based on the recommendations from the <i>An Education Success Strategy for Washington State's Youth in Care & Alumni</i> report, CA will: <ul style="list-style-type: none"> Update the Social Worker Guide for Youth Transitioning from Care to include information on high school completion requirements, college eligibility requirements and options for post secondary success. 	FY2014
2. Implement Quality Assurance activities for the Education Report to support staff in documenting education strategies, current educational status and efforts towards educational success.	Ongoing
3. Continue implementation of the Birth to Five Early Childhood Development framework, highlighting the importance and the consequences of not providing nurturing, secure attachments for children placed in out-of-home care. Activities include: <ul style="list-style-type: none"> Gather input from key staff in regions including Regional Administrators, FTDM Facilitators, Supervisors, Area Administrators, and Placement Coordinators. Make recommendations to management regarding policy and practice changes. Provide extensive targeted and ongoing training for social workers and caregivers through collaborations with the Alliance for Child Welfare Excellence, Casey Family Foundations, Department of Early Learning Department of Health and Thrive by Five. Develop quality assurance activities.	June 2013 December 2013 June 2014
4. Define supervised independent living options as a result of the expanded Extended Foster Care to 21 legislation.	October 2013

Data - Item 21

Education needs of the child

Central Case Review Question

Q: Were actions taken to assess the child's educational needs and offer appropriate services when needs were identified?

Educational needs of child	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	2011 Statewide Results	2012 Statewide Results
Central Case Review	85.0%	85.0%	86.0%	89%	91%	91%

**The 2010 case review data for Item #21 - based on 128 cases completed*

Child Health & Education Tracking (CHET) - Education Domain

Number of children whose educational needs were assessed and documented within 30 days of entering care

FY 2009	FY 2010	FY 2011	FY 2012
72.0%	86.0%	93.0%	96%

Data source: CHET Statewide database

Data – Item 22

Physical health of child

Central Case Review Question

Q: Were actions taken to assess the child's physical health needs and offer appropriate services?

Physical health of child	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	CY 2011 Statewide Results	CY 2012 Statewide Results
Central Case Review	80.0%	75.0%	76.0%	82%	88%	72%

Data Source: Children's Administration Central Case Review

*The 2010 case review data for Item #22 - based on 166 cases

EPSDT within 30-days

Child Health & Education Tracking (CHET) - Physical Health Domain

The data below represents the number of children whose physical health needs were assessed and documented within 30 days of entering care.

FY 2009	FY 2010	FY 2011	FY 2012
72.0%	82.0%	93.0%	96%

Data source: CHET Statewide database

Annual EPSDT

Children's Administration FamLink and Health Care Authority (HCA) Data – In CY2012 66% of children received an annual Early Periodic Screening, Diagnosis, and Treatment (EPSDT) screen.

Physical health of child	CY 2008 Statewide Results	CY 2009 Statewide Results	CY 2011 Statewide Results	CY 2012 Statewide Results
Percent of children with annual EPSDT Screening**	56.5%	57.5%	65.5%	66%

Data source: **EPSDT claims and encounter records from RDA based on HCA records and billing
CY2012 Data Source: Review of 100 cases from FamLink and Medicaid billing data

Data – Item 23

Mental/behavioral health of the child

Central Case Review Question

Q: Were actions taken to assess the child's mental/behavioral health needs and offer appropriate services?

Mental Health of child	CY 2007 Statewide Results	CY 2008 Statewide Results	CY 2009 Statewide Results	2010* Statewide Results	CY 2011 Statewide Results	CY 2012 Statewide Results
Central Case Review	86.0%	81.0%	84.0%	83%	80%	81%

**Data Source: Children's Administration Central Case Review data for Item #23 - based on 108 cases*

Child Health & Education Tracking (CHET) – Emotional/Behavioral Domain

The data below represents the number of children whose emotional/behavioral needs were assessed and documented within 30 days of entering care.

FY 2009	FY 2010	FY 2011	FY 2012
91.0%	93.0%	97.0%	98%

Data source: CHET Database

Part 4: Systemic Factors

Systemic factors directly affect Children’s Administration’s (CA) ability to deliver quality services that help achieve excellent outcomes for children and families. Outlined below are CA’s ongoing efforts, for quality, consistency, accountability and partnerships.

Systemic Factor A: Statewide Information System

CA’s FamLink system is an effective tool to assist management in improving performance outcomes. CA continues to refine and improve the FamLink system to support staff and management. Highlights of the past year include:

- Successful submission of the 2012A AFCARS submission for the 37 Adoption elements and 66 Foster Care elements. This submission continues to lower the error rates to new historic lows.
- Development and implementation of a new Data Request process with staff assigned as Data Request Facilitators in all regions and headquarter divisions. This new process provides Children’s Administration management with their data needs within a clear structure.
- Successful submissions of the 2012A [National Youth in Transition Database \(NYTD\)](#) reports meeting all compliance standards for NYTD. See [CHAFEE](#) section for more information.

UPDATES AND PROGRESS (FY 2013)

Activity	Status
Data System Enhancements and Accountability Tools	
1. <i>Public Reporting Site</i> - The University of Washington - School of Social Work, Partners for Our Children (POC) and the Washington State Department of Social and Health Services - Children’s Administration (DSHS-CA), continue the development and implementation of a web based Washington State Child Welfare Public Reporting Tool.	Completed: The site was completed and available to the public on February 13, 2013. The site can be viewed at: http://partnersforourchildren.org/child-well-being . New features and functionality will be added over time, including expanded data sets, forecasting tools and mapping tools.
2. <i>Revise and automate CA’s Court Report</i> – CA is revising its current court report document, the Individual Safety and Service Plan (ISSP). CA is working with the Administrative Office of the Courts, Guardian Ad Litem/CASA, Office of Public Defense, CA regional staff and federal partners to meet the needs of our courts partners, stakeholders, and clients. Phase I of the Court Report Redesign includes a checklist of the required and optional attachments to the ISSP that a worker can view and print. Phase II includes the detailed design, development, and implementation of a fully automated Court Report and Case Plan to replace the existing ISSP.	Released Phase I on July 22 2012. Completed Phase II design in FY2013 Phase II is scheduled for completion in FY 2014.

3. <i>Port Gamble Tribe IVE</i> - Port Gamble is the first tribe in the nation to engage in a Federal Partnership with the IV-E responsibilities of child welfare services. Port Gamble is working with CA to determine the roles and responsibilities each will have in this new process for child welfare reporting.	Completed : FY2013 and ongoing Port Gamble previously had read only access to FamLink. In FY2013 CA gave Port Gamble the ability to use FamLink as their case management system for their child welfare services.
4. Designed and developed FamLink report to track father and mother visits with children in the home and in out-of-home placement, including by race and ethnicity	Completed: December 2012
5. Developed tools in FamLink to alert the social worker that an upcoming court hearing and notice needs to be sent to the caregiver. FamLink will generate the letter. Develop FamLink report to track compliance with CA policy "Notification to Caregivers of Court Hearings" with the capacity to separate data by race and ethnicity	Completed: December 2012
6. SACWIS Assessment Review scheduled in May 2013 reviewed various components of the Washington State Automated Child Welfare Information System. This review is conducted to secure SACWIS certification and ensure the system meets federal requirements. An Improvement plan will be put in place to address areas needing improvement.	FY 2013 – FY2014
7. An external consulting firm, KPMG, conducted a FamLink review after 4 years of production. Observations and recommendations will be incorporated into the continued improvement plan.	FY2013 and ongoing

FY 2014

PLANNED ACTIVITIES (FY 2014) - Systemic Factor A: Statewide information system

Activity (2014)	Target Date
Data System Enhancements and Accountability Tools	
1. <i>Performance Based Contracting (PBC)</i> - The Washington State Legislature amended RCW 74.13B, requiring the department to issue a request for proposal or request for information no later than December 31, 2013, and fully implement performance-based contracting with Network Administrators no later than July 1, 2015. Modifications to the FamLink system to support PBC and payment methodologies will be completed and implemented in 2014.	FY 2014
2. <i>Case Management Demonstration Sites</i> – The Washington State Legislature amended RCW 74.13.360 to postpone the implementation of the case management demonstration sites until December 30, 2016; the demonstration sites work in FamLink will move to 2015-2016.	FY 2016 – FamLink changes due re: Demonstration Sites
3. <i>Family Assessment Response (FAR)</i> – In FY 2013 - 2014 develop new FAR FamLink tools and training for social workers. FamLink tools scheduled to go live in October 2013.	FY 2014
4. <i>Aging and Disability Services (ADS)</i> use of FamLink resulted in discovering that ADS will need to move from FamLink and create their own system. ADS and CA will work to develop the ADS version of FamLink and move the phase 2 functionality to the new system.	Planning FY 2013-14 Completion FY2014
5. <i>Develop technology to provide monthly statewide data</i> to monitor completion of the CPS Investigative Assessment within 45 days	FY 2013

Systemic Factor B: Court Case Review System

Results from the CFSR statewide assessment indicate strengths in collaboration with partners on the development of a new ISSP/court report, review hearings occurring timely, improvement in tracking timeliness of permanency planning hearings and improved performance in notification to caregivers of court hearings.

Challenges include resources to develop the new court report in FamLink (delayed due to re-prioritization), court scheduling and sufficient time for hearings, and timely notification to caregivers.

Washington courts have seen a dramatic increase in dependency filings since 2009, while termination filings decreased slightly. Four thousand seven hundred thirty-three (4,733) dependency cases were filed in Washington's courts in 2012, a 1% increase from 2011. Termination filings increased 3% to 1,730. However, even with the increased workload since 2009, 94% of review hearings were held within six months of the petition or the previous review hearing. Further analysis is required to determine the cause of the increase in filings. CA believes dependency filings will decrease and more children will remain safely at home as we strengthen the Safety Framework and continue to increase and focus on Family Team Decision Meetings throughout the state.

Over the past year, activities include:

- *Ongoing work to develop a new court report to replace the ISSP* -- While this activity was delayed in FamLink, CA completed a considerable amount of work with the Administrative Office of the Courts and other stakeholders over the past year to define the needs for a quality court report and help design the functional needs in the FamLink System. Anticipated completion date is FY2014.
- *Continued focus and improvement in caregiver notification of hearing* --FamLink tools were developed to help ensure notice is given to caregivers and track compliance. These tools were implemented in December 2012. Current data reflects low rates of notification (approximately 8%). This is due to the transition to the new process and inconsistent use of the tools. CA is reviewing the data and developing further strategies with the CQI board to address this.
- *Ongoing work with the Administrative office of the courts to improve the timeliness of filing for Termination of Parental Rights* -- includes verifying the accuracy of timeliness, clarifying definitions and links to information to assure accurate reporting of timeliness of filing, and developing training for judicial officers and court clerks based on assessments of information and reporting.
- *Case Planning meetings* - Case planning meetings have been restructured based on a set of specific principles and stakeholder input. Local Indian Child Welfare Advisory Committee staffings were not modified as they focus solely on Indian Children related to both ICWA and Washington ICW laws. Implemented December 2012.
- *Ongoing collaboration and partnership* on the APSR, CFSR and IV-E program improvement plans.

UPDATES AND PROGRESS (FY 2013)

Activity	Status
1. CA and Administrative Office of the Court (AOC) work with FamLink to produce routine data exchanges. AOC will use data to develop management reports for individual courts.	<i>Ongoing</i>

Activity	Status
2. <i>Workgroup on "Timeliness of Dependency Case Processing: Annual Report 2010"</i> - The Washington State Center for Court Research convened a workgroup that included representatives from the courts, CA, the Office of the Attorney General, the Office of Public Defense and Washington State CASA . The report is now published every year. Work on the CY2012 report is underway to include information on racial disproportionality.	Completed
3. Development of FamLink functionality that alerts social workers 30 days prior to scheduled court hearing and generate the Caregiver's Court Notification letter notifying the child's caregiver of the date, time and location of the upcoming court hearing and their right to be heard at the hearing. Development of FamLink functionality that allow social workers to document the date the Caregiver's Court Notification Letter was provided to the caregiver and the delivery method used.	Completed: December 2012 Completed: FY2013
4. Court Improvement Training Academy (CITA) will provide multidisciplinary training for Reasonable Efforts Symposia (RES) to include judges, CA and other child welfare partners. Children's Justice Conference will include workshops that address the case review process.	Ongoing
5. Development of a new court report generated from FamLink	Completed: Phase 1 and Phase 2 design FY2013; Implementation scheduled for FY2014
6. The process of caregivers sending reports directly to juvenile court was assessed and determined not to be feasible. FamLink was updated to include court addresses in all jurisdictions. This information is included in the caregiver letter.	Completed

FY 2014

PLANNED ACTIVITIES (FY 2014) - Systemic Factor B – Court Case Review System

Activity (2014)	Target Date
Practice, Program, and Service Enhancements	
<ul style="list-style-type: none"> Representatives from the court improvement training academy will meet with local courts and court partners in the jurisdictions with the lowest rate of timely filing of TPR petitions to identify local barriers and strategies to improve timely filing. 	FY2014

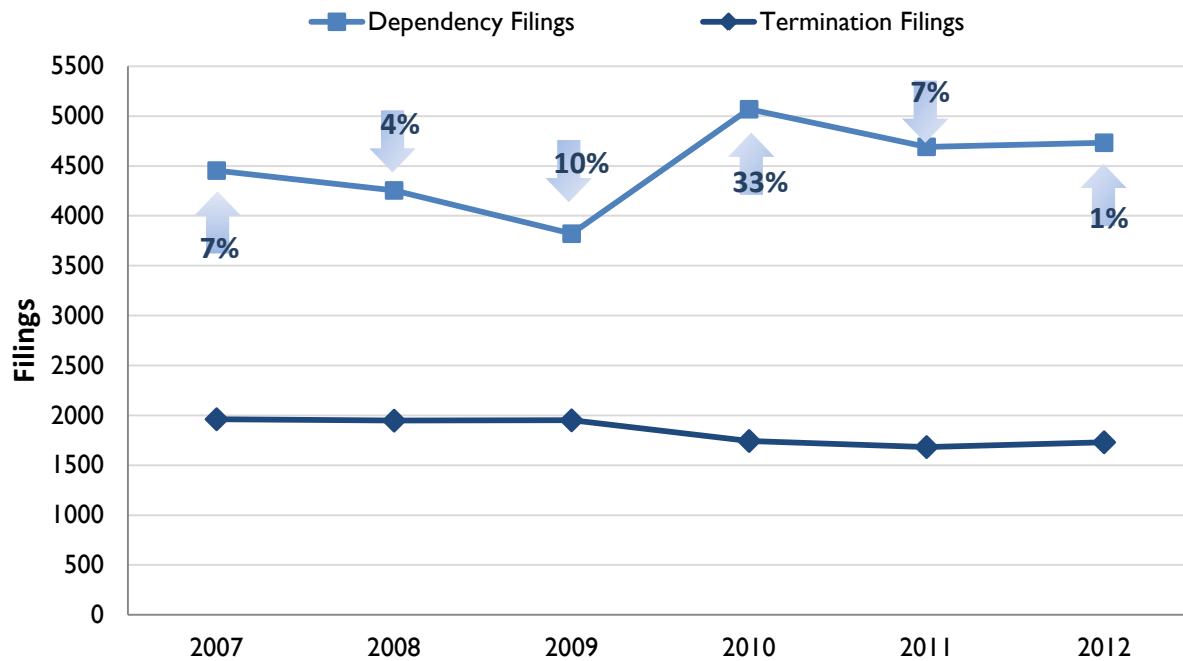
Systemic Factor Data - Coding changes occurred in 2009 which impacts the data for items 26, 27 and 28 in the annual report: *Timeliness of Dependency Case Processing 2010*

Data – item 26

Periodic reviews

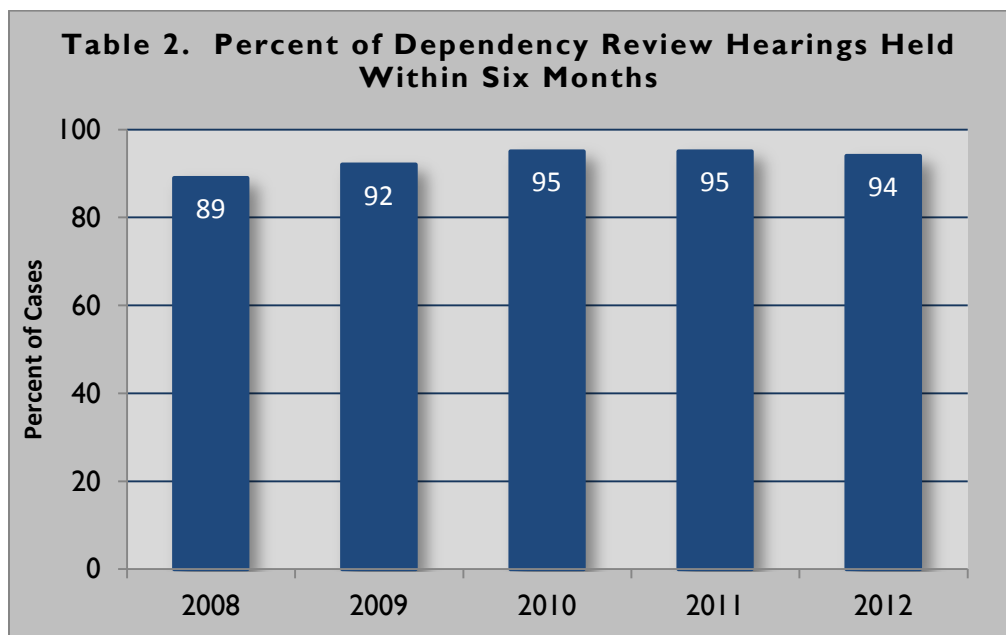
Washington courts filed 4,733 dependency cases in 2012, a 1% increase from 2011. Termination filings also increased 1% to 1,730.

