

Georgia Division of Family and Children Services

FY 2025 Annual Progress and Services Report

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

Section A: Introduction

Introduction

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. The APSR provides an annual update on the progress made toward accomplishing the goals and objectives in the Child and Family Services Plan (CFSP) ([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.

The 2024 APSR submission serves as the final report on the strategies and efforts undertaken by the state's child welfare system throughout the 2020-2024 CFSP reporting period. 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.

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:

1. Prevention Services
2. Child Protective Services (Intake, Investigation, Family Support Services, Family Preservation Services)
3. Permanency Services (Foster Care and Adoption)

Georgia's child welfare system is state-administered and county-supervised. 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 [dfcs.georgia.gov website](https://dfcs.georgia.gov). Regional Directors report to one of three District Directors – North, Metro, and South – who each report to the Deputy Commissioner for Child Welfare. The administration requirements can also be found in the Child Welfare Policy Manual, [Policy 1.0: Administration of Child Welfare Services](#).

Section B: Collaboration

The Division seeks to continuously enhance collaborative efforts statewide and is committed to supporting substantial, meaningful, and ongoing constituent engagement at all levels. Engagement with constituents and stakeholders, and active listening to children, youth, and families with lived experience in child welfare, is critical to the success of the Child and Family Services Plan (CFSP). During FY24 and throughout the CFSP reporting period, 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

Georgia convenes multiple community stakeholder meetings each year. These convenings are opportunities to engage the community of child welfare system partners in assessing the goals and strategies of the Division, identifying strengths and needs of the system, and determining action steps to improve child and family outcomes. Several examples of community stakeholder engagement opportunities are listed below.

The Caregiver Recruitment and Retention Unit (CRRU) in each region partners with the Adoption Unit to convene regular monthly meetings with child placing agencies, foster parent support groups, and service providers. These convenings are useful to share data on child placements and adoption trends, explore recruitment and placement opportunities, talk through observed challenges with difficult-to-place youth, and collaborate on strategies to enhance caregiver recruitment and retention. Meetings also address caregiver challenges, provide resources for caregiver trainings and supports, and ensure ongoing communication between foster parents, placement agencies, and DFCS.

Each regional C3 Coordinator hosts at least one regionwide stakeholder meeting and four quarterly service array-focused meetings per year. Community partners are invited from child caring institutions and child placing agencies, educational wraparound services and early learning providers, law enforcement, mental and behavioral health programs, substance abuse treatment providers and recovery support centers, and other service provider agencies. Discussions center around the regional and state performance on the CFSP QA reviews, identify service gaps, and facilitate ongoing partnerships. Attendees

also discuss policy, practices, processes, and other issues/concerns that may impact positive child and family outcomes. Feedback from these meetings demonstrates that these regular opportunities for engagement between the Division and its partners are helpful for sharing information and strengthening relationships within the child welfare community. Feedback also indicated that the best way to increase partnership and encourage honest and open dialogue would be to increase interagency exposure, community engagement, and professional partnership. The Division continues to explore new opportunities to foster ongoing dialogue with stakeholders to ensure the agencies that serve the child welfare system have regular opportunities to communicate and create solutions. Children and families benefit when the Division and its partners can communicate effectively, and stakeholders report feeling more capable of providing needed services after these “meet and greet” events.

Division staff participate in convenings hosted by other stakeholder groups, to provide information and resources. The [Adoption and Foster Parent Association of Georgia \(AFPAG\)](#) hosted their 51st annual educational conference in February 2024, which was attended by over 600 individuals. The Division facilitated several presentations to the attendees and joined the advisory board meetings. Feedback from the annual AFPAG conference is used to improve foster parent recruitment and retention programs.

In preparation for the CFSR Round 4, the Division engaged with staff and community partners in every region throughout the state, providing an overview of the CFSR process, analysis of the statewide data indicators, and discussion of observed challenges and possible solutions. Convenings were held with staff at all levels, including case managers, supervisors, administrators, and county and regional directors, as well as foster parent/caregiver support groups, placement providers, treatment providers, parents and youth with lived experience, legal/judicial partners, and many others. Feedback on assessed strengths and areas needing improvement were included in the CFSR statewide self-assessment.

[Primary Prevention](#)

The Division continues to utilize 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. PRE Team staffings provide opportunities to identify available community support services that could benefit the family, help the investigator evaluate the family as a whole and if DFCS intervention is necessary, and prevent entry (or re-entry) to foster care. In this effort, the agency staff and stakeholders on the call propose specific prevention supports and services that can be provided to the family to prevent an out-of-home placement and assist the family in maintaining self-sufficiency.

The [Prevention and Community Support Section](#) leads the Community Based Child Abuse Prevention (CBCAP) work for Georgia. PCS has been the overseeing body for the CBCAP grant since 2014. PCS works in partnership with community-based public and nonprofit organizations committed to improving child and family wellbeing by supporting primary and secondary prevention programs, services, and systems through funding or staff leadership. Most of the grant-funded programs are in three-year cohort cycles allowing time for awardees to develop a sustainability plan. PCS issues annual contract awards, researches and tracks current trends in child abuse and neglect prevention and family support and strengthening, raises awareness for children's issues, and enlists expert guidance, feedback, and evaluation to help community programs thrive. PCS's presence on the local, state, and national levels brings much needed attention and resources to communities to improve outcomes for children and their families. The goal of PCS's approach is to engage communities in planning, implementing, and evaluating a continuum of prevention services. Engaging communities in this way encourages self-sufficiency after the grant funding is removed.

PCS also supports Georgia's Child Abuse and Neglect Prevention Plan (CANPP), which continues to improve access to evidence-based or research-informed programs for families, caregivers, youth, and community members. More information on the CANPP resources and focus areas can be found at: <https://abuse.publichealth.gsu.edu/canpp/>. The effort is part of the larger [Georgia Essentials for Childhood](#), a comprehensive effort for child abuse and neglect prevention.

The [Promoting Safe and Stable Families \(PSSF\)](#) program provides a multitude of primary prevention services within the community. The PSSF team begins with an annual statewide needs assessment to identify family and community service needs. The needs assessment includes:

1. Consultation with Division leadership, unit, and program managers.
2. An online survey for regional and county directors, administrators, supervisors, and case managers.
3. Input from service providers and community stakeholders representing all PSSF program areas and service models.

The annual Statement of Need (SoN) incorporates feedback from all sources in response to changing family needs, community resources, and state and federal priorities. In FY23, PSSF selected 141 programs for funding support from more than 180 proposals submitted. Nineteen new programs were added to the PSSF Network.

