

Georgia Division of Family and Children Services

FY 2023 Annual Progress and Services Report

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Georgia's 2020-2024 CFSP and most recent APSR documents can be viewed on the DFCS Federal Plans website: <a href="https://dfcs.georgia.gov/data/federal-reviews-and-plans">https://dfcs.georgia.gov/data/federal-reviews-and-plans</a>.

#### Section A: Introduction

#### Introduction

The APSR provides an annual update on the progress made toward accomplishing the goals and objectives in the Child and Family Services Plan (section 432(a)(2)(C)(i) of the Act). Completion of the APSR satisfies the federal regulations at 45 CFR 1357.16 by providing updates on a state's annual progress since the submission of the CFSP and planned activities for the upcoming fiscal year. Georgia's 2022 APSR has been developed as a vehicle to convene, update, and collaborate with partners, promote program planning and improvement efforts, and determine the services and supports that will further the state's vision and lead to improvements in the outcomes of safety, permanency, and well-being. Within the past year, while working through the challenges brought on by the COVID-19 pandemic, Georgia has accomplished meaningful efforts toward improving child welfare services for children and families, and promoting safety, permanency, and well-being. These agency efforts also promote the national and state priority to transform child welfare into a system that focuses on strengthening families and preventing child abuse and neglect.

The Georgia Division of Family and Children Services (DFCS) is committed, through its child welfare programs, to ensuring the safety, permanency, and well-being of Georgia's most vulnerable citizens. DFCS has adopted a three-pillar approach to achieve the goals set forth in the strategic plan and to realize its vision and mission. This serves as a framework for the organization's overall approach to child welfare services. The first pillar includes the establishment and adoption of a research-based practice model that will serve as the foundation to keep children safe and strengthen families. The second pillar focuses on developing a robust workforce with expertise and training. The third pillar addresses constituent engagement to build consensus and collaboration among partners, staff, and stakeholders.

#### **Vision**

Safe Children. Strengthened Families. Stronger Georgia.

#### **Mission**

Prioritize the safety of Georgia's children in the decisions we make and the actions we take. We strengthen families toward independence and build stronger communities with caring, effective, and responsive service.

## **Guiding Principles and Values**

- 1. Commit to the safety of our children in the decisions we make and the actions we take.
- 2. Empower, strengthen, and support families on their path to independence.
- 3. Embrace a servant's heart with compassion.
- 4. Provide caring, responsive, and effective service.
- 5. Listen and respond to our constituents, communities, and each other.
- 6. Collaborate with our communities to create systems of support.
- 7. Develop a professional and efficient workforce that never stops learning and growing.

#### **Organization**

As authorized by state law O.C.G.A. §49-2-6, the Georgia Division of Family and Children Services (DFCS) is responsible for the administration of funding through titles IV-B (Subparts 1 and 2) and IV-E programs, the Child Abuse Prevention and Treatment Act (CAPTA) and the Chafee Foster Care Independence Program, and provides child welfare services to children and families through its child welfare programs to prevent and respond to child abuse, and ensure child safety, permanency and well-being. The child welfare programs are:

- Prevention Services
- Child Protective Services (Intake, Investigation, Family Support Services, Family Preservation Services)
- Permanency Services (Foster Care and Adoption)

Georgia's child welfare system is state-supervised and county-administered. Direct services to children and families are provided through fourteen regions, covering 159 county departments, in accordance with state law and policy. The map of DFCS counties and regions can be viewed on the <a href="dfcs.georgia.gov website">dfcs.georgia.gov website</a>. Regional Directors report to one of three District Directors – North, Metro, and South – who each report to the Deputy Commissioner for Child Welfare. The Division's organizational chart can be found at the end of this report. The administration requirements can also be found in the Child Welfare Policy Manual, Policy 1.0: Administration of Child Welfare Services.

The Division seeks to continuously enhance collaborative efforts statewide. Engagement with constituents and stakeholders is critical to the success of the 2020-2024 Child and Family Services Plan (CFSP). The State's CFSP can be found on the <a href="dfcs.georgia.gov">dfcs.georgia.gov</a> Federal Reviews and Plans site.

## Section B: Collaboration

The Division is committed to supporting substantial, meaningful, and ongoing constituent engagement at all levels, and to ensure that staff and partners continue active listening to children, youth, and families with lived experience in child welfare. During FY22, staff have continued to maintain engagement with the agencies, organizations, and individuals who participated in the CFSP development and coordination process, and those who are integral to the success of Georgia's child welfare system. These collaborative efforts have assisted with the assessment of agency strengths and areas needing improvement, the review and modification of goals, objectives and interventions to the CFSP (as needed), and monitoring of CFSP progress. Additional descriptions of collaborations related to CFSP goals and strategies can be found in Section D: Update to the Plan to Enact the State's Vision and Progress Made to Improve Outcomes.

## Community Engagement

In April 2022, Commissioner Broce and her leadership team spent three days in Rome (Region 3) meeting with local staff, hearing from foster parents and visiting facilities that serve Georgia's most vulnerable, like Rome Senior Center, Mercy Care, Harbor House Child Advocacy Center, and OpenDoor Children's Home. The team toured the Restoration Rome Center for Foster Care Services, a fast-growing hub that helps families get connected with the services they need. There are three additional Roadshows scheduled for the remainder of CY2022, which will occur in Athens (Region 5), Gainesville (Region 2), and Valdosta (Region 11). These roadshows provide opportunities for caregivers, providers, and staff to meet in small groups with Division leadership to share their concerns and feedback. The Roadshows are also engaging with other agency staff within the Department of Human Services – such as Division of Aging and Division of Child Support Services – to encourage partnership and collaboration between programs.

In FY22, twenty Georgia community organizations were selected to receive technical assistance and funding from the Georgia Division of Family and Children Services (DFCS) through its State of Hope (SoH) initiative. Started in 2018 and now in its fourth cycle, Georgia SoH will work with these organizations along with a network of other selected groups to help continue efforts in local communities that address conditions which attribute to disparities in education, threaten a family's self-sufficiency and lead to child abuse and neglect. State of Hope is an initiative that seeks to encourage nonprofits, philanthropies, government, businesses, and communities to collaborate closely to build local safety nets. Led by the Division and in partnership with Georgia State University's Child Welfare Training Collaborative and Georgia Family Connection partnership, the State of Hope initiative provides opportunities for interested local community programs to enhance what they are already doing to improve the quality of life for Georgia families.

The full list of these organizations can be found at <a href="https://dfcs.georgia.gov/about-us/state-hope">https://dfcs.georgia.gov/about-us/state-hope</a>, and additional success stories on community engagement within the SoH ecosystem can be found in <a href="Section D: Update to the Plan to Enact the State's Vision and Progress Made to Improve Outcomes">https://dfcs.georgia.gov/about-us/state-hope</a>, and additional success stories on community engagement within the SoH ecosystem can be found in <a href="Section D: Update to the Plan to Enact the State's Vision and Progress Made to Improve Outcomes">https://dfcs.georgia.gov/about-us/state-hope</a>, and additional success stories on community engagement within the SoH ecosystem can be found in <a href="Section D: Update to the Plan to Enact the State's Vision and Progress Made to Improve Outcomes">https://dfcs.georgia.gov/about-us/state-hope</a>, and additional success stories on community engagement within the SoH ecosystem can be found in <a href="Section D: Update to the Plan to Enact the State's Vision and Progress Made to Improve Outcomes">https://dfcs.georgia.gov/about-us/state-hope</a>, and additional success stories on community engagement within the SoH ecosystem can be found in <a href="Section D: Update to the Plan to Enact the State's Vision and Progress Made to Improve Outcomes">https://dfcs.georgia.gov/about-us/state-hope</a>, and additional success stories on the section of the secti

In March 2022, the University of Georgia's Carl Vinson Institute of Government (CVIOG) was announced as a collaborating partner with DFCS to provide strong, ongoing Continuous Quality Improvement, or CQI, for all Family First evidence-based practices. The Division's Family First Implementation Team will have a specific focus on promoting appropriate coordination and sequencing of implementation tasks, as well as integrating information gathered by the statewide Family First CQI team and regional CQI teams. Robust CQI will allow DFCS to track and analyze strengths and problems in the delivery of evidence-based practices and to implement and adapt solutions. This will ensure that the implementation of the title IV-E Prevention Plan is aligning with agency and statewide goals, while taking local context and challenges into account.

Stakeholder engagement is one of the overarching goals for improving Georgia's child welfare system, and to accomplish this goal, the Division recognizes the critical role of parents. In developing the state's Child and Family Services Plan (CFSP), the Division set a goal to recruit and retain a Parent Advisory Council (PAC) and committed to regular and ongoing engagement with the parent members. These parents are active partners in reviewing child welfare policy, providing regular training and guidance to staff on best practices for working with families, and supporting the state's efforts to improve relationships with caregivers, providers, and external partners. Additional description of PAC activities can be found in <a href="Section D: Plan for Enacting the State's Vision">Section D: Plan for Enacting the State's Vision</a>. The feedback provided by parents is used to assess program performance and support development of regional CQI goals. Parent feedback is incorporated into each APSR. This work is ongoing.

## **Primary Prevention**

The Division continues to emphasize primary prevention and the need to engage community resources as a support for families and children. Regional meetings held in the fall of 2021 made significant efforts to address primary prevention of maltreatment. Discussions included Georgia's new Child Abuse and Neglect Prevention Plan (CANPP), as well as staff from the local Family Connections programs and DFCS Office of Family Independence (OFI). OFI provides prevention assistance for families in need through the Supplemental Nutrition Assistance Program (SNAP), Family Medicaid, and cash assistance through the Temporary Assistance for Needy Families (TANF). These OFI services are recommended for families who are struggling to provide for their children, and receiving these supports are helpful for families to reduce the risk for maltreatment.

Regional stakeholder meetings are critical to connecting Division staff to local agency partners and service providers, and to raise awareness of the prevention services available for families. Stakeholder meetings are also helpful to break down barriers and understand the roles and policies within each program area.

The Division continues to untilize the Promoting Reasonable Efforts (PRE) Team process which convenes staff, courts, and stakeholders to prevent the unnecessary dependency of children by ensuring that DFCS has conducted thorough reasonable efforts prior to removal. The PRE Team process also serves as an additional opportunity to address case plan development and address the use of Family Team Meetings (FTM) to do so. PRE Team staffings also provide opportunities to identify available community support services that could benefit the family, avoid a DFCS investigation, and prevent entry (or re-entry) to foster care. When a county is seeking removal to bring a child into care, the PRE Team process identifies if an FTM has been held with the family to address the case plan and determine if there are any reasonable efforts that would prevent removal. In addition, during a PRE Team meeting, the discussion often leads to the development of ideas for case planning with the family. The Division also consistently invites medical experts from the Children's Healthcare of Atlanta (CHOA) to case staffings to ensure dependencies are warranted.

The Prevention and Community Support (PCS) Section serves as the state lead for the Community Based Child Abuse Prevention (CBCAP) federal grant program and functions as the Children's Trust Fund entity for the state of Georgia. The goal of PCS's approach is to engage communities in planning, implementing, and evaluating a continuum of prevention services. To ensure sustainability of programs, the Division is committed to supporting infrastructure development investments in communities. This investment includes the use of some CBCAP and Promoting Safe and Stable Families (PSSF) dollars that support training and capacity building efforts for grantees. The PSSF program provides a multitude of primary prevention services within the community. In FY2020, PCS and its partners completed the update to the Statewide Child Abuse and Neglect Prevention Plan (CANPP) that began in FY2019. The Plan, originally established in the 1990's, was designed to establish statewide models of collaboration that could be replicated at the local level to decrease duplication of efforts and increase efficiency in the delivery of prevention services – with the goal of decreasing the occurrence of child maltreatment in Georgia. In FY21, all 14 DFCS regions were reconvened to develop regional CANPPs adapted from the state plan. Each region met several times to review the state plan, select 3-5 strategies from the 77 included in the plan, and develop their own regional plan. In FY22, the Georgia Essentials for Childhood team convened the regional CANPP Communities of Practice. Regional Implementation Participants, Leads, and Conveners were invited to come together in each DFCS region in support of activities across the state to review the top priorities developed in FY21 regional planning meetings.

The first round of sessions were scheduled from February - March 2022. Communities of Practice allow participants across Georgia to talk about implementation resources (such as technical assistance needs), successes, barriers, and lessons learned as they work to advance their local and regional work around these statewide priorities:

- Increase access to evidence-based or research-informed programs for parenting skills and support that help parents/caregivers understand all stages of child development.
- 2. Increase life-skills training for school-aged children and youth (e.g., financial literacy as a core competency).
- 3. Promote trauma-informed training for all school personnel (e.g., trauma-informed care, addressing implicit bias, empathy, prejudices, attribution).
- 4. Expand efforts to develop safe and decent affordable housing for families.
- 5. Increase community knowledge and awareness of the incidence and long-term impact of childhood abuse and neglect, as well as how to accurately recognize and report suspected cases.
- Expand trauma-informed practices and resources across the state as well as increase understanding about the prevalence and impact of adverse childhood experiences (ACEs) and adverse community environments (jointly referred to as the Pair of ACEs).

## Workforce Development

The Division remains committed to engaging the workforce and improving the overall morale and culture of staff through a long-term strategy designed to authentically and creatively articulate the identity of the Division and its diverse partners. The Division is now in the third year of a five year 'Workforce Excellence' project in partnership with the National Child Welfare Workforce Institute (NCWWI). The project continues to be led by an 'Implementation Team' with membership comprised of all levels of the Division as well as individuals from three partner Universities. Accomplishments to date include the development and full implementation of a Leadership Academy (with associated coaching component), graduation of the first of three student cohorts provided the opportunity to earn a Master of Social Work (MSW) degree, and establishment of three Region-based 'Action Teams', all of which are focusing their workforce development strategies around peer-to-peer support which has proven to contribute positively towards worker well-being. Additional information and evaluation findings can be found in Section D: Update to the Plan for Enacting the State's Vision. For the remainder of FY22 and into FY2023, the project will focus on expanding the number of Action Teams as well as implementing strategies to ensure that the gains made from the investment in the project will be maintained and continue to serve and strengthen the Division's workforce.

During the past year the department also provided additional financial incentives for staff with a master's degree (previously only for case manager level) and clinical licenses (supplement). This effort is intended to help retain staff with higher educational achievements in agency leadership.

Café 212 is bi-monthly Division-wide forum offering a wide variety of practice improvement and self-care topics for staff. Beginning in August 2021, a new series titled "Friday Morning Charts" was introduced. These data presentations are offered once each month in the Café 212 forum to share timely and relevant child welfare data. Performance and key focus areas are highlighted to increase awareness around the data and its applications. Friday Morning Charts has presented on monthly caseworker visit data, the impact of COVID on cases, and variations in substantiation rates. Staff provide positive feedback after each session, and report that the data presentations are useful in understanding the impact of their individual work on the state's overall performance. Staff requests for specific data content are reviewed by the presenters and developed for future presentations. Café 212 also hosts presentations from other programmatic sections and spotlights great work within each region. These are monthly opportunities for frontline staff, supervisors, and county leadership to share their good work and positive outcomes to a statewide audience. The Division promotes these forums as a venue to recognize the strengths of the workforce, which supports overall performance improvement and workforce retention. This effort is ongoing.

To address challenges with staff burnout, trauma, and self-care that was particularly evident during the COVID-19 pandemic, several regions across the state have implemented various initiatives. For example, during FY22, Region 3 hosted a trauma workshop to address staff trauma related to the stress of child welfare work, especially during the COVID pandemic. The workshop was also shared during the 2021 Child Welfare Summit hosted by the Office of the Child Advocate. The Summit provided child welfare workshops to 686 attendees, representing each region of the state. Region 2 has an ongoing partnership with NCWWI in implementing an Action Team to focus on promoting staff wellbeing through the Synergy group. Additional information on the Action Teams can be found in Section D: Update to the Plan for Enacting the State's Vision. Region 2 invites new staff to convene for 2 hours per month to create peer connections and learn about secondary traumatic stress (STS), overcoming performance pressures, navigating the seasons of child welfare, normalizing challenges and mistakes, etc. The region also hosted a virtual event with a therapist who spoke about STS, and how child welfare workers can take care of themselves. This is a part of a larger regional staff wellbeing series. The region has a trauma response team that will reach out to staff to offer support when they have an especially traumatic case or experience. In addition to these examples, many of the County Directors have had regular check-ins with staff during the pandemic to talk candidly about their well-being. This work is ongoing.

The Region 4 Regional Team works in partnership with county staff to provide additional training and support. The regional team completed a virtual roadshow in FY22 with each county and their leadership to discuss the roles and duties of each Field Program Specialist and Rapid Response Team. The counties were able to identify any needs they had and developed a plan on how the Regional Team could support them. Permanency and Safety Field Program Specialist convene monthly virtually "Chat-n-Chews" with the region to share information on policy and procedures with opportunities for discussion to clarify different components within the policy. The Regional Team also holds new case manager support groups called "Pathways" where veteran case managers assist in providing informative meetings and live learnings to help new case managers build networks and their skill set. Regional Team also does the same for new supervisors called "Journeys". Region 4 has been able to adjust to the restrictions on in-person gatherings by providing training on virtual platforms to continue educating staff throughout FY21 and FY22. The region holds quarterly summits for Case Managers and Supervisors to discuss hot topics and provide additional live learnings. Region 4 is working to improve the process of obtaining feedback from these multiple supports and will explore opportunities to do so. This work is ongoing.

Region 13 supported new employees during their training and post-training, with the intent to enhance employee retention, by providing in-person orientation and guidance toward their training path with respect to their specific program areas. They are linked with the community partners (e.g., Juvenile Court, Department of Juvenile Justice, mental health partners, and K-12 school administration). New staff are also guided through the Georgia Child Welfare Training Academy with the necessary resources and tools to complete training expectations. The region conducts a weekly check-in with staff for further enhancement of their skills, and for the new staff to have access to their county leadership to address any questions or concerns they may have as a new staff member. A learning lab is provided for staff to receive over-the-shoulder support and guidance on a case they are working. They can receive support with items such as: the assessment, case plan, legal action, service authorization, SHINES documentation, and other areas. Feedback from new staff indicate the learning labs and over-the-shoulder support are appreciated.

Recognizing the importance of incorporating the youth voice in permanency planning and preparation, Georgia's Adoption Exchange Program Manager facilitated a training for staff in Regions 2, 6, 13, and 14 around child specific recruitment efforts for older youth. The training included strategies for incorporating the youth voice in their recruitment and preparation. Additional training opportunities will be made available to other regions as well as an offering upon the reinstatement of the Statewide Adoption Match Meeting (SAMM) in the future.

In an example of interagency alignment, the DFCS Child Protective Services Intake Communications Center (CICC) provided training to the DFCS Office of Family Independence (OFI) Call Center personnel on the essential needs for making child abuse and neglect reports. The OFI Call Center staff frequently receive telephone calls from the public where certain information rises to the level of maltreatment of child(ren). The OFI Call Center staff must be aware of the requirements for notifying CICC when there is suspected child abuse or neglect. The training included an overview of what happens to a report once received by CICC in accordance with agency policy. Oral feedback was obtained from participants including the benefits of the training. The goal of the training was achieved as these mandated reporters are better informed and better equipped to make reports of suspected child abuse and neglect.

## Race, Equity, and Inclusion

The Division is committed to improving equity and inclusion among staff, children, and families, and reducing bias in the workplace. There are several initiatives occurring within the regions as well as some statewide efforts to explore opportunities for dialogue and self-discovery. Additionally, the Policy and Regulations Unit is exploring methods to assess and promote inclusive language in child welfare policies. This work is ongoing.

As part of the Division's Workforce Excellence Project (in partnership with the National Child Welfare Workforce Institute (NCWWI) and the Butler Institute at the University of Denver), three participating university partners launched a student-focused project to develop increased cultural awareness using the Intercultural Developmental Inventory (IDI). In the summer of 2021, the project contacted 28 representatives from the three universities; seven faculty completed the assessment and debrief. The project also contacted 28 representatives from DFCS; 14 completed the assessment and debrief. The feedback from both agency staff and university participants will help shape potential future engagement at work across the project.

In August and September 2021, all 30 current NCWWI traineeship students (most of which were DFCS staff working towards their MSW) completed the IDI. Title IV-E students from these schools were also invited to complete IDI's. All students are meeting with qualified administrators to debrief the results of their inventory and to create individualized development plans. The three University Principal Investigators (PIs) will convene students in a series of Learning Exchanges over the course of the academic year to support ongoing development. In the summer of 2022, programs are considering training a diverse cohort of qualified administrators in Georgia that represents universities and DFCS and could support continued use of this strategy.

The Division is also promoting discussion of child welfare through a diversity-equity-inclusion (DEI) lens. Conversations with leadership at all levels were held in a series of

"Dare to Lead" workshops in 2021. These conversations provided a safe space for staff to describe implicit and explicit bias, share examples of observed or experienced discrimination, and explore opportunities to lead by example. From these state-level meetings, leaders were encouraged to continue the dialogue with their regional teams and unit staff, and find ways to promote inclusion and equity among staff and the families that are served. The Division's State Adoption Director was invited by the Court Improvement Program (CIP) Director to present at the annual Court Improvement Initiative (CII) conference to lead a conversation around disproportionality, disparities, and cultural competence in child welfare. The CII attendees were comprised mostly of judges, Special Assistant Attorneys General (SAAG), and DFCS County Directors. Feedback on the CII conference was positive, and this discussion received positive reviews in the CII meeting evaluations. CIP will continue to explore opportunities to promote dialogue among legal and judicial partners within the child welfare system around disproportionality and cultural competence.

The Prevention and Community Support Section has embarked on an initiative called H.O.P.E (Helping Organizations Promote Equity). The goal is to increase intentional partnerships with community-based organizations that primarily serve communities of color and underserved populations. This work will focus on the protective factors framework. Implementation is projected for October 2022.

Several regions have taken advantage of various trainings offered (both stand-alone and as part of conferences) related to racial prejudice and the traumatic experiences of prejudice that should be considered an adverse childhood experience. Staff are encouraged to self-reflect and analyze bias in practice, and to utilize data to understand where bias may be affecting decision-making related to involvement with families. Georgia State University Child Welfare Training Collaborative (CWTC) supports professional excellence of staff by providing a variety of courses to strengthen collaborations and promote better outcomes for children. In FY22, the CWTC offered a "Differences are Good" training, which was designed to lay the foundation for exploring biases and stereotypes and the importance of moving beyond them when working with clients and colleagues. Through dialogue and activity, participants analyzed their own perceptions and how they can work better with others. Regions are hosting panel discussions focused on racial equity and inclusion, as well as presentations at regional leadership meetings regarding child welfare work through a racial equity lens. Several state-regional partnerships have occurred promoting "crucial conversations" around biases and how the child welfare system was built without voices from people of diverse backgrounds. The Region 4 Director recently put together a support group around systemic racism. A presentation was put together on what systemic racism is, and meetings were held with frontline staff to discuss the current issues along with ways to support staff and address systemic racism within the counties.

Region 3 United is a regional initiative to support and educate staff around issues of race, equity, and inclusion. The initiative has shared information on the LGBTQ+ community, including information on why learning more is important for staff. Information included definitions of common LGBTQ+ terms/words, pronoun usage, how LGBTQ+ individuals are more likely to face poverty, food insecurity, and economic hardships, and challenges specifically affecting LGBTQ+ youth. The initiative has partnered with counties that hold "A Movement, not a Moment" groups and helped facilitate discussions around current events, mental health, women's equality, disability awareness, recovery, diversity, men's health, and human rights awareness. Region 3 United also led book clubs focused on recognizing personal bias, women pioneers across time, and trauma stewardship. These clubs allowed discussions among members to educate on areas that directly impact the work that DFCS does. Future events (through June 2022) include: book club/discussions of "What Happened to You? Conversations on Trauma, Resilience, and Healing"; Summit activity exploring the impact of skin color (from "Everyday Democracy"); sharing information on responding to microaggressions (from NCWWI/CUNY); and several opportunities to discuss cultural humility.

In 2020, Region 1 created the Race, Ethnicity, and Cultural Health Council (R.E.A.C.H.) to invest in staff development and increase their knowledge of racial equity and inclusion, as well as to provide support and create a culture of curiosity and learning. R.E.A.C.H. meets monthly and is open to all Region 1 staff members. The council creates monthly videos to help staff get to know one another better through a 5-10-minute conversation. Throughout FY22, conversations have included personal experiences of racism, intimate

REGION 4 Henry County offers No Place for Hate, a youth group that is led and organized by Communities in Schools of Georgia in Henry County, where students from diverse backgrounds discuss difficult topics around race and equity and learn ways to respond to strong feelings and bullying or abuse.

partner violence, religious persecution, among others. In addition to the monthly videos, the council also distributes a quarterly newsletter that shares information on how to partner with youth and families from diverse backgrounds, deep dives into cultural celebrations, provides short historical lessons, and shares personal stories and experiences, as well as recipes to try. The council also hosts regional summits where staff come together for two hours to learn with and from one another. From the different council activities, regional and county teams then use the information provided as a springboard into additional conversations. Some counties have even created their own R.E.A.C.H. councils where they provide additional support and educational opportunities to their staff. The Region also has a State of Hope site that's foundation is inclusivity. LIFT provides a free drop-in afterschool youth center in Ringgold, Georgia, for 6th-12th grade students, to foster an environment of inclusion, positive self-worth, and self-discovery within the youth while facilitating inner growth to prepare them for future success. LIFT's

mission is, "Creating opportunities for youth to be Loved as they are, Inspired to be more, Found in community and Trusted to make a difference."

The Division's Training Unit renewed its offering of "LGBTQ Youth in the Child Welfare System: A Path to Equity". This training was developed in partnership with Georgia State University prior to the COVID pandemic and was returned to the in-person training calendar in spring 2022. Registration is open to DFCS staff and classes will be held in various in-person venues across Georgia.

#### Family Time

The Division encourages staff at all levels to support family time, as prioritized by the Children's Bureau in ACYF-CB-IM-20-02 as providing children and youth in out-of-home care safe, meaningful and high frequency family time that strengthens the family, expedites reunification and improves parent and child well-being outcomes. Regions across the state are utilizing visitation centers to support family time. These visitation centers are very often family-oriented and provide home-like settings where families can gather for a meal, read books, play games, and bond with each other under the supervision of an outside provider. Region 1 utilizes a visitation center that also offers post-reunification services, which is conducted in-home for six months up to a year, to teach families how to continue the practices that have learned in other programs, sustain an overall healthy family, and set the family on the path for long-term success. Region 3 utilizes a visitation center that also offers parenting de-briefs and parenting classes (not tied to visitation). Additional supervised visitation family engagement opportunities are offered by contracted wraparound service providers. The use of virtual technology has further enhanced opportunities to supplement in-person visitation and has provided better connectivity between foster and birth parents. Many counties are encouraging prescheduled time for the parents and children to connect on the phone or FaceTime (or similar technology) to maintain connections and allow the parents to continue family rituals such as bedtime stories and saying "good-night" before the child goes to sleep.

As a result of the Conditions for Return initiative, courts are moving forward with unsupervised visits and reunification with an in-home safety plan when there is no longer a safety risk to the child. At the March 2022 convening of the Court Improvement Initiative (CII) annual meeting, the facilitator led the group of juvenile court judges, county DFCS Directors, and SAAGs in a robust discussion of Family Time practices within their jurisdictions. Counties described their progress in expanding family time resources and strategies to overcome hesitancy and barriers. Region 4 discussed their years-long effort to bring a home-like family visitation center to the jail, and now it is a positive atmosphere for families to gather. The meeting session encouraged judicial partners and Division staff

within the CII community to continue promoting Family Time and expand resources where possible.

Several regions have a network of collaborative partners that work directly with the agency to offer services that assist in strengthening family outcomes. In some areas, the needed services are somewhat limited due to geographical barriers. To address these gaps, some counties work with local resources to assist in building the community partnership. For example, in Region 7, many of the local family connections have begun expanding their services to include strengthening the whole family, which is beneficial to the community stability (e.g., improving services to youth at risk, parent education training, and parent/child communication).

Partnership parenting is strongly encouraged with all caregivers and parents. This includes telephone calls, virtual visits and in-home visits, involving parents and separated

siblings, both in and out of foster care. All parents are encouraged to attend appointment and extra-curricular activities with their child(ren).

#### Collaboration with Youth

Regions convened virtual annual stakeholder meetings in the fall of 2021 to ensure stakeholders and staff were informed of the current CFSR outcome measures and CFSP goals, and to explore opportunities for partnership to improve our state's child welfare system. Several regions included youth voice as a part of the meeting

REGION 13 Gwinnett County is piloting the Parent 2 Parent meeting, to allow caregivers and birth parents to meet shortly after placement to get to know one another, discuss the needs of the child, and to arrange for family time (in addition to the visits set forth in the case plan). This plan is strictly between the caregiver and the birth family.

agenda. Young leaders were invited to provide feedback on the presented CFSR data and performance outcomes, to share their personal stories of successfully leaving foster care at adulthood, and to provide suggestions for staff and stakeholders to improve relationships with youth.

R3 held a virtual stakeholder meeting in September 2021 and invited a youth to present and share her story. She is nearly 21 and preparing to leave care and step out on her own. She spoke at length and in detail of her struggles and her successes. She also shared suggestions for staff to improve engagement with young people in the Independent Living Program (ILP) who are preparing to age out of care. Staff and stakeholders on the call were impressed with her bravery and message. Following her presentation, a County Director in the region made specific plans to engage with the young lady to ensure she has the right resources to keep moving forward. ILP staff on the call also made commitments to better engage with youth in the ILP program, to help them avoid homelessness and poverty after reaching adulthood.

The larger counties across the state typically have a higher population of older youth in care with significant mental health or behavioral health needs. In these counties, there is often at least one case manager who specializes in connecting the youth with the needed resources, frequently with support from county leadership, regional staff and in partnership with DBHDD. For example, Douglas County has worked particularly hard with some of these youth and providers to build an individualized placement setting for those youth over the age of 18 who are not able to manage in an ILP setting. Douglas County supported another youth by working to extend waivers that would allow the youth to be eligible for a placement setting where supports and connections are built in.

Generally, this population of youth with complex needs can be challenging due to several factors. Often, they are free for adoption without a resource or have returned from an adoptive placement where adoptive parents do not wish to work toward reunification. This population tends to also have significant behavioral and emotional needs resulting in frequent placement changes punctuated by Crisis Stabilizations. These movements coupled with a lack of placement provider commitments to continue support efforts after crisis situations further removes and prevents connections. An extreme amount of creativity and groundwork is put into these youth so that they have support and connections. This frequently includes reassessing the biological family for placement or supports even after a TPR or failed adoption. Region 3 has a placement unit of two case managers who augment placement search efforts for these high-needs youth. Staff have "get to know them" calls where youth are encouraged to share their dreams, ambitions, career plans and goals. This helps the unit to identify best fit placements. Independent Living Placements (ILPs) and Transitional Living Placements (TLPs) are highly in demand due to their established supports and connections in the community. The Division encourages all older youth to not sign themselves out of care at age 18 and supports the young people to participate in independent living workshops, gain employment, continue education, as well as connect aging youth with relatives or support.

In November 2021, the <u>Hilton Foundation</u> selected the metro Atlanta area to expand their foster care initiative for transition-age youth. The Foundation will invest in organizations that support this youth and young adult population over the next five years. DHS/DFCS is partnering with United Way on a grant proposal to the Hilton Foundation to conduct asset mapping for the current resources and gaps in the continuum of education support and career development. Additionally, the <u>United Way of Greater Atlanta</u> is leading the <u>CareerReady ATL</u> effort which will scale and sustain youth apprenticeship opportunities in the Greater Atlanta region as a model for Georgia. The vision is to develop a youth apprenticeship system focused on Black, Hispanic and other youth of color furthest from opportunity that ensures they have multiple pathways to economic well-being and self-sufficiency and develops the regional talent pipeline to meet the needs of industry. The Division is partnering with CareerReady ATL to begin the work on a youth apprenticeship

model to serve youth and young adults who have experienced foster care. One key component of the initiative is to engage former foster youth on an ongoing basis to advise the project and ensure career pathways are tailored to the specific needs of youth in Georgia. The project invited the Youth Advisory Board members and other ILP-eligible youth in each region to the inaugural meeting in April 2022. Young leaders were encouraged to share their experiences in career placement and readiness, and provided recommendations for the partnership project to develop new and meaningful career opportunities for youth. Additional statewide convenings are scheduled in each district of the state during CY2022 where youth will support the planning and marketing efforts of the project. This partnership is intended to enhance career readiness for youth in care, strengthen the state's workforce for the future, and address economic- and employment-related barriers to success for youth of color.

The Youth Advisory Board continues to be engaged in Division planning and policy development. Young leaders are invited to provide their input in a variety of forums. The Division is intentional in the approach of "youth led, adult supported", by creating space for young leaders to determine how they want to engage, and what they choose to share. Examples of this engagement can be found throughout the report. The Division also strives to provide fair compensation to youth who participate in Division planning efforts, as they are sharing their unique

The GA-RYSE Chafee program encourages the Independent Living Specialists (ILS) in the counties to provide monthly calendars and reminders of the Opportunity Passport Program (for youth over the age of

expertise and should be compensated for doing so,

similar to paid staff.

REGION 14 is trying to learn from the youth who are in working, college. maintaining positive behaviors, and asking them what inspires and fuels them. Then the ILS ask more open-ended questions to those youth who are seeking guidance and try to make clear what it means to become an adult. The ILS also work with partner agencies that provide mentorship to youth. New plans are in progress to expand college and career partnerships. job fairs, job training and internships to see if they can pique the youths' interest

18), and various training sessions and workshops offered for youth who are ILP-eligible (age 14 – 21). Some trainings are in partnership with agencies like the Multi-Agency Alliance for Children (MAAC), Bethany, Amerigroup, and Georgia State University. The trainings are often developed and offered following requests or high levels of interest by youth, and include New Youth Orientations, Building Healthy Relationships; Professional Development; Resume Writing; Interview Skills; Opening a Checking and Savings Account; Banking and Credit; Emergency Safety and Planning; Health Insurance; Drugs and Alcohol, Nutrition; Tax preparation; Self Confidence; Vision Boards, Budgeting Tips; Relationships and Friendships; Housing and Living on your own; IDA; Investments; Career Fairs; Voting, Citizenship; Stress Management; Planning for College/Vocational; Operation Manhood; Women Learning to be Butterflies; Culinary Arts; Parenting Guide;

Parenting Skills; Public Transportation and Maintaining an Automobile; Coaching and Mentoring; Orange Duffle Bag; Entrepreneurship; Life SKILLS, Parks & Recreation; Dental Clinics; Pride Awareness, "Prism of Opportunities" and "The Evolution of Life" for our LGBTQ2IA+; Volunteerism.

## Fatherhood Engagement

The Division employs several initiatives across the regions to encourage parental engagement. Examples of regional CQI strategies include field observations with tip sheets, followed by a coaching session with a supervisor; staffing guides and summits that invite parent advisory board members; monthly engagement calls by county administrators to parents to ensure their needs are being met; and setting documentation standards. Fatherhood engagement is addressed in agency guidance and reinforced by leadership at all levels. Case managers receive training on Plan of Safe Care (POSC), which emphasizes that plan development and service goals must include fathers. Child welfare policy is pending finalization on paternity testing to enhance the engagement of fathers and paternal relatives in case planning and permanency planning. Non-custodial parents can be absent parents, biological fathers, putative fathers, legal fathers, or biological mothers who do not reside with their child(ren). The policy will confirm that the establishment of paternity will not be a barrier to the coordination of services and engagement of fathers.

Diligent efforts to locate and engage fathers begins in the Child Protective Services (CPS) stage and continues through the life of the case. All available search methods are utilized to locate fathers and paternal relatives. Promoting Reasonable Efforts (PRE) team staffings involve a collaborative discussion of fathers and paternal relatives, as well as maternal relatives, to ensure all parties are included and considered before a child enters

foster care. Paternal relatives are explored for possible placement resources during removal staffings. Fathers are engaged during Family Team meetings and are included in all aspects of case planning and visitation. Regular father-child visits are facilitated in a face-to-face setting, with virtual visits being provided for fathers who reside out of state. Monthly quality contacts are made with fathers, and contact standards are evaluated by county leadership to ensure that they are appropriate. Fathers are engaged around achieving permanency through reunification with their children and receive reunification services to support this goal. Fathers are invited to participate in the same partnership parenting activities offered to mothers.

REGION 5 continues to message the importance of completing DNA testing as the first step in the process of father engagement to ensure the correct father and paternal family are engaged from beginning. The region developed a Father Engagement guide as a tool to engage fathers around key areas of involvement in their child's life that include caregiving, financial support, cooperative parenting, and role modeling. Regional leadership continues to promote the use of this tool.

Fathers are encouraged to participate in the Fatherhood Program through child support.

The Region 12 CQI Team began conducting Regional Spot Checks in January 2022 to monitor father engagement utilizing the questions from the CFSR PIP Training Guide. These questions direct CQI team efforts to review family preservation and permanency cases randomly for improvements in father engagement. The findings will be tracked regularly to measure improvements and shared with the supervisor, county director, and region director to determine best practices and next steps. This work is ongoing.

Collaboration with stakeholders such as the Department of Labor, Department of Community Supervision, courts, DJJ, CASA, and Division of Child Support Services (DCSS) also bolsters father engagement efforts. DCSS holds father engagement events in local counties, and partners with local Family Connection sites to establish paternity and complete legitimation for fathers at no cost. Parent attorneys are encouraging more participation by fathers, and some courts still allow legitimation in juvenile court. In some jurisdictions, there are courts that are no longer legitimating during the court process, and fathers are told by the court to obtain an attorney and seek parental rights to be given standing in the juvenile court case.

## Collaboration to Develop Child Welfare Policy and Practice

In FY22, staff from the Division's Policy and Regulations Unit (PRU) met with representatives from the Department of Child Support Services (DCSS) to update policy to address issues of mutual concern and ways to improve information sharing to support best practice. This included collaboration with GA SHINES. As a result of these meetings, DFCS was able to re-clarify how and when case managers should reach out to DCSS staff to secure location information for missing fathers using the Federal Parent Locator.

PRU represents DFCS as a board member for the Georgia School of Addiction Studies whose mission includes fostering and maintaining the integrity of substance abuse related services by assisting in providing continuing training and educational programs for human service professionals whose duties include law enforcement, prevention, intervention, treatment, child welfare, victim's services, probation, courts, education, and rehabilitation or related social services. PRU collaborated with internal and external stakeholders to coordinate activities for National Recovery Month which was observed agency-wide during September 2021. DFCS staff were provided with resources on a weekly basis to assist families with their recovery. A Lunch-n-Learn was held on September 8, 2021, with speakers from Department of Behavioral Health and Developmental Disabilities (DBHDD) and Georgia Mental Health Consumers Network (GMHCN) and both individuals were in long-term recovery. Another Lunch-n-Learn was held on September 29, 2021, where former clients who are certified Peer Support and a graduate of Family Treatment Court

and two former foster youth participated. One youth created a poem entitled "The Recovery Journey" and the other youth delivered a spoken word entitled "Collateral Damage". PRU developed a medication-assisted treatment (MAT) knowledge assessment for child welfare staff to assess their knowledge of MAT as it pertains to child welfare. The results will be analyzed to provide training on MAT with community partners, such as DBHDD, GMHCN, and Opioid Treatment Providers of Georgia.

PRU is also working with the DFCS Early Childhood Collaboration Unit to update childcare and early learning/development policies. Childcare and early learning services are provided to families with no to low income to ensure that children are provided with quality learning environments and to protect children at risk of abuse or neglect due to inadequate supervision. Policy for Intakes Involving Prenatal Exposure with No Maltreatment was updated in December 2021. This intake policy focuses on appropriately identifying infants affected by the lawful use of prescribed substances to allow for the implementation of a Plan of Safe Care. The Plan of Safe Care incorporates into one document the plans from various agencies providing services to the family, such as the child welfare assessment, hospital discharge plan, substance use treatment case plan, and prenatal care plan to address the medical, behavioral, developmental, social, and emotional well-being of the family. The identification of the need for a plan of safe care may occur during any stage of DFCS involvement, including at birth, or later during the infant's development and/or as symptoms manifests

PRU participates in the <u>Statewide Human Trafficking Task Force</u> which serves to protect the citizens of Georgia from perpetrators and systems of sexual exploitation while concurrently working to support the recovery of adults and victims of all forms of exploitation to ensure that they are ready for college, work, and a successful future. PRU also maintains a collaborative relationship with the <u>Department of Community Supervision</u> in policy development to support the efficient sharing of information and provide services to address each agency's concern for the parent, legal guardian, custodian, or youth who is involved in juvenile court dependency proceedings and under DCS supervision.

PRU completed a new policy chapter on Special Circumstances in December 2021. These are distinct situations that require DFCS assessment and/or intervention based on state or federal law that may not always include child abuse or neglect. These policies were expanded to provide more comprehensive guidance for staff and includes but is not limited to the Children in Need of Services (CHINS) population, short-term emergency care, voluntary placement agreement, voluntary surrender, safe place for newborns, and children withdrawn from school.

PRU continues collaboration with <u>Georgia Coalition Against Domestic Violence</u> and Georgia Commission on Family Violence to develop policies relating to domestic violence,

and to give agency policy and practice guidance when working with families that have been affected by intimate partner violence.

For policies supporting older youth, PRU is collaborating with the Georgia Department of Aging to develop policy and practice guidance for the transition planning of youth in foster care who may be unable to make decisions on their own behalf. House Bill 154 (2021) allows the Division to file a petition for the appointment of guardian for a minor within six months of the minor reaching age 18. In collaboration with Well-being Services Unit and the Technical College System of Georgia (TCSG), PRU is developing policy and practice guidance resulting from Senate Bill 107 (2021) that allows for tuition waivers for qualified foster or adopted children. PRU and the GA-RYSE Independent Living Program (ILP) has worked to ensure the inclusion of youth voice in the development of policies that are integral to addressing their needs. As a result, former and current youth in foster care participated in several workgroups to provide input in the revision of ILP and development of Extended Foster Care policies. Additionally, youth are helping to develop the Extended Foster Care brochure and are participating and providing feedback in the policy (listening sessions). All draft policies are submitted to stakeholders for review and feedback prior to finalization. Youth are included in the stakeholder review via EmpowerMEnt (Multi-Agency Alliance for Children). This work is ongoing.

## Collaboration to Enhance the System of Care

Georgia's Interagency Directors Team (IDT) is an on-going collaboration which began in 2011. The IDT committee holds monthly meetings which have moved from in-person to a virtual platform during the COVID-19 pandemic.

The IDT includes representatives from Department of Behavioral Health and Developmental Disabilities (DBHDD), Department of Human Services (DHS), Department of Juvenile Justice (DJJ), Department of Community Health (DCH), Department of Public Health (DPH), Department of Education (DOE), Department of Early Care and Learning (DECAL), and Georgia Vocational Rehabilitation Agency (GVRA). The work of IDT informs policy and practice and allows for shared resources and funding. IDT currently consists of more than 20+ representatives from state agencies and nongovernmental organizations to promote increased cooperation, coordination, and integration at the administrative and service delivery levels between the parties for the benefit of children and adolescents in need of or in receipt of behavioral health services, and their families.

This multiagency workgroup, along with its non-governmental partners, has developed and continues to improve Georgia's System of Care (SOC) State Plan which, in part,

outlines strategies to increase access to community-based services. The Center of Excellence for Children's Behavioral Health at the Georgia Health Policy Center provides backbone and organizational support services to IDT. The Center of Excellence supports IDT by guiding vision and strategy, supporting aligned activities, and through research and evaluation. Specifically, these services include:

- Comprehensive strategic research to inform strategic goals, operations, and best practices.
- Facilitation of an interagency framework with memorandum of understanding and development of operating guidelines for collaborative development and sustainability.
- Promotion of and support for interagency data sharing.
- Facilitation of strategic planning and monthly meetings to progress SOC goals.
- Qualitative and quantitative data compilation and policy analysis relevant to yearly strategic SOC goals.
- Preparation and dissemination of annual reports and informational materials related to strategic Georgia SOC topics and collaborative work, as well as presentation of IDT accomplishments at professional conferences.
- Evaluation of the IDT's efforts and progress toward their strategic goals.

In 2022, the new System of Care website will launch. The website is designed for youth, families, and caregivers who have limited to no knowledge of Georgia's System of Care, with the intention of linking users to community services. The website contains "provider snapshots," or overviews of SOC organizations that include contact information. Tabs for parents/caregivers, youth, and providers allow a personalized experience for the browser, and the website supports a provider search, a general search, and a section for news and events. The provider tab includes a Training & Workforce Development Calendar as well as recorded and archived trainings. Additional content will be added as needed. This work is ongoing.

#### Court Improvement Program

In August 2021, a new director was nominated to lead Georgia's Court Improvement Program (CIP). To encourage ongoing communication and partnership between the Division and CIP, monthly meetings were scheduled for the duration of FY22 to facilitate regular communication and address challenges in real time. These monthly discussions cover a variety of topics to share information and knowledge, and to address identified court-related issues and concerns in the field, including challenges to permanency and conditions for return. The Division also uses these regular engagement opportunities with the CIP leadership to provide guidance and support for the development of the CIP Five-Year Strategic Plan, the CIP trainings (MDCANI and CII), and other convenings

coordinated by CIP. Due to the positive partnership resulting from these monthly meetings, they are extended into FY2023.

The Division will continue to engage CIP in preparations for the CFSR Round 4. This collaborative partnership should result in institutional and infrastructural changes that lead to measurably improved outcomes for the children and families served in Georgia. Regular meetings will be used to examine agency and legal system(s) data in order to establish activities for both legal and judicial systems and the Division to target improvement. Discussions will include examinations of substantive and process outcomes including due process, equity, reducing maltreatment, reducing unnecessary removals, improving family time/visitation, improving placement stability, education stability, and increasing quality, quantity, or timeliness of reunifications, adoptions or guardianships. This work is ongoing.

Georgia's CIP implements several projects around the state to support continuous improvement in juvenile dependency cases. The Division's Federal Plans Unit has partnered with CIP to embed additional content into CIP-sponsored trainings to highlight the Child and Family Services Review (CFSR), and the state's Child and Family Services Plan (CFSP). These efforts to integrate CFSR and CFSP information are ongoing and will enhance judges' and attorneys' knowledge and understanding of the CFSR and CFSP, and how their work impacts the state's performance on safety, permanency, and well-being for children and families. These CIP-coordinated training opportunities also provide a venue to share data from the state's QA reviews and the Statewide Data Indicators (SWDI) provided by the Children's Bureau, so that court partners can assess current strengths and areas needing improvement.

The Court Improvement Initiative (CII) is modeled after the National Council of Juvenile and Family Court Judges' Model Courts Program. Judges from seventeen jurisdictions across the state voluntarily joined CII to improve how their courts handle child abuse and neglect cases. CII judges gather twice a year to share practices, attend workshops on emerging best practices, and develop protocols or standards for CII courts to initiate in their jurisdictions. The semi-annual CII meetings provide a forum for vigorous discussion and shared learning. Each participating court reports on their jurisdiction's ongoing improvement efforts. CII convened in March 2022, with participants from the Division (section leadership, and County/Regional Directors), SAAGs, and juvenile court judges. Discussion included regional processes to support and encourage Family Time, as well as observations of inequity in judicial processes and exploration of solutions to promote equity and inclusion. The CIP Director finds this to be a priority in the state and is committed to present additional discussion opportunities in future convenings. This work is ongoing.

The Multidisciplinary Child Abuse and Neglect Institute (MDCANI) was developed based on the Children's Rights Initiative work focused on best practices and reasonable efforts and is modeled after the Child Abuse and Neglect Institute of the National Council of Juvenile and Family Court Judges. MDCANI is an intensive, two-day training in every aspect of a dependency case, wholly informed by nationally accepted best practices. The agenda for MDCANI: Part 1 covers activities required during the first 75 days of a case, including a history of the federal child welfare laws that inform state policy and practice; key child welfare outcome measures of the region hosting the training; the law and practice of making reasonable efforts and assessing risk and removal; the focus on "conditions for return" to reduce the amount of time a child is in foster care unnecessarily; an overview of the CFSR process and recent QA review findings; the history and legal requirements of ICWA; and an overview of the preliminary protective hearings, adjudication hearings, and disposition hearings. Attendees to MDCANI include DFCS staff, legal and judicial partners, CASA, and attorneys. The Division and CIP are partnering to develop an assessment tool to measure learning gains and long-term behavior change resulting from participating in the MDCANI training sessions. Findings will be reported in the next APSR.

The second iteration (MDCANI – Part 2) addresses the issues which arise from initial review through the final order which closes the case. Additional topics include: making the decision to remove a child, reasonable efforts, attachment, family time, case planning, diligent search, ICWA, and ethical challenges faced by GALs and child attorneys. Throughout the training, participants work collaboratively through scenarios that are designed to enhance their skills in their roles. At the close of each training, participants are asked to identify steps to improve practice in their jurisdictions. This training was not provided during FY22, but the CIP organizers are working to bring the training in FY2023 to those jurisdictions that received "MDCANI: Part 1" within the past 24 months.

Participating jurisdictions are tasked with convening judicial stakeholder meetings after attending a CII meeting or MDCANI training to review compliance with best practices in child welfare cases and continue assessing CFSR performance and outcomes. These stakeholders are engaged in substantial, meaningful, and ongoing consultation and collaboration to improve outcomes. The C3 Coordinators in each region are encouraged to attend these stakeholder meetings to provide guidance and support for interpreting CFSR data and developing strategies for improvement.

The Division is also partnering with CIP and the Capacity Building Center for Courts (CBCC) to explore racial equity in the legal and judicial space. CBCC convened several meetings in FY22 to begin the dialogue and discuss practice and outcomes that disproportionally impact children and families. These discussions also reviewed CFSR measures and data, explored differences in parent representation for families with varying

socioeconomic status (SES), and considered opportunities to leverage resources in the state to reduce disparities and improve permanency outcomes for children. Additional findings on this exploration will be incorporated into Georgia's CFSR Round 4 Statewide Assessment. This work is ongoing.

## Joint Planning Meetings

The Division held four separate Joint Planning meetings in the fall of 2021 to engage stakeholders on specific topics relevant to the state's CFSP and to identify solutions for continuing improvements on the state's CFSR outcomes. Court Collaboration, Well-Being, Placement/Permanency, and Safety/Prevention.

The Court Collaboration meeting hosted approximately 68 participants. The meeting agenda included discussion on Georgia's Court Improvement Program, where the new CIP director informed attendees of the new initiatives and programs being considered. The agenda also included a focus on preventative legal advocacy, with an opening by the director of the Barton Child Law and Policy Center, and a presentation by a staff attorney of the Atlanta Volunteer Lawyers Foundation on the "Standing with our Neighbors" project, a partnership with schools and communities to improve living conditions and reduce the chances for a child to come into care due to housing instability or homelessness. This was a good discussion highlighting the need for quality legal representation for all vulnerable families, and how these services can also reduce child maltreatment brought on by stressors related to housing, health care, or other financial insecurities. The Director of Georgia's Office of the Child Advocate (OCA) provided an update on the FY22 pilot project in Chatham County to improve quality legal representation with support from title IV-E funding. Training and supervision are provided by OCA. The OCA Director also presented on the Multi-Disciplinary Child Abuse and Neglect Institute (MDCANI) training initiative, describing the content in each of the training modules and how many jurisdictions have received (or are scheduled to receive) training in FY22. [An update on MDCANI trainings conducted and number of participants at each session can be found in Section D: Update to the Plan to Enact the State's Vision]

Post-meeting evaluations were submitted by five respondents (response rate: 7%). All respondents reported being "satisfied" or "very satisfied" with the meeting experience, and 80% learned something new at the meeting. Respondents described their plans for future engagement to assist the state in achieving one or more of the goals of the CFSP, which included: share the information with others in the community; develop a training to educate attorneys on the forensic interview process; and continue exploring areas where CIP and DFCS can collaborate to improve outcomes.