Table 1. Number of Dependency and Termination Filings from 2007 - 2012



Data Source: Timeliness of Dependency Case Processing 2012

Ninety-four percent of review hearings were held within six months of the petition or the previous review hearing (see Table 2). The trend over time suggests the rate is holding steady over the past 3 years.

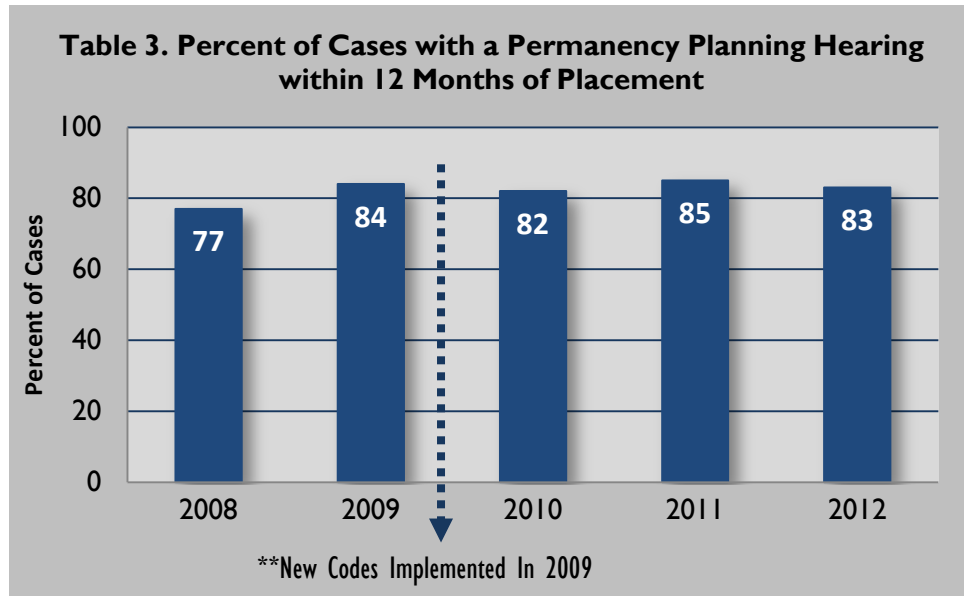


Data Source: Timeliness of Dependency Case Processing 2012

Data – Item 27

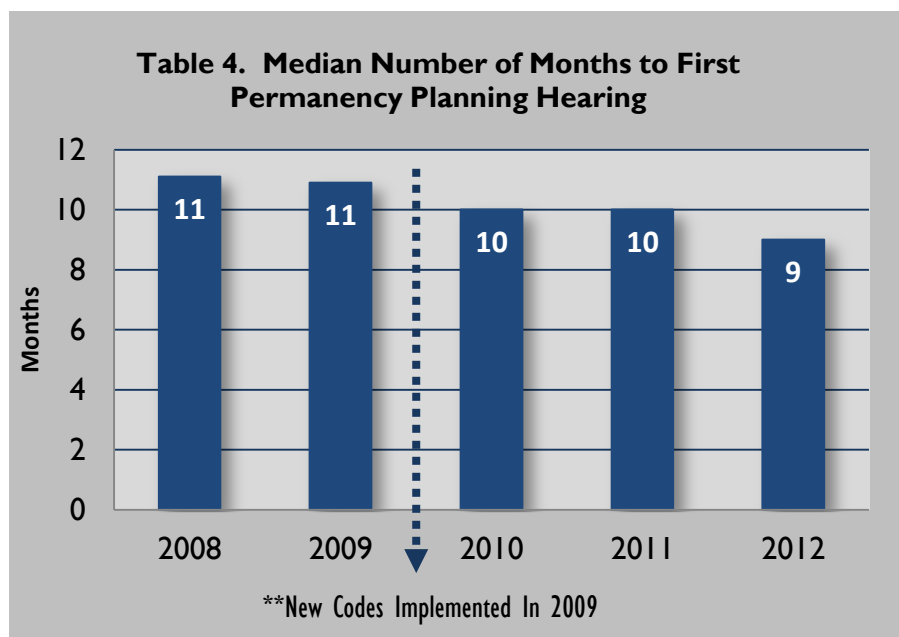
Permanency Hearings

Table 3 shows the percentage of cases where the first permanency planning hearing occurred within 12 months of the first placement episode, meeting the statutory requirement. Using data from all counties, 83% of permanency planning hearings due in 2012 were held in a timely manner. For the sample of 12 counties with historical data, the data suggest that timely hearings are holding steady since 2009.



Data Source: Timeliness of Dependency Case Processing 2012

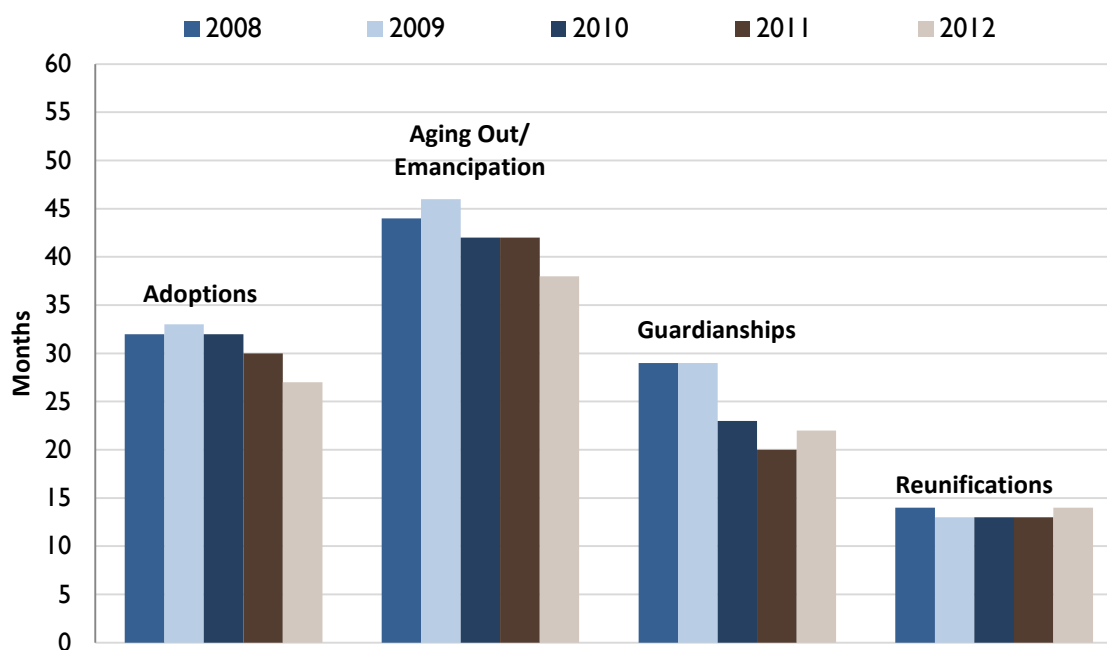
Table 4 (below) shows the median number of months to the permanency planning hearing improved in 2012 for the 12 counties with historical data. On average, the hearing took place 9 months after the beginning of the first placement episode.



Data Source: Timeliness of Dependency Case Processing 2012

The length of time in out-of-home care differs considerably depending upon the type of outcome (see Table 5). For reunifications, the average length of time was 13 months for the last five years. For guardianships and adoptions, the length of time was considerably longer (22 months and 27 months, respectively, in 2012). Those children who reached the age of majority without permanency were in out-of-home care for an average 38 months in 2012.

Table 5. Median Number of Months Spent in Out-of-Home Care Until Exit Outcome



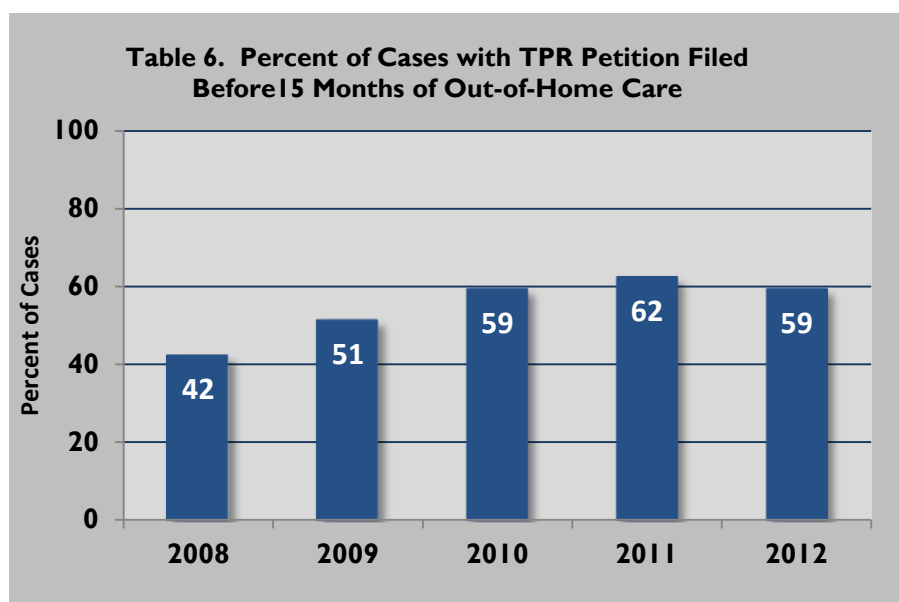
Note: Data for Table 5 include cases that achieved a final outcome by 12/31/2012. Data are presented by the placement exit year shown in FamLink

Data Source: Timeliness of Dependency Case Processing 2012

Data – Item 28

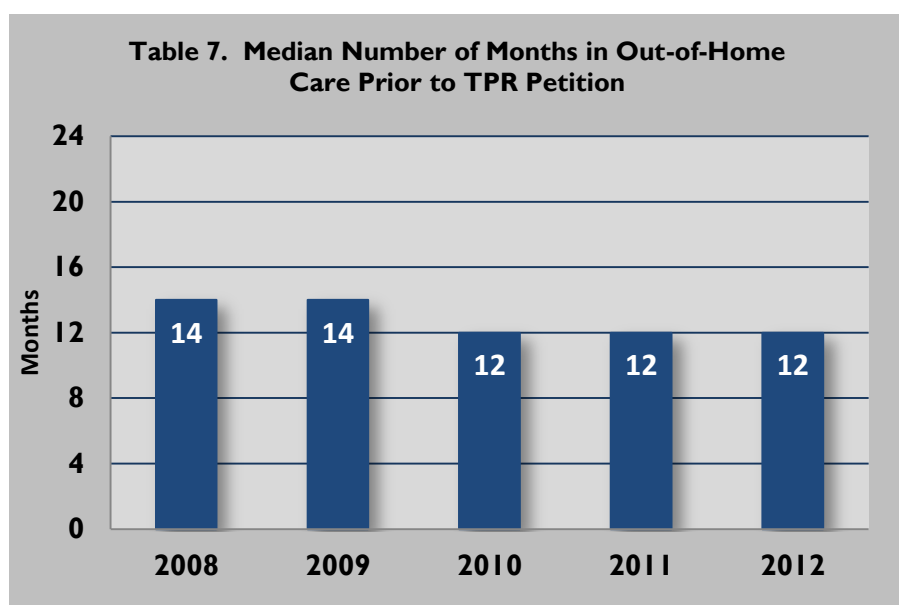
Termination of parental rights

Report Data - According to the *Timeliness of Dependency Case Processing in Washington 2012 Annual Report*, “Termination of parental rights (TPR) petitions before 15 months in out-of-home care” remained relatively stable over the last three years, since increasing in 2009. While the majority of children spent more than 15 months in out-of-home care prior to the TPR petition, many cases are exempt from the statute as they involve relative placements, Native American children, or have other documented compelling reasons why a TPR petition was not filed. Of the non-exempt cases, 59% achieved the time standard in 2012. (Table 6)



Data Source: Timeliness of Dependency Case Processing 2012

Table 7 shows the median number of months of out-of-home care to the TPR petition has remained steady since 2010 at 12 months.



Data Source: Timeliness of Dependency Case Processing 2012

**It is important to note that beginning in 2009, changes to the dependency coding system included new docket codes to identify cases in which there were compelling reasons for not filing a termination petition. The need to identify "good cause exceptions" was based on anecdotal reports from judicial officers that such exceptions were often involved in dependency cases. However, analysis of the use of these codes indicated that only about 5% of cases were noted as having good cause exceptions. Further investigation is needed to determine if this low percentage is an accurate indicator of cases with exceptions or if it is due to implementation issues with the new codes. It is possible that a significant portion of cases, which fail to meet the time standard, do in fact involve exceptions and should be excluded from analysis.*

Systemic Factor C: Quality Assurance

Washington's quality assurance and continuous quality improvement system is evolving. We have mechanisms in place to regularly assess compliance and the quality of programs and practice. We also have processes in place to engage staff, tribes, and stakeholders to identify and analyze strengths and problems, develop and implement improvement strategies, and monitor progress to learn from and revise solutions.