[Workforce Development](#)

The Division remains committed to engaging the workforce and improving the overall morale and culture of staff. After completing the five year 'Workforce Excellence' project

in 2023, a partnership with the National Child Welfare Workforce Institute (NCWWI), the Division is exploring strategies to institutionalize the accomplishments of the Implementation Team, Action Teams, and the Leadership Academy. Additional data on workforce training, recruitment and retention can be found in Section D: Update to the Plan for Enacting the State's Vision.

The Division continues to utilize Café 212 as a monthly forum offering a wide variety of practice improvement and self-care topics for staff. Data knowledge and understanding are highlighted with Café 212's "Friday Morning Charts" presentations on trends in Georgia's child welfare data. These interactive presentations provide data on key focus areas and performance trends statewide, as well as within selected counties and regions. Highlights are often included to showcase positive case work, and to encourage staff to consider opportunities for improvements. "Friday Morning Charts" was added to Café 212 in 2021 and continues to receive positive feedback from staff, along with requests for specific data for future presentations. In FY24, Café 212 also hosted presentations on the new CommuniCare portal, the implementation of Family First prevention services, and the kinship care portal. The Café 212 workforce development forum is promoted by the Division as a venue to recognize the strengths of the workforce, which supports overall performance improvement and workforce retention.

Regional Support Networks (RSN) schedule and host cadence calls, Summits, and Lunch-and-Learns monthly to support ongoing development of case managers and supervisors. Agendas are created based on recent feedback and trends noted from case reviews or other areas that present a challenge to staff. Regions routinely conduct exit interviews for staff leaving the agency, but in 2023, several regions began conducting stay interviews to help gauge workload or other areas that may contribute to staff turnover.

Program areas within the Division also encourage staff to seek out additional training opportunities. Staff are encouraged to create their "professional development plan" to address areas where they would like to improve. Staff are also encouraged to participate in conferences, workshops, trainings, and other professional development opportunities available to them and appropriate to their program. Staff members who are licensed social workers are offered opportunities to meet CEU requirements and attend trainings to remain licensed. In order to reduce staff turnover, the section managers actively pursue opportunities to reduce stress, ensure a good work/life balance through limiting workload, when possible, and host monthly "respite" meetings for catching up, debriefing frustrations, and other team building activities. To support staff retention, the management teams create environments that make staff feel appreciated and valued and allow staff the time off to rest and rejuvenate. Section leaders and managers will step in to assist the team whenever needed, so as not to burnout any one staff member but ensuring that there is the transfer of knowledge so help is always readily available. Many section leaders maintain an "open door" policy to encourage staff to share issues,

concerns, and suggestions. All supervisors also have at least monthly cadence meetings with their direct reports to encourage self-care and ensure employees are supported.

Collaboration with Youth

The Ubuntu Youth Engagement Collaborative was developed in 2023 as a joint effort with the DFCS Youth Advisory Board (Georgia Peers Advocating for Change (GPAC)), MAAC's GA EmpowerMENT youth council, and Amerigroup 360° Youth Advisory Council to streamline coordination and leverage youth engagement opportunities. The Collaborative met in August 2023 to develop their strategic plan and continues to meet monthly to provide input on youth-related events, share opportunities for youth engagement and feedback, and coordinate youth participation in events. The Division also strives to provide fair compensation to youth who participate in Division planning efforts, as they are sharing their unique expertise and should be compensated for doing so, similar to paid staff.

In 2023, the Ubuntu Collaborative designed the agenda for a November meeting with the ACF Commissioner Rebecca Jones Gaston. The youth presented data, shared their stories, and demonstrated their unwavering commitment to advocacy for youth in foster care. Ubuntu supported planning for the annual Teens R 4 ME conference and Celebration of Excellence graduation ceremony.

The Ubuntu Collaborative identified key areas from the NYTD survey and the Celebration of Excellence (COE) survey that demonstrate where young people are seeking more support, such as education, life skills training, and financial literacy. These data have illuminated the path for the Youth Engagement Collaborative (YEC) endeavors, and the young leaders are excited about the positive changes that they can bring about together. Based on the data, Ubuntu decided to create a survey to assess the adequacy and appropriateness of services provided to young individuals in their respective placements as they prepare to age out of care, and an "exit survey" to capture

Ubuntu Collaborative

The mission of Ubuntu is to collaborate with youth advocacy groups in the state of Georgia to empower young people impacted by the foster care system ages 14 and up.

"We believe that young people should have a say in anything that impacts them, and we aim to reform unjust systems by involving young people in the development of programs and systems that affect them. Our long-term goal is to bring about positive change in the world by giving young people a voice and the power to make a difference. We, the members of Ubuntu, believe in the power of collaboration, the empowerment of youth advocacy, and the reform of unjust systems. We are a collective of youth advocacy groups in the state of Georgia that works together to empower young people impacted by the foster care system. We believe that by working together, we can achieve more than we could alone."

youth feedback on their experiences while in placement. Findings from these surveys and other youth-led initiatives will be used to develop goals and strategies for the 2025-2029 CFSP.

Youth with lived experience were invited to participate in analyses of the state's CFSR data, and to share strategies for improving performance of the state child welfare system. GPAC holds quarterly meetings, where data, performance, and recent outcomes are discussed, along with survey results from current and former youth in care. This information helps GPAC to develop their priority areas. With support from the Center for the Study of Social Policy and the Creating Actionable and Real Solutions (CARES) initiative, youth developed a policy statement demanding accessible mental health resources. Youth also identified education as a focus area on the CFSP for youth in care.

Comments from GPAC members:

- “With attending several meetings and conferences, I believe our focus is mainly on secondary education and the available resources out there. I do believe having a good and quality education is important for our upcoming youth and we should continue to push for our youth to attend college or trade school... I have gained several ideas that I would like to share and discuss amongst others. I do see the system strengthening. I think we are headed in the right direction. I believe that we could work on clarification and certainty when it comes to what's available for the youth as I reflect on the Embark Conference at UGA. I believe it is important to accurately get the resources and opportunities out there and to inform others.”
- “I feel like improvements on child and adult relationships would help the system a lot more. Taking the time to show the children that they are more than the system may change the child's outcome. I have gotten ideas from surveys and on campus events that show relationships will improve communication. With improved communication then solutions can be brought up and put into place.”
- “Within the past few years from activities, surveys, discussion meetings and many more events that were made possible, I have learned a lot. I have learned to be a better leader, mentor, and advocate. With the resources that have been provided we have learned so much about the foster care system and the rapid changes it progresses to make. I have also been able to see how it has changed since I was a youth in care. The surveys keep us on our toes about how things are working out and if the youth are engaged enough, and the activities always make it thrilling for them. Being able to mingle amongst themselves in collective groups during activities is how we teach them to network etc. Nevertheless, we learn new things every day and it always helps us move forward in the right direction.”

Comments, ideas, and suggested strategies were considered for the 2025-2029 CFSP development. The state is leveraging these conversations to help develop priorities for the agency and stakeholders, and the goals and objectives of the next CFSP.