The Well-Being meeting hosted approximately 151 participants. The meeting agenda included an overview of the Well-Being program and goals, and a review of the CFSR well-being outcomes and opportunities to improve. To acknowledge National Adoption

Month, the facilitator led a discussion on adoption month, with two young leaders who spoke about their adoption experience after age 18. The meeting focus was on expectant and parenting youth in care, and data were shared to describe the specific circumstances of this population. Two young leaders who became parents while in care spoke about their experiences, and described areas for improvement, including: the need for peer support; the need for adults to better share resources to prepare youth for adulthood; and that education and employment supports to find a "career" are most needed to help youth avoid homelessness and trafficking situations. It was highlighted during the meeting that fathers are often overlooked (including teen fathers), and case managers need to better support fathers who are trying to do the right thing for their children. The meeting agenda also included discussion on a "Young Parents" pilot project in Region 14 that focuses attention and resources on this population – housing supports, connection to financial assistance programs, and job training programs are part of the project. Meeting attendees were encouraged to reach out to the program coordinators to offer resources and supports. Additionally, the Teen Parent Connection presented on their work and efforts to support youth in care across the state who are expecting or parenting. The young leaders spoke very highly of the program, that it offered the best opportunities for them to be successful in parenting their children and to be successful in adulthood. The Well-Being section will continue to facilitate stakeholder engagement and supports for this population of young parents. This work is ongoing.

State agency partners in the meeting included the Department of Public Health (DPH) which provides the Children 1st program to support young children from birth to age five who are at risk for poor health outcomes, and the Department of Early Care and Learning (DECAL) which provides childcare programs through Head Start and Childcare and Parent Services (CAPS). The expansion of CAPS to an additional 10,000 children was noted; attendees were encouraged to share this update with the families they serve and apply through the Gateway website.

Post-meeting evaluations were submitted by 14 respondents (response rate: 9%). All respondents reported being "satisfied" or "very satisfied" with the meeting experience, and 100% learned something new at the meeting. Respondents described their plans for future engagement to assist the state in achieving one or more of the goals of the CFSP, which included: share the information with colleagues and staff; provide more employment resources to youth; provide more childcare resources for young parents; provide life coaching to educate teen parents on child maltreatment; and continue engaging stakeholders to increase collaboration.

The Placement and Permanency meeting hosted approximately 210 participants. The meeting agenda included a deep dive into the placement stability data, and described how placement is calculated, trends across the state over time, and placement patterns by sub-groups (age, gender, placement type, and time in care). A discussion on planning

for stability provided attendees with detailed considerations that staff, youth, and caregivers must face to determine a successful placement. Participants were challenged to identify the most impactful contributor to making the first placement the best placement. The meeting also included a discussion of the process being used to support placement stability – Placement Assisting Utilizing Stability Exploration (PAUSE) teams. This process ensures a multidisciplinary effort to avoid unnecessary placement changes for youth.

Placement providers were invited to speak about their programs, and how they address various issues, including behavioral challenges, sibling placements and separations, placement disruptions, and family engagement. The partnership with Georgia's Department of Behavioral Health and Developmental Disabilities (DBHDD) was highlighted. DBHDD presented on their Intensive Customized Care Coordination (IC-3) program, which provides high fidelity wraparound services, and the APEX program which partners with mental health providers to ensure services exist within schools to support a continuum of care.

Post-meeting evaluations were submitted by eight respondents (response rate: 4%). All respondents reported being "satisfied" or "very satisfied" with the meeting experience, and 100% learned something new at the meeting. Respondents described their plans for future engagement to assist the state in achieving one or more of the goals of the CFSP, which included: share the information with colleagues and staff; plans to conduct a formal training or outreach effort; including these topics in developing existing staff and onboarding new case managers; gathering information early and non-stop to locate relatives or fictive kin; and work to make the best possible match to limit disruptions and placement changes.

The Safety and Prevention meeting hosted approximately 141 participants. The meeting agenda included an update on Georgia's Child Abuse and Neglect Prevention Plan, the regional plan development and implementation, and a description of Inclusivy Conversations, which are being used to engage stakeholders and the community on prevention of child maltreatment. This Inclusivy model was incorporated into the meeting to facilitate breakout sessions, where participants were given three questions to discuss and identify specific opportunities to improve child well-being in Georgia. Small group discussion provided a lot of opportunity to reflect on the resources and supports available to participants when they were children, and what is available to children today. The discussions also invited thoughtful reflection on the needs of families, and what gaps exist in communities. Mental health supports, substance use treatment, and stable adult mentors were often mentioned as community needs that can leave children vulnerable to maltreatment. Participants were encouraged to host future Inclusivy Conversations with members of their communities to continue the dialogue and develop plans for improving child well-being at the local level.

The meeting also introduced the partnership between the Division of Public Health and DFCS to expand home visiting programs and Plans of Safe Care for families with substance-exposed newborns. The meeting concluded with a presentation by parents with lived experience who spoke on the Circle of Parents pilot program, a national network to support parents through self-help groups. This effort is being supported by the Parent Advisory Council.

Post-meeting evaluations were submitted by 20 respondents (response rate: 14%). Nearly all (95%) of respondents reported being "satisfied" or "very satisfied" with the meeting experience, and 100% learned something new at the meeting. Respondents described their plans for future engagement to assist the state in achieving one or more of the goals of the CFSP, which included: plans to deliver parent education programs; outreach events in the community for whole person wellness; providing intentional home visiting; assisting with building family resiliency; and collaborating with community agencies to achieve common goals.

In addition to these Division-scheduled events, several additional joint planning sessions were held throughout the year. The United Way Career Ready ATL inaugural work included partners from the child welfare system along with organizations serving transition-age youth in care to plan for career pathways. Discussions were convened in small group, and addressed related needs for older youth to be successful in employment placements, including housing and placement stability, transportation needs in rural counties, childcare needs for pregnant and parenting youth, and behavioral health supports for youth with complex needs.

The Division's Spring 2022 Joint Planning meeting was structured to further explore opportunities with stakeholders, and to expand services and resources for children and families, particularly for youth with complex needs. Over 120 staff and stakeholders participated virtually, while panelists and speakers were in-person. The meeting opened with a message from Division leadership on the importance of placement stability and its connection to permanency and well-being. The focus for the meeting was to learn from those with lived experience and find solutions with partners to improve stability and well-being for youth and families.

The first facilitated panel consisted of youth leaders describing their experiences in care, how their unique needs were managed, and how their placements impacted their relationships with family, siblings, and other adult supporters. One panelist described the experience as a "handbook", meaning that there was no "outside the box" approach. Entering care meant a psychological evaluation, a diagnosis, and mandatory therapy and medicine, without asking the youth what approach they might prefer. As other youth corroborated that experience, a recommendation was suggested that youth might benefit from alternative forms of therapy (art or music, equine therapy, martial arts, and similar

programs). The youth then described how their placement moves impacted their personal relationships. Similar experiences of being "ripped away" from each other and difficulties in maintaining connections were discussed. In some group homes, their phones were taken away, giving them little opportunity to engage with close friends and family. This discussion led to a recommendation that the Division could do more to support families rather than remove the children, and work harder to keep siblings together when out of home placements do occur. Youth asked to have a voice in their placements, as some felt overly restrictive or provided limited personal space. Staff and stakeholders in attendance appreciated the comments and recommendations.

The remainder of the meeting included three facilitated breakout sessions featuring kin caregivers, parents, and placement experts (DFCS staff and providers). Each session provided space for the panelists to describe their experiences with the Division and to make recommendations for improvement. The meeting attendees were able to join each of the three breakout sessions and engage with the panels. Overall, the panels were able to discuss topics and services that were also addressed in the fall 2021 joint planning meetings, providing some continuity in the FY22 planning efforts of the state to improve its child welfare system and the experiences of youth and families.

Recommendations from the parent panel focused on treatment. Parents felt that they were judged and treated differently when they should have every opportunity to parent their children. It was recommended that the Division should make efforts to provide parents with resources (similar to the resources that foster caregivers receive) so they can be successful in parenting, particularly when they have a child with complex needs. One success story example described a parent who was overwhelmed raising her four children, and three of the children had developmental diagnoses, but the case manager was helpful in arranging for services and regularly asked the parent to make decisions for the children. The parent was treated respectfully and was able to lead her family, while receiving assistance and support. Another recommendation provided by an adoptive parent reflected the need for adoption-competent therapists. When therapy providers do not have experience working with youth in foster care or adoptive families, "the wrong therapy is worse than no therapy". However, the parent was able to locate an adoption-competent therapist, and the family is continuing to work with that provider successfully.

The expert panel addressed unique ways that partners and providers and including other stakeholders in supporting placement stability. Amerigroup has opened a transition program to help youth who are leaving acute care settings into other placements, and the Division is promoting peer support for youth and caregivers to validate their feelings and help them lean on others who have made a similar journey. Additional discussion centered on comments from the youth panel and how the Division and its partners could facilitate some of those recommendations into action.

The kin caregiver panel included discussion on the approval process. Comments were made that when caregivers or their adult children are asked to complete home studies, there may be some hesitancy, not because the family is uninterested or uncooperative, but because they may need some time to process what is happening. The Division was also asked to better connect kin caregivers with resources and supports. While some panelists and attendees expressed appreciation for the "great communication", others waited to hear what their next steps would be or to receive financial assistance or childcare supports. A recommendation from this panel also included more transparency on the court process and helping kin caregivers understand what happens at court.

Post-meeting evaluations were submitted by 27 respondents (response rate: 22%). While 56% of respondents reported being "satisfied" or "very satisfied" with the quality of the meeting experience, much of the feedback referenced the ongoing technical issues that interrupted the meeting. Onsite technical assistance was available to monitor any difficulties due to the hybrid nature of the meeting, but some issues took longer to resolve than others. Respondents described their plans for assisting the state in achieving placement stability for youth with complex needs by providing consistent training to staff and parents; providing better orientation and "space" when bringing older youth into placement; recruiting and training specialty foster parents and providing multidisciplinary supports for placements at risk of disruption' working more as a team with youth/young adults and their supports; and providing more mental health resources and perhaps a higher per diem.

#### Training and Technical Assistance

Division staff provided many training and technical assistance (TTA) opportunities throughout FY22 to enhance knowledge and practice among staff and stakeholders.

In an effort to ensure that there is not outdated data in the new worker training material, the Training Unit staff worked with the webmaster to provide a spot on the *IOTIS Dashboard* for easy access to the most current CFSR Data. The Training Unit collaborated with the Data Unit to ensure the CFSR findings will be automatically updated as new data become available. This will also assist when trainers are asked to discuss the most recent data and when participants are asked to use the data for in-class activities or other assignments. New worker training materials will be updated for all presentations that reference CFSR data.

The GARYSE Chafee Program Director collaborated with the Division's Office of Provider Management (OPM) to train private agency placement providers, Division staff, and foster parents, judicial partners, and other community stakeholders on the new requirements for independent living scattered site placements for youth in extended foster care, which became effective in August 2021. Fourteen trainings were offered to staff and private

agency placement providers, including child placing agencies, child caring institutions, and independent living scattered site placement providers to review the changes.

The new changes included the implementation of a readiness assessment for potentially eligible youth, a tiered structure for scattered placements, and an action plan for youth who were not deemed ready for such placement at the time of the assessment.

Training participants were advised of the new assessment criterion that would be utilized to determine the young person's readiness to live independently with limited oversight and an expansion of liberties. The tool replaced the Universal Application used for placement finding and may only be submitted to Scattered Site Placement Providers when the participant is approved for such placements. Participants were able to submit their questions during the training session which were compiled in a "Frequently Asked Questions Document".

Feedback was gathered from the training. Some training participants shared their concern that the new structure could potentially create placement limitations for youth with challenging behaviors. However, most participants expressed excitement for the new structure and believed it would help youth become more successful in such placements and better prepared for life post-foster care.

In partnership with Georgia Family Connection Partnership, the Kinship Unit provided training to local county collaboratives regarding the need for local supports for kinship caregivers. This engagement resulted in Berrien, Brantley, Fulton, Jefferson, Warren, and Toombs counties application/award to implement local kinship support groups. Region 7 requested two webinars in June 2021 for kinship caregivers regarding effective ways to establish boundaries with parents. The training was tailored to the experience of kinship caregivers. Kinship leaders shared common trends and challenges for kinship caregivers and provided online tools and resources. Promise 686 Georgia requested training on Georgia's kinship services to increase kinship referrals and also provided a learning exchange for their staff in Georgia, Florida and the Midwest region. The kinship team has developed a direct referral to Promise 686 to assist with meeting the needs of kinship families. The kinship staff in Region 3 co-facilitated monthly Kinship Support Group Virtual Meetings; topics included training and information on accessing resources with partners from Foster Parent Support Foundation, and programs available through the Department of Early Care and Learning (DECAL) and the Childcare and Parent Services (CAPS). These monthly trainings have increased attendee knowledge and access of available resources as indicated by the attendees during their meetings. The Kinship Unit provided statewide webinars for caregivers during September 2021 to highlight areas of interest provided via a poll of support group participants. The webinars addressed legal implications for kin (judicial panel), money saving and future planning (kin caregiver with lived experience), and self-care/caregiver boundaries (Strong Training and Consulting, LLC).

Based on feedback regarding Georgia's kinship services and data, the unit is considering enhancements to capture adoptive kin families in the KINDS database. The Kinship Unit will partner with the Georgia Family First Program in FY 2022 to explore opportunities to pilot a wrap services program for post permanency kinship families. This work is ongoing.

The Child Protective Services Intake Communications Center (CICC) provided training to community staff which included Children's Healthcare of Atlanta (CHOA), Georgia Bureau

of Investigations (GBI), other local law enforcement agencies, and both public and private school personnel to include the Georgia State Schools for the Deaf on the essential needs for making child abuse and neglect reports. The training included an overview of what happens to a report once received by the Division in accordance with agency policy. Written feedback was obtained from participants including the benefits of the training. The goal of the training was achieved as these mandated reporters are better informed and better equipped to utilize the Mandated Reporter website when making child abuse and neglect reports. Technical support is on a continuum with these community partners.

**REGION** The Resource Development supervisor provides monthly foster parent training on various topics and facilitated by various partners. The training has been well received and feedback from the participants is used to determine future needs/topics. The virtual platform allows for greater participation and a broader range of topics and facilitators from across the state, which gives the foster parents greater access to resources that assist them with child needs and behaviors.

CICC also provided training to DFCS Office of Family Independence (OFI) Call Center personnel on the essential needs for making child abuse and neglect reports. The OFI Call Center staff frequently receive telephone calls from the public where certain information rises to the level of maltreatment. The OFI Call Center staff must be aware of the requirements for notifying CICC when there is suspected child abuse or neglect. The training included an overview of what happens to a report once received by CICC in accordance with agency policy. Oral feedback was obtained from participants including the benefits of the training. The goal of the training was achieved as these mandated reporters are better informed and better equipped to make reports of suspected child abuse and neglect.

The Policy and Regulations Unit (PRU) provided training for the Caregiver Recruitment and Retention Unit (CRRU) staff to inform them of changes in policy resulting from <u>SB</u> <u>439</u>, specifically pertaining to enhanced notice to and improved participation of foster, pre-adoptive, and relative caregivers in certain hearings; and provided for: enhanced notice and participation of caregivers in dependency proceedings, and caregivers objection to notices of placement change. PRU provided technical support to the Fulton

County Quality Assurance Unit on permanency plans, specifically pertaining to cases that are moving to a plan of adoption and the need for continued agency reasonable efforts up until the termination of parental rights. PRU presented to the Regional Field Program Specialists (FPS) on policy changes resulting from <a href="HB 154">HB 154</a> and implications for youth turning 18 in foster care who may be unable to make decisions on their own behalf, and Family First Prevention Services Act (FFPSA) provisions pertaining to limitations of foster care maintenance payments for placements that are not foster family homes. PRU also provided consultation and training for Regional FPS on policy changes resulting from <a href="SB">SB</a> (effective January 2022) which amended the child abuse definitions. PRU also provided an overview of the policy changes at Café 212 as well as to Region 14 staff.

Region 5 offered two collaborative trainings to service providers related to the use of screen out and refer for services as an alternative to an assessment when maltreatment allegations do not cross the safety threshold. The purpose for the trainings was to provide transparency to the use of this practice, to provide technical training to DFCS staff, to hear from providers as to the types of referrals they are receiving, and to have discussion around the use of other available community resource referrals. The region is planning follow up trainings to further emphasize practice expectations around screen out/refer practice. The region is also planning a robust data analysis of this practice in order to understand whether conversations and referrals are preventing families from coming back to the Division's attention.

# Section C: Update to the Assessment of Current Performance in Improving Outcomes

#### **Georgia CFSR Child and Family Outcomes**

From January 2021 through April 2022, Georgia adopted a modified "Pre-Round 4" CFSR review process that ensured continued fidelity to the CFSR tools while allowing for a more progressive approach to meeting the needs of state. The modified review process encompassed the following modifications to the prior CFSR Round 3 review procedures:

- 3-month review cycles are being utilized to conduct statewide reviews.
- Reviewed cases must have recent history (Example: January's sample would have been active in November).
- A six-month period under review for determining CFSR ratings (versus the twelvemonth review period used in Round 3) to better inform Continuous Quality Improvement (CQI) opportunities and strategies.
- DFCS Districts were used as the geographical unit for monthly reviews instead of the six manufactured zones used in Round 3.

The Quality Assurance (QA) Unit conducted quarterly Child and Family Service Reviews (CFSR) for each district to evaluate the quality of child welfare services provided to children and families and to provide statewide assessment data in preparation for Georgia's Round 4 CFSR. A standardized questionnaire was utilized, and case-specific interviews were conducted on all cases reviewed to evaluate the quality of casework, adherence to policy and best practice principles related to safety, permanency, and child and family well-being. Interviews were also used to assess the agency's relationship with stakeholders in the community and its effectiveness in helping children move towards permanency.

Data provided in this FY2023 APSR are from the reviews conducted in calendar year 2021 using the modified review process. Cases were randomly selected to ensure the representation of each region in the district during the review period. All program activity (Family Support, CPS Investigations, Family Preservation, and Permanency) over the review period in selected case records was reviewed. Individual items must rate at 90% and overall Outcomes at 95% to be in substantial conformity related to the CFSR.

Review findings from the most recent assessment are provided below, along with brief descriptions of current or planned activities intended to address any observed concerns. The review findings continued to identify key skill sets needed for practice improvement in all program areas. A focus on these cornerstone skills (comprehensive assessments, quality visits, and enhanced supervisory oversight of cases) will have the ability to impact

all CFSR areas simultaneously. Agency leadership convened several meetings in FY22 to identify root causes, systemic barriers, and contributing factors to performance of the 18 CFSR items. In addition, a CQI Specialist is assigned to each region to work with the staff on determining root causes associated with CFSR performance and developing strategies for improvement. Identified issues are noted below, and the Division will explore a statewide CQI process during FY2023 to identify contributing factors (issues which contribute to the observed performance but may not be the primary cause) and root causes, and work toward identifying appropriate and feasible strategies to address them.

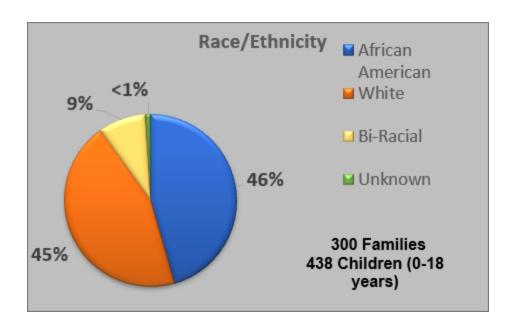
Beginning in May 2022, Georgia's CFSR team will begin exclusively reading the five unmet CFSR Round 3 PIP Items. There will be an enhanced focus to connect the review results directly to the frontline supervisors through:

- Shadowing, where a supervisor observes the entire review process while assigned to one of the CFSR reviewers
- Regional focus groups, where results are presented to the region's supervisors in a learning environment
- The number of records reviewed per month will be increased to 25 from 40.
- Greater utilization of regional CQI teams to use the results to implement both shortand long-term improvement strategies designed to assist supervisors

In January 2023, the QA review team will once again complete full reviews aligned with CFSR Round 4 requirements.

The QA review team included interviews with parents and relative caregivers (as applicable) as well as children for each case in the sample during each review period. Their input was a vital component in determining case ratings using the standard interview guides provided by the CB.

- Of the 300 cases reviewed by the QA team in CY2021, there were a total of 893 children (0-18 years) served by the Division included in the cases reviewed.
- There were 454 female children (51%) and 439 male children (49%) represented in the statewide sample.
- Cases are selected at random, so race/ethnicity is not a factor in determining cases for review. The race/ethnicity of the children served in CY2021 case reviews included 408 African American, 403 White, 76 Bi-Racial and 6 Unknown. See chart below:



| Comparison Chart: Calendar Year 2021  45 Foster Care / 30 Family Preservation    |     |     |     |     |  |
|--|-----|-----|-----|-----|--|
| Safety Jan- Apr- July- Sept Oct-Dec 2021 2021 2021                               |     |     |     |     |  |
| Outcome S1: Children are, first and foremost, protected from abuse and neglect.  | 88% | 91% | 76% | 79% |  |
| Item 1: Timeliness of initiating investigations of reports of child maltreatment | 88% | 91% | 76% | 79% |  |

Source: DFCS QA Review Data

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

**Item 1:** Were the agency's responses to all accepted child maltreatment reports initiated, and face-to-face contact with the child(ren) made, within time frames established by agency policies or state statutes?

Georgia finds this item to be a *Strength*. In several regions, staff are attempting to contact the family immediately or within the same day of receiving the report, even if the response time is assigned as "72-hours". Staff will make efforts to visit the child at their current location at the time of the report or at school where they can be located easily. Staff will make unannounced visits to the children at their school and follow up with a parent contact by phone to schedule a visit within the response time. Staff visit all non-school age

children at their current location or within the home. If needed, staff contact others who may assist in locating the victim children. Throughout the COVID-19 pandemic, staff used virtual methods to make contact when appropriate, as directed in SOP 20.01. Beginning in September 2021, staff resumed in-person contacts. Response times are monitored by Regional Directors, Field Program Specialists (FPS) and/or Social Services Administrators (SSA), and case managers are expected to report missed response times to identify areas for improvements. Social Services Administrators in each county maintain a daily log to monitor response time, ensuring response times are met. Calendar reminders are also added to case manager calendars to meet response time. Additionally, regions are supporting their counties to have daily cadences to discuss response time and diligent efforts to meet response time. CQI/CPS has established a "Regional Staffing Guide" for supervisors to support meeting response time and to ensure quality assessment is being completed. Counties are providing regular trainings on Initial Safety Assessment policies; feedback from the trainings demonstrate that they are helpful for both new hires and veterans.

There are several identified barriers which are being addressed. The most common reason noted for a missed response time was not being able to locate the family with the information provided on the intake report. Occasionally missed response times occur due to lack of communication between staff or turnover within counties. In these instances, the county management addresses these concerns and regional staff provides support as needed.

#### **Safety Outcome 1 Data Analysis**

The QA Review findings provided above demonstrate that Georgia has maintained 76% or higher for Safety Outcome 1 in CY2021. In CFSR Round 3, Georgia received an overall rating of *Area Needing Improvement* for Item 1 because 66% of the 88 applicable cases were rated as a Strength. Georgia is trending in a positive direction.

Safety Outcome 1/Item 1

|                 | Metro | North | South | State |
|-----------------|-------|-------|-------|-------|
| Oct-Dec 2021    | 75%   | 90%   | 67%   | 79%   |
| July-Sept 2021  | 75%   | 80%   | 75%   | 76%   |
| April-June 2021 | 100%  | 89%   | 88%   | 91%   |
| Jan-March 2021  | 75%   | 100%  | 89%   | 88%   |

Source: DFCS QA Review Data

Analysis of performance shows the North District and Metro District achieved substantial conformity during CY2021 for Safety Outcome 1 by contacting alleged victim children within the assigned response time for applicable cases.

### Georgia SHINES Response Times for CY2021

|                | Intakes Screened<br>In | Met Required<br>Response Time | Percent Met |
|----------------|------------------------|-------------------------------|-------------|
| Metro District | 15,353                 | 13,867                        | 90.32%      |
| North District | 20,085                 | 17,650                        | 87.88%      |
| South District | 19,437                 | 17,045                        | 87.69%      |

Source: DFCS Data Unit, Georgia SHINES (CY2021)

Performance data reported by Georgia SHINES supports the QA sampled case review data, by demonstrating that the Metro District met response time at least 90% of the time, with the North and South Districts achieving close to 90% for the calendar year.

Georgia received its Child and Family Services Review (CFSR 3) Data Profile in February 2022 based on data submissions as of 01-12-2022 (AFCARS) and 01-12-2022 (NCANDS). The chart below demonstrates Georgia's risk standardized performance relative to the national performance on seven Statewide Data Indicators (SWDI).

| Indicator                  | Data Period <sup>1</sup> | National<br>Standard | Georgia | Statistically <sup>2</sup> better (↑), worse (↓), or no different (<->) |
|----------------------------|--------------------------|----------------------|---------|---|
| Maltreatment in Care       | 19AB, FY19               | 9.67                 | 4.75    | <b>↑</b>  |
| Recurrence of Maltreatment | FY19-20                  | 9.5                  | 4.2     | <b>↑</b>  |

Data Source: Child and Family Services Review (CFSR 3) Data Profile submissions as of 01-12-2022 (AFCARS) and 01-12-2022 (NCANDS).

Georgia exceeds the national standard on both SWDI related to Safety Outcome 1, Maltreatment in Care and Recurrence of Maltreatment. Georgia utilizes several strategies to reduce Maltreatment in Care including an emphasis on kin as a first placement, and ongoing supports for kin caregivers through the specialized Kinship Unit. The CRRU staff in each region monitor the child's needs to ensure the first placement is the best placement and provide ongoing supports and training to foster caregivers to ensure they

<sup>1.</sup> Data Period - The FY (e.g., FY13) or federal fiscal year, refers to NCANDS data, which spans the 12-month period Oct 1st – Sept 30th. All other periods refer to AFCARS data: 'A' refers to the 6-month period Oct 1st – March 31st. 'B' refers to the 6-month period April 1st – Sept 30th. The two-digit year refers to the calendar year in which the period ends (e.g., 13A refers to the 6-month period Oct 1, 2012 – March 31, 2013).

<sup>2.</sup> In some instances a lower percentage than the national standard indicates a statistically better score, in some instances a higher percentage indicates a better score. The arrows indicate whether Georgia's performance is statistically better  $(\uparrow)$ , worse  $(\downarrow)$  or no different (<->) than the national standard.

are fully equipped to care for the youth in their homes. The strategies that support a strong outcome in Recurrence of Maltreatment are in part due to the Division's efforts to promote "Conditions for Return". This effort recognizes that parents may continue to have challenges, but as long as conditions are put in place and the immediate safety threat is removed, the child can safely return home. Staff work with providers to ensure supports are in place for the caregivers, and the parents can continue to work on the case plan goals, with encouragement from the case manager, while parenting their child(ren). The PRE Team process allows for the 'conditions for return' conversation to begin even before a child enters care. This assists the county and court in identifying and creating a targeted case plan that will ensure the family's primary issues relating to the allegations of maltreatment are addressed.

|   | Comparison Chart: Calendar Year 2021   |     |     |     |                 |  |
|---|--|-----|-----|-----|-----------------|--|
|   | 45 Foster Care / 30 Family Preservation  |     |     |     |                 |  |
| Safety Jan- July- June Sept Oct-Dec<br>2021 2021 2021 |  |     |     |     | Oct-Dec<br>2021 |  |
|   | Outcome S2: Children are safely maintained in their homes whenever possible and appropriate. |     |     | 33% | 35%             |  |
| Item 2.   | s to family to protect children in home and<br>removal or re-entry into foster care          | 38% | 37% | 53% | 49%             |  |
| Item 3: Risk as                                       | sessment and safety management   | 35% | 29% | 35% | 39%             |  |

Source: DFCS QA Review Data

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

**Item 2:** Did the agency make concerted efforts to provide services to the family to prevent children's entry into foster care or re-entry after reunification?

Georgia finds this item to be an *Area Needing Improvement*. There are several identified barriers to performance on this item, which are routinely monitored by Division leadership and discussed in leadership meetings, summits, and data reviews with QA/CQI teams. Timely implementation of services has been the biggest barrier for several regions. Although staff are encouraged to begin assessing for services during initial contact and complete referrals as soon as possible, services sometimes do not get started timely due to (1) the service referral being vague or missing pertinent information and the individual/family minimizing their needs, resulting in no services being recommended, (2) an inadequate number of service providers throughout the region resulting in service

delays, and/or (3) referring the family for an assessment and waiting to make service referrals until recommendations are received. Additionally, when services are implemented, there is not consistent follow up with those providing the services to ensure it is appropriately mitigating the safety concern. Region 2 has identified challenges such as providers stopping services with the families without informing the case manager. It has also been identified that case managers will send over service authorizations to service providers who will begin services with the families but then only do a handful of sessions and stop services. The provider states that they are no longer able to serve the family, or the family is no longer in need of the service against the recommendation of the department.

The Division is exploring solutions to these identified barriers. C3 Coordinators are holding quarterly service array stakeholder meetings in their regions to discuss performance and areas for improvement. Staff are working with the service providers to ensure continuity of services as recommended. Service providers are informed of the observed barriers and challenged to implement solutions that better support their counties. Because the resource availability varies across the state, the regions are tasked with developing solutions that address their unique populations and service needs. There continue to be opportunities for counties and regions to share strategies and successes. Dougherty County is implementing the 3-3-3 protocol of referring and following up with providers and families to help ensure timely service provision. The 3-3-3 protocol, initially piloted by Region 3, encourages providers to contact the family within three days of receiving a referral, the case manager to follow up with the provider within three days of making the referral to ensure that contact has been made, and the case manager to follow up within three days to verify the provider has initiated services. Region 6 has also completed provider staffing on the "hard to move" cases to ensure the right services are in place to see behavioral changes in the parents to mitigate safety concerns. This work is ongoing.

Georgia is partnering with Casey Family Programs and three member agencies of the SoH ecosystem on a pilot initiative to provide Family Support Services (FSS) to families who are in need. While Georgia's FSS response is designed to address elevated risk in families through a time-limited intervention where a present or impending danger situation does not exist, this program is voluntary for families. This pilot partnership with selected SoH sites in three counties (Muscogee, Union, and Gwinnett) envisions a strategic approach to the safe reduction of children in foster care and reduces the system navigation burden for families in need of services and supports. Families are identified for FSS through the DFCS Intake process, connected to the SoH partner agencies, and provided with supporting services and resources to improve their economic conditions resulting in food instability, housing insecurity, and employment stressors. Feedback

loops and data sharing are ongoing, and findings are reviewed regularly by Division leadership to determine best practice and potential opportunities for expansion.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found that 82% of respondents rated the Division as "Good" or "Excellent" at effectively identifying children at risk and providing emergency services or removal when placement is warranted, and 87% rated the Division as "Good" or "Excellent" at providing services to ensure children are safe and protected from abuse and neglect.

**Item 3:** Did the agency make concerted efforts to assess and address the risk and safety concerns relating to the child(ren) in their own homes or while in foster care?

Georgia finds this item to be an *Area Needing Improvement*. Root cause analyses were conducted with regional CQI teams (comprised of frontline staff, supervisors, administrators, and county leadership). Georgia's CQI teams utilize a performance analysis and develop interventions with the "6 boxes" method, which focuses attention on the Environment (expectations and feedback; tools and resources; and incentives/consequences) and the Individual (knowledge and skills; capacity; and motivation). The Division is exploring solutions to these identified barriers. Regional (and some county-level) CQI teams develop and monitor their Quality Improvement Plan (QIP). Once the performance problem and cause have been analyzed, the team creates a strategy to address the root cause. The strategy is added to the QIP, with a description, measurement plan, and expected outcomes. The QIP is a performance plan that shows where the region is in performance, where it needs to be and how the staff, along with necessary stakeholders, are going to get there. QIPs are monitored and updated as needed.

The analyses found that workers need more experience in assessment and engagement, and more preparation to identify safety threats related to substance abuse, domestic violence, and mental health issues. New workers need more guidance and experience in recognizing how these issues affect parenting, protective capacities, and familial supports.

The regions that have been more successful in achieving Item 3 conduct frequent visits in the home, address all reported allegations, have private conversations with the family members, assess all household members and caretakers for the children, make meaningful and relevant collateral contacts, monitor visits between the parent(s) and children in care, and address safety concerns brought to the agency's attention. Regional

and county leadership are offering live learning opportunities to review policy, recognize good practice and learn from practice deficits. Several regions are providing additional training for supervisors to increase their knowledge and skills, and trainings for staff on different ways to engage with families and children virtually. Regional leaders are promoting trainings and summits to ensure that case managers and supervisors have an understanding that throughout the life of a case, risk needs to be addressed as well as any allegations that arise. Region 2 has reintroduced laminated flip charts that can be used in the field with questions and conversation topics to help guide new staff when stuck on a case and to ensure a thorough assessment. Trainings are being conducted on ensuring that case managers and supervisors are addressing safety concerns with all household members and the importance of including all household members during assessments and safety plans.

### **Safety Outcome 2 Data Analysis**

The QA Review findings provided in the above chart demonstrate that Georgia has consistently rated between 28-35% for Safety Outcome 2 in CY2021. In Georgia's Round 3 CFSR Final Report, the state received an overall rating of *Area Needing Improvement* for Item 2 (59% of the 46 applicable cases were rated as a Strength) and Item 3 (43% of the 150 applicable cases were rated as a Strength). The state is currently trending in a negative direction.

Safety Outcome 2

|                   | Metro | North | South | State |
|-------------------|-------|-------|-------|-------|
| Oct-Dec 2021      | 24%   | 48%   | 32%   | 35%   |
| Item 2            | 35%   | 69%   | 43%   | 49%   |
| Item 3            | 28%   | 48%   | 40%   | 39%   |
| July - Sept 2021  | 28%   | 48%   | 24%   | 33%   |
| Item 2            | 73%   | 42%   | 44%   | 53%   |
| Item 3            | 32%   | 48%   | 24%   | 35%   |
| April – June 2021 | 28%   | 32%   | 24%   | 28%   |
| Item 2            | 27%   | 27%   | 53%   | 37%   |
| Item 3            | 28%   | 36%   | 24%   | 29%   |
| Jan-March 2021    | 24%   | 36%   | 40%   | 33%   |
| Item 2            | 18%   | 38%   | 54%   | 38%   |
| Item 3            | 24%   | 36%   | 44%   | 35%   |

Source: DFCS QA Review Data

The state rating showed improvement during CY2021, from 28% in the second quarter of the year (April-June 2021) to 35% in the fourth quarter (Oct-Dec 2021). Further

exploration is needed to analyze these data and draw conclusions that explain the observed findings.

Safety Outcome 2

|                  | Permanency               | Family Preservation      | Overall |
|------------------|--------------------------|--------------------------|---------|
|                  | 45 cases                 | 30 cases                 | Rating  |
| Oct-Dec 2021     | 49% (22 out of 45 cases) | 13% (4 out of 30 cases)  | 35%     |
| Item 2           | 65% (13 out of 20 cases) | 37% (10 out of 27 cases) | 49%     |
| Item 3           | 51% (23 out of 45 cases) | 20% (6 out of 30 cases)  | 39%     |
| July - Sept 2021 | 51% (23 out of 45 cases) | 7% (2 out of 30 cases)   | 33%     |
| Item 2           | 71% (5 out of 7 cases)   | 48% (12 out of 25 cases) | 53%     |
| Item 3           | 51% (23 out of 45 cases) | 10% (3 out of 30 cases)  | 35%     |
| April-June 2021  | 40% (18 out of 45 cases) | 10% (3 out of 30 cases)  | 28%     |
| Item 2           | 44% (7 out of 16 cases)  | 32% (8 out of 25 cases)  | 37%     |
| Item 3           | 40% (18 out of 45 cases) | 13% (4 out of 30 cases)  | 29%     |
| Jan-March 2021   | 49% (22 out of 45 cases) | 10% (3 out of 30 cases)  | 33%     |
| Item 2           | 43% (3 out of 7 cases)   | 36% (9 out of 25 cases)  | 38%     |
| Item 3           | 51% (23 out of 45 cases) | 10% (3 out of 30 cases)  | 35%     |

Source: DFCS QA Review Data

Analysis of program performance shows higher ratings for Permanency cases compared to Family Preservation throughout CY2021. QA review findings reported that inadequate assessment of safety issues negatively impacted the agency's ability to ensure the safety of children. Gaps in safety assessment occurred in both Family Preservation and Permanency cases due to lack of engagement with children/caretakers regarding allegations or safety threats, increasingly prevalent in relative/voluntary kin placements. Additionally, as reflected in the scores for Item 2, the agency did not provide timely services to address identified safety concerns, such as substance abuse, domestic violence and significant parenting deficits. Due to the lack of adequate safety assessment, needed safety services were either delayed or not provided. The Division is exploring opportunities to obtain and review equity data on for this outcome measure, as well as contributing factors and potential root causes. This work is ongoing.

| Comparison Chart: Calendar Year 2021    |                     |              |               |                 |  |
|---|---------------------|--------------|---------------|-----------------|--|
| 45 Foster Care / 30 Family Preservation |                     |              |               |                 |  |
| Permanency                              | Jan-<br>Mar<br>2021 | Apr-<br>June | July-<br>Sept | Oct-Dec<br>2021 |  |

|  |     | 2021 | 2021 |     |
|--|-----|------|------|-----|
| Outcome P1: Children have permanency and stability in their living situations.                         | 13% | 18%  | 22%  | 22% |
| Item 4: Stability of foster care placement   | 78% | 71%  | 76%  | 82% |
| Item 5: Permanency goal for child  | 40% | 47%  | 39%  | 49% |
| Item 6: Achieving reunification, guardianship, adoption, or other planned permanent living arrangement | 18% | 29%  | 40%  | 31% |

Source: DFCS QA Review Data

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

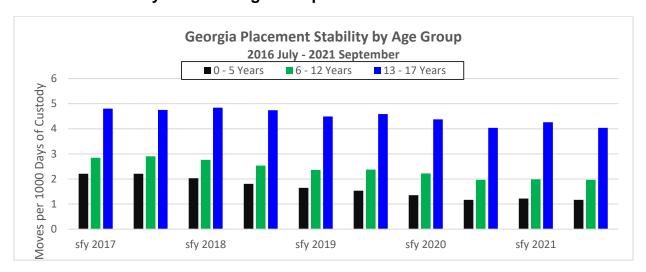
**Item 4:** Is the child in foster care in a stable placement and were any changes in the child's placement in the best interests of the child and consistent with achieving the child's permanency goal(s)?

Georgia finds this item to be a *Strength*. Children are consistently in a stable placement. The Division's CRRU team monitors the child's needs to make the best first placement for child, and regions have an identified Field Program Specialist (FPS) who assists with placement disruptions and conducts PAUSE consultations. The Placement and Permanency Section has initiated Placement Assistance Utilizing Stability Exploration or "PAUSE" staffings which is a multi-agency approach to exhausting efforts to stabilize a placement that is nearing disruption with support. The PAUSE staffing is used to explore resources available that may strengthen the stability of the placement and prevent disruption or identify the best potentially permanent home if a disruption cannot be prevented. Collaboration from County Staff, Regional Support, MAAC, Amerigroup, DBHDD, DJJ, Adoption Coordinator, SAAG, GAL, CASA and private service providers are invited to the meeting as deemed appropriate. This collaboration helps ensure reasonable efforts to prevent placement change and serves to gain consensus related to the child's best interest. If a move cannot be avoided, there is a discussion about ways to make the move less traumatizing for the child.

There are some identified barriers in several regions, and the Division is working to address them. Due to high caseloads and staff turnover, the follow up visits that should be made within 24 hours of a new placement occurring (to help ensure the child and caretakers are adjusting and quickly address any identified concerns) does not occur consistently, especially when a child must be placed outside of their removal county due to lack of placement resources being available.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found that 60% of legal services rated the Division as "Good" or "Excellent" for achievement of permanency and stability for children in foster care in a timely manner.

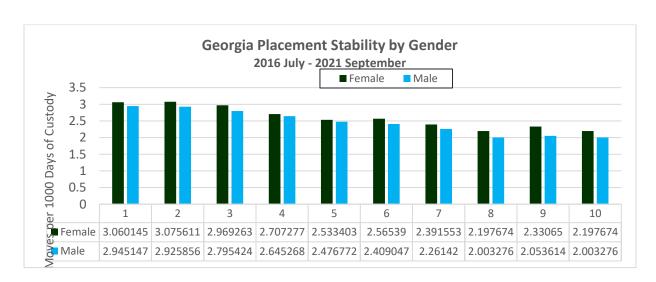
### Placement Stability Chart #1: Age Groups



Source: DFCS Data Unit, Georgia SHINES

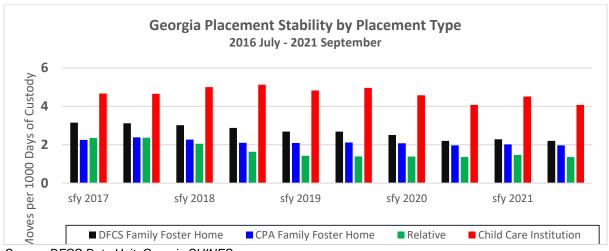
Placement stability is higher (i.e., fewer moves per 1000 days of custody) for children age five and younger. Older youth age 13-17 experience more placement moves compared to younger children.

### Placement Stability Chart #2: Gender



Placement stability for males is slightly higher (i.e., fewer moves per 1,000 days of custody) compared to females.

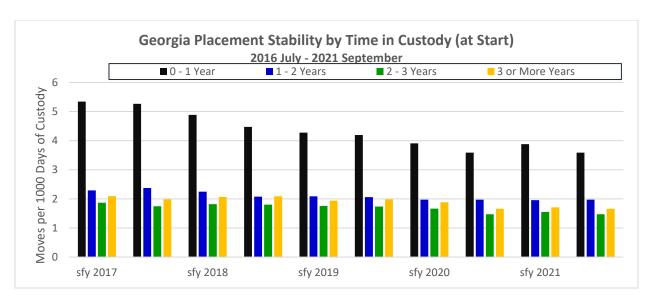
### Placement Stability Chart #3: Placement Type



Source: DFCS Data Unit, Georgia SHINES

Since SFY2018, placement stability is higher (i.e., fewer moves per 1000 days of custody) for youth placed in relative homes compared to all other placement types. Youth placed in child caring institutions experience more placement changes compared to youth in other types of placements.

### Placement Stability Chart #4: Time in Care



Source: DFCS Data Unit, Georgia SHINES

Placement stability is slightly higher (i.e., fewer moves per 1000 days of custody) for youth who have been in custody for 2-3 years. Youth in custody for less than one year experience more placement changes compared to youth in care for more than one year, but the average number of moves for youth in custody 0-1 year has decreased since SFY2017 (from 5.34 to 3.59 moves).

**Item 5:** Did the agency establish appropriate permanency goals for the child in a timely manner?

Georgia finds this item to be an Area Needing Improvement. Counties have had some

delays related to court timeliness for various reasons. including ongoing court delays which in turn causes delays in establishing permanency goals for our children. TPR packets are sometimes not completed timely by the county staff or are not being filed timely by the SAAG. Regional Adoption Coordinators (RAC) monitor concurrent cases and children who are partially free for adoption to ensure that the Division is attempting to file timely. Other regions reported barriers to permanency related to not completing initial case plans timely, not completing Family Team Meetings (FTMs) to ensure children and parents are included in the case plan development, and not changing permanency plans to reflect case circumstances, when appropriate. Staff turnover and high caseloads are very problematic and limit the ability of the Division to complete the TPR packets and initiate the TPR process. Because there is no

REGION 13 implemented a new permanency strategy in FY2022 called "Pathway to Permanency" to replace case consultations with collaborative staffings. The staffings occur every three months starting at the onset of a foster care episode to discuss the specific reason(s) entering care, connections, services/interventions, behavior changes, and conditions for return. High impact next steps are identified at each staffing to manage accountability.

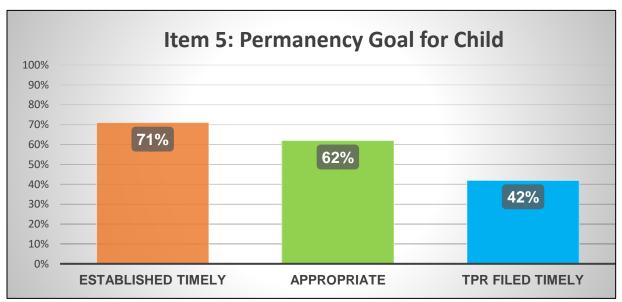
statewide data system for juvenile courts, there is no tracking mechanism for these items. The Division is partnering with the CIP and other stakeholders to explore opportunities for improved data collection and reporting.

The Division is exploring opportunities to remove these reported barriers. The Division is partnering with Georgia's Court Improvement Program (CIP) to support enhancements in the quality and dialogue of judicial stakeholder meetings. Counties are seeing some progress in timeliness and collaboration following judicial stakeholder meetings and improved stability with judicial partners. Additional work is planned to collect measurable data on these findings. CIP is also promoting discussion of CFSR permanency outcomes within the FY22 Multi-Disciplinary Child Abuse and Neglect Institute (MDCANI) trainings. Judges and SAAGs are critical participants in the MDCANI, and it is a priority for the CIP to ensure they are informed of their role in achieving timely permanency for children in care and an improved rating on this item. Additional information on the MDCANI curriculum can be found in the Collaboration: Court Improvement Program section of this report. This work is ongoing.

The Division has implemented a "Flag and Follow" pilot project to provide case support and consultation for children who come into care after egregious circumstances, with the goal of expediting TPR and permanency. This pilot has reviewed a small number of cases in FY22, so efficacy is not yet determined. The efforts of this team will be monitored throughout FY2023 to assess improved timeliness to permanency.

The QA Review Team reviewed 180 Foster Care cases in CY2021:

- In the majority of cases reviewed, the permanency goal(s) were established timely for children in care based on the federal standard.
- Permanency goals were established timely in 71% of the cases reviewed.
- Permanency goals were appropriate based on the circumstances of the case in 62% of the cases reviewed. This component of Item 5 was most often negatively impacted when reunification goals remained in place long after efforts to achieve this goal had been exhausted.
- TPR petitions were filed timely in 42% of the applicable cases reviewed.



Source: DFCS QA Review Data, CY2021

**Item 6:** Did the agency make concerted efforts to achieve reunification, guardianship, adoption, or other planned permanent living arrangement for the child?

Georgia finds this item to be an *Area Needing Improvement*. Timely permanency hearings for FY21 and FY22 were a challenge following the closing of juvenile courts because of the restrictions on in-person gatherings due to COVID-19. The pandemic created TPR delays statewide due to court closures, but courts are working to address the backlog of filings. As a result, some children did not achieve timely permanency if their permanency goals needed to change. FY21 noted a stall in reunification services with families and

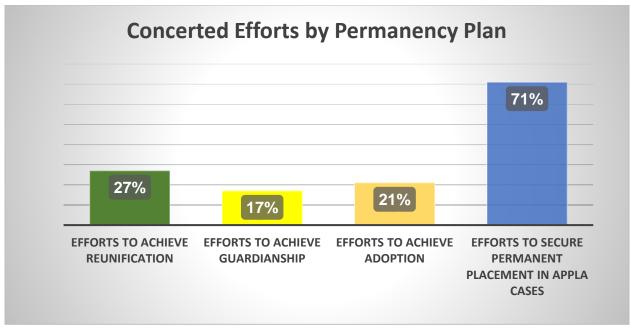
children because of COVID-19 restrictions, and though service providers and families were able to fully transition into a virtual platform in FY22, there continued to be staffing shortages and turnover for many providers. The Division convened staff in FY22 to explore the root causes for observed performance of timely permanency and found that turnover and lack of service provision for families continues to be a contributing factor. Additional work is planned to collect measurable data on these findings. CIP is also promoting discussion of CFSR permanency outcomes within the FY22 Multi-Disciplinary Child Abuse and Neglect Institute (MDCANI) trainings. Judges and SAAGs are critical participants in the MDCANI, and it is a priority for the CIP to ensure they are informed of their role in achieving timely permanency for children in care and an improved state rating on this item.

Regions are conducting case consultations at 12-months to eliminate barriers toward permanency through collective and collaborative planning. Region 14 conducts permanency consultations at six, eight, and 12 months to review each case and determine if the Division is making all efforts to move the case toward permanency. Regional Adoption Coordinators (RACs) monitor cases in their assigned regions that have a primary goal of adoption or a secondary goal of adoption and in care for greater than nine months. This work is ongoing.

The QA Review Team reviewed 180 Foster Care cases in CY2021:

Issues most frequently identified as impacting achievement of permanency timely include:

- Delays or failure to provide needed services to families to achieve permanency timely
- TPR petitions not filed timely resulting in adoption not being achieved within 24 months
- Having concurrent permanency plans with only one plan being worked
- Insufficient contacts with parents and/or service providers to facilitate and support progress on reunification cases.



Source: DFCS QA Review Data, CY2021

### **Permanency Outcome 1 Data Analysis**

The CY2021 QA Review findings demonstrate that Georgia has consistently rated between 13-22% for Permanency Outcome 1 in CY2021. In the Round 3 CFSR Final Report, Georgia was not in substantial conformity with Permanency Outcome 1.

Georgia received an overall rating of Area Needing Improvement for Item 4 because 68% of the 90 applicable cases were rated as a Strength. The state is demonstrating improvement in achieving Item 4, with ratings from 71-82% in CY2021. Georgia received an overall rating of Area Needing Improvement for Item 5 because 42% of the 86 applicable cases were rated as a Strength. The state is making small improvements in achieving Item 5, with ratings from 39-49% in CY2021. Georgia received an overall rating of Area Needing Improvement for Item 6 because 27% of the 90 applicable cases were rated as a Strength. The state is making improvements in achieving Item 6, with ratings from 29-40% in CY2021.

### **Permanency Outcome 1**

|              | Metro | North | South | State |
|--------------|-------|-------|-------|-------|
| Oct-Dec 2021 | 20%   | 33%   | 13%   | 22%   |
| Item 4       | 80%   | 80%   | 87%   | 82%   |
| Item 5       | 47%   | 69%   | 33%   | 49%   |
| Item 6       | 20%   | 40%   | 33%   | 31%   |

| July - Sept 2021  | 20% | 13% | 33% | 22% |
|-------------------|-----|-----|-----|-----|
| Item 4            | 47% | 93% | 87% | 76% |
| Item 5            | 47% | 33% | 36% | 39% |
| Item 6            | 47% | 33% | 40% | 40% |
| April – June 2021 | 13% | 33% | 7%  | 18% |
| Item 4            | 53% | 87% | 73% | 71% |
| Item 5            | 47% | 67% | 27% | 47% |
| Item 6            | 27% | 47% | 13% | 29% |
| Jan-March 2021    | 7%  | 27% | 7%  | 13% |
| Item 4            | 67% | 80% | 87% | 78% |
| Item 5            | 53% | 47% | 20% | 40% |
| Item 6            | 13% | 27% | 13% | 18% |

Source: DFCS QA Review Data

The State overall did a good job of ensuring children were placed with their relatives and siblings, as well as having stability in their placements. However, all three Districts struggled not only to ensure that permanency plans were appropriate given case circumstances, but also in demonstrating the concerted efforts necessary to achieve those permanency plans.