We recently completed a self-assessment of our QA/CQI system using the five essential components the Children's Bureau identified in their August 2012 memorandum. Assessment results confirmed our system is still evolving and enhancements are needed to institute a comprehensive, coordinated, well-functioning and meaningful QA/CQI system for child welfare in our state. Below is a summary of the assessment results we will use to develop a statewide QA/CQI system improvement plan:

Component	Strengths	Improvement Needs
Foundational Administrative Structure <u>Assessment</u> Moderate improvement work <ul style="list-style-type: none"> Statewide oversight and authority over implementation of CQI CQI consistently applied across state Approved training process for staff, contractors, stakeholders conducting CQI activities Written policies, procedures, practices for CQI Capacity and resources to sustain ongoing CQI 	<ul style="list-style-type: none"> Leadership commitment to QA/CQI Some realignment/assignment of staff to new Quality Improvement & Risk Management Division Statewide CQI Board and array of external stakeholder groups: Children, Youth, and Family Services Advisory Committee/Citizen Review Panel; Indian Policy Advisory Committee, Washington State Racial Disproportionality Advisory Committee, Passion to Action Youth Advisory Committee, Washington State Parent Advocacy Network, Foster Parent Consultation Committee (1624) QA positions in each region and QA/CQI part of state/regional program manager positions Some practice-specific QA Plans/CQI Reports Some strong QA/CQI systems in place (QA leads, case review, critical incident review, external oversight of technology projects) 	<ul style="list-style-type: none"> Formalized infrastructure/framework for comprehensive, meaningful and sustainable QA/CQI systems statewide Application and CQI process consistently applied across the state and stakeholder groups Integration/coordination of QA/CQI activities across the state, divisions, and initiatives Capacity and resources to facilitate and support QA and CQI (use of technology for CQI) Repeatable processes QA/CQI of QA/CQI activities Training and communication plan Updated CQI policy, procedures, and practices

<p>Quality Data Collection</p> <p><u>Assessment</u> Moderate improvement work</p> <ul style="list-style-type: none"> ▪ Ability to input, collect, extract quantitative and qualitative data from variety of sources to address issues important to CA ▪ Case level data shows instruments/ratings completed and consistent with instructions ▪ Clear process to collect/ extract accurate data consistently implemented and documented with audit mechanism to verify process followed ▪ Process to identify and resolve data integrity issues and inform recipients ▪ Monitors federal requirements/ guidelines and uses quality utilities/tools to ensure accurate data (i.e. AFCARS, NCANDS, CFSR, NYTD) 	<ul style="list-style-type: none"> ▪ Abundant amount of data available ▪ Processes/resources to validate reports ▪ Great tools ▪ Standardized instruments, inter-rater reliability for Central Case Review ▪ Use of targeted case review ▪ National leader for NYTD, meeting all federal standards for AFCARS, NCANDS, and NYTD data collection and reporting processes in place ▪ Staff, courts, Tribes involved in data collection activities ▪ Partnerships, research, and child welfare data collection by external agencies 	<ul style="list-style-type: none"> ▪ Priorities for data collection outside mandated requirements ▪ Alignment of frequency of data collection/reporting with practice/ agency priorities ▪ Input of quality data into FamLink ▪ Availability and focus on qualitative data, integrated with quantitative ▪ Prioritization for development/ validation of FamLink Reports ▪ Coordination/QA of targeted case reviews ▪ Efficiency and quality of data collection activities ▪ Measurement of customer satisfaction ▪ Measurement of quality of contracted services ▪ Documentation of data collection / reporting processes
<p>Case Record Review Data and Process</p> <p><u>Assessment</u> On Track</p> <ul style="list-style-type: none"> ▪ Review includes reading case files and interviewing parties in case ▪ Sampling methodology meets criteria (child pop, stratification, statistical inferences) ▪ Schedule represents populations served and significance of other demographic/ practice issues ▪ Case level data provides context and agency performance ▪ Detects quality of services ▪ Reviewers are trained, qualified, with inter-rater reliability ▪ Written manuals/ instructions ▪ Process to conduct ad hoc/special reviews 	<ul style="list-style-type: none"> ▪ Central Case Record Review team in place for 11 years ▪ Case review process understood, valued, and recognized by staff ▪ Process is a staff engagement and learning tool ▪ ICW case review and collaboration with Tribal Representatives is a national model ▪ Team members are trained and have inter-rater reliability ▪ Comprehensive review tools, criteria, procedures posted on intranet ▪ Review includes parent interviews ▪ Automated data collection and reporting functionality ▪ Sample is stratified and schedule meets federal requirements ▪ Tools and reports available to staff on web 	<ul style="list-style-type: none"> ▪ Capacity to review offices/programs more frequently than every two years ▪ Ability to be responsive to need, prioritize offices/program areas based on practice issues ▪ Coordination with targeted case review activities ▪ Cross-training with practice model, Solution-Based Casework ▪ Consultation with Children’s Bureau regarding potential increased standards for case record review (i.e. interviews, sample large enough to make statistical inferences)
<p>Analysis and Dissemination of Quality Data</p>	<ul style="list-style-type: none"> ▪ State, regional, local data is aggregated and available to staff using FamLink and judicial interactive 	<ul style="list-style-type: none"> ▪ Priorities for data analysis and dissemination of data ▪ User/reader-friendly, accessible

<u>Assessment</u> Significant improvement work	spreadsheets <ul style="list-style-type: none"> Some data reports are available on internal/external websites Some data reports are user-friendly and interactive Some data reports show trends, context, analysis, improvement activities QA lead role to participate/facilitate data analysis Widespread interest internally and externally to obtain, understand data , participate in review and analysis, provide feedback (agency decision-makers, courts, tribes, staff, stakeholders) 	data reports that show trends over time, and at a glance dashboards for priority measures <ul style="list-style-type: none"> Translation of results for use by staff and stakeholders, followed by dissemination and engagement in analysis and findings Coordination of data analysis activities and process to regularly share results Refinement of data analysis plans; quality over quantity Analysis and understanding of data at all levels (training, technical assistance, qualified expertise)
Feedback to Stakeholders and Decision Makers and Adjustment of Programs and Process <u>Assessment</u> Significant improvement work	<ul style="list-style-type: none"> Performance reports used at state and regional level to improve practice, services and monitor progress toward goals Leadership, oversight and governing bodies, Tribes, and some stakeholders use quality data to monitor performance and assist with system, program, and practice improvement Statewide program leads use results to inform training, policy, goals and strategy work Case record review procedure includes action planning process to address improvement needs Information sharing/feedback with the Alliance for Child Welfare Excellence (SBC Coaches) 	<ul style="list-style-type: none"> Communication/ sharing data analysis and findings with staff and stakeholders to drive practice improvement, including why Results used by area administrators, supervisors, field staff to assess and improve practice (time, usability, relevant content, support/coaching) Focus on strengths , communication of what/where is it working well Local office action plans to address improvement needs Effectiveness and assessment of strategies and action plans Communication of adjustments/ actions taken to address findings Monitoring of progress/trends Formalized recommendation process to submit, vet, prioritize, assign, track, report status and trends

As reflected in our QA/CQI system assessment above, many components and elements are in place and functioning well, such as our eleven-year case record review process to evaluate the quality of services provided and the amount of data/information we have available to inform our CQI work. We also recognize there are opportunities to strengthen our system, particularly related to data analysis, sharing findings, and using results. We have interest, commitment, expertise, partnerships and successes to build on as we develop and implement a system

improvement plan.

Throughout our APSR report is evidence of QA/CQI data and results used to measure progress, update goals and strategies, and use of funds. Highlights of practice and systems improvements based on QA/CQI findings are integrated within each section of the report.

Additional QA/CQI system highlights from the past year include:

- *Infrastructure changes* to realign staff, hire QA/CQI manager, and redefine the Office of Risk Management as the Quality and Practice Improvement Division. The division brings together QA/CQI, Case Review, Critical Incidents, Practice Consultation, Constituent Relations, and Torts.
- *Restoration of statewide CQI Board (internal stakeholders) and agreements with stakeholder groups* to participate in CQI by analyzing information presented and provide recommendations for system, program, and practice improvement.
- *Completion of Central Case Reviews for 16 local offices and publication of CY2012 Statewide Case Review Report* consisting of more than 500 randomly selected cases. Local offices developed action plans to address improvement needs and are required to track and report completion. The statewide CQI board and stakeholder groups will review the statewide report and discuss strategies identified and/or recommended for CQI.
- *Completion of two statewide Central Case Reviews:*
 - *Indian Child Welfare (ICW) Case Review.* The ICW Case Review was conducted in partnership with Tribes. State and regional reports include comparison to 2009 performance. Recommendations for QA/CQI plans and statewide systemic issues are identified in the report and an ICW QA/CQI plan is being developed to address improvement needs.
 - *Timeliness and Comprehensiveness in DLR/CPS Investigations of Children in Licensed Care.* Review results showed 95% of a random sample of 296 referrals/intakes alleging child abuse/neglect of children in out-of-home care received thorough investigations.
- *Development and implementation of program/practice specific QA plans and CQI reports.* QA Plans define measurement and data collection plan and CQI reports show results of data collection and analysis, communication of findings, stakeholder involvement, and actions plans for CQI.
- *Development and implementation of Targeted Case Reviews* to assess specific practice areas and monitor progress on Braam Settlement Agreement, Solution-Based Casework and Safety Framework. Results inform QA/CQI Plans and Reports, including action plan to improve practice.
- *Centralized and strengthened child fatality review process* and implemented a new practice to review some child near-fatalities and serious injury cases (see Part 1 Safety section).
- *Implemented strategies to increase consistency of intake screening decisions* across the state based on results of the 2011 Statewide CPS Intake Review. Strategies completed during CY2012:
 - Creation of Intake Practice/Training Guide and Intake Specialized Training
 - Monthly consensus building calls for all intake supervisors, AA's and program staff. Six intakes are identified, summarized and provided to participants in advance. Participants discuss and engage in consensus building. Results are shared with intake specialists statewide.
 - Ongoing meetings for state /regional intake leads and CPS program managers to review and analyze data, discuss intake screening decisions, policies/procedures, etc.
 - Refresher training for all staff on RCW and WAC definitions of child abuse and neglect and mandated reporting. A pre-test focused on intake scenarios and screening decisions.

PROGRESS AND UPDATES (FY 2013) - Systemic Factor C: Quality Assurance

Activity	Status
Practice, Program, and Service Enhancements	
1. Improve response to critical incidents	Completed: and ongoing– See Safety Section
2. Implement new full-time Program Evaluation Managers (PEMs) positions to determine compliance with policy and required practice and provide consultation, evaluation and data for specific program areas.	Revised and On hold: The plan to develop Program, Contract, and Fiscal PEMs, to monitor the PBC contract is on hold due to the rescission of the RFP for the PBC contract. In the interim, the PEM QA/CQI responsibilities are being incorporated into program manager positions.
3. Form special QA/CQI teams to develop QA plans, monitor data, track progress, identify and address practice improvement needs.	Ongoing: Formed teams for Safety Framework, Practice Model-Solution Based Casework, FTDMs, Unified Home studies, Case Planning Meetings and Notification to Foster Parents of Court Hearings
4. Develop and use FamLink on-line management and ad-hoc reports to manage performance and staff use of FamLink.	Ongoing: CA uses FamLink reports to help manage, inform practice, and improve performance. Report development, refinement, and validation continue. See also Statewide Information System
5. Conduct a statewide Central Case Review of compliance and quality of DLR/CPS practice of children in licensed care.	Completed: April 2013
6. Conduct statewide Indian Child Welfare Case Reviews in collaboration with tribal representatives in six locations in Washington state.	Completed: Report issued February 2013
7. Maintain a statewide Continuous Quality Improvement (CQI) board to review and highlight areas of program and practice identified as strengths and challenges.	Ongoing
8. Add an external stakeholder advisory group to support CQI activities.	Initiated and In-Process

FY 2014

PLANNED ACTIVITIES (FY 2014) - Systemic Factor C: Quality Assurance

Activity (2014)	Target Date
Practice, Program, and Service Enhancements	
1. Develop and implement QA/CQI system action plan to address improvement needs identified in self-assessment based on federal memorandum on QA/CQI.	FY2014
2. Continue use of Central and Targeted Case Reviews to assess compliance and quality of practice and inform QA/CQI process.	Ongoing
3. Refine existing and develop new QA Plans and CQI Reports for additional program areas with child safety as the priority.	FY2014

4. Develop CQI curricula for inclusion in staff and supervisor training provided by the Training Alliance.	FY2014
5. Participate in national ongoing peer-to-peer workgroup facilitated by the National Resource Centers for using data to improve outcomes.	Ongoing
6. Request training or technical assistance from the Training Alliance, Casey Family Programs, Partners for Our Children, and/or the Children's Bureau National Resource Centers to assist with strategies for data analysis, sharing findings and use of results.	Summer 2014

Systemic Factor D: Staff and Provider Training

Children's Administration's comprehensive training plan is located in [Section IV](#), and provides the details of our training program and services for staff and caregivers.

Systemic Factor E: Service Array and Resource Development

Inventory of Purchased Services by Area of the State

During late FY 2012, Children's Administration worked with families, caseworkers, tribes, stakeholders, and community partners to take a fresh look at what families need to keep their children safely at home or to facilitate and maintain reunification. This resulted in the service array to be procured through the Request for Proposal (RFP) for services.

Children's Administration is working to implement Engrossed Second Substitute House Bill 2264 , which became law on June 7, 2012. It required CA to contract with one or more network administrators that may provide services directly or through a subcontract, and will be responsible to provide the Family Support and Related Services that are included in the family's case plan within the funds available.

The statute required the department to issue a request for proposal, released on January 15, 2013, for Family Support and Related Services and to contract for these services under a performance-based contract. However, due to concerns raised by the organizations that were expected to bid on the proposal, DSHS rescinded the RFP on March 13, 2013. We will be seeking additional input from partners and stakeholders and looking for opportunities to enhance the solicitation. The Washington State Legislature amended the statute, which now requires the department to release a new RFP by December 2013, and to fully implement contracts by July 2015.

Evidence Based Practices

New legislation passed in 2012 will enhance the work of Children's Administration by increasing the use of Evidence Based Practices (EBPs) and the efficiency of supporting these services.

A report to the Governor and legislature by the Department of Social and Health Services and the Health Care Authority with recommendations to implement this legislation is due December 30, 2013. CA maintains a focus on developing evidence-based and research-based programs in cost-effective and sustainable ways.

CA also continues to train providers on the various EBPs, monitor program fidelity, and support our staff in matching the needs of families and children in Washington state to the right service.

UPDATES AND PROGRESS (FY 2013) - Systemic Factor E: Service Array and Resource Development

1. Identify categories of Family Support & Related Services based on input received through June 15, 2012. CA developed the service array based on consultation with staff, stakeholders, and tribes. (See Service Array)	Completed July 13, 2012
2. Issue Request for Proposal (RFP) for Family Support & Related Services to be provided by network administrators.	Completed January 15, 2013
3. Rescinded the RFP for Family Support & Related Services	March 13, 2013
4. Completed a baseline assessment of the use of evidence-based and research-based practices reported in DSHS report issued June 30, 2013	Completed June 30, 2013
5. Released EBP guidance tool to assist social workers in selecting evidence-based services that match the needs of families and children. Available to CA staff and public partners.	Completed April 23, 2013

FY 2014

PLANNED ACTIVITIES (FY 2014) - Systemic Factor E: Service Array and Resource Development

Activity (2014)	Target Date
1. Consult with staff, providers, and stakeholders to inform enhancements to the solicitation.	August 2013
2. Issue RFP or RFI for Family Support & Related Services to be provided by network administrators.	December 31, 2013
3. Work with other agencies and DSHS administrations to create a report for the Governor and Legislature on recommended strategies, timelines, and estimated costs for increasing the use of evidence-based and research-based practices. In progress	December 30, 2013: Report due

Systemic Factor F: Responsiveness to the Community

The CFSR Statewide Assessment indicates strength in engagement of tribes and stakeholders, and use of tribal and stakeholder feedback to inform policy and practice. *The Final Report: Washington Child and Family Services Review – February 2011* also notes this area as being in substantial conformity with the systemic factor of Responsiveness to the Community.

Children's Administration continues to increase its efforts to involve stakeholders and community partners to ensure those impacted by child welfare work are included in the substantive discussions about that work.

Throughout this document, we describe our consultation and collaboration with tribes, community stakeholders, caregivers, youth, juvenile courts and other public and private child and family service providers. Challenges include differing approaches across DSHS administrations, sharing information efficiently, and budget reductions that affect CA's ability to meet the needs expressed by communities and stakeholders.

In the past year, CA continued to improve and strengthen collaboration by focusing on:

- Providing ongoing opportunities for a wide range of stakeholders, court and tribal representatives to provide input in a timely and meaningful way. This includes input into policy and practice changes, Program Improvement Plan, and the Annual Progress and Services Report (APSR).
- Careful consideration when developing policy and program changes as to who is impacted and how those who are impacted can effectively have a say in the process.

Collaboration efforts in Fiscal Year 2013 include:

- Increase the use and support of [Evidence Based Practices](#)
- Implement recommendations to address findings in the Office of Family and Children's Ombudsman (OFCO) 2012 Annual Report through workgroups with community partners and stakeholders
- Develop plans to implement [Family Assessment Response](#)
- Continue implement the [Expansion of Foster Care to 18-21](#)
- Strengthen consistency of practice by enhancing the delivery of education, training, and professional development opportunities through the [Training and Education partnership](#)
- Implement the [Birth to Five Framework](#)
- Strengthen educational success of children and youth in foster care through collaboration between child welfare, education and the Courts.
- Address the findings from the [Indian Child Welfare FY2013 case review](#)
- Continue to Implement and expand the Fostering Well-Being Program

The following committees or advisory groups provide regular and ongoing collaboration and consultation to Children's Administration:

- Children, Youth and Family Services Advisory Committee
- Indian Policy Advisory Committee
- Washington State Racial Disproportionality Advisory Committee
- Foster Parent 1624 Consultation Team
- Supreme Court Commission on Children in Foster Care
- Foster Parent Hubs and Regional Foster Parent Meetings
- Foster Parents Association of Washington
- Transformation Design Committee
- Court Improvement Advisory Committee
- IV-E Waiver Advisory Committee
- University of Washington Partners for Our Children
- University of Washington School of Social Work and Eastern Washington School of Social Work Statewide Education Committee
- University of Washington Evidenced Based Practice Institute
- The Casey Family Program
- National Resource Centers of the Children's Bureau

- Catalyst for Kids
- Superior Court Judges Association sub-committee for children and families
- Passion to Action Youth Advisory Committee
- Provider groups
- Private Agencies
- Veteran Birth Parents Advocacy Committees

CA used the work of stakeholders to inform and develop the Annual Progress and Services Report; many of these same stakeholders were part of the review of the APSR before its finalization.