GPAC is also serving as one of the state's CAPTA citizen review panels. GPAC members are invited to use their unique lens of lived experience in the child welfare system to assess performance of child protective services, adoption and foster care programs, and make recommendations for improvement. GPAC members attended the National Citizen Review Panel annual conference in May 2024, and will share their experiences and priority areas of inquiry at the state's annual citizen review panel retreat.

Parent Engagement

Georgia's Court Improvement Program (CIP) Strategic Plan includes "engagement with fathers" as a priority area. CIP intends to increase agency and court engagement with fathers by 50% over the period covered by the plan. CIP will use court observations, court file reviews, and interviews with judicial stakeholders to evaluate performance. The Division is partnering with CIP on this effort to improve fatherhood engagement by providing QA review and interview data, as well as feedback from the DFCS regions.

Fathers are invited to participate in the same partnership parenting activities offered to mothers and encouraged to participate in the [Fatherhood Program](#) through the Division of Child Support Services (DCSS). DCSS schedules monthly "Fatherhood Conversations" in regions throughout the state to discuss child support services and how they can help fathers play a greater role in their children's lives. DCSS also provides several fatherhood collaborative partnerships:

1. Parental Access, Visitation, and Education (P.A.V.E.) Program exists in all thirteen Transitional Centers (TC) statewide for residents with an active child support case. The PAVE program focuses on the importance of choices, education, and skills to cope with life post-incarceration. Efforts are made to connect/reconnect residents with their children through visitation days with their families.
2. A Metro-Atlanta Partnership where Fatherhood services are provided and coordinated with Legal Aid and Veterans Affairs to address the needs of veteran participants.
3. Through a DCSS partnership with Goodwill Industries and the US Department of Labor, Goodwill provides subsidized employment to noncustodial parents with a child support case. Areas served are Clayton, Cobb, DeKalb, Fulton, Gwinnett, and Henry counties.

For youth in care who are parenting, the Metro District has partnered to establish a program to identify all supports that a young parent may need. The region works with a provider that has teen parent life coaches who work with youth on parenting skills, help

youth with applying for childcare, food assistance, and other needs to care for their child. Program staff meet with the young parent every six months 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. ARC provides fathers with resources and supports to obtain employment and remain actively involved in the case planning process. ARC has extended its hours to include Saturday visits between children and their parents and to offer more opportunities for family engagement. The ARC also works with the youth to make sure he is legitimated as the father of his child.

Collaboration with these and other stakeholders including the Department of Labor, Department of Community Supervision, courts, Department of Juvenile Justice, Family Connections, and CASA help the state to bolster father engagement efforts.

[Collaboration to Develop Child Welfare Policy and Practice](#)

Throughout the CFSP reporting period, the Policy and Regulations Unit (PRU) received several policy development requests from DFCS Leadership, program units, and external stakeholder groups. All policy requests were reviewed timely by the PRU Director and Subject Matter Experts (SMEs). There are several opportunities for internal and external stakeholders to provide feedback on newly developed or updated child welfare policy, including but not limited to policy workgroups, subject matter expert engagement, and policy surveys. When policies were developed that responded to the request, the partners would be included in the draft reviews and asked to provide feedback in surveys.

The PRU partners with the Office of General Counsel to develop child welfare policy responsive to passed legislation and the program units responsible for implementation or oversight. Throughout the CFSP reporting period, policies were developed with the DHS Office of General Counsel, the Georgia SHINES team, RevMax, Permanency, the Training and Professional Development team, Caregiver Recruitment and Retention Unit, Early Childhood Collaboration Unit, and the DHS ADA Coordinator and LEP/SI (Limited English Proficiency/Sensory Impaired) Coordinator.

The PRU continues to provide training and technical assistance to staff and stakeholders to ensure that child welfare policy is fully understood and implemented consistently. PRU provides on-demand technical assistance and consultation to the field by responding to policy-related questions received via PRU's dedicated mailbox. Feedback from the field regarding these consultations is generally positive. Each policy clarification email includes a request for the recipient to complete a short survey rating their experience and the usefulness of the response. Nearly all survey responses indicated that the PRU policy

guidance provided was clear, concise, timely, and responsive to the question asked. Staff routinely indicate that they are pleased to get the support, guidance, and collaboration of the policy team, and that the team was helpful, professional, and knowledgeable.

[Collaboration to Enhance the System of Care](#)

Agency leaders are collaborating to identify available youth services and ensure the youth are informed and knowledgeable of these services. For example, the Division is aware of a rise in autism-related needs for children in care. Region 12 is currently serving as a site for autism screening. All children in foster care are screened, and if a second screening is recommended, a diagnosis and referral for services are provided. The site provider has a strong reputation with the state legislature, and the Division is hopeful that the results of the project will lead to increased support and collaboration to serve children with autism-related needs.

The agency also established [Community Action Teams \(CAT\)](#) in 2023 as a behavioral health care service for children and youth with significant mental and/or behavioral health needs and conditions. The FY23 state budget included \$1.5m in state funds to establish community action team programs to address children who are in, or at risk of entering, foster care. Each CAT is intended to be a safe and effective alternative to out-of-home placement for children with serious behavioral health conditions that are creating a crisis in the family. The CAT is staffed with mental health clinicians, therapeutic mentors, nurses, and support staff. During the initial phase, children in regions 1, 2, and 12 are referred to the CAT by DFCS staff, allowing the Division to provide family-centered wraparound services prior to a need for out-of-home placement.

[Georgia's Interagency Directors Team \(IDT\)](#) is an on-going collaboration which began in 2011 and continues to hold monthly meetings. 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. 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.

The IDT multiagency workgroup 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:

1. Comprehensive strategic research to inform strategic goals, operations, and best practices.
2. Facilitation of an interagency framework with memorandum of understanding and development of operating guidelines for collaborative development and sustainability.
3. Promotion of and support for interagency data sharing.
4. Facilitation of strategic planning and monthly meetings to progress SOC goals.
5. Qualitative and quantitative data compilation and policy analysis relevant to yearly strategic SOC goals.
6. 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.
7. Evaluation of the IDT's efforts and progress toward their strategic goals.

In 2022, the [System of Care](#) website officially launched. 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. Resources for parents and youth are available for download, to provide clear guidance on how to get behavioral health help and provide contact information. The site includes a Training & Workforce Development Calendar as well as recorded and archived trainings. Additional content will be added as needed.