Statewide Data Indicators (SWDI) for permanency items demonstrate mixed performance. The SWDI can be found in the Child and Family Services Review Data Profile section of this report. Analyses of Georgia data demonstrate a lower value for Placement Stability (moves/1,000 days in care), which is statistically better than the national performance. Georgia has maintained an equal or better performance outcome for this item in four consecutive reporting periods (19B20A, 20A20B, 20B21A, and 21A21B), which supports the state's assessment of Item 4 as a Strength.

Trend analysis of Georgia placement stability (July 2016 - Sept 2021) demonstrates that younger children have considerably fewer moves compared to teens, but the placement stability rate for teens is still below the 4.44/1,000 national standard for all children (Placement Stability Chart #1). Until recently, there was a minimal difference between outcomes based upon gender. However, over most recent six-month reporting periods, a gap is beginning to emerge. (Placement Stability Chart #2). Family settings appear to have the greatest success with fewer moves. Child Caring Institutions (CCIs) undoubtedly receive older children who are more apt to disrupt. (Placement Stability Chart #3). The first year in care continues to be the most unstable time for a child while in care. After the child's second year in foster care, changes in placement appear very consistent. (Placement Stability Chart #4).

Georgia received its Child and Family Services Review (CFSR 3) Data Profile in February 2022 based on data submissions as of 01-12-2022 (AFCARS) and 01-12-2022

(NCANDS). The chart below demonstrates Georgia's risk standardized performance relative to the national performance on seven Statewide Data Indicators (SWDI).

| Indicator                              | Data Period <sup>1</sup> | National<br>Standard | Georgia | Statistically <sup>2</sup> better (↑), worse (↓), or no different (<->) |
|--|--------------------------|----------------------|---------|---|
| Permanency in 12 months (entries)      | 19A19B                   | 42.7                 | 34.2    | <b>↓</b>  |
| Permanency in 12 months (12 – 23 mos.) | 21A21B                   | 45.9                 | 37.3    | <b>\</b>  |
| Permanency in 12 months (24+ mos.)     | 21A21B                   | 31.8                 | 29.0    | <b>↓</b>  |
| Re-entry to Foster<br>Care             | 19A19B                   | 8.1                  | 6.2     | <b>↑</b>  |
| Placement Stability                    | 21A21B                   | 4.44                 | 4.26    | <b>↑</b>  |

Data Source: Child and Family Services Review (CFSR 3) Data Profile submissions as of 01-12-2022 (AFCARS) and 01-12-2022 (NCANDS).

Georgia exceeds the national standard on two of the five permanency SWDI measurements. Georgia utilizes several strategies to support Placement Stability, including an emphasis on kin as a first placement, and ongoing supports for kin caregivers through the specialized Kinship Unit. The CRRU staff in each region monitor the child's needs to ensure the first placement is the best placement, and provide ongoing supports and training to foster caregivers to ensure they are fully equipped to care for the youth in their homes. The Division employs dedicated staff (Placement Field Program Specialists) who convene the child's support system in Placement Assistance Utilizing Stability Exploration (PAUSE) calls to prevent unnecessary placement changes.

The strategies that support a strong outcome in Re-Entry to Foster Care are in part due to the Division's efforts to promote "Conditions for Return". This effort recognizes that parents may continue to have challenges, but as long as conditions are put in place and the immediate safety threat is removed, the child can safely return home. Staff work with providers to ensure supports are in place for the caregivers, and the parents can continue to work on the case plan goals, with encouragement from the case manager, while parenting their child(ren). The PRE Team process allows for the conditions for return

<sup>1.</sup> Data Period - The FY (e.g., FY13) or federal fiscal year, refers to NCANDS data, which spans the 12-month period Oct 1st – Sept 30th. All other periods refer to AFCARS data: 'A' refers to the 6-month period Oct 1st – March 31st. 'B' refers to the 6-month period April 1st – Sept 30th. The two-digit year refers to the calendar year in which the period ends (e.g., 13A refers to the 6-month period Oct 1, 2012 – March 31, 2013).

<sup>2.</sup> In some instances a lower percentage than the national standard indicates a statistically better score, in some instances a higher percentage indicates a better score. The arrows indicate whether Georgia's performance is statistically better  $(\uparrow)$ , worse  $(\downarrow)$  or no different (<->) than the national standard.

conversation to begin even before a child enters care. This assists the county and court in identifying and creating a targeted case plan that will ensure the family's root cause issues are addressed. This early collaboration positively impacts Georgia's observed reentry rate. In addition, during PAUSE staffings, conditions for return are discussed in an effort to not only stabilize a youth's placement but ensure staff are targeting what needs to occur so youth can return home.

The state's performance is lower than the national standard on Permanency in 12 months (entries), Permanency in 12 months (12-23 months), and Permanency in 12 months (24+ months). Analyses of findings demonstrate that Georgia has had some success with reducing the number of foster care entries, perhaps in relation to the work of the Division in becoming more intentional with bringing children into care (e.g., PRE Team staffings and establishing Conditions for Return). In doing this work, staff are noticing that the children who are coming into care and their families are more likely to have complex needs which require significant service provision, and therefore may take longer to achieve permanency. Relatedly, this consistent approach to "front door" work is possibly connected to Georgia's stronger performance in placement stability, maltreatment in care, and re-entry to foster care. In keeping with this track of analysis, Georgia would expect to see higher rates of permanency for children in care over 24 months compared to the other Permanency SWDI measures. Georgia will continue to explore the data and consider approaches to address the observed outcomes. This work is ongoing.

| Comparison Chart: Calendar Year 2021  45 Foster Care / 30 Family Preservation                |   |                     |                      |                       |                 |  |
|--|---|---------------------|----------------------|-----------------------|-----------------|--|
|  | Permanency  | Jan-<br>Mar<br>2021 | Apr-<br>June<br>2021 | July-<br>Sept<br>2021 | Oct-Dec<br>2021 |  |
| Outcome P2: The continuity of family relationships and connections is preserved for children |   | 46%                 | 42%                  | 60%                   | 51%             |  |
| Item 7:  | Placement with siblings                           | 94%                 | 80%                  | 87%                   | 84%             |  |
| Item 8:  | Visiting with parents and siblings in foster care | 57%                 | 65%                  | 58%                   | 47%             |  |
| Item 9:  | Preserving connections                            | 60%                 | 62%                  | 60%                   | 64%             |  |
| Item 10:   | Relative placement                                | 61%                 | 51%                  | 68%                   | 56%             |  |
| Item 11:   | Relationship of child in care with parents        | 27%                 | 31%                  | 22%                   | 33%             |  |

Source: DFCS QA Review Data

## Permanency Outcome 2: The continuity of family relationships and connections is preserved for children

**Item 7:** Did the agency make concerted efforts to ensure that siblings in foster care are placed together unless separation was necessary to meet the needs of one of the siblings?

Georgia finds this item to be a *Strength*. The state continues to adhere to the 2018 SOP directing staff to increase sibling placements unless there is an identified safety or well-being issue that prevents placement together. The Permanency Field Program Specialist (FPS) within each region reviews waivers for separation and follows up with counties to assist with practice guidance. Temporary sibling separation waivers must have the final approval by the County Director, and permanent sibling separation waivers must have the final approval by the Regional Director. Permanency FPS conduct staffings every 30-60 days on all youth that are placed separately from their siblings to discuss steps taken to place siblings together, present barriers to sibling placement, and whether a permanent sibling separation waiver is appropriate. Some regions struggle with finding permanency for larger sibling groups and children with multiple service needs such as mental health, medical fragility, and delinquent behaviors. It is a challenge for staff to identify a caregiver who has the capacity to provide care for these children while deciding about permanency. Subsequently, these children are often placed in group home settings which makes the possibility of them maintaining permanent connections even more difficult.

**Item 8:** Did the agency make concerted efforts to ensure that visitation between a child in foster care and his or her mother, father, and siblings was of sufficient frequency and quality to promote continuity in the child's relationships with these close family members?

Georgia finds this item to be an *Area Needing Improvement*. It is the expectation that for every case involving a reunification goal, there is a planned visit held between the child and parent as frequently as appropriate given the child's permanency goal. Staff are encouraged to pursue alternate visitation options via Family Time [NOTE: Additional information on the Family Time guide is also addressed in the Collaboration – Family Time section of this report]. The regions ensure that there are frequent contacts between children and their parents. County staff work closely with families to ensure that parent and sibling visits are being done routinely and per policy, and with service providers to help facilitate these visits and provide transportation. Staff also encourage foster parents to help assist with maintaining the bond between parents and siblings when appropriate.

During FY21, foster parents and relative caretakers reported being very hesitant to participate in face-to-face visits with parents and case managers due to the COVID-19

pandemic. The hesitancy to participate in face-to-face visits increased with medically fragile children. COVID-19 restrictions continued to affect visitation for part of FY22, but counties have resumed ensuring appropriate visitation and that a visitation plan is provided at the 72-hour court hearing. Some regions identified visitation gaps related to staff shortages and oversight, but as county leadership are addressing staffing needs, this will improve. This work is ongoing and will be monitored throughout FY2023 for continued progress.

**Item 9:** Did the agency make concerted efforts to preserve the child's connections to his or her neighborhood, community, faith, extended family, Tribe, school, and friends?

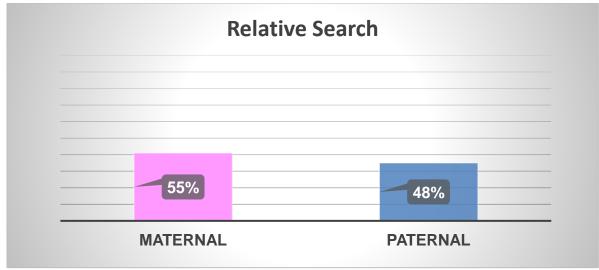
Georgia finds this item to be an *Area Needing Improvement*. Regional leaders are continuing to utilize conversation guides to help shift the conversation with children, parents, and relatives away from "placement" to "connections". The term "fostering connections" implies an ongoing conversation with the child, parents, and relatives about who is important to the child - to include teachers, coaches and other adults who may want to help mentor and support the child through their foster care journey. In helping to identify connections, staff are in a better position to involve relatives who may not be able to serve as a placement resource in the moment but may be interested in being a visitation resource or a to have regular phone contact with the child, and who may one day be in a position to be a placement resource. Conversation guides are continuing to be a resource for regions to help case managers have intentional conversations with children, parents and caregivers related to their connections. These conversation guides help staff with identifying and evaluating relatives and fictive kin early in the life of the case, which is vital in preserving connections for children in care.

When children are placed out of the county, placement among family with whom they are already familiar helps to preserve those connections that are vital for continuing positive development. With support from the Division's Tribal Liaison, staff efforts to engage the Native American community in the permanency planning for tribal children are tracked and monitored. The regions also make concerted efforts to place children in their home school, as well as maintain communication with school systems to keep youth in their home schools. Challenges related to this include a lack of placement availability in the youth's community, school zoning, and lack of fit and willing relatives. Education Support Monitors (ESM) in the regions work with schools to support youth in maintaining connections.

**Item 10:** Did the agency make concerted efforts to place the child with relatives when appropriate?

Georgia finds this item to be a *Strength*. Identified strengths for this measure are due to regional leadership promoting the consistent use of diligent search and completion of genograms for family and fictive kin which begins during the earliest stage of the case. Voluntary Kinship policies are utilized in partnership with CPS Investigations. Diligent efforts to place with kin start at the beginning of the case and are ongoing until all relatives are assessed or ruled out. Staff continue to ask the children and other family members about possible relatives who might be willing to serve as placement. Staff also work to ensure that the relatives have drug screens and fingerprinting completed prior to placement. The Division has in place a specialized Kinship unit to support kin, address complaints, and provide guidance to staff. Utilization of the Promoting Reasonable Efforts (PRE) calls has added additional focus on identifying and contacting relatives and fictive kin placement options. The Placement Assisting Utilizing Stability Exploration (PAUSE) process explores potential relatives as well if youth are not currently in relative placements. PAUSE calls are also held for children in relative placements when the placement is in jeopardy of disrupting. The policy, reports, regional strategies, specialized staff, and ongoing trainings have a positive impact on placing children with kin.

Several regions continue to have difficulty with relative placements, specifically in diligent search efforts and following up with relatives who may have initially refused placement to reconsider. These regions report a common barrier to placing children with kin is the actual approval process. Many times, kin have extensive criminal backgrounds and/or CPS history that prohibits them from being a resource. In some cases, kinship placements have been identified and utilized but not fully vetted, which then results in the child's removal from the kinship placement. Staff in those circumstances must take steps to complete the full assessments, including criminal background check, CPS history check, drug screenings, and other required screenings prior to placement. The Division plans to provide more guidance to support staff use of the wavier process in order to fully vet kinship placements. Another noted barrier to placing children with kin is that kin do not currently obtain any financial assistance until they are approved as a foster parent or are eligible for Enhanced Relative Rate (ERR) funding. The Caregiver Recruitment and Retention Unit (CRRU) is supporting counties and private agencies in their approval of relative placements as foster homes, to move these families through the process of becoming foster parents. Regional leaders continue to promote accountability to counties to ensure relative placements are approved timely in Georgia SHINES. The Kinship Navigator portal also supports relative caregivers in obtaining resources to successfully care for children and ensure that relative placements are appropriate and maintained. The Kinship Continuum program will continue to hold regional trainings as needed to educate staff about the process to move a relative through the process to become a foster parent and provide supports.



Source: DFCS QA Review Team, CY 2021

The overall rating for Item 10 was 59% for the 180 Foster Care cases reviewed in CY2021. There was a comprehensive search for maternal relatives in 55% of the cases reviewed, and for paternal relatives in 48% of the cases.

The below chart demonstrates a steady increase in the percentage of children in foster care who are initially placed with kin (30% in April 2021  $\rightarrow$  36% in March 2022). Placement stability data demonstrates that kin placements for children in care are more stable compared to other types of placements.

#### **CHILDREN INITIALLY PLACED WITH KIN**



SOURCE: Georgia SHINES, LENSES Report (April 2022)

**Item 11:** Did the agency make concerted efforts to promote, support, and/or maintain positive relationships between the child in foster care and his or her mother and father or other primary caregivers from whom the child had been removed through activities other than just arranging for visitation?

Georgia finds this item to be an Area Needing Improvement. The Division continues to encourage staff to ensure that parents are invited to attend medical appointments and school activities. Staff are also encouraged to ensure that parents participate in the consent process for psychotropic medication, surgical procedures, and birth control. However, limitations are noted around the agency's poor engagement with relative caregivers and foster parents around the parents' engagement with their children outside of visitation. Documentation of contact with parents and caregivers very infrequently discusses parent-child engagement outside of a visitation context. While this engagement outside of visitation is the responsibility of the agency, in practice this facet of engagement appears to be left up to the placement to nurture. True partnership foster parents are unfortunately difficult to come by and relationships with relative caregivers and parents are frequently strained due to circumstances that caused the children to enter care, both of which are barriers to parents' engagement with their children outside of visitation. These barriers are further bolstered by the agency's struggles around quality engagement with parents where discussions around encouraging these types of interactions are not taking place frequently.

Regional leaders are working to remind staff during Case Manager and Supervisor Summits of the importance of partnership parenting and the need for this discussion to ensure that biological families are aware of these appointments (i.e. school activities, medical appointments, and recreational activities).

The Division is developing a parent engagement support packet in partnership with parents who have lived experience. This resource will be a guide for parents to understand the foster care system when their children are removed from their care, and what to expect from the child welfare system. The parents will have detailed guidance on their rights (e.g., visitation/family time, hearings, and case plan development), types of placements, permanency goals including the ASFA timelines, and the legal/judicial process. This work is expected to be completed in FY2023 and available statewide.

### **Permanency Outcome 2 Data Analysis**

The provided QA Review findings demonstrate that Georgia has consistently rated between 42-60% for Permanency Outcome 2 in CY2021. In the Round 3 CFSR Final Report, Georgia was not in substantial conformity with Permanency Outcome 2. Georgia

received an overall rating of Area Needing Improvement for Item 7 because 77% of the 56 applicable cases were rated as a Strength. The state is demonstrating improvement in achieving Item 7, with ratings from 80-94% in CY2021. Georgia received an overall Round 3 rating of Area Needing Improvement for Item 8 because 45% of the 69 applicable cases were rated as a Strength. The state is demonstrating improvement in achieving Item 8, with ratings from 47-65% in CY2021. Georgia received an overall Round 3 rating of Area Needing Improvement for Item 9 because 39% of the 87 applicable cases were rated as a Strength. The state is demonstrating improvement in achieving Item 9, with ratings from 60-64% in CY2021. Georgia received an overall Round 3 rating of Area Needing Improvement for Item 10 because 46% of the 85 applicable cases were rated as a Strength. The state is demonstrating improvement in achieving Item 10, with ratings from 51-68% in CY2021. Georgia received an overall Round 3 rating of Area Needing Improvement for Item 11 because 34% of the 62 applicable cases were rated as a Strength. The state is demonstrating poor performance in achieving Item 11, with ratings from 22-33% in CY2021. With the exception of item 11, the state is trending in a positive direction since CFSR Round 3. These strengths highlight the good work being done across the state to ensure children maintain connections after entering foster care.

### **Permanency Outcome 2**

|                   | Metro | North | South | State |
|-------------------|-------|-------|-------|-------|
| Oct-Dec 2021      | 60%   | 40%   | 53%   | 51%   |
| Item 7            | 73%   | 100%  | 80%   | 84%   |
| Item 8            | 42%   | 55%   | 45%   | 47%   |
| Item 9            | 80%   | 53%   | 60%   | 64%   |
| Item 10           | 47%   | 67%   | 53%   | 56%   |
| Item 11           | 50%   | 36%   | 11%   | 33%   |
| July - Sept 2021  | 53%   | 67%   | 60%   | 60%   |
| Item 7            | 100%  | 80%   | 83%   | 87%   |
| Item 8            | 64%   | 56%   | 55%   | 58%   |
| Item 9            | 60%   | 60%   | 60%   | 60%   |
| Item 10           | 53%   | 86%   | 67%   | 68%   |
| Item 11           | 13%   | 33%   | 20%   | 22%   |
| April – June 2021 | 47%   | 40%   | 40%   | 42%   |
| Item 7            | 67%   | 80%   | 89%   | 80%   |
| Item 8            | 73%   | 58%   | 64%   | 65%   |
| Item 9            | 73%   | 40%   | 73%   | 62%   |
| Item 10           | 47%   | 53%   | 53%   | 51%   |
| Item 11           | 10%   | 50%   | 30%   | 31%   |
| Jan-March 2021    | 47%   | 53%   | 40%   | 46%   |

| Item 7  | 89% | 100% | 92% | 94% |
|---------|-----|------|-----|-----|
| Item 8  | 36% | 73%  | 62% | 57% |
| Item 9  | 53% | 73%  | 53% | 60% |
| Item 10 | 60% | 60%  | 64% | 61% |
| Item 11 | 30% | 30%  | 20% | 27% |

Source: DFCS QA Review Data

| Comparison Chart: Calendar Year 2021  45 Foster Care / 30 Family Preservation  |  |     |                      |                       |                 |
|--|--|-----|----------------------|-----------------------|-----------------|
| Well-Being   |  |     | Apr-<br>June<br>2021 | July-<br>Sept<br>2021 | Oct-Dec<br>2021 |
| Outcome WB1: Families have enhanced capacity to provide for their children's needs. (Item 12 must be a strength for the Overall Rating to be Substantially Achieved) |  | 16% | 12%                  | 20%                   | 16%             |
| Item<br>12:  | Needs and services of child, parents, foster parents | 16% | 12%                  | 21%                   | 17%             |
| Item<br>13:  | Child and family involvement in case planning        | 43% | 46%                  | 51%                   | 44%             |
| Item<br>14:  | Caseworker visits with child                         | 56% | 61%                  | 51%                   | 56%             |
| Item<br>15:  | Caseworker visits with parent(s)                     | 23% | 22%                  | 18%                   | 19%             |

Source: DFCS QA Review Data

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

**Item 12:** Did the agency make concerted efforts to assess the needs of and provide services to children, parents, and foster parents to identify the services necessary to achieve case goals and adequately address the issues relevant to the agency's involvement with the family?

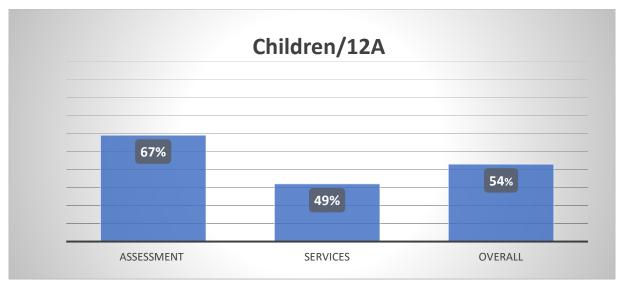
Georgia finds this item to be an Area Needing Improvement. Diligent search efforts to locate absent parents (whose whereabouts are unknown) can be considered as a contributing factor to the area needing improvement. QA Review Team findings demonstrate that Permanency cases reflected better provision of needed services to children in the cases reviewed during CY2021. In terms of providing needed services to parents, Family Preservation cases improved in providing services to both mothers and

fathers. For children, services such as family therapy, as well as timely referrals for individual counseling, in home services or independent living services were needed. For parents, a variety of services were not provided (domestic violence treatment, family therapy, parenting). In many cases, although services were eventually provided, there were months' long gaps between the identification of a service need and the actual provision of the service. Additionally, in cases where more intensive substance abuse treatment was recommended if a parent continued to test positive, the need for a higher level of treatment was rarely discussed or instituted.

#### Item 12A: Needs Assessment and Services to Children

QA reviews continue to note a distinct difference in performance between Permanency cases and Family Preservation cases throughout CY2021. Fewer Family Preservation cases rated a strength in needs assessment of children, compared to Permanency cases. Permanency cases demonstrated significantly better provision of needed services to children. For children, services such as family therapy, as well as timely referrals for individual counseling, in home services, or independent living services were needed. Findings indicate a lack of overall assessment regarding related to social skills, relationships, bonding/attachment, and independent living, etc. There are not consistent discussions taking place with children, parents, caretakers, and collaterals regarding what needs children may be exhibiting. In multiple cases, formal assessments had recommended additional formal assessments/testing (trauma, psychological, EPAC, developmental due to prenatal exposure to drugs) that were not completed. Delays in referrals for formal assessments or for recommended services also impacted performance in these items, as did delays in renewing service authorizations for services that were already in place. Although delays for appointments related to the pandemic did impact these areas, no cases were rated by the QA reviewers as an area needing improvement solely due to delays related to COVID-19.

QA Review Team findings demonstrate that when assessing the needs of children, the Division generally performed better in this area compared to assessing needs of parents (12B) and foster caregivers (12C), however, relevant collaterals to assess progression are not being made consistently. While staff turnover and high caseloads do contribute to lack of compliance in this area, counties with stable and veteran staff still struggle to appropriately assess, implement services, and follow up for completion and progress. The Division will continue to explore the root causes for this observed performance.



Source: DFCS QA Review Team, CY2021

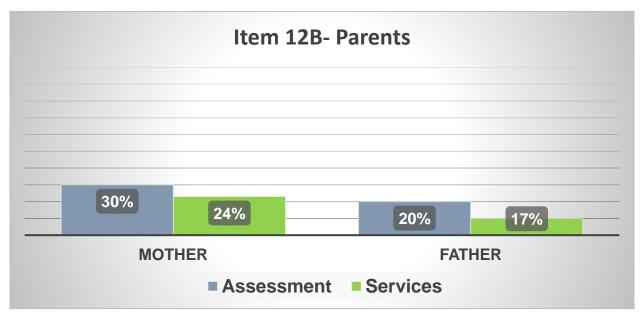
#### Item 12B: Needs Assessment and Services to Parents

Parental needs are assessed through a combination of informal and formal means. Informal assessment may include regular, quality discussions with the parents regarding their needs and whether any services in place are effective in meeting those needs, observations of parent's demeanor, of their home environment and of their interactions with the children, and the use of collateral contacts to inform the needs assessment. Formal assessments most often include Comprehensive Child and Family Assessments (CCFA), mental health, substance abuse, domestic violence, and parental fitness assessments. Although missed visits with parents did contribute to these findings, the majority of cases failed to demonstrate adequate discussion with parents regarding allegations, additional issues of the case, permanency planning, service provision, and behavioral change necessary to adequately assess needs. For parents, a variety of services were not provided (substance abuse treatment, domestic violence treatment, family therapy, parenting). Some service array issues are noted when families access referred services and staff turnover within that provider agency creates waiting lists for therapists. Additionally, one region noted a significant barrier is that their largest provider which services the entire region has a reputation for dropping clients without notification and is often difficult to contact for explanations and progress updates. Division leadership is working with the region on this issue.

QA Review Team findings demonstrate that staff are not always engaging absent parents, step-parents, paramours, or biological parents in assessing needs and providing services. Regions have developed documentation guides to support staff in conducting a comprehensive assessment and provides reminders to address any current service

provision within a case. Additional efforts are being made to hold staff accountable in utilizing the guide and following up on these areas.

Lack of quality contacts and assessment of fathers is the primary reason for low scores in this item. QA reviews consistently find that staff are not meeting with or assessing fathers in cases. Contacts are sporadic with mothers, but even when contacts are being made, full assessment of the mother's needs and appropriate implementation and follow up on services is not consistent. The Division will continue to explore the root causes for this observed performance during FY2023.

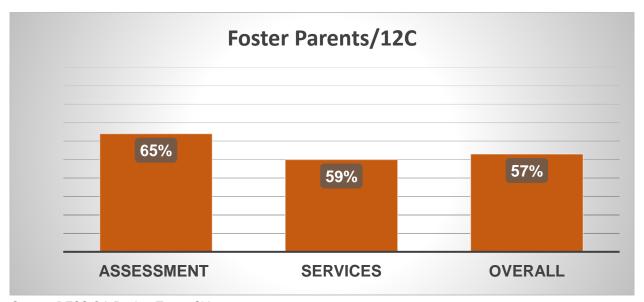


Source: DFCS QA Review Team, CY2021

#### Item 12C: Needs Assessment and Services to Foster Parents

With the assistance of the Caregiver Recruitment and Retention Unit (CRRU) and Child Placing Agencies (CPA), the needs of Foster Parents are regularly assessed and met across the region. The needs of foster parents are addressed by the regional CRRU team members at each re-evaluation (during home visits and contacts prior to home visits). CRRU team members are accessible to their foster parents around the clock via cell phone, email, or text. When an issue arises, the CRRU team member responds to the foster parent and then starts reaching out to placement case managers, supervisors, county directors, or other agency or community resources to try to assist the foster parents. The CRRU teams have a strong working relationship with the caregivers in their region and often act as a liaison between the foster parents and other agency staff. Regions also holds a monthly Foster Parent Call where updates and training are provided

to participants, and an opportunity to express any concerns or ask questions is available to foster parents at the end of the call. Feedback provided by foster parents following the calls has been positive. The PAUSE process creates an additional opportunity to address foster parent needs as it relates to specific youth when the placement is at risk. The team can identify and implement additional services to stabilize the placement and support the foster parent. This work is ongoing.



Source: DFCS QA Review Team, CY2021

**Item 13:** Did the agency make concerted efforts to involve the parents and children (if developmentally appropriate) in the case planning process on an ongoing basis?

Georgia finds this item to be an *Area Needing Improvement*. Issues identified as impacting this item include a failure to consistently engage families in case planning, a lack of evidence of family input into the written case plan, a lack of regular contact with case participants, and failure to engage in quality discussions that allow the opportunity to discuss family strengths and needs, as well as evaluate case plan progress. The most recent review found that the agency performed significantly better with regards to case planning activities with children and mothers, than with fathers. QA Review Team findings of 300 cases reviewed throughout CY2021 demonstrate that the agency made concerted efforts to actively involve the child(ren) in the case planning process in 70% of applicable cases reviewed, mothers in 62% of applicable cases reviewed, and fathers in 41% of applicable cases reviewed.

Agency leadership identified a systemic barrier to performance on this item as related to the methods of engaging parents in case planning, and the need for a more "coachingcentered" method, which allows for the parent to learn to make decisions in a facilitated conversation. The Division has continued to convene around this issue during FY22 to identify contributing factors and root causes, validate root causes with supporting data, and work toward identifying appropriate and feasible strategies to address them. This work is ongoing.

Regional leaders use case reviews and trainings to support staff in engaging families in the development of case plans, and to ensure that case plans are individualized and centered around the needs of the family. Input from the families is requested in the family team meetings (FTM). The birth parents are also asked to participate in the Comprehensive Family Assessment to provide input on their family's needs. The use of interpreters is provided as needed to ensure the family is being engaged and provided with accurate information.

Staff will continue to involve the child and family in the creation of initial and ongoing case planning, improve documentation of efforts, invite parents to the initial and 30 Day FTM, invite parents and children, if age appropriate, to the 6-month case consultation and update the case plan at that time, and conduct monthly case reviews to ensure signed case plans are uploaded in Georgia SHINES. Communication with regional leadership will be ongoing throughout FY2023 to determine if these strategies will have a positive impact on outcomes.

**Item 14:** Were the frequency and quality of visits between caseworkers and child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

Georgia finds this item to be an *Area Needing Improvement*. QA reviews continue to identify several issues, including gaps in contact between the response time and follow-up for the initial assessments; not increasing the frequency of visits with children when deemed necessary based on the case circumstances (e.g. when there were unresolved risk/safety concerns, unstable foster care placements, etc.); lack of regular contact with children in their home/placement settings (as well as insufficient assessment and observations of home setting through virtual means amid the COVID-19 pandemic); and "friendly" discussions with children that did not encompass the reason(s) for agency involvement, general family functioning, safety plan provisions, and the effectiveness of services in place. QA findings in Region 3 noted issues relating to frequency tended to take place after case transfer from one program to another or during a change of case manager due to frequent staff turnover. The frequency issue was typically no more than one missed contact during the PUR in reviewed cases. Quality of visits were affected when staff struggled in documenting true engagement with the children around interaction with other household members, visitation with parents and engagement and progress

with service providers. It is also somewhat frequent that identified service needs for children are not referred timely mainly with respect to counseling services. There was also a noted lack of quality collateral contacts regarding the children which would have been needed to direct conversations with the child about case plan progress. While staff have training during onboarding processes, there is not sufficient coverage within the counties for portions of staff to attend continuing education trainings quarterly to enhance and refocus child engagement skills. Case staffings with supervisors are an opportunity to provide mentoring and coaching around engagement.

Agency leadership identified a systemic barrier related to training of case managers and unclear definitions and expectations for "quality visits". The Division has continued to convene around this issue throughout FY22 to identify contributing factors and root causes, validate root causes with supporting data, and work toward identifying appropriate and feasible strategies to address them. This work is ongoing.

Regions are increasing live-learning and case review feedback discussions throughout FY22 to discuss specific case concerns with front line staff, and scheduling discussions in Case Manager/Supervisor Summits and Lunch & Learns. Feedback from frontline staff indicate they appreciate the one-on-one feedback and ability to get clarity about questions they have. CQI is reviewing cases to assess if the case manager had monthly private conversation with the child (either face to face or virtually) to discuss any safety concerns, case planning and goals, services that are needed, behaviors or any mental health issues, and home environment. Through these reviews, CQI is ensuring that a meaningful conversation was had and documented and then providing their feedback to the supervisor and case manager assigned to the case.

Field Program Specialists (FPS) are reading case documentation to identify strengths and concerns on caseworker visits with children. Case managers are receiving FPS feedback on quality visits during monthly case reviews and workshops. The COVID-19 pandemic has created some barriers to conducting face to face visits, but alternatives like virtual visits have allowed staff to have more frequent contacts with children. Some families have expressed a preference for video contact, as it is not so intrusive, and they are more willing to talk about progress or barriers. Regions continue to work on improving visits and ensuring services are in place by providing trainings and staff huddles on policy and documentation. Communication with regional leadership will be ongoing throughout FY2023 to determine if these strategies will have a positive impact on outcomes.

**Item 15:** Were the frequency and quality of visits between caseworkers and the mothers and fathers of the child(ren) sufficient to ensure the safety, permanency, and well-being of the child(ren) and promote achievement of case goals?

Georgia finds this item to be an *Area Needing Improvement*. Issues identified for this item include gaps in contacts with parents between the initial response time and follow-up visits as well as when cases transferred from one program to another; not increasing the

frequency of visits with parents when deemed necessary based on the case circumstances; and lack of engagement with live-in paramours and stepparents. Strengths related to this item include observations of the family's interactions and private discussions with the parents that were relevant to the reasons for agency involvement.

Frequency of visits can be a challenge when parents are not able to be located. Several counties report that some parents will refuse to make themselves available, change their residency, or otherwise "hide" from the agency. Staff are having to visit multiple homes and neighborhoods, sometimes in unsafe areas, in order to locate parents who do not want to be contacted. Staff continue to attempt contact via phone, letter, virtual unannounced and announced visits, and in-person visits. For staff with high caseloads, this level of effort creates a challenge to completing more than one parental contact each month.

REGION 11 CQI Team implemented a series of Boot Camps for Supervisors to help increase their skills in Coaching and Mentoring, with a specific focus placed on guiding Case Managers to make more purposeful visits with parents and children and to help them improve their ability to document contacts. The Boot Camps were received with positive feedback, and the CQI Team is completing Targeted Reviews to determine if the intervention has helped to improve the Supervisor's ability to guide Case Managers in this area.

Agency leadership identified systemic barriers related to unclear definitions and expectations for "quality visits", and a cumbersome workstream that leads to compliance-driven work rather than curiosity and critical thinking. The Division has continued to convene around this issue during FY22 to identify contributing factors and root causes, validate root causes with supporting data, and work toward identifying appropriate and feasible strategies to address them.

Regional CQI teams are targeting this item and developing tools such as quality visit and documentation guides, as well as focusing on strengthening the capacity of supervisors. County Directors and Administrators are also observing supervisor staffings to ensure improvement and assist with any observed challenges related to parent engagement. Regional CQI teams have developed resources for staff to evaluate parent contact standards, with an emphasis on diligent efforts and increased quality of engagement. Regional CQI teams use cadence discussions, supervisor development discussions, summits, CQI meetings, and county staff meetings to share tools and resources, discuss best practices, and complete case reviews to strengthen outcomes.

### **Well-Being Outcome 1 Data Analysis**

The provided QA Review findings demonstrate that Georgia has rated between 12-20% for Well-Being Outcome 1 in CY2021. In the Round 3 CFSR Final Report, Georgia was not in substantial conformity with Well-Being Outcome 1. In Round 3, Georgia received an overall rating of *Area Needing Improvement* for Item 12 because 25% of the 142 applicable cases were rated as a Strength. Georgia received an overall rating of *Area Needing Improvement* for Item 13 because 42% of the 137 applicable cases were rated as a Strength. Georgia received an overall rating of *Area Needing Improvement* for Item 14 because 59% of the 150 cases were rated as a Strength. Georgia received an overall rating of *Area Needing Improvement* for Item 15 because 31% of the 132 applicable cases were rated as a Strength.

As noted in the table below, Permanency cases throughout the CY2021 QA reviews continued to outperform Family Preservation cases related to assessing the needs of children and providing services to meet identified needs. The Division will continue to explore the root causes for this observed performance during FY2023.

### **Program Comparisons: Well-Being Outcome 1**

|                 | Permanency               | Family Preservation      | Overall |
|-----------------|--------------------------|--------------------------|---------|
|                 | 15 cases                 | 10 cases                 | Rating  |
| Oct-Dec 2021    | 20% (9 out of 45 cases)  | 10% (3 out of 30 cases)  | 16%     |
| Item 12         | 20% (9 out of 45 cases)  | 13% (4 out of 30 cases)  | 17%     |
| Item 12A        | 71% (32 out of 45 cases) | 37% (11 out of 30 cases) | 57%     |
| Item 12B        | 8% (3 out of 36 cases)   | 13% (4 out of 30 cases)  | 11%     |
| Item 13         | 52% (22 out of 42 cases) | 33% (10 out of 30 cases) | 44%     |
| Item 14         | 73% (33 out of 45 cases) | 30% (9 out of 30 cases)  | 56%     |
| Item 15         | 15% (5 out of 34 cases)  | 23% (7 out of 30 cases)  | 19%     |
| July-Sept 2021  | 29% (13 out of 45 cases) | 7% (2 out of 30 cases)   | 20%     |
| Item 12         | 29% (13 out of 45 cases) | 7% (2 out of 30 cases)   | 20%     |
| Item 12A        | 64% (29 out of 45 cases) | 37% (11 out of 30 cases) | 53%     |
| Item 12B        | 26% (8 out of 31 cases)  | 13% (4 out of 30 cases)  | 20%     |
| Item 13         | 63% (25 out of 40 cases) | 37% (11 out of 30 cases) | 51%     |
| Item 14         | 64% (29 out of 45 cases) | 30% (9 out of 30 cases)  | 51%     |
| Item 15         | 16% (5 out of 31 cases)  | 20% (6 out of 30 cases)  | 18%     |
| April-June 2021 | 13% (6 out of 45 cases)  | 10% (3 out of 30 cases)  | 12%     |
| Item 12         | 13% (6 out of 45 cases)  | 10% (3 out of 30 cases)  | 12%     |
| Item 12A        | 56% (25 out of 45 cases) | 43% (13 out of 30 cases) | 51%     |
| Item 12B        | 11% (4 out of 36 cases)  | 17% (5 out of 30 cases)  | 14%     |
| Item 13         | 46% (19 out of 41 cases) | 47% (14 out of 30 cases) | 46%     |

| Item 14        | 67% (30 out of 45 cases) | 53% (16 out of 30 cases) | 61% |
|----------------|--------------------------|--------------------------|-----|
| Jan-March 2021 | 20% (9 out of 45 cases)  | 10% (3 out of 30 cases)  | 16% |
| Item 12        | 20% (9 out of 45 cases)  | 10% (3 out of 30 cases)  | 16% |
| Item 12A       | 60% (27 out of 45 cases) | 43% (13 out of 30 cases) | 53% |
| Item 12B       | 20% (7 out of 35 cases)  | 17% (5 out of 30 cases)  | 18% |
| Item 13        | 55% (23 out of 42 cases) | 27% (8 out of 30 cases)  | 43% |
| Item 14        | 67% (30 out of 45 cases) | 40% (12 out of 30 cases) | 56% |
| Item 15        | 32% (11 out of 34 cases) | 13% (4 out of 30 cases)  | 23% |

Source: DFCS QA Review Data

As reflected in the scores for Item 2, the Division struggled to provide timely services to address identified safety concerns in the majority of applicable cases reviewed. Due to the lack of adequate safety assessment, needed safety services were either delayed or not provided. The Division is exploring these findings further to identify opportunities for improvement. This work is ongoing.

**Well-Being Outcome 1** 

|                   | Metro | North | South | State |
|-------------------|-------|-------|-------|-------|
| Oct-Dec 2021      | 20%   | 20%   | 8%    | 16%   |
| Item 12           | 20%   | 24%   | 8%    | 17%   |
| Item 12A          | 52%   | 76%   | 44%   | 57%   |
| Item 12B          | 13%   | 18%   | 0%    | 11%   |
| Item 12C          | 67%   | 67%   | 62%   | 65%   |
| Item 13           | 42%   | 58%   | 33%   | 44%   |
| Item 14           | 44%   | 64%   | 60%   | 56%   |
| Item 15           | 18%   | 32%   | 5%    | 19%   |
| July - Sept 2021  | 20%   | 28%   | 12%   | 20%   |
| Item 12           | 24%   | 28%   | 12%   | 21%   |
| Item 12A          | 60%   | 60%   | 40%   | 53%   |
| Item 12B          | 20%   | 20%   | 19%   | 20%   |
| Item 12C          | 47%   | 69%   | 57%   | 57%   |
| Item 13           | 54%   | 61%   | 39%   | 51%   |
| Item 14           | 48%   | 56%   | 48%   | 51%   |
| Item 15           | 20%   | 25%   | 10%   | 18%   |
| April – June 2021 | 12%   | 8%    | 16%   | 12%   |
| Item 12           | 12%   | 8%    | 16%   | 12%   |
| Item 12A          | 36%   | 56%   | 60%   | 51%   |
| Item 12B          | 25%   | 8%    | 9%    | 14%   |
| Item 12C          | 43%   | 43%   | 67%   | 50%   |
| Item 13           | 54%   | 25%   | 61%   | 46%   |
| Item 14           | 68%   | 52%   | 64%   | 61%   |
| Item 15           | 25%   | 17%   | 25%   | 22%   |
| Jan-March 2021    | 8%    | 24%   | 16%   | 16%   |
| Item 12           | 8%    | 24%   | 16%   | 16%   |
| Item 12A          | 44%   | 60%   | 56%   | 53%   |

| Item 12B | 5%  | 27% | 22% | 18% |
|----------|-----|-----|-----|-----|
| Item 12C | 57% | 64% | 50% | 57% |
| Item 13  | 38% | 52% | 40% | 43% |
| Item 14  | 48% | 64% | 56% | 56% |
| Item 15  | 15% | 29% | 26% | 23% |

Source: DFCS QA Review Data

| Comparison Chart: Calendar Year 2021 45 Foster Care / 30 Family Preservation                   |                     |                      |                       |                 |  |
|--|---------------------|----------------------|-----------------------|-----------------|--|
| Well-Being   | Jan-<br>Mar<br>2021 | Apr-<br>June<br>2021 | July-<br>Sept<br>2021 | Oct-Dec<br>2021 |  |
| Outcome WB2: Children receive appropriate services to meet their educational needs             | 57%                 | 63%                  | 61%                   | 53%             |  |
| Item 16: Educational needs of the child  | 57%                 | 63%                  | 61%                   | 53%             |  |
| Outcome WB3: Children receive adequate services to meet their physical and mental health needs | 33%                 | 32%                  | 24%                   | 31%             |  |
| Item 17: Physical health of the child  | 56%                 | 51%                  | 46%                   | 54%             |  |
| Item 18: Mental/Behavioral health of the child   | 23%                 | 17%                  | 21%                   | 22%             |  |

Source: DFCS QA Review Data

# Well-Being Outcome 2: Children receive appropriate services to meet their educational needs

**Item 16:** Did the agency make concerted efforts to assess children's educational needs, and appropriately address identified needs in case planning and case management activities?

Georgia finds this item to be an *Area Needing Improvement*. In addition to the action steps identified in the 2020-2024 CFSP [Strategic Priority II: Practice Standards, Objective VI: Increase the Division's ability to support youth who need additional educational assistance and Strategic Priority III: Service Array, Objective II: Target 0-5 early childhood

education] to develop staff competencies around educational services for youth, the Division identified a need for more intentional efforts from staff to complete Education Detail information and upload educational information into Georgia SHINES, and to more quickly involve the Education Support Monitors (ESM) in high priority cases. The Division is reviewing opportunities to engage ESMs in case management earlier, and is continuing to conduct root cause exploration to determine the "Why" behind the data.

The regions have a strong relationship with the ESM who are very involved in working with the counties to ensure children have education assessments and interventions in place. The regions invite educational representatives to the quarterly regional stakeholder meetings to share information, and several regions held education summits in CY2021. Several regional resource developers are working with county and school leadership along with the ESMs to prioritize foster children for school-based mentoring programs. Non-metro regions report limited early childhood education services for children under the age of five, but the Division is coordinating with partners through State of Hope, the Prevention and Community Support Section, and EPAC to address these gaps in service availability. Additional early childhood education supports are available through the Department of Early Care and Learning (DECAL). Communication with regional leadership will be ongoing to determine if these strategies will have a positive impact on outcomes.

The Division's Afterschool Care Program held a stakeholder listening session in April 2022 to better understand the experiences of afterschool program providers. These providers were invited to share their thoughts and recommendations to improve the provider funding process, and how DFCS can continue to support them in the future. Based on feedback provided, Division staff will explore improvements to the funding process in the future, so that more afterschool care providers can request and receive funding to support youth. The Well-Being Section schedules multiple stakeholder engagement meetings throughout the year, to ensure service providers are able to share feedback on the Division's efforts to engage communities and serve children and families. The Well-Being Section also distributes the Education Connection Newsletter, which provides quarterly updates to staff and stakeholders on the Educational Programming, Assessment and Consultation (EPAC) Unit. EPAC exists to ensure the educational wellbeing of school-aged youth in foster care. The Unit's overall goal is to improve the academic success of youth by minimizing school disruptions and increasing promotion and graduation rates. The unit consists of Education Support Monitors who provide consultation and training on the educational rights and legal protections for youth in care.

<u>Senate Bill 107 (2021)</u> enacted a new Code Section 20-3-660 to support postsecondary education with tuition waivers for youth who meet the criteria of "age 13 or older at placement; and/or currently in DFCS care permanently or currently receiving adoption assistance". The Division's post-adoption Social Services Administration Unit (SSAU) can

share this resource along with adoption assistance payments to impact adoptive youth and families who may not have the ability or plan to pay for college education. There are several collaborative partner agencies in Georgia, such as the Multi-Agency Alliance for Children (MAAC), to support youth in graduating with a high school diploma or GED.

# Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs

#### Item 17: Did the agency address the **physical and dental health needs** of children?

Georgia finds this item to be an *Area Needing Improvement*. Quarterly surveys to staff that participated in physician consultations and medication management staffings were initiated in FY21 by the Well-Being Programming Assessment and Consultation (WPAC) Unit and have continued through FY22. Staff report being very satisfied with the overall process, found the process to be very helpful, and received the staffing recommendations within two business days. WPAC continues to upload the results of the consultations and

staffings into Georgia SHINES for each case. As a result of the feedback, the DHS Medical Director Dr. Patel is contacting each region to offer resources and services to staff. These WPAC activities are also noted in Georgia's Health Care Coordination and Oversight Plan. Communication with regional leadership will be ongoing throughout FY2023 to assess impact on outcomes.

The counties schedule monthly staffings with AmeriGroup, and work diligently to obtain information on EPSDT and dental information to enter in Georgia SHINES. The Field Program Specialists (FPS) also support staff through monthly case consultations to help staff identify missing information and health services. WPAC Health Data Days are also scheduled in the counties to monitor health logs and ensure timely health services are provided. Each "Conditions for

REGION 6 holds a bi-weekly cadence call with permanency supervisors to monitor overdue health checks within the region. The region's WPAC specialist participates in these calls and works closely to monitor the data and complete "data days", assisting supervisors and case managers in ensuring children's physical and dental needs are met. As a result of these several children activities. identified who had delayed dental care due to Covid-related issues with scheduling appointments. The region coordinated with Amerigroup to schedule a mobile dental bus in October 2021 and provided dental services to 22 children in the region who were behind in this service.

Return" call, PRE Team staffing, and PAUSE call also includes discussion of mental health and physical health needs of children, including submission of referrals and completion of service authorizations, and follow-ups with service providers. The Treatment FPS and Care Coordination Treatment Unit (CCTU) are invited as necessary, to help identify resources to prevent unnecessary removal to foster care.

Certain areas of the state have provider shortages, particularly pediatric dental providers, which often causes a delay in receiving services timely. Although the Division continues to create more opportunities for staff to engage and receive supports in this area, there are ongoing challenges related to available and accessible health service providers. This work is ongoing.

## Item 18: Did the agency address the mental/behavioral health needs of children?

Georgia finds this item to be an *Area Needing Improvement*. QA Review Team findings demonstrate issues related to performance of this item that include a lack of adherence to agency psychotropic medication protocol and failure to recommend formal assessments for identified mental/behavioral health issues. The Division continues to support staff on this item with trainings provided by the Well-Being Programming Assessment and Consultation (WPAC) Unit, as well as quarterly reports to the regions that include a case review component. DHS Medical Director Dr. Patel serves as a strong training and consultation resource for staff to address needs of youth, especially those youth who are on multiple medications for behavioral health. Dr. Patel provided trainings in FY21, which were well-received by staff. These trainings were continued in FY22. In addition, the Division has increased collaboration with the Managed Care Provider Amerigroup in this section, including monthly calls with their executive leadership, monthly feedback in writing with any concerns around service provision from the field, increase in monitoring of denials for any behavioral health services, and legal support throughout the appeals process for field staff.

Many areas of the state are experiencing provider shortages, particularly in mental health care for youth. In many rural areas, there are challenges with providing services for youth who are developmentally delayed or autistic. Staff are noticing a lack of progress in some cases related to the poor quality of services or long wait times to access available services. Staff are routinely engaging on youth mental health needs, and some regions have case managers with specialized skills in high level needs and services for youth, but fewer supports are creating barriers to achieving the desired outcomes. Virtual care has been utilized heavily due to COVID-19, but a noted effect is lower quality and accountability of services in some areas. Not all youth are able to engage fully using the virtual platforms. Staff promote collaboration by having monthly discussions with caretakers or CPAs/CCIs to ensure the youth's appointments are scheduled and attended. The Division continues to explore opportunities to improve in this area.

#### **CFSR Systemic Factors**

**Item 19:** How well is the statewide information system functioning statewide to ensure that, at a minimum, the state can readily identify the status, demographic characteristics, location, and goals for the placement of every child who is (or within the immediately preceding 12 months, has been) in foster care?

Georgia finds this item to be a *Strength*. The State's data and information system (Georgia SHINES) offers the ability to record important demographic information for all children/families, foster care placements, and permanency goals for children in care. The status and demographic characteristics are tracked on the Person Detail page. The Placement page tracks the location of the child. Goals are listed on the Case Plans page. There are several reports that are generated in Georgia SHINES and LENSES that will track this information.

Regions have Performance Management Field Program Specialists (FPS) to review the reports and monitor the accuracy and completeness of this information. The Quality Management Data Unit provides a Quality Report to the Data Integrity Specialists (DIS) each month that identifies any missing data. The DIS staff in each region follow up on those cases with missing data and work to get the data completeness to 100% at a point in time each month. DIS provide training to staff in each region on how to enter demographics, placements and case plans correctly. During the training, DIS review timeliness and documentation requirements. Where there is high staff turnover, the DIS hold more frequent trainings. Data quality can also be assessed by the Regional Accounting Offices during monthly billing because inaccurate information in Georgia SHINES prohibits payments to providers. In those instances when errors are identified, accounting staff will contact the case manager and/or supervisor to correct the data.