Ongoing coordination of services and benefits with other DSHS administrations and partners continue to be an area of focus, including:

- Continuing DSHS's on-going efforts to collaborate across systems, we partnered with the Juvenile Rehabilitation Administration and Models for Change to focus on specific areas of improvement, which include:
 - Using Integrated Case Management teams to create shared service plans to help stabilize youth placements and behavior. Children's Administration continues to partner with the Juvenile Rehabilitation Administration to integrate the wraparound approach through the implementation of Integrated Case Management. CA has developed, but will not begin to provide, on-line training to staff on wraparound principles and practices until after July 2014, in order to coordinate with the Division of Behavioral Health and Recovery (DBHR) WISE services. DBHR is implementing WISE –wraparound with intensive services through mental health – scheduled for July 2014.
 - Reducing racial and ethnic disparities
 - Improving the way the system identifies and responds to youth with mental health needs
 - Improving coordination and collaboration of care for youth served by multiple systems, especially in child welfare and juvenile justice, through integrated case management by:
 - Removing barriers that inhibit services to youth and families
 - Maximizing funding through shared resources
 - Streamlining services to create efficiencies that reduce duplication of work and services
 - Providing seamless case management
 - *Memorandum of Understanding* between CA and JRA was revised and approved in November 2012. The MOU is designed to enhance discharge planning for youth. The MOU will provide clarification of roles and responsibilities, including
 - Clearly identify who has lead responsibility
 - Begin discharge planning at entry to JRA facilities and county detentions
 - Create opportunities for joint involvement in shared planning meetings
 - *Ongoing joint DSHS meetings between Economic Services Administration (ESA), JRA, CA, Aging and Disability Services (ADS)* to more fully collaborate across administrations, work on systemic level issues such as policy and practice that cross administrations and impact one another. For example:
 - Joint staffings across administrations to ensure cross system linkages.
 - Cross-administration group meets monthly and to work on real and perceived policies and barriers that interfere with necessary services for children and their families.

- The System of Care Grant includes a plan to embed Child and Family Teams across systems for complex children and their families. We are coordinating with our mental health partners in the development of the Child and Adolescent Needs and Services screen, which is a tool that will identify mental health needs and services.
- Work with Health Care Authority on the Fostering Well-Being Program to build medical provider capacity to provide EPSDT exams for foster children, and coordinate services for children who are medically fragile or have special needs. The Fostering Well-Being Program has expanded its program by an additional nurse to increase capacity in care management and quality assurance reviews of medically fragile children entering our system.
- The Fostering Well-Being Program transferred to the Aging and Long-Term Care Administration where they implemented many activities around EPSDT/well-child exams for foster children. Current activities include a focus on Medically Fragile children who come into care and their care coordination needs.

Systemic Factor G: Foster and Adoptive Home Licensing, Approval and Recruitment

- Standards for foster homes
- Standards applied equally
- Requirements for criminal background checks
- Diligent recruitment of foster and adoptive homes
- State use of cross-jurisdictional resources for permanent placement

Children's Administration's standards for foster family homes and child-placing agencies meet or exceed recommended national standards. *The Final Report: Washington Child and Family Services Review – February 2011* also notes this area as being in substantial conformity with the systemic factor of Foster and Adoptive Home Licensing, Approval and Recruitment.

Children's Administration is committed to safety, quality and one practice standard for relative, foster and adoptive home studies that balance safe quality care for children and flexibility for relative caregivers to safely meet licensing standards.

UPDATES AND PROGRESS (FY 2013)

Activity	Status
1. Revise minimum licensing standards. A draft was provided to Child Placing Agencies, Group Care Facilities, child welfare professionals, Department of Health, State Fire Marshall and the Office of the Attorney General seeking feedback. These WAC changes will be available to the public through the Rules and Policy Assistance Unit prior to finalization of WAC revision.	<i>In Process:</i> After review and finalization, CA will submit the WACs through the Rule process for permanent adoption.
2. CA established a workgroup to recommend changes regarding requirements for adoptions and adoption agencies, in response to the Severe Abuse of Adopted Children Committee	<i>In Process</i>

3. Contract with Olive Crest as the new statewide foster care recruitment and retention contractor. This is a 3-year performance-based contract.	Completed: October 2012
4. Completed targeted case review for Unified Home Studies, and presented QA report to CA Leadership	Completed: April 2013
5. Develop performance measures and monthly reporting system to monitor individual performance related to completion of unified home studies.	Completed: April 30, 2013
6. Targeted case review tool to be redesigned to reflect "lessons learned" in the first review.	In Process: due June 30, 2013
7. Develop plan to re-organize DLR structure temporarily to provide dedicated staff to work on completing adoption home studies.	In process: due June 30, 2013

FY 2014

PLANNED ACTIVITIES (FY 2014) - Systemic Factor G: Foster and Adoptive Home Licensing, Approval and Recruitment

Activity (2014)	Target Date
1. Revise minimum licensing standards. The standards are still in process and we expect to release for the public process by the end of December 2013.	December 2013
2. Collaborate with the Alliance for Child Welfare Excellence to review and recommend changes to foster parent pre-service and in-service training. Competencies are established, and the workgroup is examining options for curricula.	Ongoing workgroup
3. Review targeted case reviews of the Unified Home Study in order to further refine practice and inform policy changes.	June 2014

Data - Item 41

Standards for Foster Home

Children's Administration has exceeded the state requirement of ten percent of state-licensed foster homes monitored for the past eight years.

	SFY 2005	SFY 2006	SFY 2007	SFY 2008	SFY 2009	SFY 2010	SFY 2011	SFY 2012
% of Homes Monitored	12.8%	13.4%	13.4%	13.9%	15.8%	15.3%	15.2%	15.4%
# of State Foster Homes as of July 1	4,055	3,881	3,801	3,957	3,826	3,730	3,659	3,459
# of State Foster Homes Monitored	519	520	508	550	605	571	556	533

Data source: FamLink

Data – Item 45

State use of cross-jurisdictional resources for permanent placement

Data:

In FY 2012, 59 children were referred to the program, which resulted in 48 child specific contracts for adoptive placements. Seventeen children had their adoption finalized during the fiscal year and the remaining children are pending adoption finalization.

Adoption Purchase of Service Contracts		
	Referrals	Executed Contracts
FY 2007	46	35
FY 2008	61	43
FY 2009	64	47
FY 2010	71	31
FY 2011	54	53
FY 2012	59	48

SECTION III:

Chafee Foster Care Independence Program

Education and Training Vouchers

Chafee Foster Care Independence Program Education and Training Vouchers

State Agency overseeing the CFCIP programs

In Washington State, the Department of Social and Health Services, Children's Administration, administers, supervises and oversees the Title IV-E program and the Chafee Foster Care Independence Program (CFCIP). Washington participates in national evaluations on the impacts of the programs in achieving the purposes of CFCIP.

The two Chafee funded programs; *Independent Living (IL)* and *Educational and Training Vouchers (ETV)* are part of an array of services available to youth transitioning from state foster care.

INDEPENDENT LIVING PROGRAM

Children's Administration currently serves approximately 2700 youth/young adults (not including Tribal youth) in the contracted IL program.

IL Eligibility

To be eligible for the Independent Living Program youth must be at least 15 years old or older (through their 21st birthday) and currently in foster care in an open dependency action through DSHS or a tribal child welfare agency for at least 30 days after their 15th birthday. Once youth meet initial eligibility, they remain eligible until age 21. The program also serves youth who have achieved permanence (such as adoption, kinship guardianship, and return home) provided they meet the initial IL eligibility.

IL Service Provision

There are 12 contracted Independent Living providers and 24 Tribal Independent Living providers in all regions in Washington state to provide ease of access to youth who participate in the program.

Independent Living (IL) programs are available to all eligible youth across the state. Currently, most of the state has contracted IL services although there are a few remote areas where services are limited and the local DSHS Children's Administration office provides IL services.

Social workers refer youth at age 15 or older to the IL program, and must make at least three attempts to engage the youth in this voluntary program. If efforts to engage the youth fail, the social worker and caregiver are contacted and a letter is sent to the youth informing them that if they decide to participate in the program later they may contact the program at any time.

The IL contract outlines services required by the federal Chafee Act, including the National Youth in Transition Database (NYTD) elements, which became effective October 1, 2010. Contracted IL, Tribal IL providers and Responsible Living Skills (RLSP) providers have access to input services into our SACWIS system (FamLink) which allows Children's Administration to collect better data and report on outcomes for youth in care.

- **Casey Life Skills Assessment (CLSA)** – Children’s Administration uses the nationally recognized web-based CLSA tool provided by Casey Family Programs. The tool assesses various life domains and calculates a score based on the youth’s answer to the assessment questions. CLSA score reports populate immediately after the assessment, showing the youth’s greatest strengths and challenges.

Once the youth completes the assessment, a learning plan is developed to address the individual needs of the youth. The assessment is administered annually to youth participating in the program.

- Youth age 15 - 16 are administered the CLSA tool and receive training on a variety of skills including life skills and educational services.
- Youth age 16 – 18 are administered the CLSA tool and receive training on a variety of skills including life skills, educational services and transition planning.
- Young adults age 18 through 20 are administered the CLSA tool and receive training on a variety of skills including life skills, education supports and services, housing assistance, and employment supports and services.

- **Transitional Living Services (TLS)** - The Washington State legislature established statutory authority to serve former foster youth ages 18 through 21 in June 2001. The Independent Living Program delivers Transitional Living Services (TLS) through contracts with community service providers and tribes.

Funding is available to eligible youth ages 18 to 21 on an individual basis for housing and incidental expenses. “Room and Board” is defined as assistance provided to a former foster care youth from age 18 to 21 in the form of payment for rent, utilities, deposits and housing costs. Room and board or housing costs are budgeted and tracked separately by Children’s Administration to ensure that no more than 30% of the state’s Chafee Independent Living funds are used. *In FY 20121, CA spent 7.71% of the CFCIP grant on room and board assistance.*

TLS case managers help youth locate affordable housing, negotiate leases and make rent and utility payments. Rent subsidies are available as long as the youth is employed or seeking employment, or enrolled in an educational or vocational program. If a contracted service agency is not readily available, youth may still apply for transition funds for housing through a local Children’s Administration office.

- **Responsible Living Skills Program (RLSP)** - The RLSP program was developed in 1999 for dependent youth, ages 14 to 18 in the custody of the state or tribe who are not returning to their families, and who have been unsuccessful in traditional foster care. This program provides long-term housing, assessment, and life skills training to youth to help transition into adulthood. This program currently has 32 beds statewide.
- **Extended Foster Care program** - In 2011, the Washington State Legislature created, the legal foundation for youth to remain in care after their 18th birthday if the youth qualifies for the program and elects to participate. This legislative action supports the Federal Fostering Connection Act of 2008 and is designed to expand as Washington’s fiscal resources increase. This legislation allows Washington to claim federal Title IVE funding to support these youth in placement.

The second phase of the Extended Foster Care program, enacted during the 2012 legislative session, allows youth to remain in care to complete their post secondary education. In the 2013 legislative session, the

legislature passed another element of the Federal Fostering Connection Act, which allows participation in a program or activity designed to promote or remove barriers to employment.

- **Foster Care to 21** - Washington State offers foster care and support services to a limited number of youth age 18 to 21 pursuing post-secondary education. This program will be phased out by June 2015 and replaced with the new Extended Foster Care program.

Seven Purpose Areas

1. Assist youth in transition from dependency to self-sufficiency

UPDATE AND PROGRESS (FY 2012)

Activity	Status
1. Convene Annual Foster Youth and Alumni Leadership Summit.	Completed: June 25-27, 2012. The summit brought together 56 youth and alumni of foster care. The 2012 summit included topics that covered permanency, elevating youth voice, and healthy transitions. It also provided the unveiling of the Mockingbird Society's latest training, "Transitions". The training is designed to help youth navigate the many transitions in their lives in a healthy and productive manner.
2. Convene Annual Passion to Action Retreat.	Completed: July 21, 2011. Passion to Action members received leadership and team building skills as well as worked on goals for 2013.
3. Regional Activities – <ul style="list-style-type: none"> • Region 1 – Annual Independent Living "Real World" conference for foster youth age 15-18 to provide them with trainings and information on resources needed to help promote self-sufficiency. • Region 2N - Annual Summer event for Youth • Region 4 - Annual Independent Living Conference 	Completed: March 16, 2013. This conference was held at Spokane Falls Community Conference and brought together 103 youth from the eastern part of WA state Completed: June, 2012. This summer event brought together 20 youth to celebrate their graduations. Completed: April, 2012. The YMCA hosted their annual IL conference and had 80 participants.

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Convene Annual Foster Youth and Alumni Leadership Summit.	June 24 – 27, 2013
2. Convene Annual Passion to Action Day Retreat.	July 2013
3. Annual Make it Happen College Experience	July 9 – 12, 2013
4. Annual Camp to Belong Washington is a collaborative effort and partnership with Foster Family Connections, Children's Administration, and Camp to Belong NW. The event	August 12 – 17, 2013

Activity	Target Date
reunites siblings who are placed in separate foster homes and other out of home care and offers fun activities, emotional empowerment and much needed sibling connections.	
5. The Foster Club All-Star Program provides youth development opportunities by building leadership skills, providing public speaking experiences, advocacy skills and development of professional proficiencies through intensive training. The sponsored All-Star will serve a one year term and will complete a 7 week internship to build leadership skills.	Summer 2013
6. Regional Activities – <ul style="list-style-type: none"> Region 1 North – Annual Real World Conference Region 1 South – Graduation Celebration Region 2 North – Annual Graduation Dinner and Summer Event for Youth Region 2 South – Annual Independent Living Conference 	Spring 2014 June 2013 Summer 2013 April 2013

2. Help youth receive the education, training and services necessary to obtain employment

UPDATES AND PROGRESS (FY 2013) AND PLANNED ACTIVITIES (FY2014)

Activity	Status
1. <i>Employment Services</i> - Contracted Independent Living program staff incorporate employment modules and workshops into their day-to-day work with youth and link youth to existing community resources. IL providers provide employment services all year and specifically coincide with the summer and holiday hiring, school breaks, and near the end of the school year. Youth receive: <ul style="list-style-type: none"> Coaching on activities related to employment readiness, interviewing, resume writing and appropriate dress Assistance gaining and retaining employment Assistance obtaining or securing items needed to gain or maintain employment, such as, a social security card, dress attire, and transportation (if possible) Assistance using community employment resources to gain employment Information on how to enroll in available Workforce Investment Act youth programs or to register with the Employment Security One Stop Career Centers (if available) 	Ongoing

3. Help youth prepare for and enter post-secondary training and educational institutions

UPDATES AND PROGRESS (FY 2012)

Activity	Status
1. Continue the annual Passport to College Promise Program Scholarships.	Ongoing: In 2012-2013 this program served 432 former foster youth entering post secondary educational programs. We experienced an increase of 104 scholarships due to higher than normal fall quarter enrollment.