In 2023, the IDT prepared to implement the state's Infant-Toddler Court Program (ITCP), funded by the Health Resources and Services Administration (HRSA). The ITCP aims to improve the health, safety, well-being and development of infants, toddlers, and families in the child welfare system, including those who have experienced or are at risk for significant maltreatment. The ITCP addresses gaps in evidence-based practice and systems coordination toward: 1) improving the response to very young children and families involved in, or at risk for involvement in, the child welfare system, and 2) promoting a community-driven, preventative approach to strengthening families, preventing child maltreatment, and advancing long-term health and development. The program uses two-generation, trauma-informed interventions that concurrently address the needs of parents and children and mitigate the multi-generational transmission of trauma. This work is ongoing.

Georgia DBHDD offers the [Apex program](#), which strives to build capacity and increase access to mental health services for school-aged youth, from pre-kindergarten to 12th grade, throughout the state. Apex recognizes schools as a natural environment for identification and intervention and aims to reduce the number of youth with unmet mental health needs. The program promotes collaboration between community mental health providers and schools to provide school-based services and supports, including training for school staff, in hopes of facilitating the right care at the right time for children, young adults, and families.

[Court Improvement Program](#)

The Court Improvement Program (CIP) Strategic Plan includes several priority areas identified through the state's Round 3 CFSR PIP. Ongoing data exploration is reviewed using the [Fostering Court Improvement](#) data tool, a collaborative effort to use agency and court data systems to improve case handling and outcomes through intensive data focused interaction and training for personnel statewide. CIP intends to increase father engagement, provide ICWA compliance training for dependency cases, improve permanency outcomes and compliance with mandatory timelines, and support high quality legal representation over the period covered by the CIP Strategic Plan (October 2021 – September 2026). CIP has also indicated “data” as a priority area, finding that in the absence of a statewide court case information system, stakeholders are left to make policy, practice, training, and funding decisions without reliable data. CIP has identified specific activities and goals to support these priority areas and has developed plans for evaluating the activities to monitor change, including upgrading the state's Court Process Reporting System (CPRS) to include an adoption portal, dependency timeline tracking, and automated notice to caregivers. SB 401 (2024) requires each juvenile court to collect data to be submitted to the Administrative Office of the Courts to be incorporated into the Georgia Juvenile Data Exchange. This will support the CIP effort to use data in making programmatic decisions about safety, permanency, and well-being.

CIP served as a site for the [Judicial, Court, and Attorney Measures of Performance \(JCAMP\)](#) project to collect and analyze court performance data. CIP has since modified the JCAMP court observation instruments to meet Georgia's specific data collection needs and is beginning observations in several metro Atlanta counties. The Division is providing data and resources to CIP in support of these priorities, including data from the Child Welfare Quality Assurance (CWQA) case reviews. JCAMP data will be used for developing the CFSR PIP and reviewed throughout the CFSP reporting period to understand how courts are impacting the child welfare system.

The Division leadership continues to meet monthly with the CIP Director to ensure open communication and discuss ongoing joint projects. These meetings also serve to identify court-related issues in the field as they arise and develop solutions. Topics have included 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. Discussions have also led to development of jurisdiction-specific trainings for judges, Special Assistant Attorney General (SAAGs), and other court partners to address identified concerns and improve permanency outcomes.

The Georgia Supreme Court Committee on Justice for Children (J4C) supports and advises the work of the Court Improvement Program and includes judges, legislators, court partners, parents with lived experience, and several members of the Division, including the Permanency Section Director, the Quality Management Director, and the Federal Plans Director. The purpose of J4C meetings (five meetings annually) is to review and discuss available child welfare outcome data and what those data mean for the collective work of the child welfare system. The J4C meetings are also used as an opportunity to monitor and review goals, identify opportunities for interventions, and develop strategies for CIP involvement in program planning and improvement efforts within the Division. This effort is intended to ensure judges, attorneys, and other court partners are knowledgeable about the Child and Family Services Review (CFSR) and the state's Child and Family Services Plan (CFSP), and how their work impacts the state's performance on safety, permanency, and well-being for children and families. Several members of the J4C Committee were invited to participate in the CFSR stakeholder interviews in February 2024.

The [Court Improvement Initiative \(CII\)](#) is modeled after the National Council of Juvenile and Family Court Judges' Model Courts Program. Judges from thirty jurisdictions across the state voluntarily joined CII to improve how their courts handle child abuse and neglect cases. The participating CII jurisdictions are mostly located in the North and Metro Districts (Regions 1, 2, 3, 4, 5, 13, and 14); the list is published on the CIP website. 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, with participants from the Division (section leadership, and County/Regional Directors), SAAGs, and juvenile court judges. The CIP Director identifies this as a priority and is committed to present additional discussion opportunities in future convenings.

[Joint Planning Meetings](#)

Throughout the CFSP reporting period, the Division hosted annual statewide joint planning meetings to engage staff and stakeholders around different themes: parent engagement, youth voice, and leveraging court partners were some of the topics of discussion. In 2024, the Division facilitated a joint planning meeting with court partners and treatment providers to demonstrate the effectiveness of Family Treatment Courts. For each meeting, 100-200 participants attended, including service providers, school

systems, counselors and behavioral health agencies, the prevention community, attorneys and judges, and child advocates. Each meeting offered a data overview to demonstrate current performance on the state's CFSR outcomes related to safety, permanency, and well-being, a panel discussion to hear from a diverse group of presenters, and breakout groups to further discuss and develop plans for improvement. Surveys are distributed after the meeting, and feedback is generally positive, often noting that the meeting added value to the respondent's work and provided the respondent with tools and resources to help them improve their collaboration with other partners.

Training and Technical Assistance

Division staff provided many training and technical assistance (TTA) opportunities throughout the CFSP reporting period to enhance knowledge and practice among staff and stakeholders. In preparation for the CFSR Round 4, the Division has provided ongoing training for staff and stakeholders across multiple venues to describe the measures, observed performance trends, and goals. Staff and partners have been engaged in regional leadership meetings, regional stakeholder meetings, judicial stakeholder meetings, the annual CASA leaders meeting, CQI meetings, MDCANI trainings, and statewide conferences (e.g., GA Conference on Children and Families). Technical assistance is provided on best practices to improve outcomes, such as more details on provider notes, provider/agency collaboration, routine follow-up regarding behavioral changes, timely implementation of assessments and services, and development of relapse prevention plans. Staff and stakeholders are also encouraged to monitor their work so that data can be shared in the CFSR reports. The Division will continue to provide training and technical assistance for staff, providers, court partners, caregivers, youth, people with lived experience, and other stakeholders throughout the CFSR process to ensure that relevant information is shared timely and that stakeholders are engaged in providing input and direction for the state. This work is ongoing.