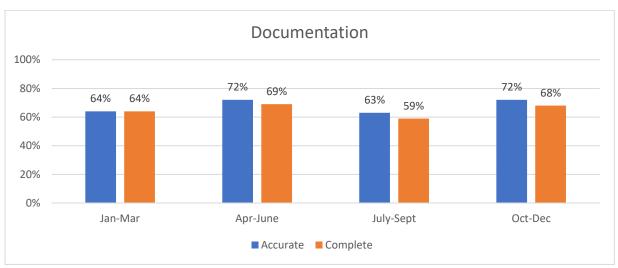
The below table demonstrates data accuracy and completeness from April 2021 through April 2022. (100% - (# Data Present / Total # Applicable Children))

|        | Demographics | Person Characteristics | Legal Status | Placements |
|--------|--------------|------------------------|--------------|------------|
| Apr-21 | 99.98%       | 99.64%                 | 98.54%       | 98.26%     |
| May-21 | 99.86%       | 97.75%                 | 99.55%       | 98.27%     |
| Jun-21 | 99.91%       | 98.25%                 | 99.73%       | 97.75%     |
| Jul-21 | 99.92%       | 99.29%                 | 99.69%       | 98.14%     |
| Aug-21 | 99.92%       | 99.26%                 | 99.66%       | 97.95%     |
| Sep-21 | 99.97%       | 99.17%                 | 99.62%       | 98.35%     |
| Oct-21 | 99.93%       | 98.68%                 | 99.75%       | 98.07%     |
| Nov-21 | 99.85%       | 99.43%                 | 99.71%       | 98.29%     |

| Dec-21 | 99.89% | 98.60% | 99.74% | 98.40% |
|--------|--------|--------|--------|--------|
| Jan-22 | 99.90% | 99.24% | 99.84% | 98.16% |
| Feb-22 | 99.93% | 99.28% | 99.86% | 98.59% |
| Mar-22 | 99.93% | 98.71% | 99.67% | 98.20% |
| Apr-22 | 99.88% | 98.68% | 99.78% | 98.47% |

SOURCE: Georgia DFCS Data Unit

The Quality Assurance (QA) Review Team tracks the accuracy and completion of documentation/relevant case information that is entered into Georgia SHINES through ongoing quality assurance/CFSR reviews. Documentation in the cases reviewed has generally provided adequate information to reflect case actions. Most often, demographic information for children in care is thoroughly and accurately entered, as well as locations/placements, and permanency goals for children in foster care. There were common elements missing in documentation across the State, such as consistent documentation of all efforts to locate parents, efforts to overcome legal/judicial barriers in permanency cases, as well as observations of the home environment and child-caretaker interactions. The below chart depicts the accuracy and completeness of Georgia SHINES documentation for the cases reviewed by the QA team in 2021.



\*SOURCE: DFCS Quality Assurance Review Team

**NOTE:** 75 cases were reviewed statewide for each reporting period. "Accurate" refers to whether information was entered into SHINES correctly. "Complete" refers to whether there were any "gaps" in case documentation (i.e., were all relevant case actions documented, and was the information gathered through QA interviews consistent with what was documented in the case record).

The CCWIS Data Quality Governance Board meets bi-monthly to review the state's Data Quality Plan (DQP) and identify solutions to known CCWIS compliance issues. The Board discusses each of the CCWIS project requirements under CFR §1355.52 to determine

how the state is complying and if there are areas for improvement. This Board was initiated in 2019 and is ongoing.

Applicable child welfare policies include expectations that the timeframe of data updates into Georgia SHINES shall occur within 72 hours of occurrence. Administration Policy provisions define child welfare program requirements, procedures, and practices in accordance with federal and state laws as well as guide child welfare staff in the provision of effective child welfare services. Staff are provided with notification of new and updated policies electronically and require staff to review child welfare policies within 30 calendar days of the issuance and/or release to promote consistency in knowledge and application.

#### **Case Review System**

**Item 20:** How well is the case review system functioning statewide to ensure that each child has a written case plan that is developed jointly with the child's parent(s) and includes the required provisions?

Georgia finds this item to be a *Strength*. Georgia meets this data element on the AFCARS report. The Division has child welfare policy and practice guidance on processes to engage parents in the case planning process. Child welfare policy on foster care case planning outlines the process for developing written case plans for children in foster care by engaging the parents/guardians during the family team meetings to participate in the development of their child's written case plans. Child welfare policy on family team meetings detail requirements of family team meetings to include guidance on selecting who will attend, and how to conduct effective family team meetings.

Most children in foster care have a written case plan. The DFCS Data Unit reviewed case records in Georgia SHINES and found that, of the 15,168 children who were in custody over 30 days during the period April 2021 – March 2022, 67% had an approved case plan. There are a few regions that have struggled with getting case plans entered and keeping them current. There is also a barrier when parties are non-compliant and do not actively participate. To support this work, there are reports in Georgia SHINES and LENSES that track the completion of case plans and alert staff that attention is needed. Each case will have a "red" case watch error showing when a case is past due. Training is conducted by Data Integrity Specialists (DIS) on how to enter case plans and the time periods. Oversight is provided at both the county and regional level. Supervisors are discussing the need for outstanding case plan/case plan goals during monthly staffings and the regional FPS team pulls weekly data on outstanding case plans to ensure the counties are aware of case plans needing to be completed. Regions have seen a significant decrease in outstanding case plan completion due to these tracking and monitoring efforts.

The Division's QA team evaluates the engagement of children and parents in the case planning process through CFSR Item 13. For this item, there is an expectation for families to be "actively" involved in case planning regardless of whether a written case plan is present in the case file. "Actively involved" means that the agency involved the mother or father in (1) identifying strengths and needs, (2) identifying services and service providers, (3) establishing goals in case plans, (4) evaluating progress toward goals, and (5) discussing the case plan. "Actively involved" children means that the agency consulted with the child (as developmentally appropriate) regarding the child's goals and services, explained the plan and terms used in the plan in language that the child can understand, and included the child in periodic case planning meetings, particularly if any changes are being considered in the plan. In the majority of Foster Care cases reviewed by the QA Review Team between July and December 2021, written case plans were present in records. The QA reviews found that "child and family involvement in case planning" was noted in 51% of FC cases reviewed July-September 2021, and 44% of FC cases reviewed October-December 2021. There were 1,933 Family Team Meetings conducted with parental involvement.

**Item 21:** How well is the case review system functioning statewide to ensure that a periodic review for each child occurs no less frequently than once every 6 months, either by a court or by administrative review?

Georgia finds this item to be a *Strength*. Georgia law (O.C.G.A. §15-11-102) requires an initial periodic review hearing to be held within 75 days following a child's removal from his or her home. An additional periodic review shall be held within four months following such initial review. Child welfare policies on the juvenile court process, case reviews, and permanency hearings provide the requirements for periodic reviews to align with state and federal laws. Data from Georgia SHINES demonstrate that from April 2021 to March 2022, 75% of periodic reviews were completed on time (analysis on 12,794 children who had been in custody for at least six months). This is an observed decrease from the previous year (April 2020 to March 2021), when 84% of children received a timely periodic review; however, because of the federal reporting "3-month grace period" in data entry, this measure may increase by July 2022.

Georgia has met this data element in the AFCARS reviews, however, of the 11 AFCARS data elements flagged for DIS correction each month, this item has the highest error rate. DIS provides ongoing training on this data element. This data element is also monitored through Georgia SHINES and LENSES reports. There are some regions that struggle more than others with periodic reviews. When courts were closed because of COVID-19 restrictions to in-person gatherings, regions had difficulty in scheduling timely hearings. There are a few that are still struggling to get back on track with their courts. Division

leadership is working with Field Program Specialists (FPS), the Court Improvement Program (CIP) and the Office of the State Attorney General to address this backlog.

**Item 22:** How well is the case review system functioning statewide to ensure that, for each child, a permanency hearing in a qualified court or administrative body occurs no later than 12 months from the date the child entered foster care and no less frequently than every 12 months thereafter?

Georgia finds this item to be a Strength. Georgia law (O.C.G.A. §15-11-102) requires a permanency plan hearing to be held within nine months of the date the child is considered to have entered foster care for children under seven years of age at the time the dependency petition is filed (and any siblings that enter care at the same time). A permanency plan hearing must be held no later than 12 months after a child seven years of age or older is considered to have entered foster care, unless a sibling group enters care at the same time and at least one member of the group is under seven years of age at the time the dependency petition is filed, then the permanency plan hearing for the entire sibling group shall be held no later than nine months after the children are considered to have entered foster care. Subsequent permanency plan hearings shall be held at least every six months after the initial permanency plan hearing or more frequently as deemed necessary by the court. Child welfare policies on the juvenile court process, case reviews, and permanency hearings provide the requirements for periodic reviews to align with state and federal laws. Data from Georgia SHINES demonstrate that 67% of permanency hearings were completed within 12 months (analysis on 10,254 cases from April 2021-March 2022).

Permanency hearings are monitored by the Data Integrity Specialists (DIS) using reports from Georgia SHINES and LENSES. DIS also monitor permanency hearings through the AFCARS reports. While judicial districts may vary in their practice, dates for the permanency hearings are generally set at the adjudication hearing, so they are on the court's calendar well in advance. The courts also track and set six-month review hearings, in which they discuss the permanency plan for the children in those hearings. The Special Assistant Attorneys General (SAAG) conduct routine and regular staffing with county staff to ensure staff and leadership remain aware of hearings. Metro regions have a designated court liaison to track the court calendars and distribute to staff on a weekly basis. When courts were closed because of COVID-19 restrictions to in-person gatherings, regions had difficulty in scheduling timely hearings. There are a few that are still struggling to get back on track with their courts. Division leadership is working with Field Program Specialists (FPS), the Court Improvement Program (CIP) and the Office of the State Attorney General to address this backlog.

**Item 23:** How well is the case review system functioning to ensure that the filing of termination of parental rights (TPR) proceedings occurs in accordance with required provisions?

Georgia finds this item to be an *Area Needing Improvement*. Child welfare policies on juvenile court process and termination of parental rights provide the requirements for termination of parental rights to align with state and federal laws. Georgia SHINES provides a report which indicates the children who have been in care for 15 of the most recent 22 months without a filed TPR or voluntary surrender. Another resource in Georgia SHINES is the Case Watch page, which is intended to offer visibility to case managers and supervisor regarding the status of a case. The Case Watch page includes Case Errors (events overdue) and Case Warnings (events coming due). These systems are in place to ensure that if TPR isn't filed by the 15th of the most recent 22 months of a child's stay in foster care, there must be documentation to support a compelling reason.

The QA team evaluates the timeliness of filing for TPR in applicable cases reviewed as a component of CFSR Item 5. Between July and December 2021, there were 53 cases reviewed in which the filing of TPR was relevant based on the case circumstances (15/22 months in care). TPR was filed timely in 47% of the cases reviewed (25 of the 53 applicable cases). Untimely submission of TPR packets was often a reason for delay. Supervisory staffings related to the need to complete TPR packets and file for TPR were often repeated for extended periods with no progress. Compelling reasons for not filing for TPR according to ASFA standards were at times not documented in the case record (however, specific data was not captured for this issue).

Data from Georgia SHINES show that there were 5,856 children who were in custody for 15 or more months of the 22-month period ending on March 31, 2022. Of those, 1,468 (25.1%) had a completed TPR, and TPR had been initiated for an additional 736 children. Of the remaining 3,652 children with no initiated or completed TPR, 33% had a documented compelling reason. There continues to be challenges with staff identifying appropriate compelling reasons not to file for TPR. In addition, there are court delays due to staff inability to articulate evidence to support the TPR being granted. The agency has developed training to address the challenges around compelling reasons and concurrent planning. The PAUSE process as well as the PRE Team meetings are being utilized to build capacity to address these gaps. These meetings are also opportunities to provide continued guidance on conditions for return and permanency planning with a deliberate focus around returning children home safely and timely, while also considering other permanency options when reunification is no longer likely.

Regional Adoption Coordinators (RACs) are state office consultants, providing hands-on guidance and support for cases with an adoption goal. These cases are most often

identified through the state's CCWIS system (Georgia SHINES). Most of the RACs work on cases where parental rights have been terminated and the agency is trying to move them to permanency. For those without TPR, the RACs work with the county to pull their packets together and provide guidance on what is needed for the packets. The county staff will pull the packet together, change the goal to adoption, and support the TPR filing.

Several counties have noted that the primary barrier to timely filing has been with the SAAG (e.g., too few, too new, or insufficient administrative support). Division leadership is working with the County Directors and Administrators regularly to discuss any barriers, especially regarding filing of TPR. Metro regions are developing more consistent strategies to ensure that TPR packets are filed timely and in accordance with the federal guidelines. The county leadership and staff are working more closely with the court system to improve upon the timeliness of petitions filed and address current court processes that may serve as barriers to the timely filing of petitions. This work is ongoing and will be monitored throughout FY23.

**Item 24:** How well is the case review system functioning to ensure that foster parents, pre-adoptive parents, and relative caregivers of children in foster care are notified of, and have a right to be heard in, any review or hearing held with respect to the child?

Georgia finds this item to be an *Area Needing Improvement*. Child welfare policy on caregivers' right to be heard provides the state and federal requirements for notice of reviews or hearings. It also includes guidance for accurate documentation of caregivers' receipt of notice of court reviews, hearings, and of their right to be heard. Policy was updated to allow staff to email notification to caregivers if the caregiver has authorized that form of communication. Senate Bill 439 (2020) became effective January 1, 2021. It provides for enhanced notice to and improved participation of foster, pre-adoptive, and relative caregivers in certain court hearings. It also provides for the court's consideration of issues relevant to a child's placement, care, well-being, and permanency raised by such persons; and requires certain findings be made by the court, including whether the caregiver was provided notice of the hearing or review, including the method, and whether the caregiver expressed an interest in being heard at the hearing or review.

Many court hearings have been virtual since the onset of the COVID-19 pandemic, so courts will send a virtual meeting link which is immediately shared with the caretakers. Sometimes the link is emailed as far as a month in advance and the Case Manager or Supervisor will remind the caretaker a week in advance. In several regions, foster parents, pre-adoptive parents, and relative caregivers are provided written notice within 72 hours of the scheduled hearing. For many counties, the child's case worker or tech provides the written notice; however, in other counties, it is the SAAG who provides the written notice.

Additionally, the next court date is often announced in the hearing, so the attending foster parents/caregivers are immediately aware of the next court date.

Although notices to caregivers are being provided, there is no consistent statewide practice, so the Division is exploring opportunities with CIP to automate notices to caregivers through the Court Process Reporting System (CPRS). This work is ongoing.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found that 73% of foster parents rated the Division as "Good" or "Excellent" at effectively providing notification in a timely manner of upcoming court hearings, panel reviews, etc., and 75% of foster parents rated the Division as "Good" or "Excellent" in allowing their input and opinions during court hearings and case panels to be heard.

| Foster Parents   | Excellent | Good | Fair | Poor |
|--|-----------|------|------|------|
| Rate the agency's effectiveness in notifying you in a timely manner of upcoming court hearings, panel reviews, etc                       | 40%       | 33%  | 13%  | 14%  |
| How would you rate the effectiveness of the agency in allowing your input and opinions during court hearings and case panels to be heard | 41%       | 34%  | 16%  | 9%   |

## **Quality Assurance System**

Item 25: How well is the quality assurance system functioning statewide to ensure that it is (1) operating in the jurisdictions where the services included in the Child and Family Services Plan (CFSP) are provided, (2) has standards to evaluate the quality of services (including standards to ensure that children in foster care are provided quality services that protect their health and safety), (3) identifies strengths and needs of the service delivery system, (4) provides relevant reports, and (5) evaluates implemented program improvement measures?

Georgia finds this item to be a *Strength*. Georgia operates an identifiable quality assurance (QA) system that is in place in the counties/regions where the services included in the CFSP are provided and the system evaluates the quality of services, identifies the strengths and needs of the service delivery system, provides relevant reports, and evaluates implemented program improvement measures. The case review system utilized by the QA team is high-functioning and directly models the CFSR process,

in that cases are not only reviewed for compliance, but case specific interviews are conducted for each case to offer a thorough, comprehensive assessment of the state's true performance with regards to federal requirements related to work with families.

There have not been any areas of concern identified for the QA system. This area continues to be a strength for the Agency. The State has demonstrated substantial compliance with regards to how this system is utilized to evaluate performance related to CFSR Outcomes and Items. Beginning in January 2021 and continuing throughout this reporting period, Georgia adopted a modified "Pre-Round 4" CFSR review process that ensures continued fidelity to the CFSR tools while allowing for a more progressive approach to meeting the needs of the State. The modified review process established the following procedures:

- 3-month review cycles to conduct statewide reviews
- Cases to be reviewed must have recent history
- A six-month period under review for determining CFSR ratings is used (versus the twelve-month review period used in Round 3) to better inform Continuous Quality Improvement (CQI) opportunities and strategies.
- Districts are the geographical unit for monthly reviews instead of the six manufactured zones used in Round 3.

The primary goals of the Pre-Round 4 review process are to:

- Accurately determine the quality of Georgia's Child Welfare casework based upon Round 3 CFSR criteria in the months prior to Round 4. Outcomes from these reviews will serve to help guide initiatives that can address deficits while also building upon strengths.
- Ensure that the State embraces shared values related to quality. This includes viewing statewide outcomes as indicative of county or regional performance.

Stakeholder surveys are an added component to the review process and have been consistently conducted to evaluate the state's performance with regards to systemic factors. Both external and internal stakeholders (agency staff, foster parents, service providers, and legal representatives) are drawn from the participants of the case specific quality assurance interviews. For example, a service provider would be asked case specific questions about the family with whom they work. In addition, this same service provider would be interviewed as a stakeholder and asked questions related to their overall services, relationship and collaboration with all the DFCS agencies they work with, not just the agency for which they were being interviewed for case specific information.

The QA team has consistently yielded comprehensive evaluative data and trend reports that document conformity with standards that address safety, permanency, and well-being. Routine statewide reporting methods have included:

- The Trend Comparison Chart
- CFSR Trend Reports (for each District following each review, and quarterly statewide reports)
- Program Comparison Charts
- District/Regional Comparisons
- Stakeholder Survey Results
- Collateral Contact/Supervisory Staffing/Documentation Data

County level debriefs allow the opportunity for QA reviewers to provide one-on-one individualized feedback regarding review results at the field level. Directors were surveyed at the conclusion of each debrief session about the level of communication with them during the review process and were sked to provide feedback regarding ways that the QA team could improve their processes. The survey results were analyzed by the QA team each month. To date, County Director feedback related to the review process has been positive with no substantial recommendations for performance improvement noted.

CD Survey results from July -December 2021:

- 76 CDs were engaged in the debriefs
- 100% of CDs relayed that the process/feedback loops helped them to be able to identify practice strengths and needs
- 97% of CDs reported that the QA teams' communications with them was "extremely clear" or "very clear"

Each region continues to have a QA Specialist assigned to assist them with educational needs related to CFSR. Evaluation and implementation of program improvement measures are promoted through the state's Continuous Quality (CQI) Improvement team. Georgia CQI teams consist of fourteen regions and the Child Protective Services Intake Communications Center (CICC). The teams also have at least one regional facilitator who is responsible for leading their CQI team. In addition, all regional teams have an assigned State CQI specialist to guide the teams in the CQI process and a QA specialist to provide CFSR data at a state, regional and/or county level. Currently, Georgia has 12 active regional teams, one CICC team, and four county CQI teams (Candler, Emanuel, and, Muscogee, Richmond). Each team uses GA's CQI process which consists of 5 phases: Performance Analysis, Cause Analysis, Intervention Selection and Development, Implementation and Change Management, and Evaluation. CQI training is provided to individual teams on an as needed basis to ensure they understand the CQI's Performance Improvement Process.

The COVID-19 pandemic has not impeded the state's ability to ensure an operational quality review system. The only change in the review process has been a shift from primarily face to face quality assurance interviews to interviews conducted via virtual means beginning in March 2020. The QA team has been able to maintain continual engagement with a vast population of review participants. CQI meetings and attendance have also been more consistent during the pandemic, as meetings are more accessible and convenient in the virtual arena.

#### **Staff and Provider Training**

**Item 26:** How well is the staff and provider training system functioning statewide to ensure that initial training is provided to all staff who deliver services pursuant to the Child and Family Services Plan (CFSP) that includes the basic skills and knowledge required for their positions?

Georgia finds this item to be a Strength. The Division has been successful at ensuring that initial training is provided to 100% of staff. Regional Mentoring & Staff Development Field Program Specialists (FPS) work in partnership with the Training and Professional Development Unit to ensure initial and ongoing trainings are provided to staff. They participate in the certification process and work to identify specific trainings needed within their regions. Feedback from staff indicate that the virtual learning environment is convenient but does not offer opportunities for engagement in the same in-person training. as effectiveness and usefulness surveys are more difficult to conduct in the virtual training space. classes are in-person, participant feedback is provided nearly 100% of the time.

The Division is not able to accurately provide data reporting on the new staff who completed initial training prior to receiving a caseload, but in

CIP PARTNERSHIP In November 2021, the Court **Improvement** Program began funding a legal training for newer workers to help prepare them to provide quality testimony at court hearings. Titled "Raising the Bar: Navigating the Legal System", the training uses a variety of activities, interactions, and discussion boards, so participants can engage with legal professionals experienced trainers to develop critical skills. Participants then apply these skills during a mock trial and receive feedback. **Participants** routinely report feeling more prepared and confident in their court skills after completing the training.

feedback from regional leadership on this item, there are some noted positive benefits to receiving a case assignment during the training process. New case managers who are assigned cases due to county staff shortages articulate the benefit of practicing what they are learning in real time. There are other areas noted in feedback from staff that the

knowledge gains in training do not include skill development in time management, court proceedings, and navigating the case review system (Georgia SHINES). Regions rely on the staff development FPS, small group training with the Data Integrity Specialists (DIS), and supervisor mentoring to provide instruction and guidance on these areas when identified as a need.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. Of the 500 DFCS staff surveyed, 53% of case managers and 50% of supervisors rated the Division as "Good" or "Excellent" at effectively providing initial training and preparedness for the new case manager job responsibilities.

The Office of Provider Management (OPM) provides Room, Board, and Watchful Oversight (RBWO) Foundations, a 160-hour RBWO new-hire training course which supports the development of knowledge and skills of RBWO staff who serve in case support and supervisory positions within their RBWO agencies. Foundations addresses child welfare career preparatory areas that build general knowledge regarding child welfare practices and policy in DFCS, RBWO standards and working in partnership with DFCS case managers. The overall objective of Foundations is to provide RBWO staff with information to help them be successful in their RBWO roles which includes working within the DFCS practice model, understanding DFCS policies, RBWO standards and working in partnership with DFCS case managers to accomplish positive outcomes for children and families. From April 2021 - March 2022, 153 case management staff were trained in the classroom portion of Foundations training. From March 2021 - March 2022, 97 case management staff completed the eLearning portion of the Foundations training.

Region 14 has an Education and Guidance Learning Enrichment Services (E.A.G.L.E.S.) unit that offers initial training to new case managers. Case managers have New Employee Orientation (NEO) with E.A.G.L.E.S. for 10 consecutive days before being released to the county where shadowing opportunities, transfer of learning assignments, online training as well as field experiences are completed as part of the prerequisites for the Georgia's Child Welfare Academy. Although the training parameters and timelines do vary based on the Georgia Academy registration slots and availability, the average number of days from 'date of hire' to 'completion of training' is approximately 10 weeks; the median was 75 days. The holidays and COVID limitations affected timeframe. After completion of the Georgia Academy, E.A.G.L.E.S. also administers 6 weeks of program-specific learning labs for new hires. E.A.G.L.E.S. provided a "Night Owl" training series in November 2021 where all training for the entire month started after 5:00 PM to accommodate the needs of the after-hour shifts, and a "March Midnight Madness" series to accommodate the 3rd shift staffers. E.A.G.L.E.S. invites Partnership Parents (formerly known as Foster Parents) to any of the monthly offerings. They have attended classes to learn alongside

veteran staff. This has proved to be a rewarding educative experience for all as they learn alongside staff in "real time".

**Item 27:** How well is the staff and provider training system functioning statewide to ensure that ongoing training is provided for staff that addresses the skills and knowledge needed to carry out their duties with regard to the services included in the CFSP?

Georgia finds this item to be a *Strength*. The Division has been successful at ensuring that ongoing training opportunities are offered and available to 100% of staff. Courses are added to the training system regularly. The QA Team surveyed a total of 903 stakeholders across the State during CY2021. Of the 500 DFCS staff surveyed, 66% of case managers and 59% of supervisors rated the Division as "Good" or "Excellent" at effectively providing ongoing training for continued job responsibilities.

DFCS staff are required to complete 20 hours of ongoing training. During FY22, 61% of staff received 0-10 hours of training, 7% received 11-19 hours of training, and 32% of child welfare staff met the requirement of 20+ hours of training in ongoing professional development. Many staff throughout the regions attend ongoing training and professional development each year that address the skills and knowledge needed to carry out their duties; however, due to staff shortages and case management priorities, there is often insufficient time for staff to contact the Training Unit and request that the local professional development courses are manually entered into the Learning Management System (LMS) so credit can be received. Additionally, the high turnover rate reduces the number of staff available to fully engage in the trainings offered. The Division is exploring opportunities to provide routine notice to staff on their course completion status, to ensure ongoing training hours can be met within the required timeframes. This work is ongoing.

In addition to Professional Development courses attended by staff, there are numerous conferences, summits, and webinars that also contribute to staff ongoing education and training. These trainings enhance knowledge of current laws, policy, and evidence-based practices. The Division continues to implement a career path that requires staff to have met their ongoing training needs to move up in the career ladder. Additionally, Social Services Specialist employees (SS1, SS2, SS3) and child welfare employees in positions below Regional Directors (in the field) and Section Managers (at the state office) with a Master of Social Work or a master's degree in a behavioral science are eligible to receive a 10% pay increase when they begin employment or when the degree is obtained for current employees, and a 10% salary supplement is offered to employees who have the Licensed Clinical Social Worker (LCSW) credential.

The Policy and Regulation Unit (PRU) staff participated in several sponsored professional development trainings during FY22 to enhance their knowledge as subject matter experts in child welfare policy, such as the National Conference on Child Abuse and Neglect

(NCCAN); the Child Welfare Virtual Expo (CWVE) 2021: Advancing Racial Equity in Child Welfare; the National Governors Association: Child and Family Well-Being Governors Summit; NAMI: Promoting Mental Health Equity in Black Churches; and the Georgia Family Violence Conference.

Regional leadership provides frequent Case Manager/Supervisor Summits (monthly or bi-monthly) to discuss child welfare policy, maltreatment codes, Pieces or Practice (POP) and CFSR items. Region 4 has monthly "Chat N Chews" for CPS and Permanency staff. The focus of the Chat N Chews is around trends, policy, and ways to improve the CFSR outcomes. A monthly meeting called "Pathways" was also developed where Supervisors participated in one meeting a month for six months. The purpose is to develop supervisors in supporting and retaining child welfare case managers by providing them with additional training, support, and feedback, and connecting them to resources to increase their confidence and strengthen their capacity to serve families.

Ongoing trainings in Region 14 are being offered virtually through E.A.G.L.E.S. as well as opportunities through the state's IOTIS Learning Management System. E.A.G.L.E.S. ensures alignment of curriculum for trainings with policy to avoid gaps in training and skill building for application. Additionally, the unit tracks on-going hours and provides the county leadership of staff hours completed and/or needed. Surveys are distributed after each E.A.G.L.E.S. training opportunity where staff are asked a series of questions and provided a comment section to provide additional topics for future trainings. Additionally, E.A.G.L.E.S. provides "Stay Interviews" for staff that have been employed 4, 8, and 12 months and these interviews have a written survey component where staff can also provide feedback on what is needed to assist them in completing their jobs proficiently.

A database managed by the Residential Child Care Licensing (RCCL) Training and Development Supervisor tracks the completion of all trainings completed by RCCL staff. In addition to annual employee trainings for all staff, any training on subject matter specific to RCCL is conducted by various subject matter experts within RCCL and tracked by the Training and Development Supervisor. Because the staff trainings are continuous and ongoing, there are no barriers to the trainings being conducted in relation to workload demands. These trainings are conducted one-on-one or as a group virtually (via MS Teams) due to the Covid-19 pandemic, and training materials are accessible at any time for review. Opportunities to provide input on training needs are given to staff during all staff meetings and individual conferences with the RCCL Director. In 2021, a training guide for RCCL staff and licensed facilities (community stakeholders) was developed and implemented. This guide provides instructions on how to conduct a virtual site visit, as the Covid-19 pandemic has created barriers that oftentimes impede in-person contact.

**Item 28:** How well is the staff and provider training system functioning to ensure that training is occurring statewide for current or prospective foster parents, adoptive parents, and staff of state licensed or approved facilities (that care for children receiving foster care or adoption assistance under title IV-E) that addresses the skills and knowledge needed to carry out their duties with regard to foster and adopted children?

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found that 88% of foster parents rate the Division as "Good" or "Excellent" at effectively providing initial training and 94% rate the Division as "Good" or "Excellent" at effectively providing ongoing training.

Georgia finds this item to be a Strength. The Division has been successful at ensuring that training opportunities are provided to caregivers and agency staff. All DFCS regions offer IMPACT classes along with educational opportunities for foster parents to gain required training hours. All relatives and fictive kin are required to become foster parents and complete the same trainings unless they are ineligible. Several regions also have a relative support network to include monthly sessions for relatives on topics directly related to children in foster care and relative supports. Trainings are a combination of communitybased trainings from non-profits and organizations including the children's hospital, invitation to participate in some employee trainings, trainings offered online by national foster parent organizations, and trainings directly provided by staff or a hired facilitator by the department. The Caregiver Coaching Academy, which was instituted in August 2020, continues to assist caregivers with obtaining their ongoing continued parent development hours. Throughout the COVID pandemic, caregivers have had to obtain training hours through virtual platforms. The Caregivers Coaching Academy provides caregivers with one hour of training for each session they attend. Georgia SHINES and the Resource Development Dashboard on LENSES track and monitor foster parent training hours.

In Georgia, some foster homes are approved by DFCS and others are approved by Child Placing Agencies (CPA), which are licensed by the Residential Child Care Licensing (RCCL) unit. Rule 290-9-2-.07(4)(b) states: "The annual training requirements for foster parent(s), including the requirement of at least fifteen (15) hours of training relevant to the type of child placed or to be placed in the foster home if the child is more than 12 months old. For parent(s) providing foster care for children under 12 months of age, the foster parent shall have at least eight (8) hours of training." RCCL is authorized and empowered to conduct investigations and on-site inspections of any agency to assess compliance with these rules. There is no distinction between foster parents and relative caregivers for a CPA licensed by RCCL. RCCL has been informed that Child Placing Agencies adjusted to the challenges presented by the Covid-19 pandemic by transitioning from in-person trainings to virtual meetings in an effort to meet their training needs.

The Office of Provider Management (OPM)'s Resource Development (RD) team has the responsibility of ensuring that caregivers have met the training requirements at their annual re-evaluation period. Foster caregivers must complete an annual Placement Preference Form. This form outlines all of the diagnoses and behaviors the foster caregiver is willing to serve. RD's also ensure that the trainings received are aligned with the placement preferences identified by the foster caregiver. Foster caregivers also must complete a Caregiver Feedback Survey form annually. The survey is used to understand how the year of fostering has been for the foster caregiver. Several specific questions relate to ongoing training effectiveness, including: "Have the continued development trainings increased your ability to parent children in care?" CPA providers are required to submit the Caregiver Feedback Survey form for each caregiver at the time of the annual re-evaluation. It is the providers' responsibility to review the caregiver feedback survey and address any concerns that may be noted by their caregivers. Likewise, when these concerns are presented to the Division, OPM staff ensure that all concerns have been addressed by the provider. Most of the feedback provided by the caregivers is in narrative format, and the Division is exploring a way to place a numerical value on the feedback that is received in surveys from both DFCS and CPA caregivers. OPM is committed to developing a process for translating this information into measurable data. In addition, OPM's Monitoring Specialist (MS) is responsible for conducting random Safety Reviews of foster caregivers' home. During this review, the MS is asking the foster caregivers if their needs are being met by the provider and ensuring the foster caregiver can meet the needs of the children currently placed in the home.

Lastly, the Georgia SHINES portal is a system used by private agencies to document the children being served by their program. Currently, OPM is working with the Division's technology team to explore enhancements to the SHINES portal, including the feasibility of capturing data related to trainings received by caregivers and how those trainings align with the characteristics of the youth that are placed in their homes. This work is ongoing.

#### **Service Array and Resource Development**

**Item 29:** How well is the service array and resource development system functioning to ensure that the following array of services is accessible in all political jurisdictions covered by the Child and Family Services Plan (i.e. statewide)?

- 1. Services that assess the strengths and needs of children and families and determine other service needs;
- 2. Services that address the needs of families in addition to individual children in order to create a safe home environment;

- 3. Services that enable children to remain safely with their parents when reasonable; and
- 4. Services that help children in foster and adoptive placements achieve permanency.

Georgia finds this item to be an *Area Needing Improvement*. Georgia provides child abuse and neglect prevention, intervention and treatment services, foster care, family support services, family preservation services, time-limited reunification services and services to support adoption, relative care, independent living, and other permanent living arrangements. Overall, Georgia provides an array of services for children, families, and youth. Georgia provides family and child welfare services through a continuum of public and private services representing a wide range of agencies and funding sources. This continuum includes government-operated and funded agencies created and/or administered by the state's Department of Human Services (DHS) as well as traditional grassroots faith-based and non-profit organizations that may or may not receive any public funds; the state works with these other organizations, regardless of their funding sources. Children and families enter the continuum either through voluntary referral or because of a child maltreatment report. Regardless of where a child is served in the continuum or the reason for entry, DFCS is committed to ensuring the safety of children.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found that 82% of respondents rated the Division as "Good" or "Excellent" at effectively providing appropriate services to meet the needs of families and children served both through CPS and Permanency. Additionally, 70% of case managers and 66% of supervisors rated the availability of services to meet the needs of children and families in their county or region as "Good" or "Excellent". Results also demonstrated that 64% of agencies and service providers rated the quality of DFCS referral information as "Good" or "Excellent", and 80% rated the timeliness of referrals as "Good" or "Excellent".

The geographic distribution of services is uneven across the state. Case managers and supervisors included in the FY22 QA stakeholder interviews provided analyses regarding the availability of services in their area to meet families' needs. In the metro district (Regions 13-14), respondents noted that although there were a variety of basic service providers in the Metro area, many had high turnover or were short staffed, thereby leading to long waiting lists and poor quality of services. Specific services still needed include: housing; employment; services for special needs children, especially those with high level behavioral needs; local foster homes and group homes; specialized providers, especially for autism/Applied Behavior Analysis (ABA) therapy; behavior aide services; multi-lingual providers; and services for undocumented families and children.

The north district (Regions 1-5) respondents noted a lack of service providers in or willing to travel to the rural counties. Providers continue to focus on telehealth and virtual sessions, which are not always effective, particularly for children. North district surveys also indicated a lack of providers that would accept Medicaid. Similar to the metro district, providers as well as community agencies are often overwhelmed or short staffed, leading to waiting lists, service delays and poor quality of services. Specific services still needed include: housing; transportation; mental health care; play therapy, autism services, and in-home therapists for children; in-home therapists and community mental health services for adults; substance abuse treatment; multi-lingual providers; and foster homes for highneeds children and large sibling groups.

South district (Regions 6-12) respondents noted an overall lack of providers, including providers that accept Amerigroup and Medicaid. The rural counties of the south district lack providers, either contracted or community providers and families (or staff) must travel long distances to get services. The few providers are overwhelmed or generate "cookiecutter" assessments of little quality. Specific services still needed include: housing; transportation; specialized services for children, particularly for autism/ABA and behavioral aides; substance abuse treatment for men; in-home service providers, especially therapy/mental health; and multi-lingual providers.

The Division is exploring opportunities to assess the availability and accessibility of services for children and families at each stage of a case and within each district. This effort will assist the Division in identifying service gaps and resource needs across the state. This work is ongoing.

**Item 30:** How well is the service array and resource development system functioning statewide to ensure that the services in item 29 can be individualized to meet the unique needs of children and families served by the agency?

Georgia finds this item to be an *Area Needing Improvement*. The counties have varying levels of resources to incorporate identified services for the child in the child plan and family case plan. Systems are in place to ensure children are referred for a trauma and health assessment within 10 days of entering care, and service plans are developed for the child when the child is placed with a placement agency (CPA/CCI). Regional staff attempt to ensure services can be individualized to meet the needs of children and families. Translation services are sought when a rare dialect is encountered, but it remains difficult to locate bilingual providers and those families often go unserved. There continue to be issues with getting children intensive services when the need is identified. Provider fairs in the region help staff to learn about new providers, but there continue to be limitations due to lack of available service providers. Several providers are no longer

seeing children in person and virtual services are not effective for all children. Waiting lists and turnover in providers leads to an inability to provide consistent services for families. Sometimes it takes weeks or months for services to begin. Services continue to be cookie cutter and not individualized. This is due to many factors, including the volume of cases and number of service providers available. Also, the expertise of the provider pool is sometimes not as high as in the past, presumably due to the staffing crisis everywhere.

Adoption services are tailored and developed to meet the needs of adoptive families. The Post Adoption programming is geared toward ensuring adoptive families in Georgia have the necessary supports to sustain adoptions long term. The service array is aimed at serving multiple areas throughout the adoption journey, such as Crisis Intervention, search and reunification services, information & referral, and resource management.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found that 77% of respondents rated the Division as "Good" or "Excellent" at effectively individualizing the needed services to meet the specific needs for the families and children served both through CPS and Permanency, and 70% of foster parents rated the Division as "Good" or "Excellent" in providing services requested by the foster parent. When asked to rate the ongoing follow-up by the Division to determine whether the services were initiated timely and were effective in meeting the needs of the families and children, 79% of agencies and service providers rated the Division as "Good" or "Excellent".

## **Agency Responsiveness to the Community**

Item 31: How well is the agency responsiveness to the community system functioning statewide to ensure that, in implementing the provisions of the Child and Family Services Plan (CFSP) and developing related Annual Progress and Services Reports (APSRs), the state engages in ongoing consultation with Tribal representatives, consumers, service providers, foster care providers, the juvenile court, and other public and private child- and family-serving agencies and includes the major concerns of these representatives in the goals, objectives, and annual updates of the CFSP?

Georgia finds this item to be a *Strength*. Georgia convenes multiple stakeholder meetings each year. These convenings are opportunities to engage child welfare system partners in the assessment of the goals and strategies of the Division, identify strengths and needs of the system, and determine the best course of action to make adjustments as needed.

Each of the 14 regional C3 Coordinators host at least one regionwide stakeholder meeting and four quarterly service array-focused meetings per year. These meetings were held virtually in FY22 due to the COVID-19 pandemic restrictions on in-person gatherings. Invited providers are from the Child Placing Agencies, school boards, law enforcement, mental health and substance abuse, Department of Behavioral Health and Developmental Disabilities (DBHDD), Department of Juvenile Justice (DJJ), and other community agencies to discuss the region's performance on the CFSR reviews, service gaps and ongoing partnerships. They also discuss policy, practices, processes, and other issues/concerns. Feedback from meeting organizers demonstrates that the service array meetings have been helpful in creating a platform to share information and strengthen partnerships with the community partners and providers.

During FY22, the Division convened several virtual state-level APSR Joint Collaboration meetings addressed the CFSP goals. Further descriptions of these meetings can be found in the report section on Collaboration: Joint Planning Meetings. These regional and state level stakeholder meetings involved hundreds of DFCS staff, health care providers, CPAs and CCIs, educators, judges and attorneys, CASAs, parents and caregivers, and the faith-based community. Members of the three Georgia Tribes were invited to join in these stakeholder events, as well as the Parent Advisory Council and members of the Youth Advisory Board. Providers, parents, and youth were all invited to share observed strengths and challenges of the child welfare system, and to recommend strategies for improvement. These recommendations are considered for inclusion into the ongoing work of improving the CFSP and CFSR outcomes.

There are a number of opportunities during the year, both large and small, beyond Division-hosted meetings and events, for stakeholders to engage in monitoring and assessment of CFSP goals. The CAPTA Panel members are regularly invited to review CFSR data and other findings, and encouraged to provide meaningful feedback on the progress of the child welfare system in achieving the goals set forth in the CFSP. The Panel members also provide critical input to assess agency strengths and needs, which help to refine the programs and policies of the Division. For specific CFSP objectives, the Division reaches out to collaborative partners such as the statewide Child and Adolescent Health Coalition (CAHC) and Family Resource Council (FRC), which are instrumental in advancing objectives with state agency leaders and legislators that directly relate to their specific missions (e.g., the CAHC and FRC advocate for opportunities within the child welfare system to "leverage and invest in communities to provide adequate and effective service capacity statewide", which aligns with Georgia's CFSP Goal C). The Baby Steps Recovery Program in Douglas County schedules quarterly stakeholder meetings which provide an opportunity to engage around assessment of safety for infants affected by substance abuse and their families, strengths and barriers to developing and monitoring

plans of safe care, child maltreatment prevention, and available substance abuse resources in the community.

In addition to these opportunities for stakeholder engagement and strategic planning, the Division continues to host locally-led, multi-day "Roadshows" throughout the state, to inform stakeholders of emerging issues and agency progress, and to provide significant discussion time between Division leadership and those in the community who are most impacted by the child welfare system. Due to the COVID-19 pandemic, these meetings in FY22 were held virtually, which has presented some benefit in that several individuals who may not have participated due to travel challenges or scheduling conflicts were able to do so. The format will change in FY23 to incorporate smaller convenings and more integration with the other divisions of Georgia's Department of Human Services (DHS).

The Prevention and Community Support Section has facilitated the development of a state child abuse and neglect prevention plan which engages different stakeholders such as providers, community members, juvenile court representatives, and others on comprehensive goals and strategies that are directly related to the CFSP. Three-session regional meetings were scheduled for multiple dates in 2021 to accomplish several objectives. Session 1 prioritized the top five strategies from the state CAN Prevention Plan and identify major steps. Session 2 began a Regional Action Register for each priority, and develop major steps, leads, participants, technical assistance needs, and progress indicators. Session 3 reviewed and refined Regional Action Registers (with timeline, evaluation, resource requirements, and dependencies), review the draft of the Regional Action Plan template, and identify next steps. The 14 regional plans and their implementation leads can be found at <a href="https://abuse.publichealth.gsu.edu/canpp/">https://abuse.publichealth.gsu.edu/canpp/</a>.

The Division continues to promote feedback loops with the field, judges, medical providers, educators, and the CAPTA Panels. DFCS continues to work with the Department of Behavioral Health and Developmental Disabilities (DBHDD), the Office of the Child Advocate (OCA), and the Department of Public Health (DPH) regarding Plan of Safe Care and ways to enhance practices. DFCS has regular meetings with Partners including OCA, the Court Improvement Program (CIP), DBHDD, DPH, Department of Education (DOE), and the Court Appointed Special Advocates (CASA). Additional meetings are held with providers monthly including the Multi-Agency Alliance for Children (MAAC) and members of Together Georgia, as well as additional providers from around the state. DFCS attends and presents at CIP meetings to talk with judges about their concerns and provide clarification regarding agency policy and practice. CIP has provided feedback on direct case involvement bringing both concerns and successes to the agency along with recommendations. DBHDD, DOE, and DPH have provided feedback from direct involvement with agency staff and families that are served. This feedback is used to support staff in the counties and address challenges collaboratively.

The Policy and Regulations Unit has a staff person who serves as a liaison to the Georgia Tribes. The Governor's Council on American Indian Affairs meets bi-monthly to discuss concerns with tribal burial sites in Georgia, legislation that may impact tribal communities, and child welfare issues (as needed). The tribal liaison facilitates discussions and updates of the CFSP and invites the tribal leaders to any DFCS meetings relevant to the development of the CFSP and APSR.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found 86% of respondents rated the Division as "Good" or "Excellent" at effectively partnering with their agency or organization.

**Item 32:** How well is the agency responsiveness to the community system functioning statewide to ensure that the state's services under the Child and Family Services Plan (CFSP) are coordinated with services or benefits of other federal or federally assisted programs serving the same population?

Georgia finds this item to be a *Strength*. The Division continues to regularly engage its partners to accomplish the state's CFSP goals, including the Department of Behavioral Health and Developmental Disabilities (DBHDD) to support care and treatment needs for high-end youth. Some regions invite DHBDD to participate regularly in their PRE teams and PAUSE processes as their input and expertise adds value to both venues. The Department of Public Health (DPH) partners to support birth mothers and families with substance use issues and to provide health assessments for infants and young children, the Department of Education (DOE) to support youth educational needs, and the Department of Community Health (DCH) to assist staff, older youth, and families in navigating Medicaid. The kinship unit ensures that kin caregivers apply for and receive federal subsidies and services available through the Office of Family Independence when applicable. Additional descriptions of these collaborative partnerships can be found throughout Section B: Collaboration and Section D: Update to the Plan to Enact the State's Vision.

The QA Team surveyed a total of 903 stakeholders across the State during CY2021. A combination of DFCS staff (500), service providers (207), legal services (103), and foster parents (93) participated to provide their assessment regarding State performance. Survey results found 83% of foster parents rated their overall working relationship with the Division as "Good" or "Excellent". Results also found that 84% of Case Managers and 86% of Supervisors rated their county as "Good" or "Excellent" in meeting the needs of children served in both foster care and CPS cases.

#### Foster and Adoptive Parent Licensing, Recruitment, and Retention

**Item 33:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that state standards are applied to all licensed or approved foster family homes or childcare institutions receiving title IV-B or IV-E funds?

Georgia finds this item to be a *Strength*. The Office of Provider Management Resource Developers (RDs) review the initial and re-evaluations completed by the RBWO private providers. In reviewing the initial and re-evaluations, the RDs confirm that the foster parent received the required training, medical, number of home visits and safety screenings completed timely. The Monitoring Specialist with OPM conducts twice a year Desk Safety Checks for 100% of providers and these checks review each RBWO staff safety screenings (i.e. Criminal Background Check, pardon/parole, sex offender, CPS and Department of Corrections). Monitoring Specialists completed 495 Safety Desk Checks from April 2021 -March 2022. Resource Developers reviewed 679 Initials and 2,200 Re-evaluations from April 2021 – March 2022. During this period, 206 Corrective Action Plans (CAPS) were required after completion of the Safety Desk Check reviews due to non-compliance.

DFCS continues to remain successful in ensuring that state standards are applied to all approved foster homes. Georgia SHINES is programmed to validate both State and Federal approval requirements. A home cannot be approved without a medical and safety screening. OPM's Child Placing Agencies follow the same Child Welfare Policies as DFCS foster homes. OPM's Resource Developers review a percentage of foster homes to monitor and ensure compliance for home evaluation components but review 100% of the Safety Screening completed on each household member.

**Item 34:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning statewide to ensure that the state complies with federal requirements for criminal background clearances as related to licensing or approving foster care and adoptive placements, and has in place a case planning process that includes provisions for addressing the safety of foster care and adoptive placements for children?

Georgia finds this item to be a *Strength*. DFCS continues to be successful in ensuring that the State complies with Federal requirements related to approving foster care and adoptive placements. Child welfare policy on criminal records checks provides state and federal requirements for criminal background checks for approving foster and adoptive placement, as well as for case planning that addresses the safety of foster adoptive placements. Georgia SHINES is programmed to validate that the criminal records checks have been entered prior to approving a home. No homes can be approved without pre-

service training. Providers aren't able to submit an initial approval without pre-service (typically IMPACT) dates for primary and secondary caregivers. In addition, the Division provides a monthly report to field staff to support oversight and completion of the kinship assessment in Georgia SHINES. The kinship assessment requires criminal background clearances for all approved kinship placements. The field receives a report indicating unapproved placements that require attention. Several regions have assigned Field Program Specialist to review unapproved placements and address compliance issues.

The Office of Provider Management (OPM) team is responsible for monitoring compliance for the Room, Board, Watchful Oversight (RBWO) private providers. The Monitoring Specialist with OPM conducts twice a year Desk Safety Checks for 100% of providers and these checks review each RBWO staff safety screenings (i.e. Criminal Background Check, pardon/parole, sex offender, CPS and Department of Corrections). Monitoring Specialists completed 495 Safety Desk Checks from April 2021 -March 2022. Resource Developers reviewed 679 Initials and 2,200 Re-evaluations from April 2021 – March 2022. During this period, 206 Corrective Action Plans (CAPS) were required after completion of the Safety Desk Check reviews due to non-compliance.

**Item 35:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the diligent recruitment of potential foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed is occurring statewide?

Georgia finds this item to be an *Area Needing Improvement*. DFCS is working to ensure that the diligent recruitment of prospective foster and adoptive parents reflect the ethnic and racial diversity of children in the State's care. The Caregiver Recruitment and Retention Unit (CRRU) continues to host weekly cadence calls. These calls include Regional CRRU Leads and staff from across the state. Topics of discussion include data review, recruitment strategies, practice, and policy guidance related to improving the recruitment of foster and adoptive families who reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed. CRRU uses the demographic information for children in care to assist with recruitment initiatives. The "Demographics of Children in Care" is frequently updated on the Foster Georgia website. For example, the data demonstrate a need for homes for older children. Therefore, media graphics used for recruitment events provide visual emphasis on teens and messaging about the need for caregivers for older children and siblings.

The Division's current five-year diligent recruitment plan was completed for 2019-2024. Each year, the regions complete their regional plans against the stated goals in the overall state plan. The next iteration of the state's diligent recruitment plan will be modified to account for items that have been completed and to add more content around

inclusivity. The CRRU team is exploring opportunities for the next state diligent recruitment plan that is developed in collaboration with the Office of Provider Management. This work is ongoing.

The Office of Provider Management (OPM) shared the Division's strategic plan in October 2020 and required the CPA providers to update their Recruitment and Retention Plan. The plan was designed to help target five (5) areas of need: LGBTQ youth, large sibling groups, developmentally delayed, autism and Commercial Sexual Exploitation of Children (CSEC) population. The Office of Provider Management (OPM) hosts monthly meetings with CPA partners. These meetings are designed to discuss a variety of topics related to Resource Development, to include Recruitment and Retention. CPA providers are required to update their Recruitment and Retention Plan at least annually.

**Item 36:** How well is the foster and adoptive parent licensing, recruitment, and retention system functioning to ensure that the process for ensuring the effective use of cross-jurisdictional resources to facilitate timely adoptive or permanent placements for waiting children is occurring statewide?

Georgia finds this item to be a *Strength*. The Division's Interstate Compact on the Placement of Children (ICPC) works with all 50 states, District of Columbia, and the Virgin Islands, which all had different practices in place due to COVID. ICPC instituted several strategies throughout the COVID-19 pandemic to continue meeting the minimum requirements to not delay placement. ICPC collaborated with the Office of Inspector General (OIG) to create a process to ensure ICPC resources had the opportunity to receive a LIVE Scan that included an NCIC screening. ICPC also collaborated with the Caregiver Recruitment and Retention Unit (CRRU) to create an outline for approving resources with virtual contact in lieu of face to face. The outline provided guidance to include a reason why a virtual visit was needed, to document thoroughly everything that was seen virtually, and to add photos to validate the virtual visit. These strategies assisted in timely placement and permanency.

Georgia uses the following process to ensure interjurisdictional adoptions are timely and inclusive. Children are listed on Georgia's photo-listing as well as Adopt US Kids. After a family completes an inquiry, the Adoption Exchange Consultant reviews the family's home study and share it with the child's case manager if it's a potential match. The child's information is shared with the family and a staffing is held with all relevant parties, including the Regional Adoption Coordinator (RAC). Pre-placement visits are discussed, and the child's legal county submits the request through ICPC for permission to place the child in the receiving state. Once approved, the transition schedule is developed, which includes identification of needed services to support the placement. Adoptive placements are supervised by the receiving state for at least six months prior to adoption finalization.