Activity	Status
2. Independent Living providers continue to prepare and mentor foster youth ages 15 to 18 to complete high school or a GED program, and enter post-secondary education programs. The Supplemental Educational Transition Planning (SETuP) program provides foster youth age 14-18 with educational planning, information, links to other services/programs and coordination with high school counselors to ensure youth have an educational transition plan.	Ongoing: In FY 2012, the IL program served 1200 youth and the SETuP Program served 477 youth.
3. Children's Administration, in partnership with the College Success Foundation and the Washington Student Achievement Council (WSAC) held four regional education summits in April/May 2013.	Ongoing: Participants included social workers, IL providers community partners and Design and support Staff (DSS) from the colleges and universities.
4. Continue the Governor's Scholarship.	Ongoing: The College Success Foundation awarded the Governor's Scholarship to 50 new youth and 46 returning youth totaling 96 in 2013 - 2014. Scholarships ranged from \$2,000 - \$4,000.
5. The CA IL Program Manager will continue to provide assistance and training to Social Workers and IL Providers on how to administer and use the online Casey Life Skills Assessment (CLSA) tool.	Ongoing:
6. Yale Higher Education Initiative 2013: The initiative is designed to address and help eliminate any barriers to post-secondary education that current and former foster youth face.	Completed: March 9 - 16, 2013 There were 50 youth who participated in this event.

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Continue the Governors' Scholarship.	Fall 2014
2. Provide trainings on the revised Casey Life Skills Assessment.	Ongoing
3. Continue to collaborate with the Passport to College Promise Program.	Ongoing

4. *Provide personal and emotional support to youth through mentors and the promotion of interactions with dedicated adults*

Contracted IL providers, SETuP providers, foster parents and community service providers link youth with dedicated adults as the youth transitions out of care. The required 17.5 year old staffing also helps youth identify important adults in their life who can help support them through their transition from foster care and beyond into adulthood.

UPDATES AND PROGRESS (FY 2013) AND PLANNED ACTIVITIES (FY2014)

Activity	Status
1. Continue the yearly Mentoring Conference in the Seattle area. Participants normally include mentoring organizations, mentors, state and county health and human services staff and educational advocates from around the state.	Ongoing: Next conference is scheduled for August 2013.
2. College Success Foundation, in partnership with Children's Administration and the Washington Student Achievement Council will hold four regional summits bringing professionals from the child welfare and education systems together to address educational needs of foster youth.	Ongoing: Passport Summits were held in Spokane, Pasco, Seattle and Tacoma during April and May with wide participation from educators, post-secondary programs, social workers, CASA's, youth and foster parents.

5. *Provide financial, housing, counseling, employment, education and other appropriate support and services to former foster care recipients between 18 and 21 years of age.*

Please refer to IL services above which addresses services provided to youth age 18 through 21.

UPDATES AND PROGRESS (FY 2013):

Activity	Status
1. Independent Youth Housing program (IYHP) provides housing vouchers to youth exiting foster care.	Ongoing: This program is available in nine counties and served 125 young people in FY 2012.
2. Continue Transitional Living Services (TLS).	Ongoing: TLS assisted 1464 eligible youth in FY 2012 in securing housing and employment.
3. Responsible Living Skills Program (RLSP)	Ongoing: RLSP has 28 contracted placements.

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Expand Extended Foster Care program as required by legislation.	Begin July 2013
2. Responsible Living Skills Program (RLSP): CA will continue to support Region 1 South in contracting another provider to meet capacity of 32 placements.	Begin June 2013

6. *Make available vouchers for education and training, including post secondary education and to youth who have aged out of foster care.* See [ETV Section below](#)

7. *Provide Services to youth who, after attaining 16 years of age, have left foster care for kinship guardianship or adoption*

Once youth are determined eligible for IL services, they remain eligible regardless of their permanent plan.

Coordination of Services with other Federal and State Programs for youth, including Transitional Living and School-to-Work program offered by high school or local workforce agencies

Community collaboration continues to be a vital part of Children's Administration's efforts to strengthen its delivery of services to foster youth, former foster youth, and with the community as a whole. Some of these efforts include:

Statewide Collaborations –

1. **Casey Family Programs** - The Washington State Independent Living Program Manager and other Children's Administration staff are closely aligned with Casey Family Programs. They are currently working on:
 - The annual Foster Youth and Alumni Leadership Summit
 - The revision of the Casey Life Skills Assessment tool
 - Permanency Roundtables
2. **Ready to Rent** is a program of United Way's "Out of the Rain" Homeless Initiative in partnership with Mutual Interest and the Rental Association of Puget Sound. This program enables former foster youth to obtain housing and avoid homelessness.
3. DSHS- Children's Administration is one of four successful recipients nationwide to receive a two year infrastructure building grant from the **Center for the Study of Social Policy** focusing on pregnant and parenting teens in foster care in Washington state. This funding opportunity allows CA to strengthen its policies, practices and educational materials when working with this population. Children's Administration collaborates with multiple state and private agencies in this effort including DSHS Aging & Disability Services, DSHS Research & Data Analysis, Health Care Authority, Department of Health, West Sound Youth for Christ, Office of Attorney General, Passion to Action and Mockingbird Society. The workgroup is currently working on developing a guidebook for youth, social workers and caregivers. It is expected this will be used as a tool and provide best practices, as well as tips which focus on promoting healthy pregnancies and active parent engagement. **Ongoing through December 2013.**
4. In June 2011, Washington state was one of the successful recipients of a funding opportunity through the National Governor's Association, **Three Branch Institute**. This was a collaborative effort between the Executive branch (DSHS-Children's Administration and the Governor's office), the Legislative branch and the Judicial branch of Government. Representatives from each branch participated in the "Three Branch Institute on Adolescents in Foster Care: Increasing Permanency and Reducing Entries" convening in Colorado. This grant provided an opportunity for our state to build momentum and solidify our efforts to better meet the permanency needs of youth in foster care. The Washington state team convened several times in the 2013 and refined the plan with a focus on the Judiciary responsiveness to adolescent permanency needs and an emphasis on continuing the permanency round tables.

Regional Collaborations –

5. **The Family Unification Program (FUP) Voucher:** Children's Administration and 21 Housing Entities across the state formed a partnership through a Memorandum of Understanding (MOU) in August 2012 for housing assistance to families and youth involved with Children's Administration. The MOU provides housing assistance to 211 families to support reunification efforts, prevent out-of-home placement and

assist in youth who are exiting care. The MOU supports Children's Administration permanency goals to safely reunify children with their families and partner with the community to achieve these objectives.

6. **The Transition Collaboration in Region 2 South** consists of public and private agencies who meet regularly to share resources and identify gaps in service to youth transitioning out of care. This brings local agencies together to look at the issues facing youth in transition to learn and network with each other when working with this vulnerable population.
7. **Living Interdependently for Tomorrow's Success (LIFTS)** is funded through donations to Catholic Family & Child Services. This is an ongoing collaboration in Region 1 South of Independent Living Services and Transitional Living Services providers. Each contribute funds primarily for individual youth assistance, based on the youth's Ansell Casey Life Skills Assessment learning plan needs.
8. **The Transitions Collaboration Network**, chartered in 2005 by Children's Administration, Casey Family Program-Yakima, and Catholic Family and Child Services, meets periodically to discuss Federal and Children's Administration policies regarding youth who transition to adulthood from care. Inter-agency planning for upcoming activities will target housing, health care, education, and employment needs for these youth. Participants include representatives from Education Service Districts, Economic Services Division, Division of Vocational Rehabilitation, Division of Developmental Disabilities, and contracted Child Placing Agencies.
9. **YMCA Young Adult Services** in Region 2 South operate the young adult community resource center (The Center) which opened in February 2007. The Center is the gateway to YMCA services for foster youth, foster alumni and other transitioning youth ages 15-25. The YMCA provides supportive housing, case management and referral services through its three core programs: Independent Living Program, Transitions, and Young Adults in Transition.
10. **Treehouse** is a private non-profit agency serving foster youth in Region 2 South by providing clothing, school supplies, funding for enrichment activities, summer camp and in-school tutoring. It offers an outreach program to foster youth in middle school and a coaching to college mentoring program to youth who are college bound.
11. **Individual Development Accounts** - Treehouse, United Way of King County and the YMCA Independent Living Program collaborate to provide Individual Development Accounts to 83 foster youth and alumni of care in King County.

IL Training

UPDATES AND PROGRESS (FY 2013):

Activity	Status
1. Adolescent Specialized Track training for CA field staff.	Ongoing: Next training is June 4 – 7, 2013
2. Provide Casey Life Skills Assessment trainings, including on-line training, to IL providers and CA staff.	Ongoing
3. Provide training to foster parents on Positive Youth Development and	Completed: June 2013

Activity	Status
resources.	

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Work with the Alliance for Child Welfare Excellence to include adolescent development and brain science in the child development curriculum for all social workers.	December 2013

Trust Funds

Washington State does not have established trust funds for youth receiving independent living or transitional living services.

Youth Involvement in State Agency Efforts

Statewide Youth Advisory Board - This Statewide Youth Advisory Board called "Passion to Action" consists of 20 current and former recipients of Children's Administration services - representing all three regions. The Board has been in operation for seven years and is a vital part of shaping change in our child welfare system. The Board, serving in an advisory capacity, reviews and provides feedback to Children's Administration on all of its policies and practices in an effort to provide better services to youth in care. The Board ensures that as a child welfare system we are using authentic foster youth voice to help improve the foster care system. Members of the Board serve on many of CA's workgroups and CA relies on them for feedback on planning for changes to the foster care system, including:

- Children's Administration program development and service delivery models, as well as ongoing quality assurance activities. Youth review and provide feedback on policies and procedures as they are implemented throughout the year. Examples include the Extended Foster Care program and the credit check policy.
- Active participants in the development of a Children's Administration guide on Psychotropic Medications for Youth in Care.
- In the implementation of the Center for the Study of Social Policy (CSSP), Pregnant and Parenting Youth in Foster Care grant, Children's Administration created a broad advisory board that meets quarterly to guide the work. Current and former foster youth who are pregnant and parenting are critical voices at the table.
- Children's Administration, University of Washington and the Division of Behavioral Health and Recovery are recent recipients of an ACF Grant, "Initiative to Improve Access to Evidenced Based/Evidenced Informed Mental and Behavioral Health Services in Child Welfare". The "Creating Connections" grant aims to increase the identification of trauma and mental health needs; increase evidenced based treatments and improve the communication and planning between the mental health and child welfare systems on behalf of children and youth served in out of home placement.

Youth voice is critical in the planning, designing and implementation phases of the grant. Initially Passion to Action will participate in a focus group in June 2013 to identify how best to improve the systems to better meet their needs.

Medicaid

Washington state continues to offer the Medicaid to 21 program. Since implemented in 2007, there has been an increase from 187 youth enrolled in CY 2007 to 1196 in CY 2012. Medicaid coverage applies to youth who:

- Are currently under 21 years of age.
- Were in foster care on or after July 22, 2007, under the legal responsibility of DSHS or a federally recognized tribe located within the state.
- Were in foster care on their 18th birthday, under the legal responsibility of DSHS or a federally recognized tribe located within the state.

Beginning January 2014 former foster youth will be eligible for foster care medical up to age 26. Eligibility for this is currently under development and will be announced and publicized when the information is available.

Patient Protection and Affordable Care Act

Children's Administration's youth transition plan incorporated information required by Chafee Foster Care Independence Program (CFCIP) and Fostering Connections changes per Program Instruction dated June 7, 2010. CA implemented the transition plan statewide on October 2010, and continues to remind youth of the importance of the continuity of their own health care and the access to the Medicaid to 21 program for medical coupons to purchase health care services. Other important information includes:

- Designating another individual to make health care treatment decisions on behalf of the youth if the youth does not have, or does not want, a relative who would otherwise be authorized under state law to make such decisions.
- Executing a health care power of attorney, health care proxy, or other similar document recognized under state law.

Tribal Participation

Tribal youth are assured access and availability of Independent Living services across the state. Tribal youth may choose tribal IL contracted services or non-tribal providers, assuming space availability. Once the tribal youth ages out of foster care, the tribal youth is eligible for Transitional Living Services until age 21.

Agreements with the tribes regarding allocation of the Chafee Foster Care Independent Living Program (CFCIP) funds were reached in the year 2000. A solicitation process occurs yearly where all federally recognized tribes in Washington State have an opportunity to apply for CFCIP funding. Each tribe received a letter offering an IL contract for this fiscal year. To date, every tribe that requested Chafee funds for their own IL program received approval for funding. This year Children's Administration has contracts with 24 tribes. Ten percent of the total IL allocation is designated for tribal contracts.

Addressing “State Funded” IL programs versus “Direct Federally Funded” IL programming to tribes.

There is currently one tribe in Washington state receiving direct federal funding for their IL program as a result of the Fostering Connections legislation. If the tribe’s direct federal award is less than the state award for IL programming, Children’s Administration will offer that tribe a contract to make up the difference. This is offered to maintain our agreement of providing tribes with 10% of the total Chafee grant.

National Youth in Transition Database (NYTD)

Children’s Administration continues to communicate with tribes about the federal NYTD requirement. This includes providing regular updates at the monthly Indian Policy Advisory Council (IPAC) meetings and incorporating this requirement into our contracts.

As part of the NYTD rollout in Washington state, all contracted tribal Independent Living providers were given access and input capabilities to the IL page, education page. CA continues to offer ongoing training and extensive support to both tribal and non-tribal Independent Living providers when needed or requested.

Each tribe has a designated IL program staff person who identifies youth who are eligible for IL/NYTD services and provides education to the tribe and their youth on the program.

Outreach to Tribes regarding the Independent Living Program

Outreach to tribes regarding CFCIP programs continues on a regular basis. The IL Program Manager and/or Education and Training Voucher (ETV) Program Manager attend the monthly Indian Policy Advisory Committee (IPAC) to provide information on the Chafee programs. They also attend various tribal meetings to educate tribes about IL and ETV services and meet with individual tribes upon request to train on IL and ETV related topics.

Several IL Coordinators in each region meet regularly with the tribes and discuss IL issues and collaboration. Each region is also active in training tribal members on the IL and education pages in FamLink.

Implementation of National Youth in Transition Database (NYTD)

In October 2010, Washington State implemented the *National Youth in Transition Database (NYTD)*. Children’s Administration incorporated all the NYTD elements (including the survey) into the SACWIS system (FamLink). As part of this process, contracted IL and Responsible Living Skill providers were given access to FamLink to input IL and education services.

In August 2012 the NYTD Technical Team came to Washington State to conduct an informal audit. Overall findings were positive and CA is currently working to address the recommendations provided during the audit.

Children’s Administration continues to meet the federal requirements for the submissions.

Implementation of Annual Credit Checks

In March 2012, Washington state implemented the federal requirement that each youth age 16 and older will receive copies of their consumer credit reports annually until they transition from care into young adulthood. Policy and procedures were rolled out to staff on this new requirement.

Currently Children's Administration is working on agreements with three credit reporting agencies to be able to submit electronic batches.

EDUCATION AND TRAINING VOUCHER PROGRAM (ETV)

The ETV program supports eligible current and former foster youth in pursuing their post-secondary education. ETV provides support and funding to help youth successfully navigate the college system and graduate. Supports may include referrals to designated support staff on college campuses who help youth who are struggling academically or financially.

ETV Eligibility

To be eligible for the ETV program, youth must be enrolled in, or accepted for, a post-secondary degree or certificate program and meet any one of the following criteria:

- Youth is 16 years old or older, currently involved in dependency action in a Washington State or tribal court, in the custody of the Department of Social and Health Services or a tribal child welfare agency, and in foster care.
- Youth is age 18 to 20 and exited state or tribal foster care because youth reached the age of majority at age 18. Youth who exited foster care in a state other than Washington may be eligible for the Washington ETV program.
- Youth is age 16 to 20 and left Washington State or tribal foster care at age 16 or older for an adoptive or relative guardianship placement.
- Youth is age 21 up to age 23 and received ETV funds before their 21st birthday.

Once youth are qualified to receive an ETV award, they may receive funds each year as long as they are enrolled in school at least half time, maintain a 2.0 cumulative grade point average, are eligible for financial aid and are less than 23 years old.