The Prevention and Community Support Section (PCS) has funded major training efforts for Staff and Providers through Care Solutions, Strengthening Families Georgia, Prevent Child Abuse Georgia, and the Georgia Center for Child Advocacy. Through Care Solutions, 32 courses, representing 43 hours of training are offered, that include an array of courses applicable to human service professionals, early care and education professionals, parents, and community volunteers. Examples of offerings include Mandated Reporting in Georgia, Safe Sleep for Georgia Babies, Health and Safety Orientation Training, Parental Resilience, Brain Development: Amazing Brains, Amazing Babies, Knowledge of Parenting and Child Development, Calming Thoughts: Supporting Children with Anxiety, Trauma and Attachment, and Ethics for Home Visitors.

The [Georgia Center for Resources and Support \(GACRS\)](#) provides resources and supports, including live and on-demand classes for adoptive and foster parents, therapeutic adoption clinicians, and a lending library of books, articles, and DVD resources for adoptive and foster families. Regional Resource Advisors are available throughout Georgia to assist adoptive families by providing advice, support, and training. The center is also staffed with families who have adopted and are able to provide support as a family with lived experience.

Technology Enhancements

DHS Office of Information Technology (OIT) is designing several technology projects that provide streamlined service enhancements to staff, stakeholders, and families.

To achieve the mission of delivering quality services to children and families, DFCS staff require real-time access to information in the field from Georgia SHINES. The mCase mobility application empowers case managers to capture contact information, case plans, and create safety plans with constituents in the field and not have to return to the office to input the data. To support the mCase Mobility Project, tablets and supporting devices were provided to staff in the regions (13, 5, 2, 1, 4, and 7). Due to numerous challenges in implementation, mCase was discontinued in 2023.

OIT completed development of two portals, called Argo and Argo Placements, which support the modernization initiative to improve interactions between service providers (both delivered and placement) and case managers. In the current world, correspondence and communication between case managers and providers are by phone or email. Any service requests must be performed on a one-at-a-time basis, often requiring multiple calls to either identify a provider who has the capacity to provide a service or to identify a proper placement for a child. This process can result in an extensive amount of time spent on communication and/or less than an ideal fit of service. The Argo portals project bridge the business process gap using technology initiatives. With Argo, a service authorization can be initiated through the portal instead of sending individual requests to providers. Case managers can also receive attachments from providers directly to their external documentation in Georgia SHINES.

OIT modified the Georgia SHINES application to support the AFCARS 2.1 data collection for reporting period FFY23, by adding 70 fields and data elements, and updating functionality in the Georgia SHINES application. Staff received specific job aids to assist in navigating the new items required for AFCARS 2.1, as well as policy updates, and short training videos.

OIT completed several upgrades to the Georgia Gateway system, including the infrastructure and security of Gateway, and enhanced the portals for customers, workers, and partners. [Georgia Gateway](#) is a streamlined, one-stop-shop resource for individuals in the community to apply for, check, or renew benefits, as well as report household or income changes and upload required documents. Georgia Gateway served as a critical tool throughout the Covid pandemic to ensure users were able to remotely request medical assistance, childcare benefits, SNAP, or TANF, and explore eligibility for other cash and food assistance programs. OIT is exploring opportunities to conduct customer experience surveys and better understand the user's journey through the Gateway platform.

The Division provides regular training opportunities and supports staff with these technology enhancements. Staff are encouraged to provide feedback on the system updates. This work is ongoing.

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

Georgia CFSR Child and Family Outcomes

Georgia utilizes CFSR data in conjunction with the State’s data profile (contextual data report), and data from the State’s Comprehensive Child Welfare Information System (CCWIS) in the development, planning, and monitoring of Child and Family Services Plan (CFSP) goals and other statewide child welfare initiatives. The Quality Assurance Unit utilizes the case review process and standards provided by the Children’s Bureau for the continuous measurement of the State’s performance in the areas of safety, permanency, and well-being. The case review data are used at the district, regional, and county levels to evaluate case practice and assist staff and leadership in making improvements to the provision of services for children and families. The CFSR Onsite Review Instrument (OSRI) is the only official instrument to be used in rating a case for CFSR determinations of substantial conformity. The OSRI contains the questions, applicability notes, instructions, and definitions, which provide more detailed information.

In 2024, Georgia conducted a state-led CFSR which followed all Round 4 requirements for case reviews.

Child and Family Services Review Data Profile – Safety Measures

Georgia received its Child and Family Services Review (CFSR 4) Data Profile in February 2024 based on AFCARS submissions as of 10-28-23 and NCANDS submissions as of 6-16-2023. The chart demonstrates Georgia’s risk standardized performance relative to the national performance on the two Safety Statewide Data Indicators (SWDI).

Indicator	Data Period ¹	National Standard	Georgia	Statistically ² better (↑), worse (↓), or no different (<->)
Maltreatment in Care	21AB, FY21	9.07	3.43	↑
Recurrence of Maltreatment	FY21-22	9.7	4.5	↑

Data Source: Child and Family Services Review (CFSR 4) Data Profile.

Georgia’s SWDI performance continues to outperform the national standard for both Safety outcomes, Maltreatment in Care and Recurrence of Maltreatment. Maltreatment in Care measures the rate of children who are abused or neglected while under court jurisdiction. Georgia utilizes several strategies to reduce Maltreatment in Care, including

regular evaluation of foster homes, a robust schedule of required in-person visits with the child(ren) in care, an emphasis on kin as a first placement, and ongoing training and supports for foster caregivers. Georgia’s strategies to prevent Recurrence of Maltreatment, which measures the percentage of children who are abused or neglected within 12 months of the initial victimization, include ongoing case management, providing aftercare and wraparound services to the family, and referrals to community agencies and organizations for additional supports (e.g., food assistance, childcare, housing expenses).

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 SHINES Response Times for CY2023

	Intakes Screened In	Met Required Response Time	Percent Met
North District (Regions 1-5)	19,250	16,834	87%
Metro District (Regions 13-14)	15,605	13,560	87%
South District (Regions 6-12)	18,175	16,290	90%

Source: DFCS Data Unit, Georgia SHINES (CY2023)

Child Welfare Policy 3.2: Making an Intake Decision requires that intakes are assigned to the Initial Safety Assessment (ISA) track for response within the following timeframes to ensure child safety and wellbeing. All response times are calculated from the date and time of the receipt of the Intake Report.

- Immediate: a present danger situation is indicated.
- 24 hours: an impending danger safety threat is indicated and there is no indication of a present danger situation.
- Five weekdays: child abuse (maltreatment) is indicated, however there is no indication of a present danger situation or impending danger safety threat.

Response times are monitored by supervisors and agency leadership at the county and regional levels. County, regional, and state-level data are generated twice weekly to identify trends and patterns in assigned cases and achieved response times. While there are some instances where families are unable or unwilling to be located, children may be visited at their current location at the time of the report or at school where they can be

located easily; non-school age children may be visited at their current location or within the home. Visits can be announced or unannounced; parents may be contacted by phone to schedule a visit within the response time. Case managers are expected to report missed response times to identify areas for improvements. Staff supports include: daily logs to monitor response times; calendar reminders; daily cadences to discuss diligent efforts to meet response times; Regional Staffing Guides for supervisors to support meeting response time and to ensure quality assessment is being completed; and regular trainings on ISA policies. Feedback received from the ISA trainings demonstrate that they are helpful for both new hires and veteran staff.