In FY21, Georgia initiated an exploratory process for data monitoring. The National Electronic Interstate Compact Enterprise (NEICE) has aided in this effort during FY22. NEICE is a national electronic system for quickly and securely exchanging all the data and documents required by ICPC to place children across state lines. States can request a timeliness report for all request types directly from the NEICE team. The report includes the request type, date received, completion date, met or not met, and case outcome of denied, approved, withdrawn, or returned. The NEICE team has also committed to sending an annual report to all states to show the median of days from receipt to completion for all request types. Georgia received its initial report in December 2021, for 2019-2020 data.

# Section D: Update to the Plan for Enacting the State's Vision and Progress Made to Improve Outcomes

Georgia's 2020-2024 Child and Family Services Plan (CFSP) was developed with robust participation from staff, stakeholders, and people with lived experience. The CFSP steering committee was comprised of Division leadership and program staff. This committee finalized the goals and strategies that were developed and reviewed at 24 regional stakeholder meetings, which were then shared with over 140 stakeholders at the Annual APSR Joint Collaboration (AJC) meeting in 2019. Attendees included federal partners, court representatives, health professionals, youth, educators, providers, faith-based partners, and others. Prior to the meeting, a group of seven former foster youth held two sessions to discuss the proposed goals and to prepare responses and commentary on what they felt should be prioritized over the next five years to see improved outcomes for youth. The preparatory sessions were led by a University of Georgia, JW Fanning Institute specialist and the Youth EmpowerMEnt Policy Council coordinator. The youth eloquently shared their observations at the AJC meeting and provided support for the final CFSP goals.

#### Revisions to Goals, Objectives, and Interventions

Georgia's approved 2020-2024 Child and Family Services Plan (CFSP) is available on the DFCS website at https://dfcs.georgia.gov/data/federal-reviews-and-plans. At the time of this writing, the following changes have been made:

- Strategic Priority 2, Objective 2: Address Performance Gaps Related to Safety. The CFSP identified a Benchmark goal of timely transfers between Investigations and Family Preservation at 55% by March 2022, and 85% by 2024; however, Georgia SHINES currently does not have a mechanism in place to track this item and distinguish transfer staffings from other types of staffings. The Division is exploring potential data sources to ensure accurate tracking and reporting of this measure in the next APSR.
- Strategic Priority 2, Objective 4: Implement Connected by 21 (CB21) to provide supports to youth age 18-21. This objective is revised to reflect that funding was not provided to fully execute the CB21 "Connections Unit" as initially planned. The benchmarks identified for this goal – onboarding new staff and launching the Connections Unit – are removed, and new benchmarks are added to reflect the new Objective: "Enhance Support Services to Youth ages 18-21"
- Strategic Priority 3, Objective 4: Leverage Regional Stakeholder Meetings". One Action Step and one Benchmark are currently under review to determine effectiveness and assess for modifications in preparation for CFSR Round 4.

While the Division's Quality Assurance (QA) reviews are used to inform progress on several CFSP goals, particularly those relying on the CFSR benchmark measures to determine successful implementation (e.g., Strategy 2: Objectives 5 and 7); the revisions to the CFSP Objectives were identified through ongoing discussions with staff and stakeholders involved in the successful implementation of the objective.

#### Implementation and Program Supports

The Division integrates CFSR Outcomes and Systemic Factors into agency strategic planning, as well as efforts identified from the CFSR PIP. The following sections of the APSR provide updates on progress made on the goals set in the 2020-2024 CFSP.

- Identification of goals rolled over from the CFSR PIP;
- A description of additional supports needed to achieve successful implementation (i.e. staff, training, coaching, policy, data systems, physical space, equipment, and memoranda of understanding); and
- A timeline for ensuring when the goal or objective will be achieved (e.g. delayed, in progress, ongoing, complete).
- A description of progress made in meeting the timeframes and benchmarks (e.g. implementation milestones). If progress is not on target, a rationale and plan for completion is provided.
- A description of feedback loops with involved and impacted partners, including implementation and progress made resulting from provided feedback.
- A description of collaborative partners and implementation supports, including recent legislation (proposed and/or signed into law).

## Youth Engagement

Youth were involved in the development of the CFSP goals and objectives and continue to be involved in the planning and delivery of ongoing CFSP-related activities, primarily Objective 4 (Support Services to Youth 18-21). Young people are asked to participate in the Division's twice-yearly Joint Planning Meetings to provide input and ideas to improve practice in several other CFSP objectives. The Division values this partnership and compensates all youth attendees for their time and for sharing their expertise with staff and stakeholders. Youth feedback and recommendations provided during Joint Planning Meetings are included in the development of training materials for each of these program areas. The Division's Youth Advisory Board is also a resource to review proposed training material upon request.

#### **Strategic Priority 1: Workforce Development**

Objective 1: Participate in a four and a half year "Workforce Excellence" project with the National Child Welfare Workforce Institute (NCWWI).

**Action Step:** Complete Comprehensive Organizational Health Assessment (COHA). The COHA, a requirement of the project, is an approach to gathering both qualitative and quantitative data to assess the organizational health of Georgia's child welfare agency.

**FY22 Update:** The Division, in partnership with NCWWI, completed the COHA in in November 2019. The agency utilized these results to develop and prioritize strategies for the Action Teams. The Division initially began with three action teams, one in each District. These action teams have focused their efforts, based on the COHA results, on supporting new employees during their hiring efforts. These actions teams are continuing to focus on this area of improvement.

In the Winter/Spring of 2022, the Workforce Excellence Implementation team began development of a second Comprehensive Organizational Health Assessment. The Division plans to implement a second COHA sometime in late 2022/early 2023.

**Action Step:** Select student cohorts for first year (four to six students will be selected each year).

**FY22 Update:** The first cohort was selected in August 2019. During FY22, there are nine (9) total graduates and 31 additional students/employees enrolled.

**Action Step:** Adopt and implement workforce strategies (as informed by the COHA).

**FY22 Update:** The Division has developed workforce strategies around Action Teams, Leadership Academy, and Sustainability Workgroups.

Action Teams: There are three (3) fully functioning Action Teams working to improve the support and training needs of newly hired case managers through mentoring and peer support. There are two (2) additional Action Teams currently in development of their strategies.

Leadership Academy: The agency has fully adapted the NCWWI Leadership Academy into the training system. The Leadership Academy is known as Leadership Influence For Tomorrow (L.I.F.T). The L.I.F.T Academy has graduated two cohorts (23 total participants) from its program and is well into the third cohort. Leadership Academy participants complete five (5) modules focused on: Fundamentals of Leadership, Leading Change, Leading for Results, Leading in

Context and Leading People. Academy participants are also paired up with their own Leadership Development Coach for ongoing mentoring and support. Georgia currently has 36 Leadership Development Coaches from across the state who have completed NCWWI's virtual coaching program.

Sustainability Workgroups: The Workforce Excellence Implementation Team is currently working on a plan to transition from an Implementation Team to a Workforce Council for long term sustainability of workforce development efforts. Sustainability teams have identified the priorities listed below. Teams have been implemented to further develop actional goals and strategies for these priorities for long term workforce sustainability.

- Effective communication is essential for wide-spread engagement.
- Action Teams are truly the hub of workforce development.
- University/DFCS partnership should be leveraged beyond traditional approaches.
- Building/investing in formal workforce development infrastructure/supports is critical.

**Action Step:** Develop a train-the-trainer course for the Leadership Academy.

**FY22 Update:** This step was completed in August 2020. The Leadership Academy is being utilized to develop leadership skills of Middle Managers within the agency.

#### Benchmarks:

**Phase 1:** Exploration – completed on time (November 2019)

Phase 2: Planning – ongoing

Phase 3: Implementation (October 2020-May 2021)

#### FY22 Updates:

Action Teams have been identified as the primary hub for implementation of workforce development strategies. Action Teams are up and running in several regions throughout the state. In South District's Region 10, a new worker mentormentee pilot has begun, and initial feedback shows great success thus far. In the North District, Region 2's action team piloted a new worker support group (called Synergy) and graduated its first cohort in February 2022. Also in FY22, the Metro District Action Team is developing the "All-In" initiative, designed to assist Region 13 with developing and sustaining a robust workforce. Through the All-In initiative,

it is their goal to develop skilled new professionals who feel competent and empowered to complete their work-related responsibilities and duties.

The University Partnerships have strengthened considerably since implementation of the Workforce Excellence Program. Currently, the focus is on strengthening the curriculum related to ICWA across University programs and implementation of the Intercultural Development Inventory (IDI). In FY22, the agency and University Partners completed a pilot in which NCWWI students and a volunteer group of DFCS employees completed the IDI assessment. The University Partners and agency are currently working to identify and train Qualified Administrators for long term implementation of the IDI within the Schools of Social Work and the Division.

As referenced above, the L.I.F.T Academy has graduated two cohorts (23 total participants) from its program and is currently in the third cohort. An evaluation of the LIFT Academy was completed and findings are referenced below. The evaluation efforts for the greater Workforce Excellence project are ongoing.

#### Feedback Loops

The NCWWI Workforce Excellence Team offers periodic updates for staff on the Workforce Excellence Project and the agency partnership with NCWWI via newsletters and regular information sessions. There is a communications group within the implementation team which works closely with the agency's communications department in finding ways to share updates and progress related to the project. Presentations have been given during the agency's Friday Café 212 meetings and communication blurbs in agency newsletters.

In relation to practice improvement, Action Teams are the primary direct response to staff in the field and workforce development issues. As the Division transitions to a workforce council in FY23, the expectation is to have a greater impact on workforce issues overall.

#### **Training**

The L.I.F.T. Academy has graduated two cohorts (23 total participants) from its program and is currently in the third cohort. Leadership Academy participants complete five (5) modules focused on; Fundamentals of Leadership, Leading Change, Leading for Results, Leading in Context and Leading People. Academy participants are also paired up with their own Leadership Development Coach for ongoing mentoring and support. Georgia currently has 36 Leadership Development Coaches from across the state who have completed NCWWI's virtual coaching program. As a component of the academy, participants are tasked with coming up with a change initiative project – something that can be used to improve workforce, grow community partnerships or can target a need. The Division has observed awesome creativity through these initiatives.

Graduation celebrations are held with each cohort. During these ceremonies, participants and coaches share their experience with the L.I.F.T Academy and give presentations on their change projects. There are check-ins with prior cohorts to receive feedback on the progress and status of their change projects. One issue addressed during FY22 was the lack of leadership support for some of the change projects being instituted. After consultation and review, the issue was determined to be less of lack of leadership support than an issue of too many competing priorities. The Division has implemented a new change in the process that now requires cohort participants to gain approval from leadership prior to deciding on a change project. Cohort participants are also encouraged to partner with the Action Teams to ensure that their respective projects are aligned with and supportive of agency priorities.

#### **Technical Assistance**

Technical assistance continues to be provided by the National Child Welfare Workforce Institute and The Butler Institute for Families related to the following: development of the project's Implementation Team and Action Teams, execution and application of the COHA, development and selection of strategic workforce development focus areas, leadership academy preparation and establishment of student cohorts. Technical assistance from these entities will continue through the life of the project.

Due to restrictions on in-person gatherings as a result of COVID-19, all meetings and trainings associated with this project are being held virtually. There are multiple meetings each month with partners at NCWWI to provide technical support to the state for the various components of the Workforce Excellence project.

#### **Evaluation**

An evaluation of the LIFT Academy was completed. The Evaluation Report provided by NCWWI shows that:

- Overall, participants were satisfied with the LIFT Academy, particularly the trainerfacilitated sessions. They found the material useful, coaches and trainers supportive, and enjoyed connecting with peers.
- On average, participants demonstrated significant knowledge gains, particularly in the areas of Leading for Results (e.g., understanding the Plan-Do-Study-Act cycle) and in Leading Change (e.g., developing a vision statement and change project).
- In general, participants felt that key factors that support learning transfer were in place. All participants agreed that the training content was relevant to their jobs and that they have the support of others at work (supervisor and co-workers) to use the skills they learned. They also described instances of applying what they learned on the job (e.g., with staff) and sharing training materials and information with others (e.g., new team members).

- After completing the LIFT Academy, participant leadership behaviors increased significantly, particularly in the areas of Leading in Context (e.g., operating skillfully within the political environment to address issues) and Leading Change (e.g., demonstrating willingness to question or improve upon existing processes or approaches). These changes were sustained even six months after the LIFT Academy concluded. Participants also reported improvements in communicating effectively, listening more carefully to input and feedback from others, conflict resolution, ability to collaborate, confidence, and supporting others' development.
- Participants found the NCWWI 360° Leadership Feedback Process (that included an assessment, seeking feedback from others, a personalized report, and coaching to discuss the results) beneficial to their leadership development.
- Participants developed diverse change projects that ranged from a focus on workforce-related efforts (projects to help with retention, onboarding, staff wellbeing, and/or promoting race equity and inclusion) to processes and procedures geared toward practice improvements (for foster homes, relative caregivers, and community engagement). Participant confidence in and supports for implementing change projects were strong when the LIFT Academy ended and continued to grow even six months later. Barriers to implementation included lack of time (some due to staffing shortages) and a need for buy-in, though some cited buy-in as a success of their change project efforts.
- While attending the LIFT Academy, participants met with their coaches approximately five times (for about 60 minutes each session) and had an average of two post-training coaching sessions (for an average of 35 minutes each) that focused on change project development and implementation as well as leadership development. Participants found the coaching sessions helpful and a good use of their time and described coaches as supportive, responsive, and knowledgeable.
- Together with their coaches, most participants developed a written leadership development plan described as somewhat or very helpful. At 6-month follow-up, 88% agreed that they had achieved the goals they set for themselves

The evaluation efforts for the greater Workforce Excellence project are ongoing.

### **Implementation Supports**

The implementation team provides implementation supports for the Workforce Excellence project, and includes DFCS Senior Leadership, District Directors, University Partners, NCWWI staff, and Workforce Excellence team leads. In addition to the implementation team, there are action teams in each region. Action teams with guidance and support from the WE Implementation Team, are responsible for examining workforce challenges and implementing strategies that will result in improving conditions for the workforce. NCWWI also provides implementation supports to the University Partners, Coaches and

Leadership Academy. Implementation updates are provided during the monthly implementation team meetings.

Collaborative partners include: National Child Welfare Workforce Institute; University of Georgia; Georgia State University; Albany State University

## **Strategic Priority 2: Practice Standards**

# Objective 1: Execute Practice Model Implementation, Phase 2

This objective and activities will leverage and utilize SBC practices acquired in phase 1 to ensure phase 2 tenets are highlighted and incorporated into the development of the Division's Comprehensive Practice Model.

**Action Step:** Georgia will convene a Practice Model Steering Committee to identify, evaluate and prioritize activities needed for Phase 2 SBC implementation.

**FY22 Update:** This step was completed in April 2020. This work is ongoing. During FY22, the Practice Model Steering Committee drafted the Comprehensive Practice Model and current plans focus on piloting the Practice Model and subsequent rollout and implementation. The Practice Standards Guide, inclusive of Solution Based Casework, will guide the FY2023 identification, evaluation and prioritization of activities for SBC Phase 2 implementation.

**Action Step:** To overcome the transfer of learning barrier of SBC in Phase 2, a series of purposeful activities will be used to create the momentum necessary to move Georgia forward.

**FY22 Update:** The steering committees identified in this plan have convened and the Division has developed a Practice Standards Guide to communicate the Division's practice standards, inclusive of Solution Based Casework, Guiding Principles, Trauma Response, Safety Focus and Quality Caregiving.

**Action Step:** The Division will also explore designing the next level training needed for supervisors in order to further their application of SBC tenets and ability to develop those within their staff

**FY22 Update:** The Practice Standards Guide, inclusive of Solution Based Casework, will guide this year's identification, evaluation, and prioritization of activities for SBC Phase 2 implementation. Efforts are underway to begin piloting.

#### **Benchmarks**

The State seeks to achieve the following targets and benchmarks in FY2023:

| Federal<br>Fiscal<br>Year | Safety 1 | Safety 2 | Perm<br>1 | Perm<br>2 | Well-<br>Being<br>1 | Well-<br>Being<br>2 |
|---------------------------|----------|----------|-----------|-----------|---------------------|---------------------|
| 2023                      | 94%      | 38%      | 20%       | 49%       | 24%                 | 58%                 |

**FY22 Update:** See Section C: Update on Assessment of Performance for analysis on the State's performance of these outcome measures.

## **Feedback Loops**

Results and feedback from the Practice Standards Guide pilot will be utilized to improve practice. For the CFSR mentoring process, feedback was solicited from the C3 Coordinators during FY22 regarding the current overall mentoring process and the CFSR Supervisory Mentoring reviews. This feedback was garnered in an effort to align the work of the C3 Coordinators and the CFSR mentoring process to improve overall outcomes and supervisory capacity. In addition, a workgroup composed of project managers for the CFSR Mentoring Process, the Supervisor Mentor team, Quality Assurance team and regional Mentoring and Staff Development Field Program Specialists has met to further align the mentoring efforts collectively.

# **Training / Technical Assistance**

Former Practice Model Coaches (PMC) continue to participate in New Hire Simulation classes which concentrate on teaching the tenets of SBC to new case managers. In addition, SBC refreshers are held routinely for trainers and curriculum writers to ensure all training materials continue to promote SBC tenets.

## **Implementation Supports and Collaborative Partners**

The Division continues to collaborate with internal and external stakeholders to ensure the tenets of SBC are reviewed, assessed, and developed as an integral component of the Comprehensive Practice Model. Collaborative partners are afforded an opportunity to review performance data through venues such as the Annual APSR Joint Collaboration meetings, DFCS Advisory Board meetings, and various court monitors including Kenny A plaintiffs. State and regional CQI Teams help assess and utilize strengths and needs related to implementing strategies to directly impact Phase 2 of SBC.

Youth involvement in this CFSP objective was emphasized during the development process, when the original work on the practice model began. There has not been continuous youth engagement on the Practice Model Steering Committee.

# **Objective 2:** Address Performance Gaps related to the Assessment of Safety

This objective and its activities will provide for a consistent, high level review process that increases awareness of CFSR practices and related county and regional specific trends. Through this objective, Georgia will develop a specific process for the governance of Field Operations regional supervisor mentor monthly CFSR case reviews.

**Action Step:** By September 2020, develop staff competencies around investigations and safety decision making so that caseworkers have the knowledge and skill to effectively identify risk and safety concerns with the ability to determine steps needed to create safety for children now and in the future. Provide ongoing training, guidance, and support for case managers and supervisors regarding any new changes in tools, practice, and policy. Continue the monthly review of records with ongoing feedback loops to include supervisors and front-line staff.

**FY22 Update:** This action step is completed, and the training/support activity remains ongoing. The Division is working to align efforts across the state and develop evaluation tools that will best measure process and outcomes.

**Action Step:** Revise the process for the High Priority Review Team (HPRT) and complete reviews on cases that data shows are at a higher risk of serious recidivism. Conduct real-time case reads relatively early in a case using a structured case reading tool to identify critical safety issues, communicating, and address concerns. Continue to provide real-time feedback on safety issues, including assessment of safety using a structured investigations case reading guide.

**FY22 Update:** This step is completed and the work is ongoing. The HPRT reviews 90-100 cases per month. Case reviews analyze previous CPS history, quality of interviews and observations, identification of safety threats, quality of safety planning, and supervisory support. Feedback/recommendations are provided to county/regional leadership at the conclusion of each case review.

**Action Step:** Revise the current practice, tool, and guidance developing a seamless continuation of safety intervention between Investigation's initial assessment and the onset of Family Preservation Services.

**FY22 Update:** This step is completed; this work is ongoing as part of the FFPSA implementation process.

**Action Step:** Division will complete all focus groups, reviews of data and outcomes, established goals and implemented necessary practice change to ensure that staff have the training and proper tools for the completion of comprehensive and accurate assessments. This will include initial and ongoing assessment of risk and safety at all levels and program areas.

**FY22 Update:** This Action Step is completed. In FY21, the Division received consultation from Chapin Hall regarding assessments and explored the potential for modifying the current tool (Family Functioning Assessment) to provide a more comprehensive assessment for families. Feedback from the field suggested that case managers are knowledgeable of the assessment tools used to gather information and make safety determinations. The Initial Safety Assessment (ISA) and Family Functioning Assessment (FFA) tools are reported to be streamlined and comprehensive. Frontline staff have expressed a need for practice supports and more learning opportunities to aid them in clearly identifying safety factors and making case decisions utilizing the information collected while clearly, concisely documenting their findings. Based on this input, additional content will be added to training curriculum and practice guidance to further the transfer of learning for staff in these areas in alignment with Family First requirements.

**Action Step:** By January 2021, the Division will update policy clarifying the guidance and best practice along with the procedures.

**FY22 Update:** This step is completed.

Action Step: By January 2021, the Division will review the results of the CFSR Impact Plan and provide ongoing training for CPS staff specific to the identification of impending/present danger, improving skills for the overall assessment of safety, and how to properly document assessments and observations. The CFSR Impact Plan mentor process will continue to ensure that supervisors have a clear understanding of what is needed in a comprehensive and accurate risk and safety assessment. The process will also continue to ensure that supervisors are able to present that information to their staff in a way that is understood and applied.

**FY22 Update:** The CFSR Supervisor Case Review and Mentoring process continues to target gaps in practice and allow for continued learning for staff. The targeted review process focuses on improving supervisory capacity for case staffings, transfers and closures; creating case movement and increased consultative opportunities with case managers. This process has been in effect for the past three years, so a check in was conducted with the field staff to see if there are any lessons learned and/or barriers to implementation. Feedback was solicited from the C3 Coordinators during FY22 regarding the current overall mentoring process and the CFSR Supervisory Mentoring reviews. This feedback was garnered in an effort to align the work of the C3 Coordinators and the CFSR mentoring process to improve overall outcomes and supervisory capacity. In addition, a workgroup composed of project managers for the CFSR Mentoring Process, the Supervisor Mentor team, Quality Assurance team and regional

Mentoring and Staff Development Field Program Specialists has met to further align the mentoring efforts collectively. This work is ongoing.

#### **Benchmarks**

The CFSR Outcomes for Safety 2 will be used as benchmark measures for the overall goals, improving from 27% to 40% by March 2024. The CFSP identified timely transfers between Investigations and Family Preservation, with a goal of 55% by March 2022, and 85% by 2024; however, Georgia SHINES currently does not have a mechanism in place to track this item and distinguish transfer staffings from other types of staffings. The Division is exploring potential data sources to ensure accurate tracking and reporting of this measure in the next APSR.

**FY22 Update:** See report Section C: Update on Assessment of Performance for analysis on the State's performance of these outcome measures.

# Feedback Loops

**FY22 Update:** Quarterly mentoring reports and leadership summaries are a part of the feedback process throughout the implementation of the case review and mentoring project. Using quarterly mentoring reports, mentors and mentees capture the top three case review trends identified in the quarter as well as activities, resources, trainings and observations used throughout the quarter to impact those trends. This process supports professional development of supervisors and case managers. The reports are also shared and debriefed with county leadership and are used to develop quarterly leadership summaries that capture the top trends across the county/region and identify key activities to implement over the next quarter to directly impact those trends. Such examples include, but are not limited to, Lunch and Learn trainings for staff, trend related Café 212 calls, and unit meetings for live learning.

# Training/Technical Assistance/ Evaluation

**FY22 Update:** Continuing from FY21, the Division requires initial training to all new workers and ongoing training for current staff is routinely offered and accessible in virtual and classroom-based formats (during the COVID-19 pandemic, trainings have been provided virtually). The Division has an ongoing process of mandatory refresher training and evaluation to ensure staff competency in all areas of practice.

Regular and frequent staffings between the supervisor and case manager afford the supervisor an opportunity to determine whether the case manager has an understanding of how to properly assess safety and risk and subsequently carry out the necessary tasks of working with individual families and continuously assessing their progress and needs.

County directors ensure that their staff receive the necessary training to develop skills and knowledge needed for proper assessments of risk, safety, and needs of families.

## **Implementation Supports & Collaboration**

**FY22 Update:** Through the CFSR Impact Reviews, cases are reviewed and the findings are discussed with front line staff to develop an understanding of good practice. These discussions serve as a learning tool to identify mistakes and acknowledge quality work. The mentoring component of this process further supports the supervisor's understanding to properly assess safety and risk, and the information can be used to develop the supervisor's ability through the development of targeted action steps.

County leadership shadow workers on a random basis to monitor case work and ensure the accuracy of case record documentation. This allows for observation of the case manager to gauge their understanding and ability to assess risk and safety. After each observation, the case manager is provided with direct feedback. FY22 assessment of this work has received positive feedback from state and county level staff.

Beginning in May 2022, the Division's QA Review Team will begin supporting the CFSR Impact reviews by collecting data on the frequency of case consultations, whether supervisors are routinely reviewing case records, and the effectiveness of supervisory directives. For each case that is reviewed, the QA Review Team will provide review guides and supplementary supervisory findings. Reports will be provided to staff after each three-month cycle. CQI Teams in each region will use the outcomes to develop or revise strategies for improvement.

# **Objective 3:** Strengthen the Kinship Continuum Program

**Action Step:** The state will consistently track the number of families serviced by the Kinship Navigator Program and increase the number of kin families that are fully approved foster parents.

**FY22 Update:** This action step is completed. SHINES deployed system enhancements to provide kinship staff with automatic notifications of relative and fictive kin placements. The program has served 987 kinship caregivers from October 2021- March 2022.

**Action Step:** Georgia SHINES enhancements set to occur in 2019 and 2020 will automatically track safety requirement completion for all kin caregiver cases.

**FY22 Update:** This action step is completed. The agency completed SHINES Voluntary Kinship and Kinship Foster Care enhancements in November 2019 to align with the new practice changes.

**Action Step:** Georgia will develop policies and practices and provide technical support to field staff by December 2020. The Kinship Continuum will be in effect statewide at the end of October 2019. State and region level kinship staff will assess the effectiveness of each region's implementation of the Continuum.

**FY22 Update:** This action step is completed. The Kinship Policy Chapter 22 was completed in September 2020, that included twelve policies specific to kinship placements in CPS and Foster Care.

**Action Step:** Georgia will conduct an evaluation assessment of Georgia's Kinship Navigator Program to pinpoint strengths, weakness, or necessary program improvements. Results of the assessment will be shared widely with kinship staff, field staff, kin caregivers, service providers and executive leadership. In late 2019 through early 2020 the Division will create an action plan for implementing the recommendations of the evaluation assessment.

**FY22 Update:** The Division has prioritized the use of kinship caregivers to care for children who cannot stay at home. According to recent Georgia budget hearings, the number of youth placed with relatives has increased from 19 percent to "almost a third" in recent years. With the support of federal grant funds, DFCS is working to enhance Georgia's Kinship Navigator Program service delivery and infrastructure by developing a responsive, strengths-based support system for kinship caregivers across the state. The Georgia Kinship Navigator Program Enhancement Project is in the third year of evaluation. The evaluation goals and objectives for FY22 include the following:

- 1. Implement data collection activities as defined by the Kinship Navigator Program Evaluation Plan developed by the evaluation team during FY21.
- 2. Create and manage a Cohort of 8 counties with Kinship Navigator funds to provide financial support to Kin Caregiver families and assist with gaps in services in their communities.
- 3. Analyze and produce an annual report for FY21-FY22 that includes findings related to each of the five primary evaluation questions.
- 4. Provide support to Kinship Navigator Program leadership and staff to ensure quality data collection needed to assess whether the program model was implemented as planned, to identify major challenges and successful strategies associated with program implementation and determine the extent

to which expected changes in child or youth outcomes occur and whether these changes can be attributed to the program activities.

Methods for the FY22 evaluation will include:

- Program participant level data collection through KINDS including: Referral Form, Intake Form, Needs Assessment, Encounter Form, and post-service Participant Survey.
- Surveys with community organizations and advisory committee members.
- Focus group with program participants in both enhanced counties.
- Surveys with DFCS Kinship Continuum and other DFCS staff.
- Facilitation of regular program evaluation technical assistance meetings with program staff.
- Review and analysis of data collected during FY21-FY22.

The overall evaluation project deliverables will enhance the program model by identifying and conducting data collection with comparison group in enhanced service areas, conducting interviews with community organizations and sample of Kinship Navigator Staff, and analyzing findings using KINDS database, surveys, and focus groups to assess program implementation and child, youth, and family outcomes.

#### **Benchmarks**

Increase the number of kin families who are approved as foster parents from 0.5% to 34% by March 2024. The state will strive to meet the following targets:

| March 2020 | March 2021 | March 2022 | March 2023 | March 2024 |
|------------|------------|------------|------------|------------|
| 8%         | 16%        | 22%        | 28%        | 34%        |

**FY22 Update:** On March 31, 2022 (single point in time), 129 children were placed in an approved relative foster home (also referred to as a kinship partnership parent). This represents 2% of the total number of children placed in out of home care on that date, and 5% of all relative/kinship home placements (2,560).

The number of children placed in relative/kinship homes upon entering care has increased during the reporting period (see Kinship Chart #1); however, the percentage of relatives approved as foster parents has not increased since the CFSP benchmark measure was set.

Kinship Data Chart #1: The Number of Children Placed in Kinship Homes Upon Entering Care (April 2021 – March 2022)



Source: Georgia SHINES, LENSES report

# Feedback Loops

Kinship state leaders, advisory board, and programs staff partnered with the evaluation team to develop surveys and feedback loops. Kinship surveys gather information related to the following key components:

- What kinds of supports and services does the Kinship Navigator program provide to caregivers?
- What impact does the Kinship Navigator program have on the well-being of caregivers and families?
- How does the Kinship Navigator program foster partnerships between local and state agencies to increase agency knowledge of the needs of kinship care families and promote better support for caregivers?
- How does the Kinship Navigator program coordinate services with local and state level agencies to support kinship families?
- What system level changes are needed to improve service delivery and support to kinship families?

Client data are collected at referral, needs assessment, intake, and at each encounter and entered into the KINDS database. Surveys will be administered to DFCS staff by evaluators in the summer of 2022. The evaluation team will also conduct interviews during

the last 3 months of the year with a sample of community organizations and kinship caregivers and navigator staff. The kinship leaders will continue to leverage agency feedback provided during annual APSR meetings, C3 Coordinator reports, and post kinship training evaluations.

# **Training/ Technical Assistance**

Kinship state office leaders continue to facilitate a monthly state-wide technical assistance call. Over 100 agency staff participate each month to review practice trends, data, and on-going kinship efforts across the state. The Kinship Unit has helped DFCS Regions 3, 6, 7, and 12 develop and tailor regional strategies to monitor and support kinship placements. This led to a incorporating a regional spotlight during monthly discussions. Regional staff share kinship outcomes and barriers to promote a consistent approach to kinship care. As a result, several regions have requested follow-up regional/county trainings and case consultations. In FY22, Kinship staff have participated in 135 agency county staffings to address placement concerns and prevent disruptions.

#### **Evaluation**

Client data will be collected at referral, needs assessment, intake, and at each encounter and entered into the KINDS database. Surveys will be administered to DFCS staff by evaluators in the summer of 2022. The evaluation team will also conduct interviews during the last 3 months of the year with a sample of community organizations and kinship caregivers and navigator staff. The kinship leaders will continue to leverage agency feedback provided during annual APSR meetings, C3 Coordinator reports, and post kinship training evaluations.

#### **Implementation Supports & Collaboration**

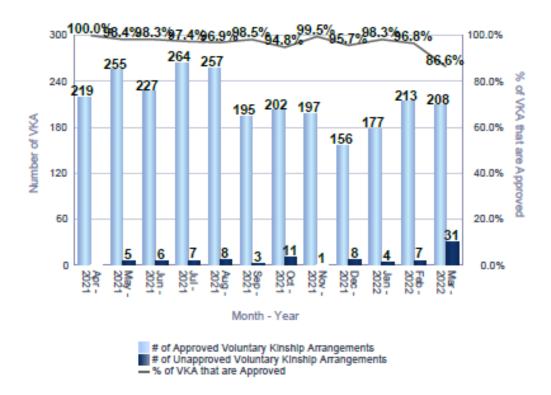
Collaboration with various stakeholders is essential to supporting and strengthening Georgia's Kinship Continuum and Navigator Services. Currently, state leaders are partnering with the DFCS Early Childhood Unit and the Department of Early Childcare and Learning (DECAL) to develop Early Head Start/Head Start priority designation for children living temporarily with kinship caregivers because of DFCS involvement. The program is also partnering with Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) to provide training to kinship navigators to increase kinship families maximum use of available services and resources. These collaborations will assist in addressing some the leading reasons for referrals to the navigator program. The kinship unit began hosting monthly kinship caregiver support webinars in FY22, as

educational and behavioral health services remain critical to maintaining safe and stable kinship families.

The agency centered its first stages of the Kinship Continuum around improving culture change, policy, and practice. Kinship caregivers helped to inform many of the current strategies and enhancements. DFCS leadership will expand and scale up specific engagement opportunities to include input from youth with lived experience in FY23.

# Kinship Data Chart #2: The Number of Approved Voluntary Kinship Arrangements (April 2021 – March 2022)

| # of Approved Voluntary Kinship Arrangements                |       |
|---|-------|
| # of Unapproved Voluntary Kinship Arrangements              |       |
| % of Arrangements with Approved Voluntary Kinship Caregiver | 96.6% |



Source: Georgia SHINES, LENSES report

#### **Objective 4:** Enhance Support Services to Youth ages 18-21

**Action Step:** Create written, documented plan to guide the timeline of implementation and launch activities. Completed July 2018

Action Step: Convene three District Youth Listening Sessions. Completed Summer 2019

**Action Step:** Convene four workgroups to help build out what services will look like for youth in the areas of housing, education, health and employment. Completed with modifications: Staff engaged with youth and internal and external stakeholders to finalize policy and practice changes affecting older youth. Changes are noted in Child Welfare Policy Chapter 21: Extended Foster Care Services.

## **Action Steps (new for FY22)**

**Action Step:** Create and define the Extended Foster Care (EFC) child welfare policy for youth age 18-21

**FY22 Update:** The EFC Policy Chapter has been drafted.

**Action Step:** Disseminate EFC child welfare policy to DFCS staff for implementation

**FY22 Update:** The EFC Child Welfare Policy Chapter is pending review and approval. Policies will be disseminated after July 1, 2022.

**Action Step:** Establish a protocol for transitioning older youth in care at age 21

**FY22 Update:** For young people who are preparing for transition out of care at age 21, preparation for their transition must occur as early

REGION 5 is exploring the establishment of a regional management case specializing in services to youth 18-21 to offer a more strategic approach to this critical transition period. In addition, a field program specialist serves as a subject matter expert for independent living programs and services and has taken the lead on establishing a youth cohort that meets every other month to bring attention to issues essential to successful vouth transition.

as possible between 18 and 20 years old. In 2021, interagency units collaborated to create a statewide plan for DFCS regions to implement structured transitioned plan for 21-year-olds. Information was disseminated to each District and instructions were provided that explained that the National Public Health State of Emergency was to end on September 30, 2021, and young people in care who had been able to remain in care due to that executive order would have to transition out of care by that date. These two groups of young people included undocumented youth who were identified as an 'unqualified alien', and Young Adults in care age 21 and older.

Districts were advised to ensure that county teams have completed transition meetings for all youth and young adults who were within these categories and their information and transition meeting has been recorded in the *Youth Listing Database*. If staff were unfamiliar with the *Youth Listing Database*, they were

advised to contact the 21+ District or Regional Champion. Districts were also advised if they had a question regarding an undocumented youth, staff should contact DFCS General Counsel. Additional guidance on next steps for young people with a completed transition meeting, could be provided by the Care Coordination and Treatment Unit (CCTU) Specialist for each region.

**Action Step:** Enhance the foster care scattered site independent living placement options for youth and young adults in extended foster care.

**FY22 Update:** The Scattered Site Placement protocols and provisions have been updated to ensure young people are properly placed in independent programs and settings. The goal of an independent living placement is to prepare youth to become socially and financially independent from the foster care system. When a youth enters an ILP program at age 18, the provider will have less than 3 years to ensure that young adults are ready for independence at age 21; therefore, it is critical that the young person is able to successfully move from less to more independence in all areas —education, employment, housing, life skills, etc. —over the course of the placement. To this end, Independent Living Programs are broken into three (3) tiers.

Each young person that enters an Independent Living Program must start in Tier 1. They must complete each milestone within the tier before progressing to the next. Each tier has its own expectations and outcomes, and movement between tiers is based on assessments completed by the provider at least every 90 days. Below is a matrix that outlines the updated Room, Board, and Watchful Oversight Standards that impact the new scattered site placement process for young people in care.

| <b>Previous RBWO Minimum Standards</b>               | <b>New RBWO Minimum Standards</b>                |
|--|--|
| Assessment is being completed independently by the   | Assessment will be completed in conjunction with |
| RBWO ILP Provider                                    | the RBWO ILP provider and Independent Living     |
|  | Specialist (ILSs)                                |
| Young people 18 years and older can be placed in     | Young people must be 18 years and older with a   |
| ILP without High School Diploma and/or GED           | High School Diploma or GED to be considered for  |
| (*Note: youth 17 1/2 can be considered for           | placement  |
| placement via waiver request).                       |  |
| RBWO ILP Providers do not have a formal              | Young people must sign the Scattered Site        |
| agreement process as it relates to assessing a young | Placement Youth Readiness Assessment and it must |
| person for placement. The Universal Application is   | be approved prior to being placed with ILP       |
| provided for ILP placement consideration.            | provider. This assessment replaces the Universal |
|  | Application for ILP placement consideration.     |
| All ILP types are categorized together and there is  | Young people matriculate through Tiers. Tier 1,  |
| no graduated progression throughout the              | Tier 2 and Tier 3 (*Note youth must successfully |
| independent living program.                          | complete the requirements of each tier in        |
|  | subsequential order)                             |

| Young person must be employed at least 15 -20 hours or attending school full-time.  | Young people must be employed at least 80 hours per month or attending post-secondary school full-time (12 or more credit hours per term) or working part-time and enrolled part-time. A young person not attending school must be employed full-time: 30 hours per week, no less than 120 hours per month.  |
|---|--|
| RBWO ILP Providers are required to visit the young person daily for the first week and twice a week for the 2nd through the 4th week along with daily telephone calls.    | The Tier the young person is in will determine the frequency of in-person visitations and contacts with the young person.  |
| RBWO ILP Providers and the young person are meeting together for ongoing assessment of support that is needed such as education, mental/physical health and social needs. | Each young person entering the ILP must have a staffing within the first 30 days of placement, which must include the young person, DFCS Case Manager, ILS and other supports. The purpose of the staffing is to review the results of the Assessment, program expectations, the WTLP and ILP ISP and to discuss the youth's eligibility for services and funding.   |
| RBWO ILP Providers are required to give a monthly stipend, but a dollar amount is not specified.  | Youth in Single Occupancy Housing must be provided with a <b>minimum monthly allowance of \$300</b> to cover hygiene products, food and other essentials. Providers must assist youth with creating a shopping plan/schedule for the purchase of said items and food. All youth are eligible to apply for food stamps, however, food stamps are supplemental, and the food allowance provided must not be lowered based on the amount of food stamps the youth receives. |

#### Feedback Loops

In 2021, the Division established the Georgia Peers Advocating for Change (GPAC) Youth Advisory Board. This youth advisory board is comprised of young people who represent varying backgrounds, regions and demographics. The youth advisory board provides insight on upcoming and new policies within the Division that impact young people and the care they receive, participate in APSR meetings, and provide feedback on state CFSR and CFSP goals and objections. A workgroup was established to create the updated scattered site placement process.

Prior to the establishment and dissemination of the new scattered site placement process for young people in care, a workgroup was established to ensure input from internal and external partners were included within the implementation. Representatives from various placement provider organizations, internal office, DFCS county office and other key leaders within child welfare were engaged in meetings and planning sessions. The current

scattered site assessment protocol represents the collective thoughts and input of those partners. This work is ongoing.

The Federal Plans Unit schedules quarterly C3 Coordinator reports from each of the 14 DFCS regions to provide feedback on this objective. In the reports, regional efforts are described, as well as areas needing improvement and requests for additional supports. These requests for assistance are shared with the relevant program partners to facilitate solutions. Strengths in the regions are also shared to encourage new ideas and partnerships across the state.

# Training/ Technical Assistance/ Evaluation

The Division's Data Unit and the Well-Being Services Section Data & Systems Manager work collaboratively to ensure data is maintained and reported as needed for federal and state reporting purposes. At this time, there are no formal evaluation efforts being conducted.

Regions are continuing to identify opportunities to educate staff on support services for older youth in care. For example, Region 2 conducted a Supplemental Security Income (SSI) training in March 2022 to educate staff on Department of Behavioral Health and Developmental Disabilities (DBHDD) assistance and SSI involvement. It had been identified that Region 2 Case Managers may not have had the best knowledge and skills to identify what older youth aging out of care may require and all the resources that are available to them. By partnering with DBHDD, Region 2 was able to conduct a two-hour training that included topics such as types of social security benefits, identifying children who may qualify, how to apply for benefits, how to make appeals, and what happens once benefits are approved. The region had a great turn out with lots of engagement and positive feedback on the training. The region is ensuring that roundtables with the Independent Living Specialists (ILS) are occurring once the youth reaches age 16 and every 6 months thereafter. The region is also ensuring that if the child has specific needs, their service providers, therapist(s), CASA, birth parents, attorneys, and mentors are all in these meetings. Through having the transitional roundtable, the youth can learn about the benefits of remaining in care early on and begin planning for items such as housing, educational funding, assistance with furniture, and other needs.

#### Implementation Supports & Collaboration

Partners who support the implementation of extended care for young people who are in care and who are transitioning out of care include (but is not limited to), the vast array pf private independent living programs, YESS for Youth, the Multi-Agency Alliance for

Children, CHRIS 180, nsoro Foundation, the University of Georgia Fanning Institute, Angels in Paradise Inc., Covenant House and other internal and external organizations who have a commitment and interest in young people in care and their success.

Every youth has an Educational Advocate that assists with school needs to ensure they can graduate high school or complete their GED requirements. Youth are placed in scattered site housing/apartments where available and are assigned life coaches with each placement. While in the placement, youth work with the life coach on daily living skills, such as cooking, cleaning, laundry, grocery shopping, money management, and job readiness. The placement provides the youth with means of transportation to get to their destinations, which can include MARTA passes or Lyft/Uber rides if needed. These life skills are also reiterated by the case manager on their monthly visits with the youth. The case manager also ensure that the youth participate in the Independent Living Program (ILP) workshops that are hosted by local partner agencies.

County Independent Living Specialists (ILS) provide monthly calendars and reminders of the Opportunity Passport Program (for youth over the age of 18) and various training sessions and workshops offered for ILP eligible youth who are 14 – 21 years of age. Partners include the Multi Agency Alliance for Children (MAAC), Bethany, Amerigroup, and Georgia State University.

The ILP Coordinator works with youth to ensure they are educated about their options and encourages consideration to remain in care and take advantage of what is offered. Regionally, Transitional Roundtables are attended by the facilitator/Youth Champion, case manager/supervisor, EPAC, WPAC, Amerigroup, ILP, the foster youth and any other identified resource representative in order to provide the necessary information the youth need to make an informed decision. There are identified barriers to this objective in some regions of the state. Some youth who have been in care for an extended period of time may no longer want to be involved with DFCS; some youth who are transitioning may not want to follow the rules of ILP or, in some cases, be responsible for their actions; some youth may not have a good working relationship with their case manager, for a variety of reasons.

For youth with severe mental health issues, Department of Behavioral Health and Developmental Disabilities (DBHDD) waivers are sometimes denied due to the child being in foster care and receiving services. Division leadership is working with DBHDD to resolve this and ensure youth in care receive needed services. The Region Support Team (CCTU Specialist, Treatment Specialist, IL Specialist and WPAC Specialist) meets monthly to cadence current lists of youth requiring disability and other high-end services to ensure they are requested timely. The regional Treatment FPS and the Independent Living Specialist work closely together on conducting transition planning meetings with youth, ages 16-21. In FY23, the Autism Pilot Program in Region 12 will provide screening

and evaluation that will be helpful in ensuring that youth preparing for transition receive appropriate referral and completion of applications to appropriate agencies to meet their needs. This work is ongoing.

For youth that are parenting, Region 13 has established a program geared towards young parents in care to identify all supports that a young parent may needs. The region works with a provider that has teen parent life coaches availably for every young parents. These life coaches work with youth on parenting skills, help youth with applying for childcare, food stamps, and other needs to care for their child. The young parents work with county leadership on the parenting pilot program to ensure their voices are heard and needs are met. Program staff meet with the young parent every six month to address goals that they are working on for themselves and their children. Program staff refer young fathers to the Fatherhood program through the DeKalb Access and Resource Center (ARC), where they are assigned someone to work with them on Fathering, and their rights as the child's father. The ARC also works with the youth to make sure he is legitimated as the father of his child.

**Objective 5**: (PIP → CFSP) Ensure children are appropriately placed in settings that meet individualized needs and preserve family and community connections.

**Action Step:** Full permanency roundtables including follow up as specified in the permanency roundtable model will occur for cases where the children have reached the 13th month in care and there is no clear permanency path identified. Cases will be identified by the supervisor or permanency Field Program Specialist. Permanency case consultations will continue for cases not in need of a full permanency roundtable.

**FY22 Update:** This action step is completed and the work is ongoing. The regions have shifted away from conducting roundtables and toward case consultations (often at 6 or 9 months, and again at 12 months). Regions have developed case consultation guides to incorporate relevant areas of permanency discussions that include conditions for return, status of diligent search, progress around needed behavioral changes, family supports and services, and whether alternative permanency should be pursued. Guardianship options are being discussed with the staff to focus on the family's individual needs to determine the best permanency option for the child.

The Permanency Connections Unit tracks 12-month case consultations monthly. In the 4<sup>th</sup> quarter of CY2021, the Unit reported the following data. This work is ongoing.

|          | Number of children at 12-month benchmark | Number of children with consultation | Percentage of children with consultation |
|----------|--|--------------------------------------|--|
| Dec 2021 | 228                                      | 114                                  | 50%                                      |
| Nov 2021 | 208                                      | 135                                  | 65%                                      |
| Oct 2021 | 267                                      | 155                                  | 58%                                      |

**Benchmarks:** The Division anticipates this strategic objective will positively impact CFSR Outcomes, Permanency 1, Item 5; Permanency 1, Item 6 and Well-Being 1, Item 12.

**Target Benchmarks** 

Item 5: 58% by March 2022

Item 6: 40% by March 2022

Item 12: 33% by March 2022

FY22 Update: See Section C: Update on Assessment of Performance for analysis on

the state's performance of these outcome measures.

## **Feedback Loops**

See below for feedback provided from the PAUSE Process, which serves to ensure children are placed in the most appropriate settings.

# **Training/ Technical Assistance/ Evaluation**

The Division is exploring opportunities to implement a robust evaluation effort of case consultations and the PAUSE Process. This work is ongoing.

# Implementation Supports & Collaboration

DFCS continues to utilize the "PAUSE Process", which supports youth placements by improving collaborative relationships with caregivers, reducing 72-hour discharge notices, and stabilizing placements or extending move time. In addition to reducing 72-hour discharge notices, the process also reduces those emergency disruptions when youth must be moved on the same day. PAUSE is a multi-agency approach to exhausting efforts to stabilize a placement that is nearing disruption with support. The intent is to prevent unnecessary placement changes and promote placement stability. PAUSE serves to

identify the youth's individual needs, trends, and history, to see the youth as a person and not a placement.

The PAUSE process is found by staff to be an extremely beneficial process overall. Even when a placement is not salvaged every time, the process has reduced the number of requests for immediate removals. Feedback shared in surveys indicated that children have benefited from reduced disruptions, individualized services, and stronger teamwork to support youth success in placement, but more caregivers are needed to handle high end youth, and sometimes the process happens too late, and the provider is moving the child anyway.

The Regional Adoption Coordinators and the Adoption Exchange both participate in PAUSE calls to support the goal of stabilizing placements. Both are also involved in prepause calls to offer support and recommendations of services to stabilize placements. Additionally, the RACs continue to meet with their counties regularly and are sometimes able to assist counties with the implementation of services to provide for stabilization, with the goal of achieving safe and timely permanency. The most utilized service for providing supportive service to adoptive families is the ADOPTS program. ADOPTS is a program that the State implemented approximately six years ago. ADOPTS (Addressing the Distress of Post-Traumatic Stress) is a trauma-focused, adoptionspecific therapy program serving children ages 8-17 years old and their parents. ADOPTS places its primary emphasis on treatment of past traumatic experiences for pre and post adopted children. ADOPTS does not focus on processing or exploring the child's traumatic memories. Instead, the focus is on connecting the trauma the child has experienced to the current behavior and to build coping skills which in turn strengthens the family unit. The ADOPTS program focuses on increasing the child's capacity to form healthy attachments to others, understanding how trauma has affected their lives, developing healthy expression and regulation of emotions, and building personal strengths. The focus of treatment is to help the child and parents to understand the impacts of trauma and to become attuned to the child's triggers and needs.

While the Regional Adoption Coordinators (RACs) and the Adoption Exchange teams have been working closely with field staff to stabilize pre-adoptive placements, Georgia has supported building capacity to support "Post-Permanency" families by creating the Adoption and Guardianship Services Unit in March of 2021. The goals of the Unit are: 1) to enhance the stability and support of post-adoptive/guardianship families, 2) to reduce the likelihood of discontinuity, and 3) to build well-being and resilience. Taken together, these will secure high quality, efficient, accessible supports and services for Georgia's adoption and guardianship families who have answered the call to meet the needs of children and assure they grow and achieve their potential.

For 12 months, the Unit engaged the support of the National Quality Improvement Center for Adoption and Guardianship Support and Preservation (QIC-AG) to provide services and supports to adoption and guardianship families post legalization. The process for QIC-AG was to: (1) Determine the population most at risk of discontinuity, including any differences between outcomes for adoptive and guardianship families; (2) Assess the accessibility and quality of services and support that exists along the permanency continuum; (3) To identify gaps in services needed to support and sustain post-permanency families; and (4) To begin to remedy the gaps. The support from QIC-AG officially ended on March 31, 2022; in June, the Division received the final report and recommendations to support the team moving forward. This work is ongoing.

**Objective 6**: (PIP → CFSP) Increase the Division's ability to support youth who need additional educational assistance.

**Action Step:** The State will provide educational academies to increase stakeholder and case manager awareness of educational services that advocate for youth in educational settings

**FY22 Update:** The Division provided 76 Regional Academies and 15 Statewide Academies.

**Action Step:** In-person and online virtual training will be provided through the WebEx training platform to educate stakeholders and case managers on EPAC's purpose, services provided, and inform case managers of the latest educational trends and information.

**FY22 Update:** Due to restrictions on in-person gatherings resulting from the Covid-19 pandemic, all EPAC training opportunities remained virtual. The only training opportunities provided were Education Academies as described above. EPAC is currently in the process of utilizing alternative training opportunities which include "SHINES Shorts" that will be housed on the Division's Learning Management System (LMS) website. These short learning videos will be required for a case manager to receive certification. The anticipated launch date is July 2022.

**Benchmarks:** By March 2022, the education team will provide:

- At least three (3) statewide academies, fifty (50) county-level education academies, and two (2) online webinars to enhance state and local staff's knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs;
- At least three (3) statewide academies and thirty-five (35) county-level Education Academies and two (2) online webinars to enhance state and local staff's

- knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth;
- At least seven (7) Education Academies and one (1) online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; and
- At least seven (7) Education Academies and one (1) online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth.