Education and Training Voucher (ETV) Service Provision

	Total ETVs Awarded	Number of New ETVs
Final Number: 2011-12 School Year (July 1, 2011 to June 30, 2012)	230	70
2012-2013 School Year (July 1, 2012 to June 30, 2013)	225	73

2011-12 School Year

Thirty percent of the students awarded ETV were new participants (no prior award) and 70% of the students had previously participated in the ETV program. The average award for new and renewal students was \$2,215. The three main expense categories youth used their funds for were:

- Housing/Rent 44%%
- Groceries (Safeway gift cards) 14%
- Books 12%

2012-13 School Year (as of March, 2013)

Thirty-two percent of the students awarded were new participants (no prior award) and 68% had previously participated in the program. The decrease in students served is intentional in an effort to respond to tuition increases at public and private colleges, which has a direct impact on the funds available to award students. The average award for new and renewal students is \$2,345. The three main expense categories are:

- Housing/Rent 38%
- Books 13%; and
- Groceries (Safeway gift cards) 12%

2013-14 School Year (proposed changes)

The award amount in the 2013-14 academic year will increase to \$4,000 from \$3000 in the 2012-2013 school year. The increase is due to the following, which have impacted ETV expenditures:

- Implementation of the Extended Foster Care (EFC) Program
- Increase to the Passport Scholarship award amount from \$3,000 to \$4,500
- Implementation of the College Bound Scholarship, and
- Washington Student Achievement Council (WSAC) determined that ETV cannot be considered as a form of self help which means ETV cannot replace loans or be used to meet the self help component of the State Need Grant (SNG) Program.

These factors have reduced the number of students awarded and the award amount. Therefore, we are increasing the award to maximize ETV funds available for students.

ETV Services

UPDATES AND PROGRESS (FY 2013):

Activity	Status
1. Explore Electronic Funds Transfer (EFT) payments to students to reduce state expenses.	Completed: Youth who access their ETV award can now receive reimbursement by check or direct deposit.
2. Re-explore use of technology (Facebook/Twitter/Skype) to communicate with students.	Ongoing: FY 2013 and FY2014
3. Coordinate with Port Gamble S'Klallam Tribe to service youth who are eligible for both the State and Tribal ETC program	Ongoing

Activity	Status
4. Collaborate with Passion to Action Youth to develop trainings on how to access ETV funds and host on independence.wa.gov.	Due to other work priorities and staffing demands, this is not yet completed. This item will continue in FY 2014.
5. Outreach to Northwest Indian College to increase awareness of ETV as a potential funding source for eligible tribal youth.	This activity was not completed in FY 2013. We will address it in FY 2014.

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Description/Purpose	Target Date
Practice, Program, and Service Enhancements		
1. Participate in the College Success Foundation Make It Happen Event		Summer 2013
2. Re-examine categorization of ETV as a form of non self-help student aid		Spring 2014

Education and Training Voucher (ETV) Collaboration Efforts

- College Success Foundation** - Children's Administration continues to coordinate with the College Success Foundation, the Washington State Achievement Council, and other agencies in an effort to maximize former foster care youth access to financial aid assistance (e.g., federal student financial aid programs, grants, scholarships, and ETV services). Staff from these agencies often "triage" student financial aid awards, and on a case-by-case basis have successfully helped students receive a full financial aid award to pay their cost of attendance. They also connect students to staff on campus who can help a student file a financial aid appeal in the event they are suspended from financial aid participation.

Status: *Ongoing. Passport Summits were held in Spokane, Pasco, Everett and Tacoma during April and May with wide participation from educators, post-secondary programs, social workers, CASA's, youth and foster parents.*

Ongoing Community Partner Collaboration - ETV program staff continue to collaborate with community partners statewide to coordinate youth access and promote education success. Activities include participation in regional college consortiums to educate college campus staff about the unique needs of foster care youth pursuing their post-secondary education. This includes information on how to verify if youth are eligible for the different programs and how to engage youth so they focus on their education and reach out for help when they struggle to succeed.

Status: *Ongoing*

SECTION IV: Training Plan

Children's Administration Training Plan

The Alliance for Child Welfare Excellence is the Children's Administration comprehensive statewide training partnership dedicated to developing professional expertise for social workers and enhancing the skills of foster parents and caregivers working with vulnerable children and families. The Alliance combines the resources of the University of Washington (UW) School of Social Work, UW Tacoma's Social Work Program and Eastern Washington University's School of Social Work with the expertise of the Children's Administration and Partners for Our Children, which charged with rigorously evaluating training effectiveness over time. By sharing curriculum, delivery methods and evaluation tools, this public-private partnership will strengthen the professional expertise of social workers, tribal child welfare workers and community providers; enhance the care-giving skills of foster, adoptive and relative caregivers; and create better futures for children and families.

Overview of the Alliance FY 2013 Accomplishments

- **Competencies.** The Standing Committee on Competencies and Curriculum (CCC) developed three sets of competencies for caregivers, for direct line social workers and social service specialists, and for supervisors and area administrators. The CCC received technical assistance from the National Resource Center for Organizational Improvement (NRCOI) to accomplish this work.
- **Further Infrastructure.** The standing committee's Charter describes its role in overseeing the development, continued refinement, and implementation of both competencies and curriculum. The NRCOI also provided assistance in developing the Charter.
- **Evaluation Plan.** The statewide Evaluation Committee learned from other states how they evaluate their training and sought the best advice in learning more how training can assist the agency in reaching its desired outcomes. The result is an Evaluation Plan that uses a "Chain of Evidence" approach to evaluating training.
- **Redesign of Training for New Social Workers.** Based on feedback from a number of sources (including focus groups with Supervisors) and the new competencies, the intensive training for new social workers, including new tribal child welfare workers, was redesigned and field tested in Region 1. The Regional Core Training will replace the current 4-week Academy. Changes include:
 - More knowledge regarding the effects of maltreatment on child development
 - More practice on specific interviewing skills
 - More knowledge and skills for engagement, assessment, planning, and management
 - More learning opportunities for applying knowledge and skills needed to begin field work, including documentation in FamLink
- **Identify Levels of Learning.** A suite of learning opportunities were identified based on the competencies and existing trainings. *Foundation* is the first level and occurs in core training for new staff. *In-Service* is the second level meant for new workers within the first year of employment. It includes many areas covered in the Regional Core Training and Academy, but at a more concentrated level of learning. *Focused* is the third level, which will be developed for all staff who have been employed for longer periods of time.
- **Caregiver Work Team.** This work team compared the competencies for caregivers to the current curriculum, and determined best methods of delivering training to caregivers statewide. The team began with pre-service training and will work through all current training provided to caregivers.

- **Scheduled Coaching Sessions.** We identified six specific coaching sessions to focus on improving and supporting areas of practice. They are routinely available through the agency's Learning Management System and monthly training catalog.
- **Strategic Roadmap.** The Alliance Executive Team started a strategic planning process with the National Resource Center for Organization Improvement. The Executive Team will chart a roadmap for the next five years for the Alliance.

UPDATES AND PROGRESS (FY 2013)

These activities are in addition to ongoing training listed in Attachment 1- Training Matrix

Activity	Status
1. Identify Alliance Statewide Standing Committees and members Assign specific work and goals to provide input on education and training system.	Completed
2. Assess training contracts using performance based contracting measures and new competency-based training system.	Ongoing: as new training contracts are developed
3. Develop new pre-service orientation and training academy based on new competencies and deliver in the regions. Field test of new pre-service orientation and academy (Regional Core Training) began on January 1, 2013 in Region 1.	Region 1 Field Test will be completed by July 1, 2013.
4. Implement new training curriculum to provide comprehensive and quality staff training. New curriculum includes Early Childhood Development, Multi-Ethnic Placement Act, Family Team Decision Making and Wrap-around.	Completed
5. Receive technical assistance from the National Resource Center for Organizational Improvement to work with the newly formed Training Partnership.	Completed

FY 2014

PLANNED ACTIVITIES FOR FY 2014

Activity	Target Date
1. Continue to refine curriculum for Regional Core Training and begin offering in Region 2 and 3.	January 2014
2. Develop new Supervisor Core Training to provide more on-going training to Supervisors and Area Administrators.	October 2013
3. Provide on-going training in domestic violence to direct line staff and supervisors. Provide on-going training to direct line staff in areas of Child Well-being including Education, Trauma Informed, and Brain Development.	January 2014
4. Implement competencies and professional development process for the Alliance trainers and coaches.	July 2013
5. Provide Family Assessment Response training to the 2-3 selected offices.	November – December 2013
6. Assist with training staff and supervisors on new assessment tools in FamLink.	August – October 2013
7. Committee on Competencies and Curriculum (CCC) will adopt a Curriculum Guide, which will provide a standard for all curriculums.	July 2013
8. Develop alternative methods for delivering curriculum to the workforce.	January 2014
9. Implement "chain of evidence" evaluation for all education, training, and coaching.	July 2013

Training Cost Allocation

Children’s Administration conducts the social worker and resource family (foster parent and relative caregiver) training through the Alliance for Child Welfare Excellence (Alliance).

The Public Assistance Cost Allocation Plan outlines the cost allocation methodology for training, as approved by the Division of Cost Allocation (DCA) within the Department of Health and Human Services (HHS). We reference the plan for purposes of explaining how we allocate training costs. It is a separate plan from the APSR.

The Alliance provides training for all levels of Children’s Administration staff. All new Children’s Administration social workers, licensors and investigators are required to attend Academy training, which the Alliance provides. Staff costs for the Alliance, contracted training costs, and Foster Parent training are allocated through the ACWE Training Base 585, which is based on the DCA approved curriculum analysis methodology.

For training conducted in FY2013, the applicable Title IV-E Federal Financial Participation (FFP) rate of 50% or 75%, was assigned to each training activity entitled to Title IV-E reimbursement and is cited below the training title in each of the tables in the attached Training Matrix. The Title IV-E training topics were determined as eligible for claiming at the 50% or 75% FFP rate based on Section 8.1H, “Title IV-E Administrative Functions/ Costs, Training” of the Child Welfare Policy Manual. The training matrix included in the APSR is the supporting documentation CA uses for the curriculum analysis to derive the proportionate share of Title IV-E based on eligible training hours and topics. The non-combined penetration rate is then applied. The calculated Title IV-E and State percentages are then used to update the ACWE Training Base 585 in the automated cost allocation plan for claiming training costs. The total number of training episodes for FY 2013 is shown in parentheses under the column entitled “Length per Training” and is further broken out into days or hours under the column titled “Total Training”.

Administrative staff that provide training are allocated through CA RMTS Indirect Base 590. Social workers, who provide training and administrative costs associated with Children’s Administration staff attending training, are allocated through CA RMTS Direct Service Staff Base 592. Bases 590 and 592 are based on the Random Moment Time Study (RMTS), which includes Title IV-E at 50% FFP. Regional contracted trainings are allocated through the Title IV-E Foster Care Population, Base 599, which includes Title IV-E at 50% FFP. In addition, other training in support of child welfare programs is allocated to Title IV-E at 50% or 75% as eligible.

Higher Education Program/Title IV-E Training supports the education of the current and potential child welfare workforce. Administrative costs associated with the higher education program are allocated as follows: direct charged to the Foster Care Grant (Title IVE) (CFDA 93.658) and for the stipend program, allocation is calculated at the point of payment and the resulting allowable amount is direct charged to Title IV-E training.

Technical Assistance

In 2013, CA used technical assistance from the following National Resources Centers:

- Organizational Improvement
- Diligent Recruitment

CA is conferring with the NRCOI for possible TA for FY2014.

See Attachment 1 – Training Matrix - Statewide Staff Training Conducted in FY 2012 and Ongoing

SECTION V:

Inter Country Adoption

Inter-Country Adoptions

- **Number of children adopted from other countries who entered into state custody in State FY 2012 as a result of the disruption of a placement for adoption or the dissolution of an adoption:** Two (2) children came into care during state fiscal year 2012.
- **The agencies handling the placement or the adoption:**
 - Adoption Advocates International (1)
 - Unknown (1)
- **The plan for the children:**
 - Adoption – for 1
 - Return Home – for 1
- **The reasons for the disruption or dissolution:**
 - Negligent Treatment/Maltreatment
 - Sibling death

Country	Agency	Reason for Disruption/Dissolution	Plan
Ethiopia	Adoptive Advocates International	Child was removed due to allegations that adoptive parents caused the death of his adopted 13 year old sister.	Case is currently dependent. Court ordered plan is adoption and return home.
Liberia	Unknown	Child was placed due to lack of medical treatment for severe skin condition. Parents had given child to another family who then adopted the child. That adoption was subsequently reversed and the child was returned to the original adoptive family.	Case is in shelter care status. Plan is return home.

SECTION VI:

Foster & Adoptive Parent Recruitment

Foster & Adoptive Parent Recruitment Plan

Diligent Recruitment of Foster and Adoptive Homes

Children's Administration endeavors to continuously strengthen, improve and diversify recruitment efforts to seek potential foster and adoptive families. We seek families who will reflect the ethnic and racial diversity of children in care, as well as families who are interested in caring for children of varying age, gender, large sibling groups and children with special developmental, behavioral or medical needs.

CA previously used three contracted agencies to provide recruitment services across the three DSHS regions. In 2012 CA issued a Request for Proposal (RFP) seeking one statewide contractor to provide foster care recruitment and retention services through a performance-based contract. The RFP focused recruitment on the urgent and critical need for safe, quality foster families to meet the needs of the diverse populations of children in out of home care. Through the competitive bid process, Olive Crest was selected as the statewide contractor to begin October 7, 2012. The contract uses data to establish and measure performance outcomes in five specific areas. CA established incentive payments for all outcome areas that reflect the greatest needs in foster family recruitment. A state oversight team provides consultation and direction throughout the term of the contract. The contract continues to build on prior work using current or former foster parents as recruiters/liaisons across the state to work with potential foster families, and provides support services for caregivers to help them understand and navigate the child welfare system.

CA uses data from the Statewide Recruitment Information Data Tracker, which is a contracted service through Northwest Resource Associates. This data continues to confirm that satisfied and supported foster and adoptive parents make the best recruiters of other foster and adoptive parents.

Highlights of the past year include:

- Children's Administration continues to provide strong support to foster parents as demonstrated in the [Annual Foster Parent Survey](#). The 2012 survey, released in February 2013, showed that 79% of the surveyed foster parents responded positively to the survey questions regarding adequate support in their roles and responsibilities as a foster parent. The survey conducted for 2012 was completed by the DSHS Resource Data and Analysis and documented an extremely high completion rate of 95% of surveyed foster parents.
- Olive Crest established 18 recruitment staff across the state. Efforts are underway to engage faith communities and organizations, business leaders and leaders in diverse communities as partners in recruitment efforts.
- All retention/support services for foster parents are now combined in one contractor, Olive Crest. This includes the Foster Intervention Retention and Support Team (FIRST), and the Foster Parent Critical Support and Retention Program.
- CA requested technical assistance from the National Resource Center for Diligent Recruitment and began the assessment process to help improve and increase recruitment efforts for foster and adoptive families who accept placement of children who meet identified demographics, including large sibling groups. We asked for assistance with the Statewide Caregiver Support Improvement Plan and furthering recruitment efforts with Olive Crest. We will begin developing the work plan in June 2013.
- Expediting Adoptions – CA implemented the Unified Home Study Statewide in September 2012. Adoption home studies are now completed as part of the initial home study process for foster parents, relatives and other caregivers.