CFSR Round 4 Preliminary Data

Safety		State
Outcome S1: Children are, first and foremost, protected from abuse and neglect.		86%
Item 1:	Timeliness of initiating investigations of reports of child maltreatment (18 out of 21 cases)	86%
Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.		32%
Item 2:	Services to family to protect children in home and prevent removal or re-entry into foster care (9 out of 42 cases)	21%
Item 3:	Risk assessment and safety management (26 out of 65 cases)	40%

Source: DFCS Quality Assurance Unit (2024)

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?

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?

QA reviews have identified ‘timely implementation of services’ as a barrier to successful performance on this item. The Division developed the ARGO Community Portal in Georgia SHINES to create a simple and efficient process for staff to complete service authorizations for support services. The ARGO Community Portal allows for service

requests to be sent to all eligible providers and for those providers to respond directly through the portal. DFCS staff can then select from the responding providers willing to accept a request. This enhancement simplifies the service request process. To address the timeliness of assessments, the ARGO portal is expected to decrease the length of time between identifying a need and making the service referral, as well as receiving necessary documentation from the service providers. Staff can request a service on the portal, select from a list of applicable and available providers in the portal, and choose one within 24-72 hours.

Early results show increased timeliness in the initiation of appropriate services for in-home supports. ARGO will also simplify document-sharing so that staff can receive monthly case notes from the providers. The Division expects these enhancements to positively impact the state's performance on this item. Regular training is provided to staff on the ARGO portal and its functionality, through SHINES Shorts videos and emailed communications from the development team.

The Division partnered with Casey Family Programs on the "Support Out" initiative (Union County Family Connection, Columbus Community Action Agency, [Mother's Advocacy Project](#), and Gwinnett County Foster Care Alliance) to provide Family Support Services (FSS) to address risk in families through a short-term intervention where a present or impending danger situation does not exist. Families are identified for FSS through the DFCS Intake process, connected to the partner agencies, and provided with supporting services and resources to improve their economic conditions resulting in food instability, housing insecurity, and employment stressors. Throughout the project, more referrals came from schools (214) than from any other reporting source. Most allegations were related to inadequate supervision (443), educational/cognitive neglect (51), and inadequate food/clothing/shelter (48). The FSS program is voluntary and limited to 45 days for the case to be open. Feedback loops and data sharing are ongoing, and findings are reviewed regularly by Division leadership to determine best practice and potential opportunities for expansion.

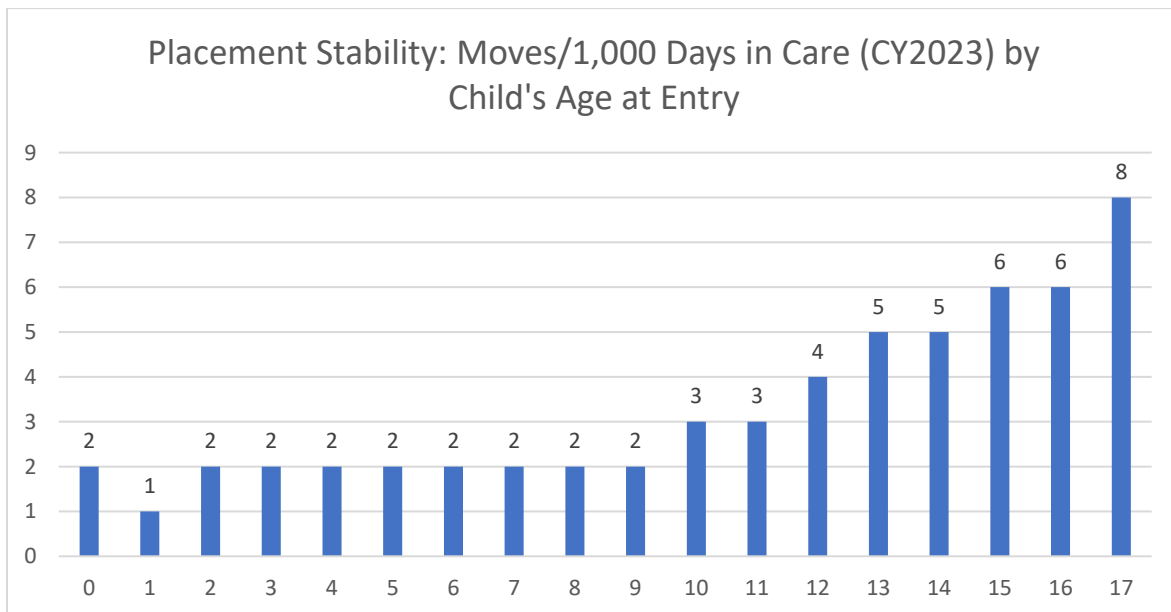
Permanency Outcome 1: Children have permanency and stability in their living situations

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)?*

CQI exploration with staff and stakeholders has identified specific challenges to stabilizing placements including lack of resources for transgender youth, lack of CCI beds for

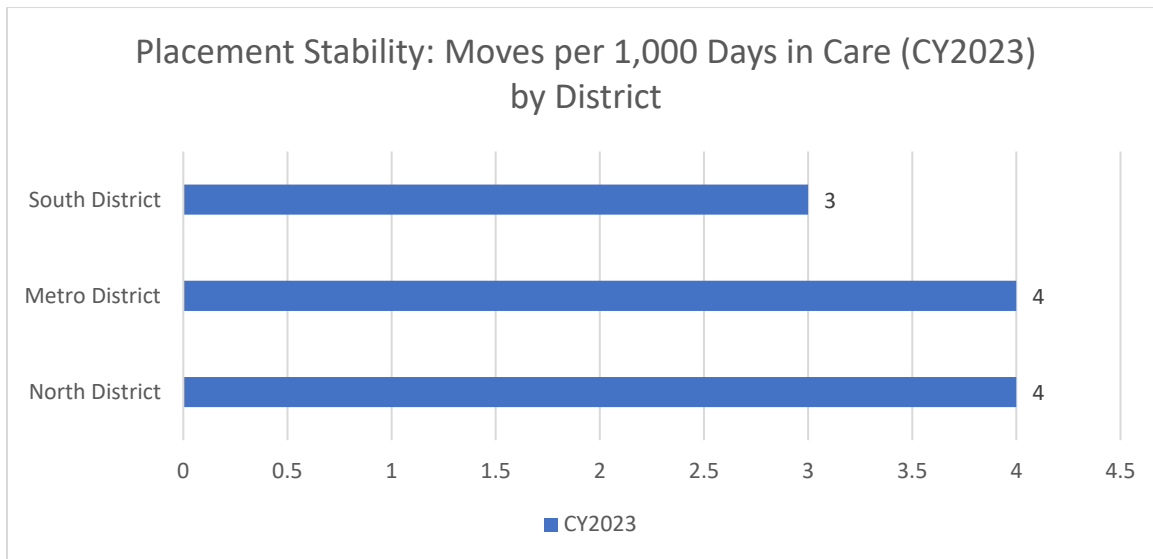
females, lack of foster homes statewide, and lack of placements for youth with complex needs. The state is taking steps to improving placement stability by adding \$5m to the Department of Human Services FY2024 budget to provide alternative housing options for youth with complex needs, \$15m for a child and adolescent crisis stabilization unit, and legislation to develop QRTPs. The Division is increasing the recruitment and available supports for family foster homes, including increasing per diems and respite care.