**FY22 Update:** Regional Academies – 76; Statewide Academies - 15 (which includes partner/contractor Georgia Appleseed)

# Statewide Academies led by EPAC - 6

August 3<sup>rd</sup> and August 5, 2021 – Statewide Education Academy – BACK TO SCHOOL – 2 Academies

August 3: 44 participants / August 5: 58 participants

Survey results: 98% of participants thought information was useful/ 86% would use in their work to advocate for kids

August 24, 2021 - Statewide Education Academy - SPECIAL EDUCATION - 2 Academies

August 24 (morning): 57 participants / August 25 (afternoon): 30 participants

Survey results: 95% of participants thought the information was useful/98% would use in their work to advocate for kids

December 14, 2021 - Statewide Education Academy - SPECIAL EDUCATION - 2 Academies

December 14 (morning): 37 participants / December 14 (afternoon): 24 participants

Survey results: 98% of participants thought the information was useful/95% would use in their work to advocate for kids

# Statewide Academies Led by EPAC Contractor-Georgia Appleseed regarding discipline- 9

1/11/22: ESM and CASA Tribunal Training (statewide) 21 participants

1/19/22: AmeriGroup Town Hall Training (statewide) We had 225 participants but **17** identified as DFCS case managers

2/24: DFCS Region 13 training: 25 participants

3/3/22: DFCS Region 5: 33 participants

3/4/22: DFCS Region 3: 50 participants

3/15/22: DFCS Region 4: **86** participants

3/18/22: DFCS Region 1: 50+ participants

3/21/22: DFCS Region 12: **100+** participants

3/28/22: Cobb County DFCS: 34 participants

Education Academies were available to anyone. CCIs, private agencies, and foster parents are welcome and encouraged to attend. These Education Academies and presentations provided information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local educational processes, DFCS child welfare best interest determination policies, and advocacy. Additionally, the Academies provided information and best practices for case managers and supervisors as they engage with the local school system and academic centers for youth on their caseload.

**Benchmark:** Participation of case managers in online Education Academies milestones for strategy completion: 30% by 2021, 35% by 2022, 45% by 2023, and 50% by 2024.

**FY22 Update:** Currently, the Division does not have this data. The EPAC Unit is working toward implementing a new practice with the DFCS education and training unit to create a series of "SHINES Shorts" and training videos that will be mandatory for all case managers to complete prior to receiving their certification. Anticipated start date July 1, 2022.

# Feedback Loops

For each academy, participants are asked to complete a feedback survey online. Currently, an average of 97% of participants report that the information was useful and 93% would use the information in their work to advocate for kids.

# Training/ Technical Assistance/ Evaluation

**FY22 update:** EPAC held 76 regional academies and 15 statewide academies. These academies and presentations provided information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local

educational processes, DFCS child welfare best interest determination policies, and advocacy. Due to the Covid-19 pandemic, all trainings occurred virtually.

# Implementation Supports & Collaboration

**FY22 Update:** The Division and Georgia's Department of Education (DOE) continue to exchange information through the Statewide Longitude Data System (SLDS), allowing each agency access to relevant and pertinent information to aid in the academic support of the foster youth. DOE has identified Foster Care Points of Contact at the State and Local level to work collaboratively with EPAC's Education Support Monitors in the immediate enrollment, best interest determination meetings, transportation plans, special education and behavior concerns of foster youth. Access to SLDS continues to help the EPAC Unit to identify IEPs, complete educational diagnostic assessments and provide tutoring for youth.

EPAC implemented a new Contract effective October 1, 2021, between the Division and Georgia Appleseed called the Fair Project. This contract assists the Division by providing direct legal representation for children in care facing suspension or expulsion from school. Georgia Appleseed advocates for legal and policy innovations to the foster care system in Georgia and grows the community of advocates for children in care. In addition, Georgia Appleseed provides statewide training to field offices regarding the disciplinary process. To date, Georgia Appleseed has completed 9 disciplinary academies statewide.

SB 107, passed by the State Legislature during the 2021 session, amends Title 20 of the O.C.G.A. relating to education, so as to provide for in-state tuition for youth who are from homeless situations and to provide for the waiver of tuition and all fees, including customary rooming and board fees, for qualifying foster and adopted individuals, at units of the University System of Georgia and the Technical College System of Georgia, subject to certain exceptions. SB 107 became effective on July 1, 2021 and the Division has implemented an online application for youth that have experienced foster care, adoption, or homelessness.

#### **Objective 7**: (PIP → CFSP) Individualized Education Plans (IEP)

This objective and activities can aid in the successful matriculation of youth in foster care.

**Action Step:** When warranted foster youth will have current and accurate IEPs. Reviews will be conducted for youth, ages 5 -17, who have an identified IEP (as noted in GA SHINES). They will receive accommodations needed for their educational setting. Education Support Monitors will pull random IEPs from their respective regions. Reviews

will occur monthly and 5% of the cases will be reviewed each month. Cases will be identified based on SHINES data retrieval.

**FY22 Update:** EPAC reviewed 653 IEP from March 2021 through March 2022. On average EPAC reviewed 54+ per month. Out of the 653 IEP's that were reviewed, 493 IEP's were satisfactory and 160 IEP's were unsatisfactory. Unsatisfactory IEP reviews consist of out of date, inappropriate services, or missing list of attendees. Other unsatisfactory ratings may include goals that are not properly aligned with the stated deficits. Once the IEP review is completed, the document is uploaded into SHINES and sent to the case manager.

**Benchmarks:** Progress will be measured by Well-Being Outcome 2: Children receive appropriate services to meet their educational needs. The State goal is to achieve 60% by March 2024.

| March 2020 | March 2021 | March 2022 | March 2023 | March 2024 |
|------------|------------|------------|------------|------------|
| 49%        | 52%        | 55%        | 58%        | 60%        |

**FY22 Update:** See Section C: Update on Assessment of Performance for analysis on the state's performance of these outcome measures

**Benchmark:** EPAC unit will conduct at least fifteen (15) Education Academies, on special education to enhance the state and local staff, child caring institutions (CCIs), private agencies and foster parents' knowledge on special education and individualized education plans (IEPs), ensuring the appropriate services foster youths need to meet their educational needs by March 2024.

**FY22 Update:** EPAC held the following Education Academies: Regional (76) and Statewide (15). Training topics include back to school, Education stability, best interest determination, special education, and disciplinary issues.

**Benchmark:** By March 2022, seven hundred IEPs reviewed, if applicable, recommendations provided to case managers and/or supervisors, and at least, 70% of the recommendations will have been implemented to ensure 55% of the youth are receiving the appropriate services to meet their educational needs.

**FY22 Update:** 75% percent of youth that had IEP's reviewed were receiving appropriate services to meet their educational needs.

# Feedback Loops

**FY22 update:** The EPAC Unit continues to provide the Regional Directors with monthly reports and meets with them twice a year, to solicit feedback and offer ways of support to the field. Feedback provided to the EPAC Unit is used to inform future trainings and supports to staff.

# Training/ Technical Assistance/ Evaluation

**FY22 update:** EPAC continues to provide education academies and held 76 regional academies and 15 statewide academies. All academies were facilitated virtually through the MS TEAMS platform. To evaluate each training, a survey was provided to participants. The survey question topics included case manager demographic information, education academy session information, satisfaction of virtual training format, previous training related to education support for youth in care, helpfulness of training, most informative topic, application to future work, and any additional trainings of interest. The results were used to improve subsequent education academies by modifying training content to include topics based on staff recommendations, standardizing trainings that have been highly attended, and enhancing the training delivery format.

- 1. Insights from the survey include:
  - EPAC & The Importance of Education was the most attended training
  - On average, the virtual format received 4.5 out of 5 stars
  - Majority of staff members experienced education academies as their first training related to education support
  - Majority of staff member found trainings to be extremely helpful
  - Staff found topics on IEP and 504 plan to be most informative
  - Majority of staff will use the information received in trainings at work

The Division has initiated the development of "SHINES Shorts" which are short training videos to educate staff. The implementation date is projected for July 1, 2022. This training will be mandatory for all case managers and required to obtain their certification.

#### Implementation Supports & Collaboration

The EPAC Unit continues to provide the Regional Directors with monthly reports and meets with them twice a year, to solicit feedback and offer ways of support to the field. Feedback provided to the EPAC Unit is used to inform future trainings and supports to staff. The EPAC training videos will be mandatory for all case managers and required to obtain their certification. These implementation supports are ongoing.

# **Strategic Priority 3: Service Array**

**Objective 1:** Maintain a Parent Advisory Council to enhance primary and secondary community-based prevention and to increase parent leadership and engagement within the Division

**Action Step/Benchmark:** The Prevention and Community Support (PCS) Section will provide information to the Parent Advisory Council (PAC) on different evidence-based primary and secondary prevention programs. Anticipated due date: September 30, 2021

**FY22 Update:** Several presentations/trainings re: prevention programs were provided to the PAC members in bimonthly virtual meetings. In November 2021, the Division's Prevention Section had a full-day meeting of the PAC and discussed the Georgia Reads initiative, Inclusive Conversations, and primary prevention campaign video development. In August 2021, the PAC had an orientation from the Prevent Child Abuse Georgia Director about their prevention programs/services and from the Georgia Department of Juvenile Justice. These types of presentations and trainings will continue into the new year.

**Action Step/Benchmark:** The PAC will recommend to the Prevention Section which services are most helpful to families in their communities. Anticipated due date: September 30, 2022

**FY22 Update:** PAC members have participated as reviewers in PCS Statements of Need application reviews as a way to help determine what programs or services should be funded. Additionally, several PAC members participate in the state or regional Child Abuse and Neglect Prevention Plan (CANPP) meetings to provide input. PAC members also provide input to the PCS leadership through the bimonthly virtual or in-person meetings.

**Action Step/Benchmark:** PAC members will participate in the proposal review teams for Prevention Section funding opportunities. Anticipated due date: September 30, 2023

**FY22 Update:** Several PAC members have participated or are signed up to participate in all of the PCS Statements of Need (SON) review teams, to include Promoting Safe and Stable Families (PSSF), Second Step, Sources of Strength, teen pregnancy prevention programs, and Family Resource Centers. PAC members receive a stipend for their time in reviewing. This work is ongoing.

**Action Step/Benchmark:** The PAC will develop projects and activities to work on with the Division. Anticipated due date: September 30, 2020

**FY22 Update:** Three parents presented a workshop at the Summit, Georgia's Child Welfare Conference in November 2021; Nine parents recorded PAC promotional/parent perspective videos with Banyan Communications in November 2021; Two parents presented with PCS staff and Department of Early Care and Learning staff on a webinar about February Parent Leadership Month; A parent in Region 5 presented to regional leadership in February 2022 about being a foster parent and PAC member; Three parents participated in a recorded interview with the DFCS Deputy Commissioner of Child Welfare, Mary Havick in February 2022.

Two parents are working with Banyan Communications to develop a series of training videos from the parent perspective. These videos will be used to support new worker training curriculum and ensure case managers can understand the impact of the child welfare system on parents.

GA PAC participated in a "What Happened to You?" Book Club which met weekly for 10 weeks. The book club was facilitated by the Children's Trust Fund Alliance. The book club discussion guide has been released nationally and PAC members have participated in webinars to discuss the book club. Oprah Winfrey attended the final book club meeting and spoke with the PAC members directly regarding their experience reading/discussing the book.

**Action Step/Benchmark:** Training on parent advocacy, engagement, and leadership will be provided to parents. Anticipated due date: September 30, 2020

**FY22 Update:** Three parents participated in the Children's Trust Fund Alliance and Casey Family Programs' Parent Advocacy Fellowship program. Georgia was one of four states selected to participate in the fellowship. The parent perspective videos are additional opportunities to support parent advocacy and leadership, as well as ongoing conversations with Georgia Department of Education about Family Resource Centers in schools.

**Action Step/Benchmark:** The PAC will have full membership (14 members). Anticipated due date: September 30, 2024.

**FY22 Update:** In FY21, PCS changed the capacity of the PAC to be 16 instead of 14 to allow for two parent representatives in each of the two metro Atlanta regions given the population of those areas. As of April 2022, all slots for PAC members have been filled at this time except for Regions 6, 8, and 9. PCS continues to support ongoing recruitment efforts, specifically recruiting fathers and kin caregivers. Presentations were made at the Adoption and Foster Parent Association of Georgia (AFPAG) annual conference in February 2022 and numerous state and local meetings to recruit for those slots. PAC currently has 13 out of the 16 members.

#### Benchmark:

The measure of progress will be 75% of PAC members will attend all trainings and meetings by FFY 2024. The state will strive to meet the following targets:

| March 2020 | March 2021 | March 2022 | March 2023 | March 2024 |
|------------|------------|------------|------------|------------|
| 35%        | 45%        | 55%        | 65%        | 75%        |

**FY22 Update:** The Division continues to exceed this benchmark measure, with 90% of PAC members attending trainings and meetings in FY22.

## Feedback Loops

PCS continues to work with internal and external partners to engage parents with the work of the Division but also to engage them with our collaborative partners. This year, PCS added a PAC member to the Strengthening Families Georgia Leadership Team and made a recommendation to add a Georgia PAC member to the Alliance's National Parent Partnership Council (ANPPC). PCS engaged PAC members with the Department of Education and Department of Juvenile Justice. PCS also invited DFCS leadership to meet with and engage with PAC members through PAC meetings and inclusion in DFCS meetings. PCS welcomes input from these internal/external partners into how the PAC is operating and any improvements that can be made.

For the trainings and the Book Club, all PAC members who attended completed those surveys and all feedback was positive. Specifically for the book club, members reported that that opportunity had been very meaningful to them and they'd like to do more of it. Due to that feedback, the PCS is beginning another book with PAC later in the year.

# Training/ Technical Assistance/ Evaluation

PCS partnered with the Children's Trust Fund Alliance on the development and coordination of the PAC. The Alliance initially solicited survey responses from the PAC

members following meetings and trainings to evaluate those efforts. PCS is exploring opportunities to continue requesting feedback surveys following each meeting and activity. This work is ongoing.

# Implementation Supports & Collaboration

The National Children's Trust Fund Alliance continues to provide support, technical assistance, and training for the GA PAC through a contract with their organization. The Alliance works with several states to develop and coordinate PACs and was critical with the creation of the GA PAC. Additionally, leadership with the Division has been supportive in utilizing the PAC to provide input into agency initiatives.

The Prevention Section also has a dedicated staff member who serves as the liaison for the GA PAC. The parents know they can reach out to that staff member with any questions or concerns, or when they need assistance or information. In early 2022, the DFCS PAC Staff Liaison conducted one-on-one "check-in" phone calls with each of the PAC members. She is now regularly conducting these calls to allow an opportunity for feedback, requests for additional support, or suggestions for improving the GA PAC. DFCS would not have been successful with creating and maintaining the GA PAC without these implementation supports.

# **Objective 2**: Target 0-5 Early Childhood Education

**Action Step:** Provide statewide Early Childhood Education training to case managers, social service supervisors and foster parents two times a quarter.

**FY22 Update:** Training is provided to county and regional staff. Details are provided in the chart below.

| Training Topic   | Frequency<br>Offered | Audience  | Description  |
|--|----------------------|---|--|
| Early Childhood<br>Care, Education,<br>and Childcare<br>Support for Children<br>in Foster Care | Quarterly            | State Office Staff,<br>Field Staff, and<br>Foster Parents | The Early Childhood Collaboration Unit provides comprehensive monitoring, consultation, support, and advocacy for children in care, ages birth – 5 years old, who qualify for early childhood educational programming and/or childcare (Head Start, Child and Parent Services (CAPS), and Ga Pre-K). With an emphasis on building and fostering relationships that support educational stability at an early age, the unit works collaboratively with the Division's state |

|   |            |   | and county DFCS offices, other state agencies, and external partners to ensure the educational needs of this population are met. Come learn about DFCS Early Childhood Collaboration Unit and the support services we offer.   |
|---|------------|---|--|
| Serving Young Children In Foster Care (DFCS Early Childhood Services Program) | Quarterly  | State Office Staff,<br>Field Staff, Foster<br>Parents, Internal<br>and External<br>Partners | This information session will provide an overview of the Early Childhood Services Program and the key statewide early childhood care and education support services it offers. Participants will also be offered resources that will support them in caring for two unique populations children under the age of five and expectant and parenting youth.  The programs, resources, and supports shared will cover connecting and navigating the following early childhood services:  • Early Learning (Traditional Options: Head Start, Early Head Start, Pre-k, and Quality Rated Programs, Non-Traditional Options: Early Childhood Education Alternate Learning Plan)  • Early Intervention (Children's 1st, Babies Can't Wait, Preschool Special Education)  • Early Health and Wellness (Georgia's Home Visiting Programs, Parent Child Psychotherapy, Children Medical Services) |
| DFCS Childcare<br>Support Services  | Bi-monthly | State Office Staff,<br>Field Staff, Foster<br>Parents,<br>Internal/External<br>Partners     | In this information session participants will learn about childcare supports that span all child welfare case stages. This includes support with resolving issues related to Childcare and Parent Services (CAPS) scholarships, initial referrals, renewals, and case changes. In this session participants will also learn about the specific childcare support services (DFCS Supplemental Supervision Wavier, DFCS Informal Childcare Provider, the DFCS Childcare Services Letter, Childcare support to Expectant and Parenting Youth and Training and Technical Assistance) offered by the DFCS Childcare Services Program.   |

| The Evolving<br>Landscape of Early<br>Childhood: A Child<br>Welfare Perspective | April 2021              | State Office Staff,<br>Field Staff, and<br>Foster Parents                                   | Learn easy ways to help build your baby's brain in this webinar hosted by the Division of Family and Children Services and presented by the Georgia Department of Early Care and Learning! It's easy to do, the key is you! In this webinar, you will also learn about what to expect at each age of your child's development, and free resources that you can use.  |
|---|-------------------------|---|--|
| Head Start/Early Head Start Information Session                                 | Quarterly               | Field Staff and Foster Parents  | This information session will assist participants with understanding the Head Start/Early Head Start Programs in Georgia. All children in foster care under the age of 5 are eligible to attend a Head Start or Early Head Start Program. Children enrolled in this program will have access to the following FREE comprehensive services: Individualized Curriculum, Health Exams, Nutrition Exams and Developmental Screening. Families will be assigned their own Family Support Specialist and so much more. Come learn about the Head Start program and the services this program offers. |
| Supporting Expectant and Parenting Youth In Foster Care                         | September<br>2021       | The Multi Agency<br>Alliance for<br>Children  | For youth in care who are expecting or parenting, the process of transitioning to adulthood is accelerated even if the youth is ill-prepared to assume adult responsibilities. Therefore, expectant, and parenting youth in care need a strong support system and targeted services to assist then in enhancing their potential protective capacities while they strive to become successful, self-sufficient adults. Come learn more about how the DFCS Early Childhood Collaboration Unit supports those efforts.  |
| Navigating Early Childhood Services for Young Children in Foster Care           | February,<br>March 2022 | State Office Staff,<br>Field Staff, Foster<br>Parents, and<br>Internal/External<br>Partners | Serving young children in foster care is no small task. Research in the neurosciences has proved that 80 percent of brain development takes place in the by the time a child is five years old, with the first three years seeing the maximum growth. Children in this age group are particularly vulnerable to adverse effects of foster care placement in these early years, quality care and education give children a head start on skill development, school readiness, and future success.   |

| This workshop will provide an overview of  |
|--|
| the services, support and resources        |
| designed to meet the needs of children in  |
| foster care under the age of five. The     |
| DFCS Early Childhood Collaboration Unit    |
| will focus on critical areas such as early |
| childhood education and care options       |
| early intervention services and childcare  |
| (CAPS).                                    |

**Action Step:** By September 2020, create and disseminate an Early Childhood Toolkit to case managers and other appropriate DFCS staff who support the needs of children in foster care, ages 0-5.

**FY22 Update:** The Early Childhood Toolkit is still a priority. However, *Childcare Reference Guides* were developed in place of the toolkit to address the immediate need of our county and direct service teams to streamline service delivery. The Childcare Reference Guides address the early care and education needs of children birth to age five in addition to the specific out of school time, supervision, and enrichment needs of all children with DFCS involvement.

**Action Step:** An Early Childhood collaboration workgroup will convene once per quarter. Invited participants will include:

- DFCS Staff (state office and field)
- State Agency Partners
- Non-profit Organizations
- Foster Parents
- Other community partners such as GEARS, Voices for Children, DECAL, and Bright from the Start may be invited at varying stages to participate as well.

**FY22 Update:** At the onset of the pandemic this initiative was postponed. This workgroup first convened in May 2022. The inaugural meeting goals included opportunities to collaborate with other state agencies that impact and influence early learning and childcare practices across the state through cross-agency coordination, and to ensure CFSP, CFSR, and other federal-level goals and objectives for state-level early learning and childcare services are incorporated into

the Division's planning. This Advisory Workgroup will convene bi-annually to discuss new policies and practices that impact children in foster care age 0-5, and to incorporate workgroup resolutions into larger convenings that guide early learning and development. This work is ongoing.

**Benchmarks:** Early childhood education trainings will be conducted in every region at least three times by June 2023. Early childhood toolkits will be completed and disseminated by June 2020.

**FY22 Update:** Trainings have been conducted regularly (see chart above). Virtual training allows for attendance from multiple regions. The Childcare Reference Guides were disseminated in lieu of the Early Childhood Toolkit to address the more immediate needs of the agency which were to ensure access and streamline childcare services.

**Benchmarks:** Increase the percent of children from ages 0 - 5 who are in an early childhood education setting from 64% to 75% by 2024, as documented in GA SHINES.

**FY22 Update:** Georgia SHINES data show that 84% of children age 0-5 were in an early education setting (point in time, March 31, 2022)

**Benchmarks:** Progress will be measured by Well-Being Outcome 2: Children receive appropriate services to meet their educational needs. The State goal is to achieve 60% by March 2024.

| March 2020 | March 2021 | March 2022 | March 2023 | March 2024 |
|------------|------------|------------|------------|------------|
| 49%        | 52%        | 55%        | 58%        | 60%        |

**FY22 Update:** See Section C: Update on Assessment of Performance for analysis on the state's performance of these outcome measures

# Feedback Loops

This workgroup is scheduled to convene May 2022. The Early Childhood Services program will assure that internal and external partners and stakeholders are engaged and involved to offer updates and share data quarterly. During these information exchanges via meetings, forums, and/or workgroups feedback is received from internal and external partners and stakeholders. On-going progress is managed through virtual documents,

partnership reports, conference calls, surveys, monthly program meetings and monthly management meetings. These meetings are conducted with DFCS leadership and field operations staff, internal and external partners. Before implementing new work that will affect internal and external partners, staff engage them quarterly or as needed to get their input and feedback on how the changes may affect them.

## Training/ Technical Assistance/ Evaluation

Training and technical assistance participation and quality is evaluated via survey. There are also opportunities for internal and external partners to provide feedback during scheduled meeting occurrences. Survey results are kept with our data and systems manager.

Surveys were disseminated following each training session. The overall survey results reflect that the training topics and the information offered during each training met the needs of the participants. Based on the overall participant feedback 90% of participants that participated in trainings offered by the Early Childhood Collaboration Unit found the training platform used, the topic, and information provided to be helpful.

# Implementation Supports & Collaboration

The Division currently partners with the following agencies and organizations to achieve this CFSP objective:

- Department of Early Care and Learning (CAPS, Head Start, Quality Rated)
- Department of Public Health (Children 1<sup>st</sup>, Babies Can't Wait, Georgia's Home Visiting Programs)
- Department of Education (Preschool Special Education Department)

**Objective 3**: (PIP → CFSP) Train and market available youth services to supervisors and frontline staff. The Wellness Programming, Assessment, and Consultation (WPAC) team will sponsor a wellness series designed to support and enhance case manager, supervisor, and other direct service child welfare staff's understanding of appropriate and timely health screening.

**Action Step:** The Well-Being Services Section will create a well-being toolkit for children, youth and young adults. This toolkit will be specifically for case managers and those who

work within Georgia's child welfare system. The creation of the toolkit will begin in August 2019 and will be finalized for production by July 2020.

**FY22 Update:** This project is ongoing and has been delayed due to competing agency priorities. The executive leadership is aware of the ongoing efforts to complete this project. The finished product is in anticipated to be completed by September 2022.

**Action Step:** WPAC will implement quarterly web-based academies (series) annually that will be designed to support and enhance case manager, supervisor, and other direct service child welfare staff in understanding of appropriate and timely health screenings. (beginning November 2019).

**FY22 Update:** WPAC completed three live web-based presentations in January, April, and July 2021. In October 2021, the previously recorded web-based presentation was shared with DFCS staff for viewing. WPAC will continue the web-based presentation in the summer June 2022.

**Benchmarks:** The state will partner with providers and stakeholders for joint training experiences. Facilitation of trainings on LMS will commence January 2020.

**FY22 Update:** Trainings are provided jointly with providers and stakeholders. Refer to the below chart for training title/topic and co-presenters.

# Feedback Loops

WPAC coordinated and facilitate the below trainings based on feedback from staff, WPACs involvement with consultations, and case staffings. After each training session, a survey was sent out to the participants. The information collected in the surveys are used to plan for new presentations or repeat previously offered trainings (as needed).

Additionally, surveys were sent out to participants of physician consultations and/or staffings with DHS Medical Director Dr. Priyanka Patel. The surveys were sent out each quarter to the participants of each quarter (e.g., Q1 FY 22 (July-September) Q2 FY 22 (October–December). The surveys are used to determine staff and caregiver educational needs regarding health and wellbeing of youth in care.

# **FY22 WPAC Trainings**

| Date      | Title  | Audience   | Respondents  | Response<br>Rate % | Feedback  |
|-----------|--|------------|--------------|--------------------|---|
| 4/23/2021 | Psychotropic Medication Consent by Dr. Patel (DHS Medical Director) and WPAC | DFCS Staff | 91           |                    | No Feedback for this presentation   |
| 5/6/2021  | Children 1st and Child<br>Health Programs (DPH<br>& WPAC)                    | DFCS Staff | 10 out of 53 | 19%                | Most useful part of training was learning about CMS, understanding of BCW and Children 1 <sup>st</sup> overview of application, all information was informative |

| 6/17/2021                                   | Children 1st and Child<br>Health Programs (DPH  | Foster<br>Parents/CCI/C       | 36 out of 117 | 30% | Participants felt the training objectives were met, presenters were   |
|---|---|-------------------------------|---------------|-----|---|
|   | & WPAC)   | PA                            |               |     | knowledgeable, training was beneficial, and topic was relevant, most useful part of training was learning about BCW, different resources, learning from others, host shared their contact info, easy to follow, breakdown of programs.  |
| 6/18/2021                                   | ADHD and Mood<br>Disorder   | DFCS Staff                    | 17 out of 33  | 51% | Participants like virtual format, information was helpful, most helpful learning about mood disorders, breakdown of diagnosis, breakdown of disorders. Want to learn more about RAD, Schizophrenia, conduct disorder, treatment options for disorders, dual diagnosis   |
| 7/13/2021                                   | Children's Oral Health:<br>by Dr. Adam Barefoot   | Foster<br>Parents/CCI/C<br>PA | 65 out of 110 | 59% | Most helpful how to take care of teeth, impact of sugar, statistics on oral health, impact of baby bottles on teeth, growth of teeth, amount of tooth paste to use, process of tooth decay, all the information. Need more information on oral health care for children with mental health diagnosis and picky eaters   |
| 7/19/2021                                   | Children's Oral Health:<br>by Dr. Adam Barefoot   | DFCS Staff                    | 11 out of 20  | 55% | Most helpful explaining of dental exams for children at age 1, importance of early dental visits, statistics on oral health, connection of oral health to physical health.  |
| 8/13/2021                                   | Psychotropic Medication Monitoring Parameters by Dr. Patel (DHS Medical Director) and Dr. Andy Gothard and Dr. Carolyn Johnson (psychologist            | DFCS Staff                    | 4 out of 38   | 11% | Most helpful was learning about psychological evaluations, autism testing. Want more about PRTF process   |
| 10/22/202                                   | Childhood Trauma and<br>How it Affects the<br>Developing Brain by<br>Dr. Patel (DHS<br>Medical Director)  | DFCS Staff                    | 12 out 34     | 35% | Most helpful effects of trauma on the brain, early life stressor impact, Want to know more about Autism, difference between DSM 4 & DSM 5 diagnosis, and how help caregivers of children with Autism  |
| 12/10/202                                   | PRTF Requirements<br>and Autism Diagnosis<br>by Dr Priyanka Patel<br>(DHS Medical Director)<br>and Dr. Shaun Savage<br>(Amerigroup Medical<br>Director) | DFCS Staff                    | 9 out of 56   | 16% | Most helpful PRTF info, autism diagnosis, criteria for diagnosis, want to learn more about IDD, ways to support youth with autism, the difference between mental health and seeking attention   |
| July –<br>September<br>2021 (Q1<br>FY22)    | Medication Staffing and Physician Consultation  | DFCS Staff                    | 6             |     | Very satisfied with scheduling process, staffing form easy to complete, staffing/consultation was very helpful, receive written recommendations with 2 business days, Barriers to following recommendations short staffed, difficulty obtaining information from CPA  |
| October –<br>December<br>2021 (Q2 FY<br>22) | Medication Staffing and Physician Consultation  | DFCS Staff                    | 11            |     | Very satisfied with scheduling process, staffing form easy to complete, staffing/consultation was very helpful, receive written recommendations with 2 business days, Barriers to following recommendations difficult contact psychiatrist, staff turnover, WPAC could invite more people outside the agency, need assistance obtaining medical records, need a list of information need for the staffing, inviting caregiver and actual psychiatrist to staffing |

# Training/ Technical Assistance/ Evaluation

WPAC sends several reports to each region to assist in closing the gap on service completion for youth in care. These reports are listed below.

- Psychotropic Medication Quarterly Report: This report comes from Amerigroup and includes the youth that are prescribed psychotropic medication, the dosage, start date, and the name of prescribing physician
- WPAC Monthly Report: total of overdue initial and ongoing health checks from Georgia SHINES overdue health check report (totals for 3-month increments).
   These health checks include EPSDT/well checks, dental exams, developmental assessments, and trauma assessments
- Amerigroup Monthly Reconciliation Report: regional data that includes claims for well checks, dental exams, and trauma assessments, along with the contact information for the provider that completed the assessment
- Children 1<sup>st</sup> Monthly Report: includes a list of children that were referred to Children 1<sup>st</sup> from DFCS for developmental assessments, as well as the status of those referrals (both CPS & Foster Care referrals)

The DHS Medical Director providers monthly medication management staffings and physician consultation (per request of staff). Since July 2021, Dr. Patel has completed 81 medication management staffings (the cases are selected from the psychotropic medications report) and 45 Physician consultations.

Additionally, WPAC is working with the Georgia SHINES team to increase WPAC staff access to the records of children in care. It is anticipated by June 2022, WPAC will be able to enter in health events, diagnoses, and medications, and to upload documents for children in foster care. This will allow WPAC to support counties in areas experiencing a staff shortage, and to close the gap on documentation of health events in a case.

## **Implementation Supports & Collaboration**

WPAC continues to meet with DPH on a quarterly basis. In FY22, WPAC, along with Department of Public Health programs (Children 1<sup>st</sup>, Babies Can't Wait, Children's Medical Services, and Home Visiting) completed a joint presentation with DFCS staff, foster parents, CCIs and CPAs. Additionally, Children 1<sup>st</sup> provides a monthly and quarterly report of children referred by the Division for developmental assessments along with the status of the referrals.

WPAC continues to hold bi-monthly calls with the Department of Community Health (DCH) and Amerigroup, and meetings to address barriers to services for youth in care. During FY22, Amerigroup hosted quarterly Townhall meetings with collaboration with DFCS and the Department of Juvenile Justice (DJJ). Amerigroup Care Coordinators continue to participate in transition roundtables for youth preparing to exit care as well as

PAUSE meetings for youth that need placement and treatment. Additionally, DCH and Amerigroup have partnered with the Division to review trauma assessments for youth in care. Amerigroup Medical Director Dr. Savage and DHS Medical Director Dr. Patel collaborated on a presentation for staff on Psychiatric Residential Treatment Facility (PRTF) requirements and autism.

WPAC coordinated a presentation on oral health for children with Dr. Barefoot (Director of Oral Health Program for the Division of Health Promotions) for DFCS staff, foster parent, CCIs, and CPAs.

WPAC, Region 14 and Amerigroup continue to collaborate with Southside Clinic as well as dental vans to provide well checks and dental appointments for youth in the region.

**Objective 4**: (PIP → CFSP) Leverage regional stakeholder meetings to address service array, and monitor to ensure implemented services are effective

**Action Step:** Host at least one stakeholder meeting in each region, each quarter, through March 2024

**FY22 Update:** This action step is on track and ongoing. Regional C3 Coordinators convened quarterly virtual stakeholder meetings during FY22 due to continued COVID restrictions on in-person gatherings. The C3s have met with providers from the Child Placing Agencies, school boards, law enforcement, mental health and substance abuse, DBHDD, DJJ, and others to discuss the regional performance on the CFSR reviews, service gaps and ongoing partnerships. Stakeholder meetings also address policy, practices, processes, and other issues/concerns. The C3s have reported that the service array meetings have been helpful in creating a platform for them to share information and strengthen their partnership with the community partners and providers. The C3s take the feedback that is given to them through the post-meeting surveys to assist with the planning of future service array meetings. This work is ongoing.

**Action Step:** Regions will establish, track and monitor lead measures (benchmarks) and lag measures (X to Y by when) to address service gaps. As objectives are met, regions will establish new leads and lags.

**FY22 Update:** This action step is under review to determine effectiveness and assess for modifications. Regional C3 Coordinators continue to work with their regional leadership, staff, and service providers to develop and monitor CFSR benchmark measures related to quality and timeliness of service provision. Performance data from QA review findings are also considered. This work is ongoing.

**Action Step:** C3 Coordinators will submit quarterly reports regarding the outcomes of the service array meetings and service improvement objectives.

**FY22 Update:** This action step is on track and ongoing. Quarterly reports are submitted using the SurveyMonkey platform and include descriptions of service array meeting agendas, discussions, and outcomes of the meetings. Most of the C3s identify service gaps by feedback received from the CQI meetings, and from information received from the community partners/providers through surveys, summits, CPA meetings, etc. The Regional Directors are engaged in creating the agendas around desired goals and practice improvements for their region. C3s have discussed topics relating to permanency outcomes, judicial collaboration, Family First updates, screen outs and referrals, behavioral aid services to youth and families, regional roadshows, training and staffing needs for the Division, recruitment strategies for kinship providers, CPA collaboration and substance abuse services. The Children's Bureau was invited to each of the annual stakeholder meetings and provided feedback for the agency to consider moving forward with future meetings.

**Benchmarks:** The measure of progress will be improvement in CFSR Outcome 12 within each region. The state will seek to improve the state overall rating on CFSR Outcome WB 12: "Needs and services of child, parents, and foster parents" from 18% to 40% by March 2024.

**FY22 Update:** See Section C: Update on Assessment of Performance for analysis on the State's performance of these outcome measures.

**Benchmarks:** The state will improve response ratings from QA stakeholder surveys to 90% by March 2024 for the following questions:

- Agency effectiveness in providing appropriate services to meet the needs of families and children which they serve through both CPS and Permanency.
- Services provided by DFCS to ensure children are safe and protected from abuse and neglect

#### FY22 Update:

Stakeholder surveys conducted during FY22 demonstrated that most respondents rated the agency "Good" or "Excellent" in providing appropriate services to meet the needs of families and children served in both foster care and CPS cases. Additional detail can be found under CFSR Outcomes: Safety Outcome 2.

**Benchmark:** Case records will be randomly sampled by C3 Coordinators for reviews in each quarter, to determine if ongoing communication between the Division and the service provider occurred for the duration of the services (throughout a three-month

review period). The measure of communication will increase from 50% (baseline) to 65% by March 2024.

## FY22 Update:

This action step is under review to determine effectiveness and assess for modifications. The Division is exploring opportunities to align the case record review process with supervisor-case manager mentorship to improve service provider communication in real time. As described in Strategic Priority 2: Objective 2, the Division's QA Review Team will also support the CFSR Impact Review by reviewing case records and providing feedback and support to frontline staff.

# Feedback Loops

The C3 Coordinators receive feedback regularly from service providers in the region who attend the stakeholder meetings and share experiences of the families receiving their services. This feedback helps to monitor and improve service provision, as well as provide supports for C3 Coordinators to educate staff on available services. New service providers attend these stakeholder meetings as a way to introduce themselves to staff and other providers, and the C3s are able to connect providers to each other and enhance partnerships and collaborations. Service providers have expressed positive feedback after attending these meetings, and appreciate the opportunity to introduce themselves to staff and connect with other providers.

The C3 Coordinators submit quarterly reports to the Federal Plans Unit. Reports include updates on regional stakeholder meetings, as well as any progress and barriers relating to community partnerships, services to older youth and kin caregivers, and court collaborations. The items in the quarterly reports are reflective of the goals and objectives of the state's CFSP. These narratives are shared with state office section leaders to support program development and monitoring. Section leaders regularly use this information to connect with the regional staff and provide support. This ensures that staff at all levels are informed, and issues are addressed timely. This work is ongoing.

Additional feedback loops engage the CQI/QA Unit to review cases and interview stakeholders. The QA team conducts reviews in each district quarterly, and the findings are shared with the C3 Coordinators, who rely on the data to support activities of the regional CQI teams.

# **Training/ Technical Assistance/ Evaluation**

C3 Coordinators meet once per month with the Federal Plans Unit to receive technical assistance and training, guidance on new state and federal legislation, program

instructions and information memoranda, and other resources that impact the work. Meetings continue to be held virtually due to COVID restrictions on in-person gatherings.

# **Implementation Supports and Collaborative Partners**

C3 Coordinators receive technical assistance and support from the Federal Plans Unit, district and regional directors, the QA/CQI Units, state office programs, and external stakeholders. This support ensures ongoing awareness of issues relating to service array and service provision.

Strategic Priority 4: Community Partnerships, Family Engagement, Inclusion, and Equity

|                        | Number of State of Hope Sites Objective I   |                |                |                |                        |                |                |                |                |                |
|------------------------|---|----------------|----------------|----------------|------------------------|----------------|----------------|----------------|----------------|----------------|
| BASE -<br>LINE<br>2019 | Target<br>2020  | Actual<br>2020 | Target<br>2021 | Actual<br>2021 | Target<br>2022         | Actual<br>2022 | Target<br>2023 | Actual<br>2023 | Target<br>2024 | Actual<br>2024 |
| 54                     | 64  | 130            | 84             | 250            | 114                    | 300            | 154            |                | 204            |                |
|                        |   | N              | umber of       |                | d Philant<br>Objective | •              | artnership     | os             |                |                |
| BASE -<br>LINE<br>2019 | BASE - LINE Target Actual Target Actual Target Actual Target Actual Target Actual |                |                |                |                        |                |                |                |                |                |
| 5                      | 10  | 6              | 15             | 17             | 20                     | 20             | 25             |                | 30             |                |

**Objective 1**: Leverage and invest in communities to provide adequate and effective service capacity statewide.

# **Action Step 1. Establish State of Hope Sites**

Increase the number of State of Hope (SoH) project sites to activate nonprofits, philanthropies, government, businesses and other community members to collaborate closely to build local safety nets that will prevent conditions contributing to disparities in education, threaten a family's self-sufficiency and potentially lead to child abuse and neglect.

**FY22 Update:** This action step is on target and ongoing.

In February 2021 a Project Director was assigned to the State of Hope to work exclusively with the ecosystem participants to ensure experiential learning sessions and networking opportunities are provided. The Project Director has worked to develop an ecosystem web portal and dashboard for information sharing and collaborating across jurisdictions, when appropriate. This work is ongoing.

In August 2021, 20 new sites were selected to receive technical and financial support through the State of Hope. Sites that are unfunded are still able to receive technical support through the SoH ecosystem. In each application cycle, the Division has been able to leverage multiple streams of state and federal funding to support the work of sites in communities across the state.

# Action Step 2. Establish Division Civic and Philanthropic Partnerships

Establish a plan for ongoing engagement with national, state and local philanthropic and civic organizations will be developed by July 1, 2020, and full implementation of the plan is expected by June 30, 2024.

FY22 Update: The Department of Community Partnerships (formerly The Office of Strategy, Innovation, and Engagement (OSIE)) continues to work diligently to establish relationships with philanthropic and civic organizations that help to enhance the Division's efforts and impact. Connections with potential partnerships are cultivated during and outside the State of Hope Application cycle. In FY21, over 100 applications were received during the Round 4 Application cycle and more than 60% of those were first-time applicants. Following the application cycle, new and former ecosystem members were engaged through one-on-one meetings, SoH resources, and connected with Division and other SoH partners. SoH continues to engage with external partners such as S.A.D.E.S Hope, Mother's Advocacy Project, Carrie's Closet, Ebook Buddy, Must Ministries, and more.

#### Action Step 3. Host Destination Hope Events

Host at least four Division regional roadshows (also known as Destination Hope events) which will be held each federal fiscal year to support consistent and ongoing engagement with communities, stakeholder groups, and Division staff in each region of the state.

FY22 Update: Due to changes and reorganization of Offices within the Department of Human Services, Regional Roadshows (also known as Destination Hope events) are now hosted through the Georgia Professional Human Services Association (GPHSA). State of Hope will now host two Semi-annual Summits to connect with Ecosystem Members. Attendees will have the opportunity to learn about updates and needs of the Division as well as potential partnership/collaboration opportunities, engage in informational and interactive learning sessions on the Four Opportunities of Hope, and share their needs, concerns, and feedback on how the Division can assist them with doing their work in the community. The first summit was hosted in May 2022.

# Feedback Loops

State of Hope receives feedback from SoH recipients and Ecosystem Members through Mid-year reports, Needs Assessments Surveys, and Post Training Evaluations that are completed after Big Idea Workshops. SoH also receives quarterly reports from regional C3 coordinators on engagement with SoH funded and nonfunded sites. All forms of feedback received are thoroughly analyzed and considered in the overall program engagement and goals of the State of Hope. Feedback has been greatly used by the Project Director when determining Annual Convening (summits), topics and curriculums for Big Idea Workshops, collaboration space, and opportunities for engagement.

## **Training/ Technical Assistance/ Evaluation**

State of Hope currently hosts four Big Idea Workshops led by Georgia State University (GSU). The workshop series was kicked off in March 2021 to help them further develop and grow their organization. Workshops hosted to date are Program Evaluation, Storytelling, Grant writing, and Fundraising. The most recent workshop hosted in FY22 was on March 2<sup>nd</sup>: *Simple Leadership Practices to Advance Your Organization's Mission*. After each workshop, all members receive access to workshop recordings and resources. For evaluation purposes, post-training surveys are asked to be completed by attendees for feedback. The upcoming workshop will share knowledge with members about fundraising and grant writing workshop. These topics are requested by ecosystem members when completing the needs assessment. The needs assessment is used to identify and schedule workshops for the upcoming fiscal year.

#### Implementation Supports & Collaboration

GSU and the SoH Project Director have been working together to build out the SoH Collaboration Space exclusively for all ecosystem members to connect and network with appropriate Division/Core Team Staff, and other Ecosystem Members. The launch of the collaboration space was scheduled for April 2022 using the online platform Crowdstack.

| Percen                | Percent of the total population of Georgia residents included in the penetration rate for MD-<br>CANI training jurisdictions <sup>3</sup><br>Objective II |                |                 |                   |                          |                            |                 |                |                |                |
|-----------------------|---|----------------|-----------------|-------------------|--------------------------|----------------------------|-----------------|----------------|----------------|----------------|
| BASE<br>-LINE<br>2019 | Target<br>2020  | Actual<br>2020 | Target<br>2021  | Actual<br>2021    | Target 2022              | Actual<br>2022             | Target<br>2023  | Actual<br>2023 | Target<br>2024 | Actual<br>2024 |
| Part 1<br>50%         | 55%   | 58%            | 60%             | 60%               | 65%                      | 60%                        | 70%             |                | 75%            |                |
| Part 2<br>15%         | 20%   | 21%            | 25%             | 25%               | 35%                      | 25%                        | 45%             |                | 55%            |                |
| Perd                  | ent of th   | e 159 co       | unties wi       | _                 | r activity<br>bjective   |                            | ourt Prod       | ess Repo       | orting Sys     | tem            |
| BASE<br>-LINE         | Tannat  |                | <b>-</b>        |                   | -                        |                            |                 |                |                |                |
| 2019                  | Target 2020   | Actual<br>2020 | Target<br>2021  | Actual<br>2021    | Target<br>2022           | Actual<br>2022             | Target<br>2023  | Actual<br>2023 | Target<br>2024 | Actual<br>2024 |
|                       |   |                |                 |                   | _                        |                            |                 |                |                |                |
| 2019                  | 2020  | 2020           | <b>2021</b> 60% | 98%<br>per of col | <b>2022</b> 65%          | <b>2022 100%</b> Ilows rec | <b>2023</b> 70% |                | 2024           |                |
| 2019                  | 2020  | 2020           | <b>2021</b> 60% | 98%<br>per of col | 2022<br>65%<br>d case fe | <b>100%</b> Hows rec       | <b>2023</b> 70% |                | 2024           |                |

# **Objective 2**: Strengthen the Division's partnership with the court system

**Action Step:** Full implementation of the second phase of the Multidisciplinary Child Abuse and Neglect Institute. In 2020, MD-CANI will fully roll out to jurisdictions with the newest phase and continued implementation of the first phase. Also, during this time period, the MD-CANI team will develop and include stand-alone modules such as placement stability training. From 2021 – 2024, continue to offer phase one and two of the MD-CANI and further develop stand-alone modules

**FY22 Update:** This work is on track and ongoing. Following an FY21 pause in inperson training due to the COVID-19 pandemic, the MD-CANI training resumed inperson sessions in October 2022 with "The First 75 Days". FY22 trainings were held in Regions 4, 12, 3, and 13. The Division continues to partner with the Court Improvement Program (CIP) to include Child and Family Services Review (CFSR) data, assessment of performance and strategies for improvement into the MD-CANI curriculum. Judges are informed of their region's CFSR performance prior to the training and encouraged to continue ongoing assessment and analyses within their judicial stakeholder meetings (scheduled monthly or quarterly). Additionally, the Division is collaborating with CIP to evaluate long-term changes in knowledge and practice following MD-CANI sessions. This work is ongoing.

**Benchmark:** Indicators of Progress should show inclusion of data and improvements of various data elements such as removal rates, placement stability, placement changes towards permanency, and total referrals, and increased penetration of MDCANI within jurisdictions throughout Georgia.

**FY22 Update**: Due to the pause in offering MDCANI in FY21, the 2022 penetration rate remains stable at 60% for Part 1 and 25% for Part 2.

**Action Step:** Continued utilization of Cold Case Project reviews

- Transition from Administrative Office of the Courts (AOC) to the Office of Child Advocate (OCA) in 2020. This task requires legislative changes which are expected to occur in 2020.
- Continue to compare data sources with DFCS, AOC, and the Georgia Supreme Court's Committee on Justice for Children (J4C) to ensure fidelity of data.
- Recruit additional Cold Case Fellows. There were eight fellows in 2019.
- Ensure continuity of program structure and leadership.

**Benchmark:** Measure of Progress: The project has a goal of recruiting 15 to 20 fellows for optimal program functionality.

**FY22 Update:** The Cold Case Project has 6 attorney fellows and 3 non-attorney fellows in FY22. The Court Improvement Program does not have plans to recruit additional fellows at this time.

**Action Step/ Benchmark:** Continued implementation of the Court Process Reporting System (CPRS)

**FY22 Update:** Total orders uploaded to CPRS in CY2021 were 58,067. From April 2021 through March 2022, there were 2,261 users that logged into CPRS. CASAs and SAAGs continue to be the most active CPRS users. CASA logins totaled 75,905 and SAAG logins totaled 26,165. CPRS now has at least one user from each of the 159 counties.

**Action Step/ Benchmark:** Utilization of IV-E Funds for Parent and Child Attorney Representation

FY22 Update: In 2021, the Children's Justice Act (CJA) Task Force partnered with Georgia State University to develop a tool for evaluating the quality of representation during court observations of individual cases. The Task Force also conducted a stakeholder survey to assess stakeholder perspective on what constitutes "quality representation". This survey gathered information on representation practices across local jurisdictions as part of the panel's required three-year assessment. In FY22, CJA awarded grant funds to the Office of the Child Advocate (OCA), which is leading an effort in partnership with the Supreme Court Committee on Justice for Children (J4C), the Division of Family and Children Services (DFCS), Chatham County and the Chatham County Juvenile Court. This collaborative group is contributing to the creation of a pilot project designed to improve legal representation of children in dependency court. Each of the partners is contributing its resources, time, or expertise to improve the quality of legal representation of children and to learn strategies that can be applied throughout the State of Georgia. OCA requested funding to support a social worker position, as well as additional expenses to ensure the Project is a success. The additional expenses include funding for litigation expenses, travel to Chatham County and consultants for Project oversight and ongoing support of the lawyers. This project will evaluate the impact of shifting from a contract attorney model to a full-time employee model and will inform specific legal strategies proven to expedite permanency. The lessons learned will provide valuable guidance as CJA looks to support statewide changes to improve legal representation. This work is ongoing.

Additional Measures of Progress: Permanency 1 and 2; and reduce the length of time in care in comparison to children who have not received CCP involvement.

**FY22 Update:** See Section C: Update on Assessment of Performance for analysis on the State's performance of these outcome measures.

# Feedback Loops

- MD-CANI: The state obtains feedback from the previously identified partners through continual communication and partnership. Our external partners are key leaders in this project and those partners are the agencies with the primary knowledge and information to determine the success of this program.
- Cold Case Project: This program is administered in close collaboration with the Office of the Child Advocate and the Court Improvement Program (CIP). With regular involvement, collaboration and staffings, CIP provides the Division with feedback regarding this program's successes.
- Court Process Reporting System: All data regarding CPRS is housed by the Administrative Office of the Courts. As a result, regular communication regarding the usage and continued implementation of CPRS is provided by the Court Improvement Program (CIP).
- Parent and Child Attorney Representation: The ongoing partners of the program will include the CJA Task Force, CIP, OCA, and Emory University's Barton Child Law and Policy Center.

# **Training/ Technical Assistance/ Evaluation**

- MD-CANI: This objective substantially incorporates training to counties, juvenile courts, SAAGs, and other judicial stakeholders. To achieve this objective, the Division closely collaborates with CIP, judicial partners, and OCA for technical assistance and capacity building. Continual evaluation of the program occurs by participants during each presentation. CIP is exploring opportunities to evaluate the training and outcomes by assessing long-term knowledge and practice change, as well as opportunities to include youth voice in the trainings.
- Cold Case Project: No changes from prior report. Youth continue to be routinely involved in the Cold Case meetings.
- Court Process Reporting System: The Division collaborates with the Administrative Office of the Courts and the Attorney General's Office to provide regular training and technical assistance on the use of CPRS.
- Parent and Child Attorney Representation: In 2020, in response to recent changes in federal legislation allowing title IV-E reimbursement for administrative costs related to legal representation, a stakeholder group (QLR Project) was convened and included, in addition to members of the CJA Task Force, the Division's General

Counsel, and representatives from the Court Improvement Program, Office of the Child Advocate, Georgia CASA and other relevant stakeholders to explore opportunities, evaluate current practice, and coordinate efforts among the various state plans to maximize the benefits of IV-E funding. Discussions began in earnest in August 2020 to develop an assessment plan. The Task Force decided that the first step would be to determine what constituted quality legal representation and to identify effective strategies that supported quality representation. To assist in this first step, Emory University law students conducted a research project in fall 2020 on the subject. Based on the students' research findings, the Task Force decided that it would conduct a survey of attorneys (parent, child (Including GALs), Special Assistant Attorneys General (SAAGs) that represent the child welfare agency) and juvenile court judges to gather perceptions of the six strategies identified in the students' research findings as contributing to improved legal representation. This included: Formal system of statewide oversight; Training and specialization; Compensation; Caseloads; Local administrative, operational, and supervisory support; and Interdisciplinary practice.