Foster Care and Adoption General Recruitment

UPDATES AND PROGRESS (FY 2013)

Activity	Status
1. Obtain technical assistance from the National Resource Center for Diligent Recruitment for foster and adoptive families.	First site visit occurred in January 2013.
2. Annual “We Are Family Day” with the Seattle Mariners at Safeco Field. Children’s Administration and other foster care and adoption agencies across Washington come together to celebrate and support caregivers as part of National Foster Care Month.	Annually
3. Statewide Foster Parent Recruitment Information Center (1-888-KIDS-414) : Children’s Administration posts recruitment information on its foster parent internet page. A contract with Northwest Resource Associates provides consistency for inquiries and supports the receipt of 300+ electronic inquiries each month from families and individuals interested in becoming foster parents.	Ongoing
4. Children’s Administration Web Site on Adoption – Children’s Administration maintains its web site offering information to individuals interested in adoption of children who have a permanent plan of adoption and who often have special needs related to their history. Children’s Administration Foster Care Web Site – CA continues to build and expand on this site offering recruitment information, resources, and connections for all caregivers. This web site includes names and contact information for all social work field staff and supervisors	Ongoing
5. National Adoption Month : CA partners with Washington’s Administrative Office of the Court to highlight National Adoption Month and National Adoption Day in November. Local office adoption staff with support from CA and local courts, help families celebrate the finalization of children’s adoptions in November.	Annually
6. Statewide Foster Parent Recruitment Information Center (1-888-KIDS-414) : Children’s Administration posts recruitment information on its foster parent internet page. A contract with Northwest Resource Associates provides consistency for inquiries and supports the receipt of 300+ electronic inquiries each month from families and individuals interested in becoming foster parents.	Ongoing
7. Caregiver Connection – Children’s Administration newsletter for foster and relative caregivers and adoptive parents is produced monthly. Over 7200 families receive the newsletter each month.	Ongoing

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Develop and improve foster care recruitment efforts with the state contractor Olive Crest. Begin use of Olive Crest’s new recruitment materials (written, web page, Facebook and on-line and in-person support groups). Improve data use to identify actual foster home need in each regional area, rather than standard percentage increases in foster families.	FY2014

Activity	Target Date
2. Develop technical assistance work plan with the National Resource Center for Permanency and Family Connections Diligent Recruitment in partnership with Olive Crest.	FY 2014
3. Continue to improve and streamline the unified home study process to address the needs of caregivers who were licensed prior to the unified home study being put into practice.	FY 2014

Foster Care and Adoption Targeted Recruitment

UPDATES AND PROGRESS (FY 2013)

Activity	Status
Practice, Program, and Service Enhancements	
1. State and regional staff and Olive Crest use regional and state data to identify areas and populations of children in greatest need of placement resources, and to track outcomes for performance measurements under the three year contract.	Ongoing
2. Develop and begin Implementation of the <i>Caregiver Support Improvement Plan</i> with Olive Crest and in consultation with the NRC for Diligent Recruitment.	FY2013 – FY2014
3. Regional recruitment teams have been re-established or newly created to provide and focus recruitment efforts on targeted groups in each region under the statewide Recruitment and Retention Oversight Team.	Completed: and ongoing
4. Target specific recruitment needs and promote to recruit new foster families for each identified population. Use new recruitment material developed by Olive Crest, including print, online and Facebook recruitment strategies.	Completed
5. Implement plan to Increase the number of licensed relative caregivers by identifying barriers to licensing.	Ongoing
6. CA and the Washington State Hispanic Commission developed and implemented radio broadcast programs in Spanish recruiting Hispanic families for foster care. Broadcasts aired across the state in February, April and June 2013	Completed: and ongoing
7. Special Adoption Recruitment Program (SARP) – CA collaborates on its targeted adoption recruitment efforts through a contract with the Northwest Adoption Exchange. The SARP has a successful placement rate of 57% with adoptive families. The number of children this program serves was reduced from 60 to 20, due to budgetary cutbacks.	Ongoing
8. Regional Adoption Consortium – The consortium meetings are monthly or quarterly regional recruiting and networking opportunities that bring together CA staff, private adoption workers, and staff from the Washington Adoption Resource Exchange (WARE) and the Northwest Adoption Exchange.	Ongoing

Activity	Status
Practice, Program, and Service Enhancements	
9. Northwest Adoption Exchange (NWAE) received a Milgard grant in FY2012, available through October 31, 2013, to assist three counties in Region 3 North with recruitment and training. This includes adoption navigation for families to assist them in navigating the CA system for placement and adoption of children. Family finding is also provided for those R3 N counties by NWAE who reviews files and researches extended family members and community connections that might be interested in placement. Specialized Adoption Recruitment is also offered for up to 20 children.	FY 2013 and Ongoing

FY 2014

PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Review use of Vancouver Placement Desk Facebook group page as a tool in targeting recruitment for specific groups of children, individual children and sibling groups and messaging the need to foster parents.	FY2014
2. Promote targeted recruitment needs with specific working groups, i.e., Washington State Racial Disproportionality Committee, CA's Indian Policy Action Council-subcommittee, Hispanic Commission, Tribes, Office of Deaf and Hard of Hearing and other groups.	FY2014
3. Develop informational recruitment effort in partnership with the Washington State Office for Deaf and Hard of Hearing for recruitment of deaf, hard of hearing and signing families for deaf children needing foster care and adoptive placements.	FY2014
4. Translate Foster Care forms and recruitment materials for specific target groups.	FY2014
5. Develop recruitment efforts with Olive Crest in partnership with Families Like Ours to support foster care resources for Gay, Lesbian, Bisexual, Transgender and Questioning Youth.	FY2014

SECTION VII:

Adoption Incentive Payments

Adoption Incentive Payments

Children's Administration received \$1,663,193.00 in adoption incentive money from the Federal Health and Human Services Children's Bureau for adoptions completed in FY 2012 and awarded to Washington State in August 2012.

CA allocates the Adoption Incentive funds to state only foster care maintenance payments in accordance with PL 105-989, which addresses that incentive funds may be used for allowable activities under Title IV-B and Title IV-E.

Title IV B and Title IV-E of the Social Security Act authorizes use of the adoption incentive funds for a variety of services, including but not limited to:

- Technical assistance to promote more adoptions out of the foster care system, including activities such as pre and post adoptive services and activities designed to expedite the adoption process and support adoptive families
- Training of staff and adoptive and foster families on adoption issues to support increased and improved adoptions
- Recruitment of foster/adoptive homes
- Services that fall under the Children's Administration's Child Welfare Plan

Section VIII: Coordination with Tribes

Tribal Annual Progress and Services Review

FY2013- FY2014

Washington state's primary Indian Child Welfare goals are to ensure compliance with the state and federal Indian Child Welfare Acts and improve outcomes for Indian children and families. Children's Administration recognizes a government-to-government relationship between the state and Indian tribes/nations through the maintenance and support of the:

- The Washington State Indian Child Welfare Act
- The federal Indian Child Welfare Act
- Washington State Centennial Accord
- Washington State Basic Tribal State Agreement
- Washington State Localized Tribal State Agreements
- DSHS Administrative Policy 7.01

There are 29 federally recognized tribes in Washington.

- | | |
|--------------------------------|------------------------|
| ▪ Colville Confederated Tribes | ▪ Quinault Nation |
| ▪ Chehalis Confederated Tribes | ▪ Samish Nation |
| ▪ Cowlitz Indian Tribe | ▪ Sauk-Suiattle Tribe |
| ▪ Hoh Tribe | ▪ Shoalwater Bay Tribe |
| ▪ Jamestown S'Klallam Tribe | ▪ Skokomish Tribe |
| ▪ Kalispel Tribe | ▪ Snoqualmie Tribe |
| ▪ Lower Elwha Klallam Tribe | ▪ Spokane Tribe |
| ▪ Lummi Nation | ▪ Squaxin Island Tribe |
| ▪ Makah Nation | ▪ Stillaguamish Tribe |
| ▪ Muckleshoot Tribe | ▪ Suquamish Tribe |
| ▪ Nisqually Tribe | ▪ Swinomish Tribe |
| ▪ Nooksack Tribe | ▪ Tulalip Tribes |
| ▪ Port Gamble S'Klallam Tribe | ▪ Upper Skagit Tribe |
| ▪ Puyallup Tribe | ▪ Yakama Nation |
| ▪ Quileute Nation | |

In addition to Federally Recognized Tribes/Nations, Children's Administration also recognizes, through policy, American Indian Organizations, and American Indian participants.

DSHS provides support through the Office of Indian Policy (OIP) who serve all administrations of DSHS in each of the three regions. The OIP promotes communications between DSHS programs and all Indian people while recognizing the unique government-to-government relationships with federally recognized tribes.

The Children's Administration Assistant Secretary works closely with the Office of Indian Policy to meet with Washington state tribes at their tribal communities. At these meetings, the Assistant Secretary provides Children's Administration updates and solicits feedback and input. She also works closely with tribes to discuss concerns they may have and ensures a timely and effective response.

CA maintains an email listserve of tribal social service directors that includes all tribes with whom we regularly communicate information. CA has three ICW program managers at the headquarters level and regional program managers who partner with tribes to resolve issues of concern and areas to improve services to children and families.

Children's Administration regularly consults with all tribes during the development of policies and procedures. Representatives from Children's Administration work with the tribes through the Indian Policy Advisory Committee (IPAC), a body of tribal representatives delegated by their tribal councils. CA meets with a subcommittee of the IPAC on a monthly basis and IPAC representatives participate in policy and procedure workgroups, including those mandated by legislation.

CA and all 29 federally recognized tribes are collaborating to develop local Memorandums of Understanding (MOU). We have completed and signed four MOUs as of May 2013, 14 others in draft and under review and are on schedule to complete all 29 MOUs by December 2013. CA and tribes collaborated to develop a template for these MOUs for consistency and a standard format. CA and each tribe are developing MOUs specific to the tribe regarding the delivery of child welfare services using the uniform template.

The State of Washington is proud to be the first state in the nation to have a federally recognized tribe apply and receive approval for direct title IV-E funds for foster care, adoption assistance, and guardianship assistance. The Port Gamble S'Klallam Tribe signed the agreement on March 29, 2012. Children's Administration continues to support and collaborate with tribes and organizations that are in the process of applying for direct IV-E funds.

The following matrix provides an overview of the tribal/state meetings with the 29 federally recognized tribes. The matrix below provides a high-level snapshot of activities to:

- collaborate
- seek input on new policies
- share information related to policy changes
- improve compliance with ICWA
- reduce disproportionate representation of Indian children in the child welfare system

(All tribes regardless of their availability to attend the above meetings receive packets and/or meeting minutes. tribes have the ability to provide feedback and input on all issues addressed).

Tribal/State Centennial Accord			
Attendees	Occurrence	Intent and Purpose	Activities and Updates for FY 2013
Governor and tribal leaders	Annually	<ul style="list-style-type: none"> ▪ Implement government to government relations on a state level ▪ Consultation on issues identified by the Governor or Tribal Leaders 	<ul style="list-style-type: none"> ▪ Training on the Washington State Indian Child Welfare Act occurred in FY2013 and is on-going. Training is provided to CA staff, tribal and Recognized American Indian Organizations (RAIO) staff, and state court personnel. ▪ Negotiations continue with the Port Gamble S'Klallam Tribe for an agreement to allow them to enter data into the CA data system to support direct Title IVE access and compliance.

Department of Social and Health Services (DSHS)			
Indian Policy Advisory Committee			
Attendees	Occurrence	Intent and Purpose	Activities and Updates for FY 2013
Delegates appointed by tribal governments or Recognized American Indian Organizations and state DSHS Secretary and Assistant Secretary	Quarterly	<ul style="list-style-type: none"> Government to government relations on a DSHS level Collaboration on issues identified by the DSHS Secretary and Assistant Secretaries or Tribal Delegates 	<ul style="list-style-type: none"> On April 11, 2013 a Tribal Leaders Summit was held with Tribal Leaders, Extended Leadership from DSHS, and the Secretary of DSHS. The goal and outcome was to open communication between the governments with the new administration and to inform each other of opportunities for the future. The Native American Child Fatality workgroup met and forwarded recommendations for tribal participation in Indian child fatality reviews. Recommendations implemented include: <ul style="list-style-type: none"> inclusion of tribal representatives at Indian child fatality reviews, participation by members of Recognized Indian Organizations when the child is not a member of a federally recognized tribe examination of cultural competency when reviewing the case. CA collaborated with IPAC, JRA, and Casey Family Services to hold the Washington State Indian Child Welfare conference in October 2012. <ul style="list-style-type: none"> Over 250 participants attended multiple training and breakout sessions. Attendees included tribes, Justices, prosecuting attorneys, CA staff, Casey Family staff and Oklahoma State tribe and state government
Indian Policy Advisory Committee			
Children's Administration Indian Child Welfare/ Juvenile Rehabilitation Administration			
Sub-Committee			
Attendees	Occurrence	Intent and Purpose	Activities and Updates for FY 2013
IPAC delegates, tribal and state administrators	Monthly (in person or through video or telephone conference)	<ul style="list-style-type: none"> Implementation of government to government relationship on statewide policy and practice level Collaboration on identified issues related to policy and practice on a statewide level 	<ul style="list-style-type: none"> Ongoing collaboration with CA in the CFSR related PIP Family Assessment Response, Performance Based Contracting and Permanency Round Tables are standing agenda items at the monthly CA IPAC sub committee meetings. The updated ICW Case Review tool was used for case reviews conducted in FY2013. Teamed with Casey Family Program, tribes, RAIO's, and OIP to plan an ICW conference scheduled for fall 2013.

Children's Administration Regional 7.01 Policy meetings			
Attendees	Occurrence	Intent and Purpose	Activities and Updates for FY 2013
Regional tribal and regional Children's administrators	Quarterly (individually or through regional group meetings)	<ul style="list-style-type: none"> Implementation of government to government relationship on regional policy and practice level Collaboration on identified issues related to policy and practice on a regional level 	<p>Examples of Regional 7.01 Plan activities include: (link to CA Regional 7.01 Plans)</p> <ul style="list-style-type: none"> Continued to improve communication with our partners and tribes by providing information regarding trainings, program updates, service availability, etc. Planned and held a Training Colloquium for Family Assessment Response for Tribal Social Service directors in May 2013 Continuing to safely reduce the number of Indian children in placement by implementing various strategies including local office reviews of individual cases, FTDM facilitation, Permanency Round Tables, and increasing participation in local disproportionality groups Keeping Indian children safe at home by focusing efforts on access to home based services in underserved areas Increasing supports for relatives caring for Indian children involved in the child welfare system by coordinating with Economic Services to access Child-Only grants, etc. Teamed with Casey Family Program, tribes, RAIO's, and OIP to begin planning an ICW conference scheduled for FY2013

Children Administration consults with the tribes on the APSR and the Child and Family Services Plan throughout the year. CA shares the draft plan before final submission to Region 10 to obtain tribal input and provides access via the internet to the plan once finalized.

The following highlights more detail of the statewide **Activities and Updates** (noted in the matrix) relating to Indian Child Welfare practice in Washington State.

Tribal Title IVE

Currently three tribes have pass through IVE Agreements with Children's Administration and one tribe has signed an agreement for a direct IVE agreement with the federal government.

- Port Gamble S'Klallam Tribe (PGST) successfully signed an Agreement with the federal government for federal direct IVE funding. CA and the PGST are negotiating an agreement to support the Tribe's use of the CA SACWIS system for data input to support their IVE compliance.
- CA supports Title IV-E pass through agreements with the Makah, Lummi, and Quinault Tribes.
- Lummi Nation submitted and received federal start up dollars to prepare their tribal IVE plan for direct federal funding.

- South Puget Intertribal Planning Agency, a tribal consortium consisting of 5 federally recognized tribes, is in the planning stages to represent four of their member tribes in applying for startup federal funding

Indian Child Welfare Case Review

The ICW case review was completed in December 2012 and the report was completed in February 2013. The review is comprised of 34 questions divided into eight practice areas and occurred in six locations across the state. Review team members included CA staff, Tribal and Recognized American Indian Organization staff, Office of Indian Policy program managers, and the Central Case Review team. Preliminary recommendations will be incorporated into the draft ICW Quality Assurance and Improvement plan. Key improvements from the last review conducted in 2009 include:

- Tribal Notification within one day for children who were eligible for membership in a Washington state tribe increased from 32% in 2009 to 65% in 2012. (Question 15)
- Placement preferences by the Tribe were followed 100% in this year's review (Question 28)
- Active Efforts for the fathers improved from 48% in 2009 to 54% in 2012, (Question 12) and from 66% to 77% for mothers, (Question 13)

See Attachment 3 for the full ICW Case Review Report and recommendations for improvement.

FamLink (SACWIS) Tribal Access

CA continues to work with tribes' to gain access to the SACWIS system, FamLink. FamLink data access allows tribes to view all Indian children in the care and authority of their tribal court, and data access to all their tribal members who CA staff serve. Access to FamLink allows tribes to ensure accurate information in FamLink on cases under their care and authority and helps ensure correct identification of tribal membership. Data access supports collaborative working relationships between CA and tribes and more timely communication, which lead to better outcomes for children and families.

Currently, of the 29 tribes:

- 28 tribes have requested access,
- 25 have a signed data access agreement, received training and have access;
- 73 individual tribal employees have tribal FamLink access

CA continues outreach to tribes who have not yet completed the data access agreement.

Tribes and Youth Participation – See [CHAFEE Section](#)

Section IX:

Health Care Oversight and Coordination Plan Update

Health Care Oversight and Coordination Plan

The Children's Administration collaborates with its partners to oversee and provide health care services for children in out-of-home care. The following information is a summary of our activities in fiscal year 2012. (To access the complete *Health Care Oversight and Coordination plan*, click [here](#).)