The Complex Care Coordinator works closely with leadership, staff, agency attorneys, state partners, and providers to increase engagement and collaboration that ensures youth have placements that best fit their needs. In May 2022, the Division began offering a \$5,000 incentive and increased the daily per diem to a maximum of about \$344 per day to private provider agencies who take in foster children who have been staying in offices or hotels. The child must remain in the placement for at least six months. Within the first month of announcing this initiative, 83 children were moved into a stable placement. The number of youth in hotels has steadily decreased since the launch of this initiative, reaching zero on several days in the second half of CY2023. Placements are also recently developed for transgender adolescents and complex care youth who have been trafficked or are at high risk for trafficking, and placements are planned for youth stepped down from PRTFs.



Source: DFCS Data Unit, Georgia SHINES

The above chart shows the CY2023 placement stability as the number of moves per 1,000 days in care by the age of child at the start of their custody episode (age 0-17). Placement stability is highest for children aged eleven and younger.



Source: DFCS Data Unit, Georgia SHINES

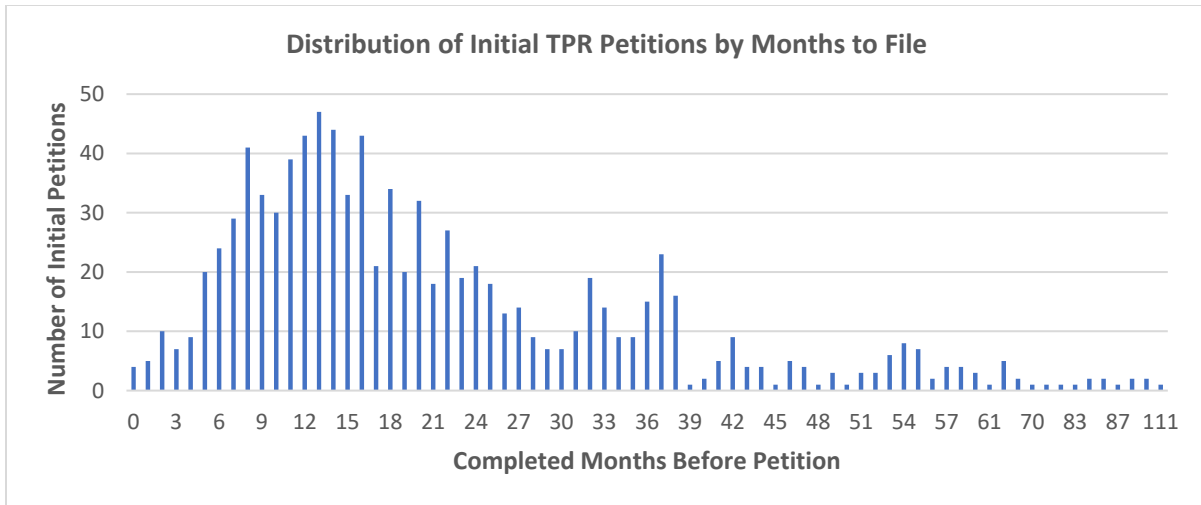
The above chart demonstrates that placement stability in CY2023 is slightly better for youth in the South District compared to the Metro and North Districts.

The Division continues to hold PAUSE staffings to stabilize placements that are nearing disruption; the Complex Care Coordinator at the state office is engaged with PAUSE to secure stable placements for children with complex needs. The coordinator often partners with the Treatment Field Program Specialist in the regions to identify resources for high-need youth. Executive leadership and the state legislature are continuing to explore systemic barriers and solutions for placement stability. This work is ongoing.

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

Data from Georgia SHINES demonstrate that 50% of TPRs are filed within 17 months of care. The below chart uses a sample of 978 children in care with an initial TPR filed in the 12-month ending 9/7/2023.

Distribution of Initial TPR Petitions in Year Ending 9/7/2023 (n= 978)

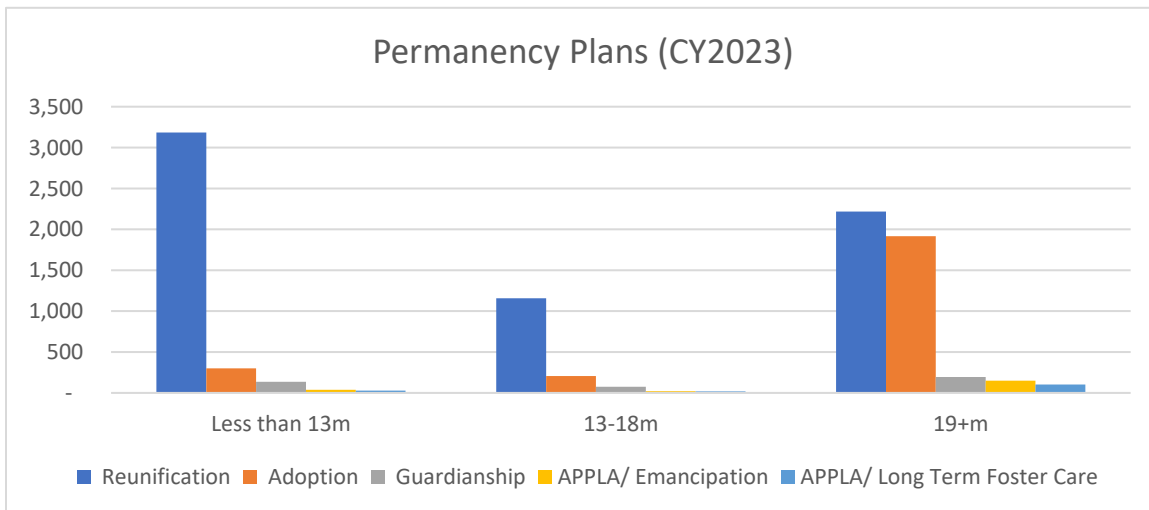


Source: DFCS Data Unit, Georgia SHINES

Analyses of Georgia SHINES data shows that for youth eligible for TPR in CY2023, 5.4% of the cases had an exception to TPR documented in the case file. The Division has developed training for county and regional leadership to use with staff, and reviews monthly data for analyses of improvements. This will be monitored monthly for improved outcomes.