The intent of the survey was to inventory current practice and obtain feedback from attorneys and judges to identify the most promising and potentially viable strategies to promote and support quality legal representation in dependency cases. The attorney survey included questions on the attorney's role/position, tenure, judicial circuit, potential strategies that may contribute to improving or supporting quality legal representation, compensation practices, professional development and training supports, and case practices. The survey for judges included questions on tenure, caseload, attorney retention, judicial circuit, perceived quality of advocacy in the courtroom by different parties, potential strategies that may contribute to improving or supporting quality legal representation, attorney compensation practices, and professional development and training supports. The survey was conducted in spring 2021. A total of 261 individuals responded to the attorney survey and 56 to the juvenile court judge survey. As of 2020, there were approximately 520 members of the Georgia Bar's Child Protection and Advocacy section, 295 SAAGs, and 150 juvenile court judges in Georgia. While the survey response was relatively modest, attorney survey respondents represented every judicial circuit, and judge respondents represented 30 of the state's 49 circuits.

Both the attorney and judge surveys asked how much each of specific operational practices and compensation measures would contribute to improving and supporting quality legal representation by attorneys in dependency cases if available or more readily available. Response options were on a five-point scale: none (1), not very much (2), some (3), very much (4), a great deal (5), and N/A.

# **Average Ratings on Operational Practices**

| Operational Practice   | SAAGs |      | Parent, child, or GAL attorneys |      | Other attorney<br>survey<br>respondents* |      | Juvenile Court<br>Judges |      |
|--|-------|------|---------------------------------|------|--|------|--------------------------|------|
|  | N     | Mean | N                               | Mean | N  | Mean | N                        | Mean |
| Formal system of oversight (statewide)   | 80    | 2.33 | 121                             | 2.91 | 8  | 4.00 | 49                       | 3.22 |
| Georgia-specific standards of practice   | 81    | 2.94 | 120                             | 3.58 | 8  | 3.88 | 49                       | 3.59 |
| Guaranteed minimum caseload  | 80    | 2.04 | 120                             | 2.73 | 7  | 1.57 | 49                       | 2.63 |
| Guaranteed maximum caseload  | 81    | 2.51 | 120                             | 3.48 | 8  | 3.00 | 49                       | 3.29 |
| Improved access to information resources (e.g., legal databases, subscriptions)  | 81    | 3.40 | 121                             | 4.35 | 7  | 3.29 | 49                       | 3.49 |
| Improved access to experts, case-<br>related professionals (e.g., social<br>workers, investigators)                    | 81    | 3.68 | 121                             | 4.40 | 7  | 3.71 | 49                       | 3.94 |
| Interdisciplinary case teams (e.g., investigator, mental health professional, education advocate, client peer support) | 81    | 3.26 | 121                             | 4.07 | 8  | 4.38 | 47                       | 3.87 |
| More timely case assignments   | 81    | 2.00 | 119                             | 2.84 | 7  | 2.57 | 48                       | 2.23 |
| Translation services and other accommodations for clients  | 81uat | 2.67 | 120                             | 3.27 | 7  | 3.43 | 49                       | 3.06 |

<sup>\*</sup>These included a few judges, court staff attorneys, legal services and third-party attorneys, and other advocates/staff

The CJA Task Force continues to prioritize this work and will continue to assess and evaluate existing efforts to ensure quality legal representation.

#### **Implementation Supports**

- MD-CANI: Staffings and Trainings
- Cold Case Project: Staffings
- Court Process Reporting System: Staffings, Trainings, Coaching, Financing, Data Systems, Policies.
- Parent and Child Attorney Representation: A strong and active partnership already exists between the entities and organizations that will lead this work. Additional implementation supports, specifically to include funding to support research, will be sought from a variety of sources, including the CJA Grant.

# Section E: Update to Service Descriptions

# Title IV-B, subpart 1: Stephanie Tubbs Jones Child Welfare Services Program

Georgia's title IV-B (1) funding is used for child welfare services statewide, including:

- Child Protective Services: The Safety Section provides services designed to strengthen the family and address mitigating needs; for example, parenting, substance abuse, prenatal substance abuse, mental health needs, medical needs, domestic violence services and or infant safe sleep services. When used appropriately, these services can reduce risks to children where there is significant harm of maltreatment and support children to remain safely in their homes.
- The CPS Intake Communication Center (CICC): CICC receives reports of allegations of child maltreatment for all counties in the state of Georgia. Since its inception in 2013, the CICC has made steady progress in both accessibility and standardization. CICC has a statewide Mandated Reporter Intake Mailbox and virtual fax line to accommodate Mandated Reporters in Georgia. The intake assessment encompasses the requirement to screen case participants via information systems maintained by DFCS (Georgia SHINES, SUCCESS, County Master Files, IDS Online, Master Index, Placement Central) as well as other available state agency databases (Georgia Medicaid Management Information System, Sex Offender Registry, Board of Pardons and Paroles, Department of Corrections Offender Query). An intake decision is made after conducting the intake assessment which includes analyzing information gathered related to the seven areas of family functioning, including the analysis of the safety screening information.
- Family Preservation Services (FPS) is a continuum of services for at-risk children and families. FPS are designed to be short-term, family-focused, community-based services that are implemented to help families achieve behavioral change and learn to manage everyday life situations, or problems that interfere with the caregiver(s)'s ability to provide proper care and protect his/her children. Services include activities designed to assist families in crisis, often where a child is at risk of being placed in out-of-home care because of abuse and/or neglect. Support services include preventive activities, typically provided by community-based organizations designed to improve the nurturing of children and to strengthen and enhance the stability of families.
- Prevention and Community Support (PCS): The Prevention Section provides primary and secondary prevention services to children and families across the state of Georgia. Services include evidence-based home visiting, Second Step, and First Steps.

- Family Support Services (FSS) is an alternative child protective services (CPS) response for providing protection to children by engaging the family to build consensus around the everyday life situations which may interfere with the family's ability to nurture and protect their child(ren). The family's participation in FSS is not voluntary as there are allegations of maltreatment. FSS are designed to ensure child safety and prevent future involvement in the child welfare system using formal and informal services to strengthen and support families. The FSS track is utilized when the Initial Safety Assessment (ISA) does not indicate a present danger situation or impending danger safety threat. An assessment of child safety and family functioning is required just as it is during an Investigation. However, there is no formal finding of substantiated or unsubstantiated concerning the allegations of abuse or neglect. FSS includes linkages to formal and informal supports, including referrals for services, which may include but are not limited to parent Aide Services, Prevention of Unnecessary Placement Services, Homestead Services, Wrap-Around Services, Promoting Safe and Stable Families Services, and individual community services.
- Caregiver Recruitment and Retention: The caregiver preparation and service continuum helps applicants make an informed decision about becoming a caregiver. Applicants receive information and training to enhance their parenting knowledge and skills, as well as to clarify their role when working with children, their families, and other community partners. The preparation and training continuum includes a mechanism for providing practical knowledge of available financial, structural, and administrative support. It also addresses skills and competencies required to meet the behavioral and psychosocial needs of children in care. Moreover, the preparation and service continuum serves as a strategy to develop and enhance the pool of approved caregivers. A well-prepared and supported caregiver directly impacts the strength, success, and overall positive outcomes of Georgia's foster care program.
- Adoptions is a specialized field that focuses on finding safe and permanent families for children when permanent, legal separation from their family is necessary. Adoption is a social and legal process designed to establish a new legal family giving children the same rights and benefits of those who are born into a family. Adoption practice provides sound planning for children who have a permanency goal of adoption and children who are in the permanent custody of the Division of Family and Children Services (DFCS). An integral part of adoption services is working with birth parents as they make a decision as to whether or not adoption is in the best interest of the parent and child. If a voluntary or non-voluntary Termination of Parental Rights (TPR) is decided to be the best plan for the child, the birth parents, if appropriate, are involved in: 1. Providing social and medical background information; 2. The placement process; 3. Providing

necessary tools and skills for the transition from foster care to adoption; 4. Decision-making about future contact; and 5. Beginning their grieving process.

Supporting information on the numbers of children and/or families served can be found on the CFS-101 form.

## Services for Children Adopted from Other Countries

Georgia's Resource Center continues to be available to families who have adopted internationally. The resource center offers assistance to families who have adopted and are in need of support and or services. The Center, through a contract with DFCS, assists families in locating needed resources, developing support groups, finding books and adoption related publications related to adoption issues, and by providing a "buddy family" who has adopted or fosters a child with similar special needs. Current information about community resources and interactive training opportunities are provided on the Center's website. The center is also staffed with families who have adopted and are able to provide support as a family with lived experience. There are no current data that capture how many families have adopted internationally; however, the Center is exploring how to best capture these data in the future. Additionally, families who have adopted internationally are eligible for other contract post-adoption services provided by the Division with a waiver. Regional Resource Advisors are also available throughout the state to assist adoptive families by providing advice, support, and training. In rare cases, families adopting from other countries can also access the Crisis Intervention Team, which provides services to adoptive families in need of professional help to improve overall family functioning, preserve the family unit, and provide links to community resources. The team assists adoptive families of special needs children who have been placed into adoptive homes.

#### Services for Children Under the Age of Five

To address their developmental needs, children under the age of four in CPS cases are required to be referred to the Department of Public Health (DPH), Babies Can't Wait program. Babies Can't Wait (BCW) is Georgia's early intervention program that offers an array of services and support for infants and toddlers (birth to age three) with special needs. BCW serves a crucial role in completing assessments of infants and young children and offers recommendations and services to ensure the child is on target in the best way that is appropriate for their age and current medical condition. The Division works closely with DPH to ensure that the proper assessments and referrals are completed timely for children. The Division also works in collaboration with Georgia's Children's Medical Services (CMS) program to support children with special health care

needs. For all substance-exposed infants, a Plan of Safe Care is completed even where there is not a specific allegation of maltreatment.

To reduce the length of time young children are in foster care, local Child Placing Agencies (CPA) and the Caregiver Recruitment and Retention Unit (CRRU) work to recruit families who can serve this population to keep them placed within the region and facilitate reunification sooner. Child Welfare Policy 10.19: Visitation requires increased parentchild visitation for young children (birth to five years of age) when reunification is the permanency plan in order to facilitate bonding and child well-being, unless the court specifies another visitation arrangement. There is a framed discussion held during ongoing regional "Adoption Cafes" that target the needs and services of young children to be able to achieve timely permanency. Most regions have at least one State of Hope site

REGION 5 is using a seed grant from DECAL to partner with region 6 in a pilot collaborative of the local Head Start/ Early Head Start programs and Family Connection. The goal is to train the "community caregivers" (including Head Start teachers, community leaders and foster/adoptive families) on becoming trauma responsive in the Circle of Security parenting model. Those trainers are now beginning to train and facilitate groups in small cohorts to create communities of trauma informed caregivers who will behave in a trauma responsive manner with children under the age of 5.

that assists with serving youth populations, including those under age five. These organizations participate during regional Stakeholder meetings and the partnerships support the regions in providing services to families who require certain needs. Working with these agencies also assists the Division with the FFPSA goal of preventing children from being separated from their families.

Services for school-age children are provided through an Individualized Education Plan (IEP): specialized services offered by local school systems to children aged three and older if they are deemed eligible following a special education evaluation. Georgia House Bill 855 (2020) assures that all newly enrolled school-aged children in foster care are assessed to determine if trauma has a negative impact on their educational performance. The Division also collaborates with school systems to support children in foster care and their families by working closely with Juvenile Court, CASA, and GALs to ensure that family treatment plans are monitored closely. Children in care who are younger than five years of age must attend an early care and education program unless special circumstances warrant a waiver. The program must be licensed by the Department of Early Care and Learning (DECAL) and participating in Quality Rated, Georgia's tiered quality rating and improvement system. This includes childcare programs, Head Start and Early Head Start programs, and Pre-K programs. This expectation is aimed at ensuring children in foster care are receiving the brain stimulation and socialization needed to reach their full potential. Children in care are also categorically eligible for Childcare and

Parent Services (CAPS), Head Start and Early Head Start education programs, and the Georgia WIC nutrition program through the Department of Public Health.

#### Efforts to Track and Prevent Child Maltreatment Deaths

The Division joined the National Partnership for Child Safety (NPCS) in 2018, a member-owned quality improvement collaborative aimed to reduce child maltreatment fatalities. Through this engagement, DFCS continues to advance and sustain a non-punitive, systemic critical incident review process to learn from child fatalities and serious injuries. As part of the Division's Fatality Review Process, and in collaboration with a team from Georgia's Office of the Child Advocate, the Child Death, and Serious Injury (CDSI) Review Team completed 117 critical incident/child fatality reviews between July 2021 through March 31, 2022.

This process involved completing thorough case record reviews and individually debriefing over 500 DFCS staff members plus relevant external stakeholders. Reviewers identify improvement opportunities, or key learnings. Improvement opportunities are defined as case-level actions or inactions relevant to the outcome, case, or an industry standard. In essence, they highlight the gap between what families needed and what families received during the Division's involvement. As improvement opportunities are identified, systemic factors contributing to the improvement opportunities are evaluated and described through the Safe Systems Improvement Tool (SSIT). Findings are scored according to their proximity and relation to the outcome and data elements are aggregated for the purposes of identifying program and practice improvements at a systems level. The SSIT is a nationally recognized tool used to structure critical incident reviews and standardize their findings.

In advocacy of Georgia's families and DFCS direct service professionals, these reviews provide a candid glimpse of the Department's work and how system improvements could foster better supports and help DFCS professionals serve families best. The Division is partnering with external child welfare system stakeholders, other state agencies, and the CAPTA Panel members to explore next steps in the development and implementation of a statewide plan to prevent maltreatment-related fatalities using the review findings.

#### Populations at Greatest Risk for Maltreatment

Younger children, particularly those less than 12 months of age, represent the group with the highest risk of substantiated maltreatment.

| Substantiated Victims by Age, Per Capita |  |
|--|--|
| Jubblandated Vieling by Age, i or Oupita |  |

| Child's Age at Incident/Report | Number of<br>Substantiated<br>Victim Children | Percent | Per 1,000 in<br>Population |
|--------------------------------|---|---------|----------------------------|
| <1 year                        | 1,623   | 16.52%  | 12.79                      |
| 1 - 4 years                    | 2,180   | 22.20%  | 4.19                       |
| 5 - 9 years                    | 2,643   | 26.91%  | 3.85                       |
| 10 - 14 years                  | 2,445   | 24.89%  | 3.36                       |
| 15 - 17                        | 931   | 9.48%   | 2.13                       |
| Grand Total                    | 9,822   | 100.00% | 3.93                       |

SOURCE: DFCS Data Unit, Georgia SHINES (Apr 2021 – Mar 2022)

Females were slightly more likely than males to be substantiated victims of maltreatment.

| Substantiated Victims by Gender, Per Capita |   |         |                         |  |  |  |  |
|---|---|---------|-------------------------|--|--|--|--|
|   | Number of<br>Substantiated Victim<br>Children | Percent | Per 1,000 in Population |  |  |  |  |
| Female                                      | 5,121   | 52.10%  | 4.17                    |  |  |  |  |
| Male  | 4,699   | 47.81%  | 3.70                    |  |  |  |  |
| Unknown                                     | 9   |         |                         |  |  |  |  |
| Total                                       | 9,829   |         | 3.93                    |  |  |  |  |

SOURCE: DFCS Data Unit, Georgia SHINES (Apr 2021 – Mar 2022)

Among children over 10 years old, females were substantiated victims more often than males.

|                                |        | Number of Substantiated Victim Children |     |        | Percent |       |       |
|--------------------------------|--------|---|-----|--------|---------|-------|-------|
| Child's Age at Incident/Report | Female | Male                                    | Unk | Female | Male    | Unk   |       |
| 0                              | 787    | 836                                     |     | 48.50% | 51.50%  | 0.00% | 1,623 |
| 1                              | 275    | 302                                     |     | 47.70% | 52.30%  | 0.00% | 577   |
| 2                              | 283    | 273                                     |     | 50.90% | 49.10%  | 0.00% | 556   |
| 3                              | 249    | 264                                     |     | 48.50% | 51.50%  | 0.00% | 513   |
| 4                              | 242    | 291                                     | 1   | 45.30% | 54.50%  | 0.20% | 534   |
| 5                              | 248    | 275                                     | 2   | 47.20% | 52.40%  | 0.40% | 525   |
| 6                              | 289    | 301                                     | 1   | 48.90% | 50.90%  | 0.20% | 591   |
| 7                              | 261    | 281                                     | 1   | 48.10% | 51.70%  | 0.20% | 543   |
| 8                              | 250    | 274                                     |     | 47.70% | 52.30%  | 0.00% | 524   |
| 9                              | 234    | 225                                     | 1   | 50.90% | 48.90%  | 0.20% | 460   |
| 10                             | 249    | 221                                     | ·   | 53.00% | 47.00%  | 0.00% | 470   |

| 11          | 259   | 188   |   | 57.90% | 42.10% | 0.00% | 447   |
|-------------|-------|-------|---|--------|--------|-------|-------|
| 12          | 312   | 206   | 1 | 60.10% | 39.70% | 0.20% | 519   |
| 13          | 297   | 210   | 1 | 58.50% | 41.30% | 0.20% | 508   |
| 14          | 297   | 203   | 1 | 59.30% | 40.50% | 0.20% | 501   |
| 15          | 282   | 178   |   | 61.30% | 38.70% | 0.00% | 460   |
| 16          | 194   | 113   |   | 63.20% | 36.80% | 0.00% | 307   |
| 17          | 109   | 55    |   | 66.50% | 33.50% | 0.00% | 164   |
| Grand Total | 5,117 | 4,696 | 9 | 52.10% | 47.80% | 0.10% | 9,822 |

SOURCE: DFCS Data Unit, Georgia SHINES (Apr 2021 – Mar 2022)

During the report period, there were 92 child deaths from maltreatment, and 85% of victim children were age five or younger. Younger children less than 12 months of age represent the group with the highest risk of maltreatment-related deaths.

| Maltreatment Related Deaths |                  |         |  |  |  |  |  |
|-----------------------------|------------------|---------|--|--|--|--|--|
| Child's Age at Death        | Number of Deaths | Percent |  |  |  |  |  |
| 0                           | 50               | 54.35%  |  |  |  |  |  |
| 1                           | 17               | 18.48%  |  |  |  |  |  |
| 2                           | 3                | 3.26%   |  |  |  |  |  |
| 3                           | 3                | 3.26%   |  |  |  |  |  |
| 4                           | 1                | 1.09%   |  |  |  |  |  |
| 5                           | 4                | 4.35%   |  |  |  |  |  |
| 6                           | 4                | 4.35%   |  |  |  |  |  |
| 7                           | 1                | 1.09%   |  |  |  |  |  |
| 9                           | 1                | 1.09%   |  |  |  |  |  |
| 11                          | 1                | 1.09%   |  |  |  |  |  |
| 12                          | 3                | 3.26%   |  |  |  |  |  |
| 13                          | 2                | 2.17%   |  |  |  |  |  |
| 14                          | 1                | 1.09%   |  |  |  |  |  |
| 15                          | 1                | 1.09%   |  |  |  |  |  |
| Grand Total                 | 92               | 100.00% |  |  |  |  |  |

SOURCE: DFCS Data Unit, NCANDS (FFY 2021)

| Age | Georgia Child<br>Population | Count of Maltreatment Related Deaths | Deaths per 100K in Population |
|-----|-----------------------------|--------------------------------------|-------------------------------|

| Age less than 1 | 126,887 | 50 | 39.41 |
|-----------------|---------|----|-------|
| Age 1-4         | 520,657 | 24 | 4.61  |
| Age 5-9         | 687,297 | 10 | 1.45  |
| Age 10-14       | 726,884 | 7  | 0.96  |
| Age 15-17       | 437,306 | 1  | 0.23  |

SOURCE: DFCS Data Unit, NCANDS (FFY 2021); Census data from Georgia Department of Public Health (https://dph.georgia.gov/)

Males were more likely than females to be victims of maltreatment-related deaths.

| Maltreatment-Related Deaths, by Gender |                  |         |                             |                               |      |
|--|------------------|---------|-----------------------------|-------------------------------|------|
|  | Number of Deaths | Percent | Georgia Child<br>Population | Deaths per 100K in Population |      |
| F                                      | 32               | 34.78%  | 1,227,420                   |                               | 2.61 |
| М                                      | 60               | 65.22%  | 1,271,611                   |                               | 4.72 |
| Grand Total                            | 92               | 100.00% | 2,499,031                   |                               | 3.68 |

SOURCE: DFCS Data Unit, NCANDS (FFY 2021); Census data from Georgia Department of Public Health (https://dph.georgia.gov/)

To ensure programs and services are appropriately targeted to those at risk of maltreatment related deaths, the Division shares these data with the CAPTA Panel members, DFCS field leadership, program directors, and regional C3 Coordinators (who in turn provide data-related trainings and supports as needed to frontline staff). The data sharing effort is to assist in targeting programs and services to those populations. The Prevention and Community Support Section (PCS) and the Well-Being Section (which includes the Educational Programming, Assessment and Consultation (EPAC) Unit, the Wellness Programming, Assessment and Consultation (WPAC) Unit, and the Early Childhood Collaboration Unit (ECCU) also utilize these data to develop targeted programs and services.

#### Supplemental Funding to Prevent, Prepare for, or Respond to, COVID-19

Georgia used 100% of the CARES Act supplemental funds (\$1,729,109) for cost allocation to support child welfare personnel and service providers to have the tools and equipment to be able safely visit children in their family environments and in their foster homes whenever possible, as well the technological supports to remain in contact remotely when needed. This included:

 Foster care case management activities for non-IV-E eligible children, such as monthly foster care contacts conducted remotely

- Ensuring updated case management and permanency plans
- Ensuring child safety in out-of-home placements during the COVID-19 public health crisis
- Provision of Personal Protective Equipment (PPE) to minimize exposure and prevent transmission of coronavirus, in accordance with guidance from the Centers for Disease Control and Prevention (CDC) and the state public health agency

The purchases were made through the cost allocation pool, and not directly charged to title IV-B funds. All expenditures were completed by December 2020.

## Title IV-B, subpart 2: MaryLee Allen Promoting Safe and Stable Families (PSSF)

The strength of PSSF in Georgia is that all PSSF providers are community-based and are acutely aware of the challenges, needs, and strengths of their communities and families. All service providers wishing to obtain PSSF funding must meet the following criteria:

- Eligibility: State, County or City Governments; other Public Entities, including institutions of higher education;
- Non-profits: must have a 501(c)(3) status with the IRS and be registered and in active compliance status for the year in which grant funds are sought with the Georgia Secretary of State's Office.
- Faith-based and community organizations that meet eligibility requirements are eligible to receive awards. Individuals, sole proprietors, foreign entities and forprofit organizations are not eligible to compete for, or receive, awards made under this announcement.

The funding opportunity announcement solicits proposals for services to improve the safety, permanency and wellbeing of children, youth, and their families through coordinated, community-based service delivery. The Statement of Need (SoN) released each year describes the eligibility guidelines, and that agencies must meet the requirement that family support services be community-based. These services must be designed to build service capacity between state and local child welfare agencies and community-based family service agencies to ensure that children who are at risk for child welfare intervention have access to comprehensive, high-quality prevention and early intervention, preservation, reunification or adoption promotion and post-permanency services. Additional information on the PSSF funding and supported programs, including descriptions of the agencies and organizations selected for funding to provide family support services, can be found at pssfnet.com.

**PSSF FAMILY PRESERVATION services** are provided to families that come to the attention of child welfare because of child abuse or neglect, child or parent behavioral

challenges, or serious parent-child conflict. Services are provided to prevent removal of children from their homes, stabilize placement and/ or to prevent re-entry into foster care.

## **Target Populations:**

- Families who have or have had a substantiated investigation and/or a Family Preservation case to prevent repeat maltreatment and help these families maintain children in their homes safely
- Relative caregivers who are caring for children when their parents are unable to do so to support the safety, permanency and well-being of these children
- Foster parents and/or children in foster care to stabilize the placement and prevent disruption
- Families for whom reunification is the goal, to prepare for and sustain reunification
- Families whose children have returned home from foster care to prevent repeat maltreatment and sustain permanency.
- Children from families who have or have had a substantiated investigation and/or a Family Preservation case or are returning from foster care to improve educational outcomes.

It is estimated that 3,130 families and 5,250 children will be served by FFY22 Family Preservation services, amounting to approximately 27% of the total PSSF budget. The rational for this percentage is based on annual community needs assessments and Departmental priorities. Services to be provided in FFY2020-2024: Placement Prevention; Crisis Intervention; Relative Caregiver/Kinship Family; Residential/Post-Placement Aftercare; Substance Abuse Treatment & Recovery Support. Services will be available throughout the State of Georgia. Examples of funded providers for Family Preservation Services include: Compassion House, Goshen Valley Foundation, Inspiritus, FAITH in Rabun County, and Prevent Child Abuse Habersham. The full list of funded providers can be found at pssfnet.com.

**PSSF FAMILY SUPPORT** services are provided to prevent child abuse and neglect among at-risk families. The community-based prevention and early intervention services are designed to prevent and reduce the risk of child maltreatment by promoting the well-being of the entire family. All services are designed to build on existing family strengths, increase the stability of families, increase parental confidence and competence in their parenting abilities, and enhance overall family functioning to prevent initial or repeat child abuse and neglect.

## **Target Populations:**

- Not known to the child welfare agency
- Who have been the subject of a report of suspected child abuse or neglect who:

- Were assigned to Family Support
- Were screened out or were the subject of an unsubstantiated investigation
- Have prior CPS history (closed but referred for follow-up supports/services)
- Victims of domestic violence and their children
- Homeless families and youth
- Pregnant and parenting teens
- Under-educated and under employed caregivers and families with few or no social support network

It is estimated that 2,810 families 6,130 children will be served by FFY22 Family Support services, amounting to approximately 27% of the total PSSF budget. The rational for this percentage is based on annual community needs assessments and Departmental priorities. Services to be provided in FFY2020-24: Prevention & Early Intervention; Home Visiting; Healthy Relationship & Co-Parenting; and Supports and Services for Homeless Youth and Families. Services will be available throughout the State of Georgia. Examples of funded providers for Family Support Services include: Family Alliance of Paulding, Family Connection of Warren County, Georgia Mountain Women's Center, Jenkins County Family Enrichment Center, and Prevent Child Abuse Rockdale. The full list of funded providers can be found at <a href="mailto:pssfnet.com">pssfnet.com</a>.

**PSSF REUNIFICATION services** are time-limited, intensive support services provided to a child with a plan of safe, appropriate, and timely reunification or other permanency option and to the parents or primary caregiver of the child. These services may be provided to families while the child is in foster care to facilitate reunification and after the child returns from foster care to sustain permanency. For example: individual, group and family counseling, substance abuse, peer-to-peer mentoring, mental health services, domestic violence services, visitation services.

#### **Target Populations:**

- Families with children in foster care
- Families with court-ordered or court-supervised relative placement

It is estimated that 4,390 families and 6,448 children will be served by FFY22 Reunification services, amounting to approximately 23% of the total PSSF budget. The rational for this percentage is based on annual community needs assessments and Departmental priorities. Services to be provided in FFY2020-2024: Supervised Family Visitation; and Child and Family Advocacy. Services will be available throughout the State of Georgia.

**PSSF ADOPTION PROMOTION and PERMANENCY SUPPORT services** are designed to encourage and support permanency for children through adoption, when adoption is in the best interest of the child, or guardianship. Services may also be provided to support families after adoption to prevent disruption, and to provide additional support to youth who may not achieve permanency, pre- and post-emancipation.

## **Target Populations:**

- Foster/adoptive children and youth, particularly those with special needs.
- Foster, pre-adoptive and adoptive parents
- Relative caregivers

It is estimated that 220 families and 260 children will be served within the PSSF network and another 2,000 families and 550 children with State contracts by Adoption Promotion and Permanency Support services in FFY22, amounting to approximately 22% of the total PSSF budget. The rational for this percentage is based on annual community needs assessments and Departmental priorities. Services to be provided in FFY2020-2024: Adoption Promotion; and Transition & Emancipation. Services will be available throughout the State of Georgia.

#### **COVID-19 Flexibilities**

As a result of the COVID-19 pandemic and limits imposed upon the ability to provide contracted services adequately, the DFCS Prevention and Community Support (PCS) Section offered flexible funding options for contractors to provide COVID-19 relief assistance to the families in their communities. For contractors who were not able to provide services, contractors who were not able to provide their full array or capacity of services, and/or for contractors who would have unexpended travel funds, DFCS PCS received federal approval from the Administration for Children and Families, CBCAP Program to allow contractors to utilize their funding for the following items:

- 1. Food and food delivery
- 2. Items for infants such as diapers, wipes, formula and baby food
- 3. Internet access for families to participate in virtual services
- 4. Phones for families to participate in services that can be offered through telephone
- 5. Emergency funds for rent and utility assistance

(NOTE: PCS also extended this flexibility to providers with contracts funded by TANF and child abuse prevention state appropriation, as applicable. If not applicable, providers were encouraged to offer services through virtual or telephonic options.)

PSSF funded providers were encouraged to utilize virtual options to facilitate service delivery. This included services such as individual counseling, collateral contacts, home visits conducted through programs other than evidence-based home visiting programs, etc. If applicable, providers were also encouraged to utilize telehealth technology to facilitate virtual contact with families and children receiving individualized direct services, in addition to utilizing telephonic communication in situations involving technological limitations. Lastly, providers were encouraged to refer to the CDC's guidelines regarding social distancing, their agency's protocol and/or their board or other governing body's guidelines and recommendations for additional guidance on the provision of services.

Division X: Supplemental PSSF Funds

| Spend Category  | FFY21        | 75% Federal  | %    |
|---|--------------|--------------|------|
| PSSF Family Preservation and Support Services           | \$244,000.00 | \$183,000.00 | 44%  |
| PSSF Family Support Services                            | \$192,500.00 | \$144,375.00 | 35%  |
| PSSF Time Limited Reunification Services                | \$102,500.00 | \$76,875.00  | 19%  |
| PSSF Adoption Promotion and<br>Post Permanency Services | \$12,500.00  | \$9,375.00   | 2%   |
| Total   | \$551,500.00 | \$413,625.00 | 100% |

Using supplemental PSSF funding provided by Division X, the Division was able to strengthen services by helping to relieve financial stress on families, which allowed families to remain connected to community providers and engaged in core services. Relationships with families improved by increasing mutual resourcefulness in identifying potential resources and maximizing their utilization. Funds also allowed providers to address financial issues that were a barrier to keeping families in their homes or children from being returned to their homes.

Not all community-based agencies had the capacity to disburse emergency funds to families particularly in the area of Adoption Promotion. The greatest needs were in the area of Family Support and Family Preservation. In some cases, the agency charter prohibited direct payments to clients. It was challenging to find a way to implement a plan to disburse funds based on need quickly, but the PSSF structure for service reporting and payments made this fairly seamless. Programs (family support, family preservation) that worked more directly with the biological caregivers were better able to identify family needs and their financial pressures in a timely manner and address them.

#### Kinship Navigator Grant

Through the Kinship Navigator Program, navigators assist kinship caregivers with understanding and accessing community, regional, state, and federal programs and services and work to create a strong community network to support kin families. Families may enter the program upon agreeing to serve as a DFCS placement resource, or through a direct referral submitted via the Kinship Navigator Portal. The program is open to any family providing kinship care to a relative, regardless of their status within DFCS Child Protective Services. The program serves as a one-stop-shop for information and support, and during FFY21 provided services for 2,121 kinship caregivers.

During FFY21, Georgia utilized funds appropriated from the kinship navigator grant to continue program evaluation and enhance program services with the newly developed GaKINDS database. The Kinship Navigator evaluation team provided training and ongoing quality assurance to improve the Kinship Navigator staff utilization of the database. The development of the database allows Georgia to monitor regional trends and gaps in services for kinship caregivers. The unit is also better able to assist stakeholders in targeting kinship caregivers with local supports. Georgia partnered with community partners in Berrien, Brantley, Fulton, Jefferson, Warren, and Toombs counties to start kinship support groups and provide kinship families with crisis interventions and emergency assistance. Each support group was allowed to use a portion of funding for a peer-to-peer kin caregiver, emergency funds for basic needs for kinship families, and to convene the support group (food and childcare). The support groups have sustained implementation and Berrien County shared their outcomes and progress with other states during The Capacity Building Center for States August 2021 webinar. Georgia's ongoing evaluation efforts have also led to the development of an auto generated caregiver survey. The state uses this feedback to inform the program's overall service delivery.

Georgia's Kinship Navigator Program also utilized funding to drive program awareness and education. Whiteboards were developed and are available to the public on the kinship portal. DFCS kinship resources are provided a more detailed whiteboard at the time of placement regarding important expectations and services. During FY2020 kinship caregivers provided feedback that the program needed more visibility. As a result, the program developed billboards and radio advertisements in underserved communities to support the states kinship care month campaign "It takes a village to raise a child, but it starts with one relative". The Covid Pandemic impacted the program's ability to host large in-person seminars, however educational webinars were held each week in September 2021 to provide education on mental health, meeting the educational needs of children, and developing boundaries with biological parents once permanency is achieved. The kinship staff provided 649 kinship families with household essentials via drive-through events at 28 DFCS county offices throughout the state.

## Monthly Caseworker Visit Formula Grant

Monthly caseworker visit (MCV) grants are provided to states to improve the quality of caseworker visits with an emphasis on improving caseworker decision-making on the safety, permanency, and well-being of foster children and caseworker recruitment, retention, and training (section 436(b)(4)(B)(i) of the Act). Georgia's FFY 2021 funds of \$769,010 supported telecommunication services (cell phones and smart phones) for caseworkers. Having access high-speed internet-capable foster care to telecommunication devices supports the quality of visits by ensuring caseworkers can take and upload photos of injuries or environments in real time and can access assessment tools or policy guidance from the field to assist them in case preparation and planning. Caseworkers can also use the pre-loaded "panic button" in the event of an emergency to summon law enforcement to their location.

Monthly caseworker visits are required under DFCS <u>Policy 10.18</u>: <u>Purposeful Contacts in Foster Care</u>. The policy includes a requirement for staff to make at least one purposeful face-to-face contact each calendar month with every child under the state's care and/or custody to assess child safety, well-being and permanency, with the majority (over 50%) of the contacts occurring in the residence of the child. The policy also requires staff to make purposeful face-to-face contact with any child in foster care within seven calendar days of an initial placement and any subsequent placement change.

When the coronavirus pandemic led to drastic changes in the daily activities of families across the state, DFCS leadership issued Standard Operating Procedure (SOP) 20:01 for Child Welfare staff on March 16, 2020. This SOP provided guidance for contacts involving initial responses to newly assigned reports, monthly in-home service contacts, and monthly contacts with children in foster care, their parents, and their caretakers. For the duration of the COVID-19 pandemic and pandemic-related restrictions on in-person gatherings, staff continued to make monthly caseworker visits using virtual technologies, or in-person when there were immediate safety concerns or if circumstances warranted (and when public health safety conditions were met).

As of September 2021, in-person visits have resumed for all children and families. Case managers are advised to honor any request by a family, caregiver, and/or group home provider for a virtual visit in lieu of an in-person visit due to COVID-19 infections. In those instances, the case manager should record the reason for the virtual visit in their documentation in Georgia SHINES. Case managers are reminded that although virtual visits will no longer count for the monthly contact, they are still encouraged as a supplement to engagement with families and children.

# Adoption and Legal Guardianship Incentive Payments and Savings

Adoption and Guardianship Incentive Payments are used to supplement services in the Adoption and Guardianship programs. Georgia was awarded \$1,167,000 in October 2019. The grant was received based on the achievement of finalized adoptions and permanent guardianships for children exiting DFCS care. States are given 36 months to utilize the funds (P.L. 113-183).

Georgia continues to spend down the \$1.167m FY19 award. The Division has entered into a contract with Georgia Appleseed for \$160,000 for the Fairness Advocacy Individual Representation (FAIR) project, which provides the following services to foster/adoptive youth in care:

- 1. Legal Representation expanding their existing support of providing pro bono attorneys during school disciplinary procedures (TRIBUNALS)
- 2. Growing the support network of attorneys and providing a statewide hotline for case managers to get legal support on tribunals
- 3. Advocacy inform policy, track data, etc

The Division contracted an additional \$70,000 for expanded support for training caregivers to strengthen retention and recruitment.

The Division contracted \$190,000 for a pilot with Adoption-Share that will leverage technology in the adoption matching process.

The Division created a Post-Adoption and Guardianship Services Unit. The goals of the Unit are: 1) to enhance the stability and support of post-adoptive/guardianship families, 2) to reduce the likelihood of discontinuity, and 3) to build well-being and resilience. Taken together, these will secure high quality, efficient, accessible supports and services for Georgia's adoption and guardianship families who have answered the call to meet the needs of children and assure they grow and achieve their potential. (Annual budget: \$333,000 – Four employees)

The Division is reassessing the adoption and guardianship work to determine how best to spend the award. The initial focus will continue to be supporting adoptive caregivers and securing support services to ensure children who have achieved permanency have stability in their placements.

#### **Adoption Savings Expenditures**

Adoption savings funds are reinvested back into Georgia's Adoption budget, providing Pre and Post adoption services for Georgia families. If future Adoption Incentive funds are earned, Georgia anticipates using these funds. Georgia expends Adoption incentive grants in the order they are received to ensure timely expenditure prior to the grant's

expiration date. States have 36 months to expend the funds (P.L. 113-183), and there are no anticipated challenges in accessing and spending these payments.

Georgia will continue to use the same methodology (CB Method) that was submitted via the CB 496 during the previous reporting period.

| Vendor/Partner  | Pre-Adoption<br>Program  | Service Provision   |
|---|--|---|
| <ol> <li>Bethany</li> <li>Christian City</li> <li>Chris 180</li> <li>Faithbridge</li> <li>Methodist Home</li> </ol> | Adoption Services  | Contracted services to recruit, assess, prepare and train families who are able to parent children over the age of 13, sibling groups of 3 or more and children with diagnosed medical, emotional and behavioral disabilities. Also, to provide families support services that will assist them in maintaining the placement of these children to the point of finalization and beyond. |
| Bethany   | ADOPTS (Addressing<br>the Distress of Post-<br>Traumatic Stress) | ADOPTS is a trauma-focused, adoption-specific therapy program serving children ages 8-17 years old and their parents. ADOPTS places its primary emphasis on treatment of past traumatic experiences for pre and post adopted children.  |
| FOX 5   | Wednesday's Child<br>Program                                     | The Wednesday's Child program is a child specific recruitment program. It is a collaboration among the Georgia Department of Human Services, Department of Family and Children Services and WAGA Fox 5 television station. Each week, children free for adoption who are in the custody of the State are profiled on Fox 5 TV - Atlanta.  |
| 1) Bethany 2) Faithbridge   | Child Life History   | Completion of child life histories is a critical element in the adoption process. The child life history is used for the purpose of full disclosure to an adoptive family prior to adoptive placement for all children being adopted through the agency.  |

| It's My Turn Now<br>Georgia | State Photo Listing                          | A federal mandate to provide photo-listing services for children State and Nationwide. Georgia contracts with a vendor for the purpose of listing all children in the agency's permanent custody without an adoption resource on both IMTNG and AdoptUsKids websites. Additionally, this contract provides adoption child specific recruitment activities.  |
|-----------------------------|--|---|
| Vendor/Program              | Post Adoption<br>Program                     | Service Provision   |
| Families First              | Georgia Center for<br>Resources &<br>Support | To maintain operation of the Georgia Center for Adoption and Guardianship Resources by developing and delivering a comprehensive program for developing post placement supportive services for adoptive and guardianship families. Services are available statewide to all adoptive and guardianship families who continue to reside within the state of Georgia prior to and after the legalization of the adoption. |
| Families First              | Reunion Registry                             | A licensed private adoption agency to enhance and maintain operation of Georgia's Adoption Reunion Registry as required by state law to offer services to birth parents, adopted persons, adoptive parents and siblings who are affected by adoptions finalized in Georgia. The complete content of the law can be found in O.C.G.A. 19-8-23(f).  |
| Family Matters              | ATEAM  | To provide adopted teens in grades 6th - 12th opportunities for mutual support and self-awareness/development through group interactions with other adopted teens in 12 ATEAM sites across the state. Parent support meetings also provided.  |
| Georgia State University    | Teaching Adoption<br>Competency (TAC)        | Contracted services with Georgia State University to train clinicians working with adoptive families to become Adoption Competent.  |
| Image Freeway               | Record Retention                             | To prepare, microfilm, index, and purge<br>State and county adoption records for<br>permanent retention as mandated by law<br>(O.C.G.A. 19-8-23).   |

| Savita | Crisis Intervention | Provide crisis intervention to families with a potential for disruption or dissolution of an adoptive placement. A statewide team of skilled individuals work with families to assess and connect them to needed resources. |
|--------|---------------------|---|
|--------|---------------------|---|

## Family First Prevention Services Transition Grant

During the FY22, DFCS has used FFPSA Transition Grant funds for operational costs to support the implementation of FFPSA by funding the DFCS Family First Team; a contract with Chapin Hall Center for Children at the University of Chicago for technical assistance and support related to developing and implementing the state's five year prevention plan and continuous quality improvement processes; a contract for support developing a Request for Proposal (RFP) for prevention services; and a contract with Lexicon Strategies, LLC for broad stakeholder communication support. Apart from the DFCS Family First Team, these are time limited costs. The Division plans to transition the internal team to the state budget in the future. DFCS has executed a contract with the Carl Vinson Institute of Government (CVIOG) at the University of Georgia for ongoing support with fidelity monitoring, data collection and analysis, and continuous quality improvement. This contract will be supported by Transition Grant funds initially and then transitioned to the state budget for future IV-E administrative cost claiming.

| Activity                          | Expenditures (as of March 31, 2022) |
|-----------------------------------|-------------------------------------|
| Technical Assistance- Chapin Hall | \$286,886.99                        |
| RFP development                   | \$3,078.13                          |
| Communication Support- Lexicon    | \$215,650.27                        |
| DFCS Family First Team            | \$398,507.87                        |

During FY2023, the Division will procure and implement Multi-Systemic Therapy (MST) and Functional Family Therapy (FFT) services in select counties throughout the state, as part of Family First Phase One. The target populations are children, youth, and families who are being served in the Family Preservation program area and expectant and parenting youth in foster care. The agency is also developing a plan to utilize the remainder of the funds for provider training on evidence-based practices and potential upgrades to Georgia SHINES. This work is ongoing.

# John H. Chafee Foster Care Program for Successful Transition to Adulthood

The Division collaborated with the Georgia Department of Community Affairs to ensure young adults in need of housing and housing supports who had experienced foster care and who were in foster care had access to the federal Foster Youth to Independence (FYI) Vouchers. Approximately 25 vouchers were reserved at a state level for young people who had experienced care or were in care. Through local housing authority teams, the Department of Community Affairs made the vouchers available to those who needed them and who were eligible. There were organizational and contact changes within the Department of Community Affairs that served as a barrier to communication throughout the year on the status of the vouchers, however, local housing authority teams were able to continue to inform their communities regarding the vouchers.

One of the significant housing barriers observed by the Division was the rising costs of housing. In some areas the barrier to housing also included the availability of housing options. The Division directs young people who are eligible for housing supports through programs like FYI to their local housing authority and community partners.

Supports for youth that identify as LGBTQI+ are available in several areas of the state. For example, Region 3 has limited resources but is making progress. PFLAG Rome is a community resource that provides education, support, and advocacy to the LGBTQ+ community and their families around Rome/Floyd County. PFLAG Rome offers youth (13-17) and adult support groups monthly. Additionally, recruitment for LGBTQ+ foster parents and foster parents open to taking LGBTQ+ kids took place at Rome Pride in June 2022. PFLAG Rome also partners with Berry College's Office of Diversity & Inclusion to provide Safe Space training in and around the community. They have recently trained all staff at the Open Door Home (CCI) in Floyd County and are scheduled to train all staff at the Murphy-Harpst Children's Center (CCI and CPA) in Polk County later in 2022.

For those regions that do not have any specific LGBTQ resources, (e.g., Region 4, 9, 10) staff are able to connect with supports and services in other areas of the state when access is needed. Staff can also connect with the Multi Agency Alliance for Children (MAAC), which serves youth across the state of Georgia, and offers a virtual once-amonth LGBTQ+ youth support group on Zoom.

Additional descriptions of Chafee services and supports are described in the section on Additional Chafee/ETV Funds.

#### National Youth in Transition Database (NYTD)

The Division's efforts to begin the development and implementation of random quality assurance reviews was placed on hold to support the development of strategies to disburse the Consolidated Appropriations Act funding.

The Division continues to utilize existing processes to provide NYTD outcomes data in various reports developed and shared publicly with internal and external stakeholders, including Georgia EmpowerMEnt, an organization founded by former and current foster youth and dedicated to improving outcomes for youth transitioning from foster care, whose motto is "nothing about us, without us". The Division also shares NYTD data collection outcomes statewide weekly during each of the reporting periods. The information is shared with County and Regional leadership to inform the level of current practice and awareness of services provided per the information inputted into the CCWIS system by case management staff.

In 2019, the Division developed and implemented standards of practice to improve NYTD data entry during the reporting periods. Since the implementation of those standards, the Division has continued to meet the NYTD data reporting requirements. The Division's Chafee Program staff continues to provide technical assistance to counties and regions not meeting the pacing efforts within the specified timeframes. Since implementation of the pacing plan, most regions continue to exceed the NYTD entry expectation by the 4<sup>th</sup> month of the review period.

The Division's Chafee Program Director has worked with its youth advisory board, Georgia Peers Advocating for Change (GPAC), to support the development of the board's first strategic plan. The Chafee Director, and three of the Chafee program staff who serve as adult supporters, provided technical assistance and support to the board as the identified areas of focus over for the upcoming year. The Chafee Director reviewed NYTD outcomes and the current CFSP goals with the board members to assist with their plan development. This work is ongoing.

#### Access to Medicaid for Former Foster Youth

It is important that young people who have been in the foster care system receive medical, health, and behavioral health services while they are in their care and oversight of the collective child welfare system. The programs and services provided to support their growth and development is an important part of ensuring a healthy transition out of care. For children, youth, and young adults who transition out of foster care (either through adoption or aging out), continued connection to medical and behavioral health supports ensures a healthy start into adulthood and as they begin their lives independently. Georgia has collaborated with internal and external partners to create a high-level plan to ensure young people who are former foster youth can access health services through Medicaid, as required and outlined within Section 2011 of the Substance Use Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act.

Georgia's plan to provide information to former foster youth within Georgia's child welfare system and the foster youth that have moved to Georgia is as follows:

#### Communication

Communication in the form of advertisement will be disseminated across the state. These communications will be sent in the form of flyers and via the websites of the Division of Family and Children Services, specifically the GA RYSE John H. Chafee Independent Living Program website that is targeted to young people who are currently in care or who have been in foster care within Georgia.

# **Child Welfare Staff Flyer**

• Current staff flyer will be updated with guidance on how to apply for Medicaid for former foster youth in the state of Georgia, youth moving out of state, and for youth moving to Georgia.

## Youth Flyer

• Current youth flyer will be updated with guidance on how to apply for Medicaid, renewal of Medicaid, and guidance for former foster youth moving out of state, and for youth moving to Georgia.

# **GARYSE** (Independent Living Website)

 Health Matters tab on GARYSE website will be updated with guidance for former foster youth on how to apply for Medicaid in the state in Georgia as well as guidance on how to apply for Medicaid in other states.

#### **Education Sessions**

Providing information and education to internal and external partners on the importance of ensuring the medical and behavioral health needs of our youth in care and youth/young adults who have exited care will give a holistic view of the importance of connecting young people to available health services, even if they are no longer in foster care. The Division will host education sessions for DFCS staff (OFI and Child Welfare), youth, and community partners. These sessions will include information on the Medicaid application process, Medicaid renewal process, and guidance for former foster youth planning to move to another state, as well as youth that move to Georgia. Education sessions will be completed by December 15, 2022, and repeated annually.

#### **Cross-Agency Collaboration and Partnership**

Within the current partnership structure, Amerigroup (also known as Anthem), the Georgia Department of Community Health and DFCS meet quarterly to discuss updated policies and practices that impact the medical and behavioral support provided to children

and youth who are in foster care. During these meetings, additional discussion will be included to address system barriers that impact former foster youth access to Medicaid and resolutions to resolve those barriers.

## **Wellness Programing Assessment and Consultation (WPAC)**

The Georgia Division of Family and Children Services established and maintains an email inbox (<a href="Mealthmatters@dhs.ga.gov">Mealth and medical related questions</a> and concerns pertaining to children and youth in foster care. This email inbox is routinely monitored by Wellness Programing Assessment and Consultation (WPAC) Specialists and will also be used for communication to former foster youth who have questions about health care services and who need additional resources connections. This email will also be used to respond to former foster youth inquiries about access to Medicaid and health care coordination. WPAC Specialists will direct youth to the appropriate resources based on their inquiries and specific health and/or behavioral health needs. Below are current resources that will also be provided to former youth in care as they navigate accessing Medicaid and additional health services while out of care.

- Georgia Gateway Homepage Screen State website for Medicaid application and other benefits.
- <u>ICPC State Pages</u> Interstate Compact of Placement of Children (ICPC) website that provides Medicaid eligibility for each state in the US along with a list of ICPC Administrators for those states
- GA / RYSE (garyse-ilp.org) The state of Georgia's John H. Chafee Independent Living Program website
- <u>healthmatters@dhs.ga.gov</u> WPAC email inbox used to directly to inquire about Medicaid benefits and health care coordination.

## Education and Training Vouchers (ETV)

In large part, the program's design and delivery remains unchanged from prior years. Some enhancements include the implementation of new technology that allows students to manage ETV request processes independently after having their program eligibility confirmed. This technology enhancement allows for greater transparency and autonomy in the process for students in receiving ETV supports. The Division continues to see more payments made through direct deposit to schools, which allows for quicker payments being made and more efficiency in moving funding to schools on behalf of students. Also, due to the increased availability and expectation for virtual learning and information sharing, the Division is delivering more trainings using Microsoft Teams and Zoom technology. As a result, more individualized trainings to students and stakeholders can be provided.

Throughout the COVID-19 pandemic, the Division has continued to identify activities that engaged young people in the state's care and oversight. Through virtual programing that included a night of entertainment with a DJ and virtual life skills classes, the GA-RYSE ILP offered convenings that brought young people together. The GA-RYSE ILP staff reached out to all young people who were enrolled in college at the start of the pandemic to ensure they had a temporary place for housing and had the resources they needed until additional federal guidance and assistance were provided. With the additional Chafee and ETV support provided to states for young people in foster care, increased stipend amounts were provided to young people who lived both on and off campus.