- Oversight/Coordination of Health Care

- In July 2012, children in out-of-home placement became eligible to enroll in Washington's managed care plans. This option supports continuity of care for children who are already enrolled in one of these plans prior to entering out-of-home placement. In addition, the managed care plans offer care coordination services for enrolled foster children.
- In August 2012, a team of leaders from the Health Care Authority (Washington's Medicaid state agency) and DSHS attended the "Minds Matter" summit in Washington, D.C. This summit focused on the use of psychotropic medications and children in foster care. The group identified several strategies currently in development. These strategies are intended to assist in the oversight of psychotropic medications for children in foster care and include:
 - A guide for informed consent that can be used by caregivers and youth. This tool discusses various types of psychotropic medications, their effects, and options regarding therapy. It is intended to empower the youth to have a thorough dialogue with their health care provider when psychotropic medications are prescribed.
 - A "report card" which provides a visual tool to prescribers about their prescribing practices compared to their peers.
 - Focus efforts to ensure children in foster care receive appropriate trauma informed care through Evidence Based Practices that specifically address the child/youth's adverse childhood experiences.
- In October 2012, the Health Care Authority, Children's Administration, and the University of Washington co-sponsored a meeting with key state stakeholders including state legislators to debrief and inform our partners about the outcome of the August 2012, Because Minds Matter Summit. The strategies identified at the Summit were presented at this meeting.
- In October 2012, the Children's Administration redesigned the Health/Mental Health pages in the SACWIS system. The redesign:
 - Allows clearer documentation of health and mental health conditions and includes "identification" and "end" dates for health and mental health conditions
 - Creates an electronic report that summarizes the health, mental health, and education information entered into the system.
- During FY 2013, quarterly meetings were held to address the needs of Pregnant and Parenting Teens in foster care. Washington State is the recipient of a grant to support work in this area. This group began drafting a guide book that will provide information and resources for pregnant and parenting youth and is scheduled to be completed in FY 2014.
- In 2013, CA held quarterly meetings with the Regional Medical Consultants. Throughout the year, the RMCs provided their guidance on CA policy issues including substance exposed infants and immunizations.

- Fostering Well-Being Care Coordination Unit (FWB CCU)

- In August 2012, the FWB CCU met with the CA Indian Child Welfare (ICW) program managers to clarify how and when tribal children in out of home placement are eligible for care coordination

services. With this clarification, the FWB CCU also developed a process to contact the child's tribal social worker when providing care coordination services to a tribal child.

- In November 2012, the FWB CCU began receiving automatic notifications of all denials for Medicaid related goods and services (equipment, prescriptions, dental care, and anything that requires a prior-authorization). A notification of the denial is automatically sent to the FWB CCU who provides assistance navigating the Medicaid system and addressing issues with the denial. An FWB CCU staff attends the HCA Utilization Review Board when there is a Medicaid denial for a foster child to provide expertise and advocacy as needed.

- Health Needs Monitored and Treated

- In July 2012, CA and the FWB CCU began identifying a process to continue care coordination services for youth participating in the Extended Foster Care program. There are special considerations to address with these youth such as consent and sharing of information.
- In November 2012, the Health Care Authority updated their policy for youth who are "missing from care." Prior to November 2012, Medicaid eligibility for these youth was closed until they returned to care. The policy change allows their Medicaid eligibility to remain open in order that these youth may seek medical care and fill prescriptions while on the run.

- Medical Information and Health Records

- In March 2013, FWB CCU began discussions with the Alliance for Child Welfare Excellence to develop training for social workers and caregivers regarding health and mental health issues.
- In October 2012, the DSHS 03-338 EPSDT/Health Services Consent card was updated. The updated card includes the schedule for Initial Health Screens and EPSDTs as required per [CA Policy 4517](#). The card is included in placement packets which are given to caregivers whenever a new child is placed in their home.

- Oversight of prescription medications

- In July and August 2012, the ProviderOne payment system implemented edits when medications are prescribed that are outside standard prescribing recommendations. The edits look at:
 - Too many (5 or more mental health medications)
 - Too much (dosages)
 - Too young (children <5 years of age)

These edits force a prior authorization to occur prior to approval from the Health Care Authority that includes a second opinion review process in order to fill the prescription(s).

- In November of 2012, the FWB CCU staff were trained by the Health Care Authority Pharmacy staff about the ProviderOne (MMIS) safeguards in place regarding psychotropic and other medications. The FWB CCU staff frequently uses this training to educate CA social workers, foster parents, and medical providers about the Health Care Authority practice and policies regarding psychotropic medications. The FWB CCU staff are available to facilitate and intervene in crisis situations in order to ensure the child receives the medication they are prescribed and support social workers and caregivers in their roles.

- Consultation in Determination of Medical Treatment

- In May 2012, FWB CCU and Children's Administration HQ staff met with Independent Living providers and CA social workers in Spokane WA to continue the work of a pilot project regarding the provision of health care overviews to youth aging out of care.

- In October 2012, Washington was the recipient of a federal Administration for Children Youth and Families grant. This one-year grant focuses on comprehensive planning to improve the social and emotional well-being of children in foster care. The primary goals of the grant are to:
 - Streamline and standardize processes to identify and refer children for services.
 - Increase capacity to deliver evidence-based practices and trauma-informed care.
 - Coordinate planning between professionals in mental health and child welfare.

Contingent upon successful outcomes of the grant's one-year planning process, there is also the potential for the grant to expand over the next four years. Additional grant funding will support infrastructure development, staff training, evidence-based practices service training and evaluation.
- In December 2012, the FWB CCU began to provide an email with specific screening recommendations for every child referred to the FWB CCU. The email is intended to provide brief targeted recommendations to the case worker and caregiver and is an alternative to more in depth summaries that are still developed when needed or requested.



PLANNED ACTIVITIES (FY 2014)

Activity	Target Date
1. Continue workgroup activities related to the Pregnant and Parenting Youth grant.	December 2013
2. Evaluate and participate in the redesign of the Predictive Risk Intelligence System (PRISM) to refine information that identifies children in foster care at high risk for health and mental health concerns.	June 2014
3. ACF Grant Activity: Hold sixteen focus groups around the state as part of a needs assessment to identify gaps in assessing for trauma and mental health services that appropriately match to children involved with child welfare.	May 2013
ACF Grant Activity: Identify trauma screening tool	September 2013
ACF Grant Activity: Develop training for CHET and caseworker staff regarding trauma screening tool	June 2014
4. Establish workgroup to update CA Psychotropic Medication policy	June 2014
5. Determine how to provide care coordination services to age 21 for youth who elect to participate in the Extended Foster Care program.	June 2014
6. Participate with the Training Alliance to develop training for caregivers and case workers about health and mental health issues.	June 2014

Section X: Financial Information

- Title IV-B Sub-Part 1 and 2 Expenditures
 - Examples of Key Service Providers (Subpart 2 Services)
-
- CFS 101, Part I, II, III have been delivered by separate email

Title IV-B Sub-Part 1 and 2

Payment Limitations - Title IV-B Subpart 1

- Washington State expenditures of Title IV-B subpart 1 funds in FFY 2005 for child care, foster care maintenance, and adoption assistance payments was \$0 and we will not be expending any of these funds in these areas in FFY 2014.
- The amount of non-federal funds expended by Washington State for foster care maintenance payments that may be used as match for Title IV-B, subpart 1 award in FY 2005 was \$0 and we will not be expending any of these funds in these areas in FFY 2014.

Non-Supplantation Requirement - Title IV-B Subpart 2

- The 1992 base year amount was \$24.257M.
- The state and local share expenditure amounts for IV-B subpart 2 for FY 2012 was \$24.796M.

Federal Law Changes - Title IV-B, Subpart 2

- Washington State does not plan to revise the use of Title IV-B, subpart 2 funds based on the amendment to P.L. 112-34.

Title IV-B Subpart 2 Services: Examples of Key Service Providers

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
A1441 - Family Preservation Services (FPS)	Children's Administration contracts with providers throughout Washington State for FPS. Key service providers include: <ul style="list-style-type: none"> • Catholic Community Services • Community Youth Services • Institute for Family Development • Martin Luther King Family Outreach Center • Spokane Child Abuse and 	N/A	N/A	N/A	N/A

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
	Neglect Prevention Center • YouthNet				
A1493 – Early Family Support Services	N/A	Children’s Administration contracts with providers for EFFS throughout Washington State. Key service providers include: • Brigid Collins House • Catholic Community Services • Family Connection • Institute for Family Development	N/A	N/A	N/A
A1962 - Evaluations and Treatment	N/A	N/A	These medical services are provided by various medical providers in local communities. Children’s Administration contracts with more than 700 providers to provide evaluations and treatment for its clients throughout Washington State. Key service providers include: • Behavior Intervention Program • Martin Luther King Jr. Family Outreach Center • Empowering Inc Svcs • Partners with Families and Children	N/A	N/A
A1441 - Family Preservation	N/A	N/A	Children’s Administration	N/A	N/A

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
Services			contracts with providers for time limited FPS throughout Washington State. Key service providers include: <ul style="list-style-type: none"> • Community Youth Services • Institute for Family Development • Martin Luther King Family Outreach Center • Spokane Child Abuse and Neglect Prevention Center 		
A1461 - Intensive Family Preservation Services (IFPS)	N/A	N/A	IFPS is provided on a statewide basis by the following service providers: <ul style="list-style-type: none"> • Brigid Collins House • Institute for Family Development 	N/A	N/A
A1633 - Adoption Medical	N/A	N/A	N/A	Qualified providers in local communities provide adoption medical services. Services include counseling, psychological and neuropsychological evaluations for legally free children who are the most needy and difficult to adopt.	N/A
A2123 - Social Workers (CWS Local Workers - Adoption Services)	N/A	N/A	N/A	Adoption services are provided by: Adoption Social Workers who facilitate adoptions and perform home	N/A

Service Category	Family Preservation (30% of grant)	Community-Based Family Support (20% of grant)	Time-Limited Family Reunification (20% of grant)	Adoption Promotion and Support (20% of grant)	Administrative (10% of grant)
				studies.	
A2181 - Adoption Program Staff	N/A	N/A	N/A	Adoption services are provided by Adoption Support program staff who negotiate adoption support agreements, and provide case management for about 17,000 children and families.	N/A
Administrative	N/A	N/A	N/A	N/A	Lease costs
Administrative	N/A	N/A	N/A	N/A	Title IVB-2 is allocated its share of indirect administrative costs through base 619, some of these cost include: Finance and Performance Evaluation Division (FPED) salaries, benefits, goods, and services.
Administrative	N/A	N/A	N/A	N/A	Assistant Secretary's Office salaries, benefits, goods, and services.
Administrative	N/A	N/A	N/A	N/A	Children's Administration's Technology Services (CATS) (does not include staff working on FamLink) salaries, benefits, goods, and services.

Section XI: Program Description

Program Description

Children's Administration provides direct services to children and families statewide through services provided by state employees and by contracted service providers. Children's Administration staff provide services in Children and Family Services as well as Licensed Resources.

Program Description

Children and Family Services

Children and families enter Children's Administration through four primary program areas: Child Protective Services, Family Voluntary Services, Child and Family Welfare Services and Family Reconciliation Services. These programs are responsible for the investigation of child abuse and neglect complaints, child protection, family preservation, family reconciliation, foster care, group care, in-home services, independent living, and adoption services for children age 0 to 18 years (as well as extended foster care up to age 21).

Child Protective Services (CPS) provides 24 hour, seven day a week intake, screening and investigative services for reports of alleged child abuse and neglect. Child Protective Services social service specialists investigate allegations of child abuse and neglect to assess the safety and protection needs of children. Law enforcement, courts, tribes, and community teams are also critical members of the child protection system. Each has a distinct role and is integral to the checks and balances designed to protect children from abuse and neglect and to safeguard families from unnecessary disruption.

When it appears that a child is in danger of being harmed and cannot safely be maintained in the family home CPS, (through law enforcement, a hospital administrator or the court), places the child with a relative or in foster care. By law, a child can be kept in protective custody for no more than 72 hours, excluding weekends and legal holidays. If the child is not returned to the parents or some other voluntary arrangement made within 72 hours, the matter must be reviewed by a court. If risk warrants ongoing placement, dependency must be established in court within 75 days.

Family Voluntary Services (FVS) support families on a voluntary basis and focus on early engagement. Services with families are designed to help prevent chronic or serious problems that interfere with their ability to protect or parent children. This program serves families in which the children are safe to remain in the home while the family engages in services through a Voluntary Service Agreement (VSA) or for children who are temporarily placed in an out of home setting through time-limited Voluntary Placement Agreement (VPA).

Child and Family Welfare Services (CFWS) provides both permanency planning and court-ordered intensive treatment services to children and families who need help with chronic or serious problems that interfere with their ability to protect or parent children, such as on-going abuse and neglect or intensive medical needs. Services address the health and wellbeing of children in out of home placements and provide ongoing assessments of safety and risk to children. Children served in this program are dependents of the state (in-home or out-of-home care) or legally free for adoption.

Family Reconciliation Services (FRS) is a voluntary and family focused in-home service that relies on the family's participation. The goal of FRS is to preserve, strengthen, and reconcile families in conflict.

The range of services provided is designed to help families find solutions to their conflicts by developing skills and supports to maintain the family unit. Service delivery begins with the least intensive, least intrusive intervention appropriate to the individual case circumstance.

Licensed Resources

The Division of Licensed Resources licenses, supports, and monitors child foster homes and group residential facilities. The Division of Licensed Resources also licenses child-placing agencies. These agencies in turn certify private agency foster homes. The Division of Licensed Resources collaborates with Children and Family Services and private contractors to recruit and retain foster families.

The Division of Licensed Resources Child Protective Services (DLR/CPS) investigates allegations of child abuse and neglect by caregivers in homes and facilities licensed, certified or operated by DSHS or the Department of Early Learning to care for children (including the biological and adopted children of licensees).

DLR/CPS has five main goals:

- 1) ensure the immediate safety of alleged child victims and other children determined to be at risk during the course of an investigation;
- 2) investigate allegations of child abuse and neglect and make determinations regarding whether abuse or neglect occurred;
- 3) assess whether the child victim or other children in the setting have been abused or neglected in ways that were not alleged;
- 4) identify risk factors within the facility which create a substantial risk of harm to children; and
- 5) ensure consistency and fairness toward providers during the investigation.

Service Description

*See Detailed Service Description of Children's Administration Services in **Attachment 2***

Section XII:

Washington State Disaster Plan

Washington State Disaster Plan

The Washington State Disaster Plan outlines the Children's Administration preparedness, response, and recovery plan to sustain vital services defined as Child Protective Services, Medically Fragile Children, and Child and Family Welfare Services.

The plan enables the Children's Administration to assure continuity of planning, response, and recovery activities for worksites and programs. The plan responds to the Child and Family Services Improvement Act of 2006 that requires states to have in place procedures to respond to a disaster, including:

- Identifying, locating, and sustaining availability of services for children under state care or supervision who are displaced or adversely affected by a disaster
- Responding, as appropriate, to new child welfare cases in areas adversely affected by a disaster, and provide services in those cases
- Remaining in communication with social workers and other essential child welfare personnel who are displaced because of a disaster
- Preserving essential program records
- Coordinating services and share information with other states

As part of the Annual Progress and Services Report for FY 2013, states are required to review previously submitted disaster plans to determine if changes are needed. Children's Administration reviewed the disaster plan, updated contact information and made some minor changes to the document.

During the winter of 2012, ice storms necessitated the closing of DSHS offices across the state of Washington. In addition, during the summer of 2012 over 300 Wildfires across Eastern Washington necessitated the evacuation of some foster homes and the closing of some DSHS offices. Communication and coordination of response between DSHS Emergency Management and the Regions has been enhanced over the last few years. Therefore, during these emergencies both the coordination of information and decision making was greatly improved. To see further details on the Washington State Disaster Plan please access the plan through the following link: <http://www.dshs.wa.gov/pdf/ca/EmergMgmtPlan2013.pdf>

Attachment List

- **Training Matrix** (Attachment 1)
- **Service Description** (Attachment 2)
- **Washington State Indian Child Welfare Case Review – 2012 Report** (Attachment 3)