The J.W. Fanning Institute at the University of Georgia established Embark Georgia in 2012 so that Georgia students who have experienced foster care and/or homelessness will have ample support to pursue a postsecondary degree. Embark Georgia established a Designated Point of Contact (DPOC) at every institution within the University System of Georgia and the Technical College System of Georgia (53 campuses statewide). Georgia is the first state to do this for youth experiencing foster care as well as youth experiencing homelessness. Seventeen Georgia campuses have developed campus-based support programs to further serve students and help them stay on track to graduate. Each campus program is unique, and Embark Georgia brings together DPOCs to share best-practices based on successful programs on their home campuses and from other states, as well as through the national initiative Fostering Academic Achievement Nationwide (FAAN). Embark Georgia utilizes three primary strategies to serve the statewide network: building and enhancing relationships, information sharing, and building capacity.

Currently, most of the campus-based programs in Georgia are understaffed and underfunded. Embark Georgia is working to bolster the supports available on postsecondary campuses through partnerships with private philanthropy. The program is hopeful that in the next 12-18 months, several campuses will be able to hire dedicated staff for those programs and deliver targeted supports. Embark Georgia is using ETV data to identify those Georgia campuses that have the highest number of students receiving ETV funds and therefore represent the best opportunity to reach the most students who have foster care experience.

The ongoing efforts within the Embark Georgia network and among the professionals included in the network are the strongest tools to ensure youth are accessing ETV funds. In addition to these resources, the program has developed an "Am I Eligible" feature within the Embark Georgia/Georgia ETV website so that a student can quickly determine their eligibility for the program without have to make a call or send an email.

The Division has developed two regional coalitions to localize the relationships between Embark Georgia stakeholders and will develop a total of six coalitions by the end of 2023.

The Embark Georgia Leadership conference is held every 18 months as a means of building relationships and sharing information among the key stakeholders who may support students who have experienced foster care. Enhancing the communication among professionals working with this group of students is critical to increasing the number of students who receive ETV support and improving their outcomes.

The Division complies with FERPA privacy protections and is not able to share student level information with campus programs. Regular connections with Embark Georgia Designated Points of Contact provides information on their students who may need further support. The Division expects that as campus professionals continue to increase their ability to identify their students in need, they will also identify students that may be eligible for ETV services who are not currently utilizing those supports.

- 7/1/2020-6/30/2021: 289 students received ETV support (130 new ETVs)
- 7/1/2021-Current: 283 students receive ETV support (130 new ETVs)

Below are the current application numbers for assistance using the supplemental funding:

- # Clients Applied for Stipend 2,425
- # Clients with Minor Child Applied for Stipend 673
- # Clients without Minor Child Applied for Stipend 1,752
- # Clients Applied for Housing 1,501
- # Clients Applied for Transportation 1,661

#### Division X: Additional Chafee/ETV Funds

Division X of P.L. 116-120, titled "Supporting Foster Youth and Families through the Pandemic Act" was a piece of federal legislation that provided supplemental Chafee and Education and Training Voucher (ETV) funding to states to support Chafee eligible youth impacted by the COVID-19 pandemic. The legislation also provided exceptions for youth to remain in care beyond age 21, and waived education and employment requirements for extended foster care. The legislation also allowed states to support youth over age 18, but not yet age 22, who exited care during the pandemic to return.

Georgia received \$10,367,523.00 in supplemental Chafee funding and \$1,506,907.00 in supplemental Education and Training Voucher funding. As of 08/15/2022, all of the grant funds have been obligated for FY21 CHAFEE and FY21 ETV.

In response to the legislation and additional funding, the Division's Chafee Program Director drafted an implementation plan that included provisions for the use of funding, and the extended foster care exceptions.

## <u>Supplemental Chafee Funding Planning and Implementation</u>

In March of 2021, the Division's Chafee Program Director began strategizing with internal and external stakeholders to support the distribution of the supplemental Chafee funding. The plan included provisions to provide direct cash assistance, housing assistance, transportation assistance, incentives for participating in training opportunities and peer support to Chafee eligible foster youth over age 18. It also included provisions to support an employment opportunity for youth, and support to Covenant House Georgia, a Metro-Atlanta area homeless shelter that aided youth and young adults. Existing partnering agencies were identified to support the distribution of funds. In May of 2021, the Chafee Program Director engaged the Division's project management unit to support the development of a web-based application portal.

In May of 2021, the Department of Human Services Office of Information Technology, Admin Apps Team in conjunction with the Georgia Resilient, Youth-Centered, Stable, Empowered (GA-RYSE) Program developed the specifications for the design, development, and implementation of a secure web-based application for the collection and provisioning of services provided via Chafee Supplemental Stimulus funding for youth and young adults between the ages of 18 and 26 who are in or have experienced foster care. The database and secure web-based application was designed to facilitate the submission of requests for stimulus funds and resources available in part by way of the Chafee Foster Care Independence Program (CFCIP). The system was developed to allow applicants to securely submit applications from any compatible web browser, functionality to verify application, determine eligibility and provision services to applicants. The system was titled the "GA-RYSE Pandemic Relief Database".

DHS Office of Information Technology (OIT) began building the application portal in a four phased process in June 2021. User Acceptance Testing (UAT) began in July 2021 and continued as portions of the portal were developed. The portal was ready for go-live to accept applications on August 9, 2021. The Applicant Portal allows prospectively eligible youth/young adult applicants the ability to request stimulus funds by completing an online application and electronically sign the application. The applicants can securely view, and access previously submitted applications as well as submit new applications and upload supporting documentation. The agency portal allows DFCS staff and its vendors to review and process the applications received from the youth applicant. The system will be a point of reference for the services/resources requested from the applicants and how such requests were fulfilled. The system also provides the ability for users with administration privileges to generate reports.

Internal marketing of the pandemic relief application portal commenced on August 11, 2021. Applicants were directed to the GA-RYSE Program website at <a href="https://www.garyse-ilp.org">www.garyse-ilp.org</a>

to review information on the supports available, eligibility requirements, and access the link to the application website at https://garelief.dhs.ga.gov/#/home.

Supports available to eligible youth were as follows:

- Direct Cash Assistance
  - One time stipend payment of \$750 for parenting youth, and \$400 for nonparenting youth
- Housing Assistance not to exceed \$8,000 per Applicant
  - Rental Assistance arrears/past due rent or future rent
  - Utilities Assistance arrears/past due or current month
  - Furniture Purchase essential furniture (bedroom, living room, dining room, cribs/child beds)
  - Rental Insurance
- Transportation Assistance not to exceed \$4,000 per Applicant
  - Down payment for vehicle purchase, or payment of existing car note payment – not to exceed \$2,500 per youth
  - Vehicle repairs not to exceed \$2500 per youth
  - Vehicle Insurance up to six months
  - Ride Share Gift Cards
  - Public Transportation Cards
- Training and Enrichment Courses participants could receive an additional \$250 cash incentive to participate in training course for:
  - Financial Literacy
  - o RentWise a training to support the youth with becoming reliable tenants

Below are the current application numbers for assistance as of April 2022:

- # Clients Applied for Stipend 2,425
- # Clients with Minor Child Applied for Stipend 673
- # Clients without Minor Child Applied for Stipend 1,752
- # Clients Applied for Housing 1,501
- # Clients Applied for Transportation 1,661

The Division projects to spend above 90% of the additional funding by the close of the 2022 federal fiscal year.

# **Employment Opportunity**

The GA-RYSE Chafee Program partnered with an existing non-profit agency to provide an employment opportunity for 10-15 Chafee eligible youth. The youth were to be

employed with the non-profit and support the processing of applications received through the Pandemic Relief Database. The youth would earn \$18 to \$25 per hour based on their role and work up to 30 hours per week. The GA-RYSE Program partnered with the Division's teen employment program, Georgia CREW (Cultivating the Rising Experienced Worker) Program to develop an online employment application for the positions. Marketing materials were developed and shared with internal and external stakeholders to recruit youth applicants. Due to the location of the employer, security provisions for access to the application database, the opportunity was available to youth who could travel to the Fayette County area. The potential applicants were shared with the non-profit agency who would employ the youth to coordinate interviews. The non-profit selected and onboarded four applicants in the month of August and September. The marketing for additional applicants remains ongoing.

### Supports for Youth from Other States

The GARYSE Chafee Program implemented processes to support the determination of eligibility and provision of supports to youth who experienced foster care in another state and are now living in Georgia. These processes were implemented to determine eligibility of said youth whether they were seeking support by way of the GA-RYSE Pandemic Relief Application Database or via the Covenant House Georgia Homeless Shelter. GA-RYSE Program staff were provided instructional guidance to identify the Federal Chafee/ETV Coordinator Grantee point of contact (POC) for the youth's Foster Care state. The instructional guidance included language necessary to determine the youth's Chafee eligibility from the POC and the gathering of collateral documents (if needed).

#### Support for Unhoused/Homeless Youth

Utilizing the Supplemental Chafee funds provided through Division X of P.L. 116-260, the Division partnered with the Covenant House Homeless shelter located in the Metro Atlanta area. The shelter has served transition aged youth and had recently experienced an increase in youth with lived foster care experience in their short and long-term programs. The Division allocated over \$500,000 in funds to the program to support youth with:

- Employment Readiness
- Life Skills Training: financial literacy, budgeting, housekeeping, culinary skills
- Acquiring vital documents (ie, birth certificate, social security cards, stateissued ID)
- Clothing and toiletry items
- Limited Recurring Monetary Stipends / Incentives
- Electronic Equipment/Technology Supports

- Pre-paid cell phone or phone cards
- Laptops
- Wifi Hotspots
- Transportation Costs
- Driver's Education/License Costs
- Public Transportation Cards
- Ride Share Cards
- Housing Start Up Costs not to exceed \$8,000 per youth
- Deposit and up to 6-months rent (Includes first month's rent)
- Utilities
- Furniture
- Rental Insurance

#### Pandemic Provisions for the Extension of Foster Care

Georgia's governor enacted the Public Health State of Emergency Executive Order No. 03.14.20.01 in April of 2020 that waived the extended foster care education and work requirements. This allowed youth to remain in care beyond age 21 up to 90 days after the order's expiration. The state executive order was continually extended until the passage of Division X of P.L. 116-260 in December 2020. Memoranda were drafted and shared by the Division's Deputy Director of Child Welfare to all staff and external stakeholders, as well as an infographic that included high level points of reference to explain the contents of the order. The memorandum and infographic were updated for each extension of the order and shared to all staff and stakeholders. Upon passage of P.L. 116-260 subsequent correspondence was drafted and shared by the Division's Deputy Director of Child Welfare in January 2021 to include language regarding the extension of care, the moratorium on foster care exists for youth who would otherwise be ineligible due to age, and the allowance for youth to return. This legislation allowed youth who had reached age 21 to remain in care until September 30, 2021. In July 2021, the Division's Chafee Program - Georgia Resilient Youth-Centered Stable and Empowered, henceforth referred to as GA-RYSE, began to support field staff with hosting transition meetings for the 21+ aged youth who remained in care due to the extension.

The Division's Well-Being Section Data and Systems manager supported the acquisition of data to readily identify the youth who remained in care and would have to exit by September 30th. The list included 21+ aged youth, undocumented youth, and youth with complex needs who would need to be supported by other adult systems. There was a total of 104 youth identified; five were undocumented and two were identified as having complex needs. The Division's Well-Being Section Director worked with the district leaders to identify a point of contact (POC) from each of the 14 DFCS regions to support

coordination of planning meetings, update the status of the transition meeting with county level staff, and update the youth's transition plans.

Each county that supported young people age 21 and older conducted transition meetings and efforts to connect to appropriate resources based on the young person's individual needs. Case managers, the regionally-assigned independent living specialist, and other adult supporters within the youth's life (including medical and therapeutic representatives) discussed next steps for the youth's transition. When and where the young person could be included in the meeting, they were engaged. For young people who did not have housing or who needed additional supports, they were provided with the Division X funding opportunity information. Local offices also provided contacts and resource connections where needed and available. Extensions were granted to the youth with complex needs to support their transition to other adult serving programs.

#### Consultation and Coordination with Tribes

DFCS continues to collaborate with the Georgia tribes. A designated member of the Policy and Regulations Unit (PRU) continues to serve as the DFCS State Office liaison to ICWA and the Georgia Tribes, led by Marian McCormick (Lower Muscogee Creek), Frances Crews (Cherokee of Georgia Tribal Council), and JB Jones (Georgia Tribe of Eastern Cherokee). The Liaison's participation in the regular meetings of the Georgia Council on American Indian Concerns provides Council members with the opportunity to discuss child welfare policies or practice that may involve their tribal members and families. The Liaison routinely shares draft child welfare policy with tribal leaders to gather their input. The Liaison also coordinates with the tribal leaders to invite representatives to attend or present at the state APSR joint planning sessions.

The Council meetings provide a forum for the agency to inform the tribe on available DFCS programs and services to foster continued collaboration and participation. A presentation by the Family First Program Director, and the Promoting Safe and Stable Families Manager was planned during the FY22 period; however due to COVID restrictions, it did not occur. The Division plans to reschedule these information-sharing sessions in FY23. This work is ongoing.

The Liaison attends the National Indian Child Welfare Association meeting for state ICWA representatives. During these meetings, participants share tips to improve success in serving Indian families. The Division is exploring opportunities to implement some of the suggested practices, including practical tips such as providing a self-addressed, stamped envelope in registered letters to increase the speed and frequency of responses from tribes with small budgets and limited staff. Other meeting discussions included recent legal rulings that impact ICWA, upcoming appeals, and their potential impact on the work

of serving Indian families under ICWA. States with tribal partnerships also share their innovations in implementing ICWA and collaboration with tribes in their state.

The Liaison continues to provide consultation to DFCS staff regarding ICWA compliance. In FY22, the Liaison participated in a pre-removal staffing in the Metro District when the child was a member of a federally recognized tribe to provide guidance regarding ICWA provisions. The Liaison also provided technical assistance at the request of the Polk County Director regarding engaging a tribe or tribes who fail to respond to a certified letter requesting information on a sibling group's eligibility for tribal membership. In addition to the Division Liaison, regional staff ensure ongoing collaboration with the tribes. Region 2 continued collaborative efforts with the Georgia Tribe of Eastern Cherokee (primarily located within Lumpkin County). Staff from Bibb County in Region 6 usually attend the celebration of the local Indian Mounds held each year and conduct foster home recruitment efforts; however due to COVID-19 restrictions, the event was canceled this year. They plan to continue participation in future events.

Georgia continues to ensure staff compliance with ICWA. The state mandates annual ICWA training for all child welfare staff. This training goes beyond notification of tribes and includes all areas of the ICWA law such as, who qualifies as an expert witness, when they should be in court, what constitutes active efforts, when and why they are required. During FY22, child welfare policy enhancements were made to the voluntary placement and voluntary surrender policies to include clarification of ICWA provisions in these situations. The Policy and Regulations Unit consulted with the federal Bureau of Indian Affairs (BIA) during the policy development process to obtain clarification regarding certification of a voluntary placement or voluntary surrender by the court.

The Liaison receives semi-annual reports from each DFCS region on their recent cases involving a Native American child or family, and verification of ICWA compliance as needed. These reports help the Liaison to identify areas where staff may need additional training or technical assistance to ensure ICWA is applied correctly. To accurately identify cases where ICWA applies, regions reported that when they learn a child entering foster care is a member or potentially eligible for membership in a tribe, they reach out to their State Assistant Attorney General (SAAG) who notifies the tribe via certified mail of a hearing and requests a response regarding the child's tribal eligibility and the tribe's potential participation in the case. In some instances, counties reached out to the Bureau of Indian Affairs or the tribe prior to the first hearing.

Region 1 reported efforts to contact an Aleut tribal representative in Alaska, transfer of custody of a child to a relative member of the Eastern Band of Cherokee, and a youth member of the Bad River Band of Lake Superior Tribe of Chippewa signed themselves back into care. The county staff contacted that tribe to learn what culturally appropriate

services they could provide to the youth. Region 3 reported one child in care was eligible for membership in the Cherokee Nation, and the tribe became an interested party in the case. The Division placed the child with the father who is a tribal member. Region 4 reported two successful contacts to Cherokee and Choctaw tribes to confirm eligibility for youth (the tribes did not wish to be involved), and several unsuccessful attempts to contact the BIA for information on tribal eligibility of two children in care. Region 6 attempted multiple contacts with the White Earth Tribe, Band of Ojibwe, Chippewa to confirm tribal eligibility for an infant. The county was unsuccessful in reaching the tribal case manager, and the infant was placed for adoption with the family that also adopted the infant's siblings. Region 13 reported one child whose parents are both members of the Catawba Indian Nation. The child is placed with relatives who are not tribal members, but the county is working with the ICWA Coordinator of the tribe to ensure cultural supports are available.

#### Data

During the FY22 reporting period, Georgia SHINES reported 20 cases where the child(ren) identified as members or eligible for membership of a federally recognized tribe:

- One eligible child entered foster care: The Division contacted the tribe to verify the child's eligibility and placed the child with the parent in Arizona.
- Four Family Preservation Cases where tribal eligibility was indicated. In one case, the Division made a documented attempt to contact the tribe.
- Six pre-adoptive cases: In five cases, there was documentation that indicated the agency had contact with the tribes. In two of the five cases, the Division successfully engaged the child's tribe. In one case, there was no documented effort by the Division to notify the tribe.
- Nine Investigation cases: In two of those cases, the child's tribal eligibility was verified.
   All nine investigations were closed to further DFCS involvement.

The liaison will continue to monitor Georgia's ICWA compliance by reviewing ICWA activity reports from the regions on their engagement with tribes and tribal families; providing case consultation, training and technical assistance when needed to improve awareness and understanding of ICWA for federal and state recognized tribes; and selecting random cases for review (e.g. identification, notice to tribes, transfer of jurisdiction, etc.). These case reviews will support reconciliation of data to ensure appropriate actions are taken for Native American children. This work is ongoing.

## **CFSP/APSR Exchange**

Tribal leaders are invited and encouraged to participate in monitoring of the CFSP and the development of the APSR each year. All tribal leaders are invited to present or attend

Georgia's APSR Joint Planning meetings; no tribal leaders attended or presented at the fall 2021 meetings. The PRU liaison provides information to tribes on how to access both the CFSP and the APSR and presents a summary of those reports to the Georgia Council on American Indian Concerns. The ICWA Liaison will continue efforts to ensure the tribal leaders are engaged in CFSP-APSR Joint Collaboration meetings, encouraged to provide feedback on goals and strategies, and invited to participate in agency planning activities.

#### Jurisdiction

Georgia Tribes do not provide child welfare services. DFCS is responsible for child welfare services for children in Georgia.

#### **Chafee Consultation with Tribes**

Georgia Tribes do not provide Chafee/ETV services. DFCS is responsible for child welfare services for children in Georgia. All Chafee-eligible youth receive services through the program.

# Section F: CAPTA State Plan Requirements and Updates

The contact information for Georgia's CAPTA Coordinator is:

Arleymah Gray, Director of Federal Plans
Georgia Division of Family and Children Services
47 Trinity Ave. SW
Atlanta, GA 30334
404-596-1370

Arleymah.Gray@dhs.ga.gov

In FY22, there were no substantive changes in Georgia statutes that adversely affected the State's eligibility for the CAPTA State grant. The Division revised the CAPTA State Plan in May 2020 to better align the goals and objectives with the CAPTA Priority Areas. Through active and ongoing partnerships with stakeholders and the members of the Georgia CAPTA Panels, the Division continues to pursue several activities to support the identified objectives of the CAPTA Plan. Several objectives of the CAPTA Plan also align with Georgia's CFSP goals and the CFSR Systemic Factors.

Georgia continued to partner with Care Solutions, Inc. to coordinate the state's three CAPTA panels. These expenditures included administrative support to the panels, coordinating communication between the Division and the Panels, and the annual CAPTA Panel Retreat. The CAPTA Panel Coordinator works closely with the DFCS Federal Plans Director to ensure stakeholder groups are informed of the CAPTA Plan and develop action steps to achieve the stated goals and objectives.

The annual citizens review panel report, as well as the Division's written responses to the panel recommendations, are attached in the Appendix.

# Infants Affected by Substance Use/Abuse

Georgia's CAPTA State Grant funding continues to support the development, implementation, and monitoring of plans of safe care (POSC) for substance-exposed infants by providing support to the Douglas County Baby Steps program and 19 First Steps sites across the state. The Division has developed an FY23 contract with the Department of Public Health to expand home visiting services and monitoring of plans of safe care for infants and their families referred though the DFCS Intake process. This expansion of existing DPH home visiting sites will occur in 11 counties (identified through a DPH Needs Assessment conducted in 2020) and serve approximately 140 DFCS-referred families over the next five years. An FY23 contract was also developed with

Georgia Family Connection Partnership (GaFCP) to provide education and training to hospital staff on the POSC referral process and supporting families with substance exposed newborns. This 2-year training pilot project will train staff in two hospitals and explore opportunities to expand the training to additional hospitals after the conclusion of the pilot. All of these CAPTA-funded POSC projects are encouraged to ensure staff are connecting families to their local First Steps, Community Service Boards, and other community resources for supports and services.

The Division continues to follow the practice change implemented in FY2020 to no longer substantiate prenatal abuse solely on the basis of marijuana use, but to assess the child(ren) and provide a Plan of Safe Care (POSC) for the affected infant and their caregiver. Policy 19.27: Plan of Safe Care for Infants Prenatally Exposed to Substances or a Fetal Alcohol Spectrum Disorder (FASD) was updated in November 2020 to ensure the coordinated development of the POSC when the family is participating in a Family Treatment Court.

In FY22, the Division's Safety Section created a Substance Abuse Specialist (SAS) position funded by CAPTA to serve as a consultant to regional and state office staff. The role is designed to build capacity and expertise in assessing risk related to substance misuse and to create linkages to the substance use service provider community, which are intended to improve collaboration and service delivery for families and increase the development and monitoring of Plans of Safe Care. The position was filled in January 2022. The SAS is working with regional staff on their prenatal exposure cases and development of Plans of Safe Care (POSC) by conducting monthly case reviews to assess the accuracy and completeness of required POSC, providing statewide training for Field Program Specialists, and implementing a process to identify and review POSC case trends. The SAS will continue to work with both the field and regional staff along with external stakeholders and partners in prenatal exposure work. The SAS is working with the Georgia SHINES team to re-establish a hard stop within the system for prenatal exposure cases that require a POSC. This would prevent a case closure without the required POSC being uploaded into external documents. The SAS is also working with the Georgia SHINES team and the CPS Intake Communication Center (CICC) on coding to ensure that staff are capturing all of the cases that require a POSC.

To increase awareness of POSC requirements, the SAS is collaborating with the Division's High Priority Review Team to provide monthly Lunch and Learn sessions throughout CY2022 to discuss prenatal exposure cases along with the requirements of POSC. This training is voluntary and open to all staff statewide. The Division also developed a new POSC brochure that will be disseminated to staff statewide.

The Safety Section continues to collaborate with the CDC and Children's Bureau, which are working together to improve the identification and care of children who were

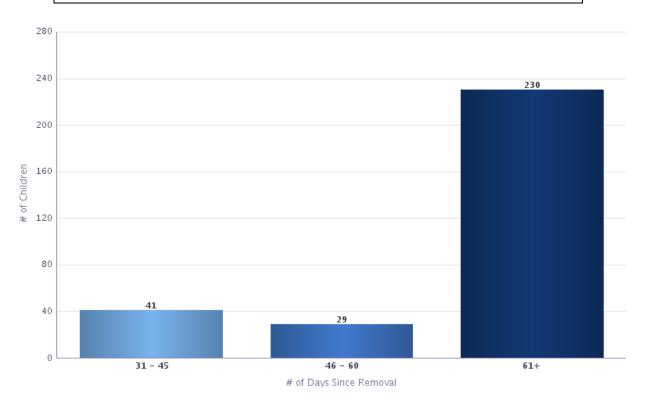
exposed to alcohol and other drugs during pregnancy. The focus of work is the <u>Prenatal Alcohol and Other Drug Exposures in Child Welfare</u> descriptive study and toolkit project.

# **Legal Representation**

Data reported from Georgia SHINES shows that 97% of children in foster care over 30 days (10,382) as of May 4, 2022 had legal representation.

## **Children Without Legal Representation**

| # of Children Under 18 In Custody Over 30 Days:            | 10,382 |
|--|--------|
| # of Children In Care Over 30 Days Without Representation: | 300    |
| % of Children In Care Over 30 Days With Representation:    | 97.11% |



Source: Georgia SHINES, LENSES report

To increase awareness and improve data quality, the Permanency Unit assigned a team member to coordinate with each region and provide support for staff. The Georgia SHINES Job Aid was also shared to remind staff on the procedures to input representation data into the case.

**CAPTA State Grant** 

The Division supported the following projects in FY22 with CAPTA State Grant funds.

| ACTIVITY                                      | CAPTA Priority                           | FUNDS       |
|---|--|-------------|
| 2021 Child Welfare<br>Summit                  | Workforce Development<br>(Area 6, 7, 13) | \$40,000    |
| Mandated Reporter<br>Training                 | Mandated Reporting (Area 1, 8, 10)       | \$47,386    |
| Douglas County Baby<br>Steps Recovery Program | Plans of Safe Care (Area 7, 10, 13)      | \$31,200    |
| GSU Child Welfare<br>Training Collaborative   | Workforce Development (Area 6, 7, 13)    | \$100,000   |
| First Steps Georgia                           | Plans of Safe Care (Area 7, 10, 13)      | \$343,250   |
| Care Solutions, Inc.                          | CAPTA Administrative Support             | \$105,820   |
| Second Step                                   | Interagency Collaboration (Area 13)      | \$116,000   |
| Sources of Strength                           | Interagency Collaboration (Area 13)      | \$256,000   |
| Click Safe mobile emergency response tool     | Workforce Development (Area 7)           | \$383,940   |
| CJCC - Child Advocacy<br>Centers              | Interagency Collaboration (Area 13)      | \$1,000,000 |
|   |  | \$2,423,596 |

The CAPTA State Grant supported the Child Welfare Summit, which is sponsored by the Georgia Office of the Child Advocate and provides training on child abuse and neglect. This is a 2.5-day, multidisciplinary conference also funded in part by the Children's Justice Act grant. The conference promotes a sharing of knowledge regarding child protection, law, policy, and practice, including the judicial handling of child abuse and neglect cases, and promotes networking and interaction for the Georgia community of child welfare professionals, both within and across disciplines. In November 2021, 686 professionals attended the training; of those, 107 DFCS staff were supported by a CAPTA scholarship.

The CAPTA State Grant supported the Mandated Reporter training developed by Care Solutions and promoted on the DFCS website. From April 2021 through March 2022, 36,400 individuals received the training. Most trained participants were educators, but other child-serving professional disciplines were also represented.

The CAPTA State Grant supported the Baby Steps Recovery Program, which provides comprehensive case management services for 10–15 cases of substance exposed

children aged birth to three years in Douglas County. Comprehensive case management includes assuring quality Plans of Safe Care, appropriate medical and developmental services for children, and linkage to services for parents with substance use and mental health disorders. The Baby Steps program meets with the Division and other stakeholders on a quarterly basis to discuss progress and barriers, and to provide recommendations for modifications to policy and practice based upon proven practices, data collected and program outcomes. The program also facilitates stakeholder engagement and education through summits, conferences, and meetings. This work is ongoing.

The CAPTA State grant supported the Prevention and Community Support Section (PCS) to work with the Department of Public Health (Georgia's federal Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grantee) and the University of Georgia's (UGA) Georgia Home Visiting Program Technical Assistance and Training Team to provide the First Steps program. First Steps Georgia provides universal, free, and voluntary support services for all expectant parents and children birth to five and their families, including screenings of and referrals to appropriate services for pregnant women for substance use disorders, and infants and children for effects of prenatal exposure to substance. Nineteen sites were funded in FY22, with training and technical assistance provided by the University of Georgia. This work is ongoing.

The CAPTA State Grant supported the Child Welfare Training Collaborative (CWTC), which also received funding from the private Whitehead Foundation grant. The CWTC is a partnership between the Georgia Division of Family and Children Services and Georgia State University's School of Social Work Professional Excellence Program. It offers training to community partners (e.g., DFCS, law enforcement, placement providers, early care, education, behavioral health, juvenile courts, pediatric health providers, Court Appointed Special Advocates, and other community and government organizations) throughout the state of Georgia to create opportunities for community partners to have a shared understanding of issues facing children and families. The training model also strengthens collaborations to promote better outcomes for Georgia's children. Trainings provided to the community include, but are not limited to:

- Trauma 101: Understanding the Impact of Trauma on Children
- o Brain 101: Understanding the Impact of Trauma on Brain Development
- Trauma/Brain 201: Building Resiliency
- Recognizing and Managing Secondary Traumatic Stress

The CAPTA State Grant supported Second Step, which is a classroom-based program that promotes children's social and academic success by decreasing problem behaviors, increasing student's school success, and promoting social-emotional competence and self-regulation. The Child Protection Unit (CPU) is an add-on to the social-emotional learning, and focuses on addressing the multiple influences that can contribute to child abuse and neglect through a classroom-based curriculum.

The CAPTA State Grant supported Sources of Strength, which is an evidence-based program implemented in schools for the prevention of suicide, violence, bullying and substance abuse by training, supporting, and empowering both peer leaders and caring adults. It is designed to harness the power of peer social networks to change unhealthy norms and culture, increasing help seeking behaviors and promoting connections between peers and caring adults. This upstream model moves beyond a singular focus on risk factors and instead strengthens multiple sources of support (protective factors) around young individuals so that when times get hard, they have strengths to rely on. In FY22, three school systems were funded. Forsyth County Schools trained 319 peer leaders and 106 adult advisors, Paulding County Schools trained 111 peer leaders and 22 adult advisors, and Cobb County Schools trained 800 peer leaders and 70 adult advisors.

The CAPTA State Grant supported the mobile emergency response tool "Click Safe", formally known as Safe Harbor System, which was included in Georgia Senate Bill 138 (2015). DFCS partnered with the Georgia Tech Research Institute (GTRI) to develop an emergency response tool to aid case managers as a last line of defense if they find themselves in a dangerous situation during a site visit where calling 911 is not an option.

The Click Safe System consists of a mobile application, web application, and a Panic Button. It is a discreet alert system that enables law enforcement to pinpoint a case manager's location. The case manager will activate a help request when needed using the "Panic Button" to alert and dispatch 911 emergency authorities to the case manager's GPS-identified location. As of FY22, GTRI is no longer fully funding the ongoing maintenance of this technology.

The CAPTA State Grant supported Georgia's Criminal Justice Coordinating Council, which provides funding and technical assistance to county child advocacy centers. Due to a decrease in CJCC's federal funding and an expected increase in child maltreatment resulting from the COVID pandemic, child advocacy centers were provided with CAPTA funds to continue offering services and supports to child abuse victims and non-offending caregivers, regardless of the victims' participation in the criminal justice system.

In FY22, the Division entered into a Memorandum of Agreement with the Department of Public Health (DPH) to expand several home visiting sites statewide. This expansion will hire and train DPH home visitors to develop and monitor Plans of Safe Care so they can accept case referrals from DFCS for infants and their caregivers who are affected by substance abuse. This MOA will provide \$1,386,442 to DPH annually for a period of five years and is scheduled to begin in FY23.

In addition to the ongoing support of the above projects and the MOA with DPH to expand home visiting, the CAPTA State Grant will begin support the following programs in FY23:

- Family and Infant Neurodevelopmental Education (FINE)/ Social Emotional Engagement Knowledge and Skills (SEE-KS) Training to strengthen Georgia's Plan of Safe Care approach and CAPTA Plan to advance healthy family development in substance exposed newborns and all infants who are admitted to a neonatal intensive care unit (NICU) at the earliest point possible. By enhancing the knowledge and skills of staff members in NICUs and birthing hospitals, providing freely accessible tools to employ best practices, and strengthening staff self-efficacy to sustain their work through peer-to-peer mentorship
- MDCANI Training, an intensive, two-day training in every aspect of a dependency case, including reasonable efforts to prevent removal. The MDCANI faculty are working to increase training materials that further promote the utilization of trauma-informed therapies for children, collaborations with domestic violence and substance abuse treatment services, inter-agency services to prevent re-entry to foster care, high quality legal education (related to pre-foster care services) and any other pre-foster care topics the committee might deem appropriate. Attendees to MDCANI include DFCS staff, legal and judicial partners, CASA, and attorneys. The Division and its partners in the child welfare system are committed to improving legal preparation and representation for youth, so funds for MDCANI training are provided by CAPTA, as well as the Court Improvement Program (CIP), Children's Justice Act (CJA) grant, and state funds.

# American Rescue Plan Act Funding

Georgia received \$3,395,929 in supplemental CAPTA appropriations through the American Rescue Plan Act of 2021. The Division is coordinating with CAPTA Panel members and external stakeholders, including Critical Point Consulting, to identify community programs and practices to support with the supplemental funding. The Division is utilizing the consulting partner to help identify organizations that serve historically under-represented populations and people of color. In FY22, the Division funded the following programs:

- \$56,958 to develop training videos for new case managers that feature parents with lived experience. These training materials are designed to educate new staff on how parents have experienced the child welfare system, and what case managers can do to provide support and reduce trauma for children and families (CAPTA Priority Area #7: Workforce Development)
- \$118,500 to support community partnerships under the State of Hope ecosystem.
   Three SoH applicants were awarded funding: Recovery Unlimited LLC in Region 3, to provide behavioral health services to families at risk of CPS involvement, and build capacity for services to infants and their families who are affected by

substance abuse; youthSpark Inc. in Region 14, to provide early intervention services, counseling, and court advocacy to court-involved youth with complex trauma; and the Dublin City Board of Education in Region 9, to provide behavioral health and substance abuse support services to youth and their caregivers to reduce the occurrence of maltreatment. (CAPTA Priority Area #13: Interagency Collaboration). The Division plans to continue directing ARP CAPTA funding toward SoH applicants in FY23. This work is ongoing.

# Section G: Targeted Plans Update

## Foster and Adoptive Parent Diligent Recruitment Plan

The implementation of the Diligent Recruitment plan began January 1, 2020. Several updates to the Plan are highlighted below. The full Plan can be found in the Appendix.

- In February 2020, the Caregiver Recruitment and Retention Unit (CRRU) acquired a Statewide Recruitment and Retention Manager. This role is vital to the implementation and ongoing support of statewide recruitment initiatives.
- The Covid-19 pandemic significantly impacted the recruitment of caregivers. CRRU changed the recruitment process by transitioning to streaming and social media to continue to recruit prospective caregivers. In November 2021, the Foster Georgia website has over 11,000 hits, in part due to the social media campaign conducted by iHeart Media.
- The State Adoption Unit initiated the Forever Match Meetings in 2021 because of the pandemic. Forever Match meetings are internal matching events hosted monthly by the Adoption Unit. Case workers from around the state present five children in need of an adoptive placement to members of the CRRU team and participating CPAs.

### Health Care Oversight and Coordination Plan

The Division continues to exercise precautions relating to COVID-19, and follows the guidelines provided by the Georgia Department of Community Health (DCH), Department of Public Health (DPH), and the federal Centers for Disease Control and Prevention (CDC). DCH has continued to allow the use of telehealth and telemedicine to address health needs. DPH provides guidance regarding the COVID-19 vaccine and indicated that the Pfizer vaccine was the only approved vaccine for 16- and 17-year-old youth. DPH developed FAQs that were distributed along with a memo form the Division Deputy Director to staff, providers, and caregivers. The Division will continue to track any significant statewide changes resulting from the public health emergency. These will be communicated to staff and external partners on an ongoing basis.

#### Disaster Plan

During FY22, only one disaster affected Georgia. During Winter Weather January 2022, 13 warming centers were activated in Fulton, Gwinnet, Rabun, Gordon, Richmond, Fannin, and Rockdale counties, due to severe weather and power outages. 10,312 Georgians were without electricity over the MLK Jr. weekend. Power was quickly restored, and the warming stations closed after two days of being open. No other shelters were opened during this event.

As with FY21, the DFCS Disaster Plan was not utilized for COVID-19. Most of the remaining PPE obtained from the Georgia Emergency Management Agency Homeland Security (GEMA/HS) at the beginning of the pandemic was distributed to all the 14

Regional Emergency Coordinators in preparation of 50 DFCS lobbies reopening. Staff were provided additional mask, gloves, and hand sanitizer.

The full Disaster Plan can be found in the Appendix. Updates to the Plan include:

- Leadership and staff contact pages were removed
- Staff contact was updated
- Agency Policies were added
- Reference to O.C.G.A. Title 15 (Courts) was updated

# Training Plan

The Training and Professional Development Unit continued offering courses in a virtual format due to COVID-19 restrictions on in-person gatherings. No other updates were made in FY22.

# Section H: Statistical and Supporting Information

#### Juvenile Justice Transfer Data

Georgia SHINES data from FY22 identified 10 youth who transferred from DFCS to DJJ custody during the year. Of these, five transferred to joint custody and five exited to DJJ custody. This population of transferred youth continues to decrease from 17 youth in FY20 and 30 youth in FY19.

## **Education and Training Voucher Data**

From July 1, 2020 – June 30, 2021, there were 289 students who received ETV support. For the current fiscal year, from July 1, 2021 – June 30, 2022, there are (estimated) 283 students receiving ETV support.

- 7/1/2020-6/30/2021: 289 students received ETV support (130 new ETVs)
- 7/1/2021-Current: 283 students receive ETV support (130 new ETVs)

This includes students receiving both regular and additional Division X funding.

## **Inter-Country Adoptions**

The state did not have any children who were adopted from other countries and who entered into state custody in FY 2021 as a result of the disruption of a placement for adoption or the dissolution of an adoption, the agencies who handled the placement or the adoption, the plans for the child, and the reasons for the disruption or dissolution. (See section 422(b)(12) of the Act.)

#### Monthly Caseworker Visit Data

Georgia will report data on monthly caseworker visits with children in foster care by the required submission date of December 15, 2022.

#### Child Protective Services Workforce

## **Education, Qualifications and Training**

The following table presents demographic data on the State's Social Services case management staff hierarchy (e.g., associate, case manager, supervisor).<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> Data are for the following Social Services positions (with job class): supervisor (SSP073), administrator (SSM010), case manager & adv (SSP071), specialist (SSP072), program director (SSM011), case management associate (SSP070).

# Demographics on Social Services Case Management

| Staff Characteristic |                              | Total | Percent |
|----------------------|------------------------------|-------|---------|
| Gender               | Female                       | 1,389 | 90.73   |
|                      | Male                         | 142   | 9.27    |
| Race/Ethnicity       | Am. Indian                   | 1     | 0.07    |
| -                    | Asian                        | 6     | 0.39    |
|                      | Black                        | 976   | 63.75   |
|                      | Hawaii/PI                    | 0     | 0       |
|                      | Unknown                      | 23    | 1.50    |
|                      | Hispanic                     | 33    | 2.16    |
|                      | White                        | 492   | 32.14   |
| Age Group            | <26                          | 127   | 8.30    |
|                      | 26-30                        | 272   | 17.77   |
|                      | 31-35                        | 230   | 15.02   |
|                      | 36-40                        | 214   | 13.98   |
|                      | 41-45                        | 248   | 16.20   |
|                      | 46-50                        | 180   | 11.76   |
|                      | 51-55                        | 131   | 8.56    |
|                      | 56-60                        | 78    | 5.09    |
|                      | 61+                          | 51    | 3.33    |
|                      |                              |       |         |
| A                    | Not Indicated                | 236   | 15.41   |
| В                    | Less Than HS<br>Graduate     | 0     | 0       |
| С                    | HS Graduate or<br>Equivalent | 81    | 5.29    |
| D                    | Some College                 | 10    | 0.65    |
| Е                    | Technical School             | 3     | 0.20    |
| F                    | 2-Year College<br>Degree     | 10    | 0.65    |
| G                    | Bachelor's Level Degree      | 905   | 59.11   |
| Н                    | Some Graduate<br>School      | 1     | 0.07    |
| I                    | Master's Level<br>Degree     | 282   | 18.42   |
| J                    | Doctorate<br>(Academic)      | 0     | 0       |

| Staff Characteristic | C              | Total | Percent |
|----------------------|----------------|-------|---------|
| K                    | Doctorate      | 2     | 0.13    |
|                      | (Professional) |       |         |
| М                    | Specialist in  | 1     | 0.17    |
|                      | Education      |       |         |
| Pay Grade            | G              | 383   | 25.02   |
|                      | Н              | 407   | 26.58   |
|                      | I              | 299   | 19.53   |
|                      | J              | 325   | 21.23   |
|                      | L              | 99    | 6.47    |
|                      | M              | 18    | 1.18    |
|                      |                |       |         |

SOURCE: Georgia DFCS Data Unit and DHS Office of Human Resource Management

There were a total of 1,531 Intake and CPS workers who had at least one active case during the year ending March 31,2022. These CPS and Intake workers were then matched with Employee Peoplesoft data to return their demographic characteristics. The result set was then filtered for the predefined job codes of SSP073, SSM010, SSP071, SSP072, SSM011, SSP070.

April 2021 – March 2022 Georgia Caseloads for Foster Care Workers

| - P    |       |         |        |  |
|--------|-------|---------|--------|--|
| REGION | COUNT | AVERAGE | MEDIAN |  |
| 1      | 101   | 24      | 25     |  |
| 2      | 84    | 26      | 26     |  |
| 3      | 88    | 25      | 25     |  |
| 4      | 87    | 17      | 16     |  |
| 5      | 100   | 23      | 20     |  |
| 6      | 50    | 20      | 20     |  |
| 7      | 66    | 25      | 25     |  |
| 8      | 56    | 24      | 23     |  |
| 9      | 36    | 21      | 21     |  |
| 10     | 54    | 21      | 21     |  |
| 11     | 94    | 29      | 29     |  |
| 12     | 70    | 24      | 24     |  |
| 13     | 132   | 20      | 20     |  |
| 14     | 174   | 13      | 12     |  |
| TOTAL  | 1,175 | 22      | 21     |  |

SOURCE: DFCS Data Unit, Georgia SHINES

Data based on any worker with greater than 5 cases at any point in time

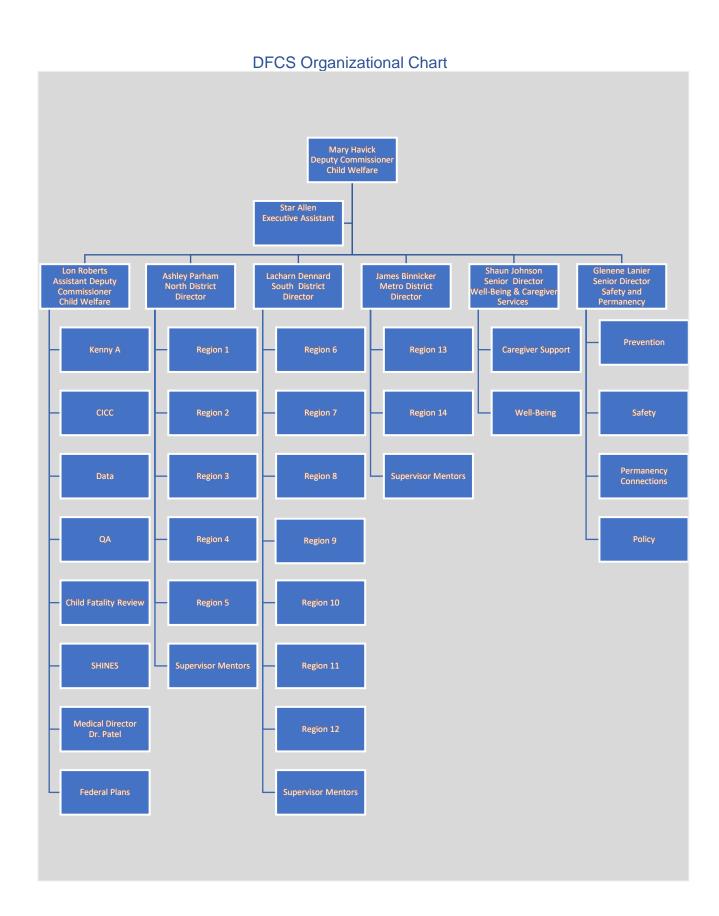
# Social Services Job Qualification and Salary Ranges

| Job<br>Code | Job Title  | PG | Special<br>Entry Salary | Working Titles                |
|-------------|--|----|-------------------------|-------------------------------|
| SST010      | Social Svcs Tech 1                                     | D  | \$ 32,000.00            |                               |
| SST011      | Social Svcs Tech 2                                     | Е  | \$ 35,000.00            |                               |
| SST012      | Social Svcs Tech 3                                     | F  | \$ 38,000.00            |                               |
| SST013      | Social Svcs Tech Spv                                   | G  | \$ 41,500.00            |                               |
| SSP070      | Social Svcs Spec 1                                     | G  | \$ 40,387.99            | Bachelor's Degree             |
| 331070      | Social Sves Spec 1                                     | )  | \$ 43,926.79            | Master's Degree               |
| SSP071      | Social Svcs Spec 2                                     | н  | \$ 43,926.79            | Bachelor's Degree             |
| 33F0/1      | Social Svcs Spec 2                                     |    | \$ 47,819.47            | Master's Degree               |
| SSP072      | Social Svcs Spec 3                                     |    | \$ 47,819.47            | Bachelor's Degree             |
| 337072      | Social Svcs Spec S                                     | -  | \$ 52,101.41            | Master's Degree               |
| SSP073      | Social Svcs Spec Spv                                   | J  | \$ 52,101.41            | Bachelor's Degree             |
| 337073      | Social Svcs Spec Spv                                   | ,  | \$ 56,811.56            | Master's Degree               |
| SSP042      | Social Svcs Prgm Consultant 3                          | K  | \$ 56,811.56            | Field Program Specialist      |
| SSP043      | Social Svcs Prgm Cons Spv                              | Ш  | \$ 61,992.72            | Lead Field Program Specialist |
|             | Mgr, Social Svcs                                       |    | \$ 59,166.61            | Social Services Administrator |
| SSM010      | - Social Services Administrator<br>- County Director 1 | L  | \$ 61,874.95            | County Director 1             |
|             | - County Director 2<br>- Deputy County Director 4      |    | \$ 65,000.00            | County Director 2/Dep CD 4    |
|             | Mgr 2, Social Svcs                                     |    | \$ 65,000.00            | SS Program Director           |
| SSM011      | - Social Svcs Program Director<br>- County Director 3  | М  | \$ 71,158.17            | County Director 3             |
|             | Mgr 3, Social Svcs                                     |    | \$ 75,000.00            | Deputy County Director 5/6    |
| SSM012      | - Deputy County Director 5/6<br>- County Director 4    | N  | \$ 79,758.74            | County Director 4             |
| CCNADAD     | Sr Mgr, Social Svcs                                    |    | \$ 85,000.00            | County Director 5             |
| SSM013      | - County Director 5<br>- County Director 6             | 0  | \$ 88,000.00            | County Director 6             |
|             | Dir, Social Svcs                                       |    | \$ 100,459.43           | Regional Director (R1-R12)    |
| SSM014      | - Regional Director<br>*RD Admin Asst - \$40,000       | Р  | \$ 105,000.00           | Regional Director (R13-R14)   |
| A0117       | Director - District Director *DD Exec Asst - \$45,000  | SE | \$ 115,000.00           | District Director             |

Master's Compensation: CWS employees classified as SS Specialists up to County Directors are eligible for a 10% salary increase for having a master's degree in a behavioral science.

| Specialists   |   |   | Supervisor  |
|---|---|---|---|
| Social Services Specialist 1<br>Grade G   | Social Services Specialist 2<br>Grade H   | Social Services Specialist 3<br>Grade I   | Social Services Specialist Supervisor<br>Grade J  |
| Bachelor's Degree Special Entry<br>\$40,387.99  | Bachelor's Degree Special Entry<br>\$43,926.79<br>or 10% promotional increase<br>(whichever is higher)  | Bachelor's Degree Special Entry<br>\$47,819.47<br>or 10% promotional increase<br>(whichever is higher)  | Bachelor's Degree Special Entry<br>\$52,101.41<br>or 10% promotional increase<br>(whichever is higher)  |
| Master's Degree Special Entry*<br>\$43,926.79   | Master's Degree Special Entry*<br>\$47,819.47<br>or 10% promotional increase<br>(whichever is higher)   | Master's Degree Special Entry*<br>\$52,101.41<br>or 10% promotional increase<br>(whichever is higher)   | Master's Degree Special Entry<br>\$56,811.55<br>or 10% promotional increase<br>(whichever is higher)  |
| DFCS Qualifications:  ☐ Bachelor's degree from an accredited college or university.  Notes:  • All new hires come in as SS Spec 1.  | DFCS Qualifications:  ☐ Two (2) continuous years of experience at lower level Social Svcs Spec 1 with GA DFCS or public child welfare experience from another state   | DFCS Qualifications:  ☐ Five (5) continuous years of experience at lower level Social Svcs Spec 1/2 with GA DFCS or public child welfare experience from another state  | DFCS Qualifications: ☐ Two (2) years of experience at lower level Social Svcs Spec 2/3 with GA DFCS or public child welfare experience from another state   |
| <ul> <li>If selectee has a Masters degree in a behavioral science, the special entry salary is \$43,926.79 (10% above SS Spec 1 entry).</li> <li>SS Spec 1 employees prior to June 1, 2021, are eligible for promotion to SS Spec 2 after 1 year.</li> <li>SS Spec 1 employees hired June 1, 2021, or after will become eligible for promotion to SS Spec 2 after 2 years.</li> </ul> | <ul> <li>□ Successful completion of new worker and all advanced skills trainings</li> <li>□ 3.0 or above on their last Performance Management Review and being in good standing</li> <li>□ No disciplinary action within one (1) year.</li> </ul> | □ Successful completion of all Professional Excellence and/or professional development trainings offered by DFCS □ 3.0 or above on their last Performance Management Review and being in good standing □ No disciplinary action within one (1) year | Effective January 1, 2022, former GA DFCS employees may return to the agency at their former SS Spec job classification; however, their tenure "clock" starts at zero.  EX: Former SS Spec 2 is rehired as an SS Spec 2, but is not eligible for promotion to SS Spec 3 until reaching five (5) years continuous service. |

<sup>\*</sup>Note: Behavioral Science degrees include but are not limited to the following: social work, social science, psychology, sociology, child development, family studies, criminal justice, education, public health, public administration, nursing.



# Section I: Financial Information

## Payment Limitations IV-B, subpart 1

FY 2005 Title IV-B, subpart 1 funds that the state expended for childcare, foster care maintenance, and adoption assistance payments

o FFY 2005: \$1,486,000

o FFY 2022: \$ 1,486,000

Non-federal funds that were expended by the state for foster care maintenance payments and used as part of the title IV-B, subpart 1 state match for FY 2005

o FFY 2005: \$5,955,414

o FFY 2020: \$ 3,120,382

FY 2005 Title IV-B, subpart 1 estimated expenditures for administrative costs are documented on CFS-101, Parts 1 and II

Actual expenditures for the most recently completed grant year are documented on the CFS-101, Part III.

### Payment Limitations IV-B, subpart 2

Title IV-B, subpart 2 (PSSF grant): The percentage of expenditures for this grant, broken down by service categories:

- o Family preservation − 27%
- Community-based family support 27%
- Time-limited family reunification 23%
- Adoption promotion and support services 22%

As required, all service categories are funded by approximately 20% of the grant, and less than 10 percent of the total grant is spent on administrative costs. Estimated expenditures for the service categories are documented on the CFS-101, parts 1 and 2

Title IV-B, subpart 2 (PSSF grant) FY 2020 state and local share expenditure amounts (for comparison with the state's 1992 base year amount, as required to meet the non-supplantation requirements in section 432(a)(7)(A) of the Act):

FFY 2020 \$2,874,645