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

Analyses of Georgia SHINES data shows that reunification is the permanency goal for nearly all children during the first year of foster care. The percentage of children with a goal of adoption increases after the 18th month in care.



Source: DFCS Data Unit, Georgia SHINES

The Division seeks to obtain the most permanent outcome for each child. While guardianship may be easier to achieve, it's a temporary relationship, while adoption is permanent and provides more resources and supports to the caregiver.

Child and Family Services Review Data Profile – Permanency Measures

Georgia received its Child and Family Services Review (CFSR 4) Data Profile in February 2024 based on AFCARS submissions as of 10-28-23 and NCANDS submissions as of 6-16-23. Georgia meets or exceeds on two of the five SWDI measurements. The state's performance is better than the national standard for Placement Stability and statistically no different on Re-entry to Foster Care. The state's performance is worse than the national standard on the three "Permanency in 12 months" measures.

Indicator	Data Period ¹	National Standard	Georgia	Statistically ² better (↑), worse (↓), or no different (<->)
Permanency in 12 months (entries)	21A21B	35.2	30.2	↓
Permanency in 12 months (12 – 23 mos.)	22B23A	43.8	36.3	↓
Permanency in 12 months (24+ mos.)	22B23A	37.3	32.6	↓
Re-entry to Foster Care	21B22A	5.6	5.0	<->
Placement Stability	22B23A	4.48	4.07	↑

Data Source: Child and Family Services Review (CFSR 4) Data Profile

In preparation for Round 4 CFSR, the Division engaged staff and stakeholders in CQI exploration of the barriers to positive permanency outcomes. Dependency is often related to more complex needs (e.g., substance abuse, interpersonal violence, and mental health issues) which require significant service provision, and often take longer to achieve permanency. Georgia does not have therapeutic foster homes to support youth moving from PRTF to family foster home settings, where they may be more likely to disrupt. Lack of attorneys is also contributing to the delays in permanency, as data suggest reunification occurs faster and more often when a parent attorney is involved.

Several strategies were identified that support positive permanency, including rigorous foster caregiver training and on-demand resources, an emphasis on kin as a first placement, and initial and ongoing support for kin caregivers and foster placements to ensure they are fully equipped to care for the youth in their homes. In alignment with DFCS' ongoing system modernization initiatives, ARGO Placements launched statewide

in January 2024 as a new tool to support the placement finding process. Demographic, educational, and health data on the child are pre-populated in ARGO directly from Georgia SHINES to avoid data entry errors. The system allows staff to:

1. Search for DFCS foster homes, CPA foster homes, and CCI/TLP/ILP homes for a child by matching the home’s attributes to the child’s needs.
2. Create a Universal Application by leveraging all available SHINES data.
3. Generate a phone list to use when contacting potential homes.

Staff are presented with a list of available placements based on configured search criteria. Placements are scored based on location, school district, characteristics, and capacity. Users can drill into each location to review detailed information.

CFSR Round 4 Preliminary Data

Permanency		State
Outcome P1: Children have permanency and stability in their living situations		23%
Item 4:	Stability of foster care placement (28 out of 40 cases)	70%
Item 5:	Permanency goal for child (24 out of 40 cases)	60%
Item 6:	Achieving reunification, guardianship, adoption, or other planned permanent living arrangement (12 out of 40 cases)	30%
Outcome P2: The continuity of family relationships and connections is preserved for children		38%
Item 7:	Placement with siblings (23 out of 27 cases)	85%
Item 8:	Visiting with parents and siblings in foster care (14 out of 31 cases)	45%
Item 9:	Preserving connections (19 out of 40 cases)	48%
Item 10:	Relative placement (23 out of 40 cases)	58%
Item 11:	Relationship of child in care with parents (5 out of 29 cases)	17%

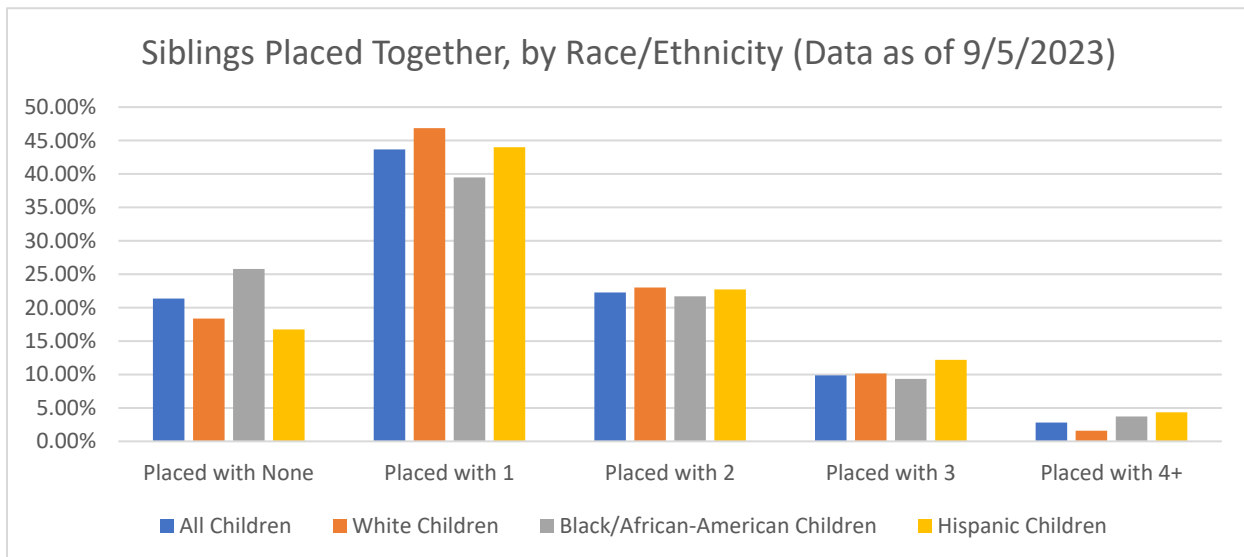
Source: DFCS Quality Assurance Unit (2024)

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?

The Division works to increase sibling placements unless there is an identified safety or well-being issue that prevents placement together. Permanency Field Program Specialists (FPS) within each region review waivers for separation and follow 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.

Siblings Placed Together, by Race/Ethnicity



Source: DFCS Data Unit, Georgia SHINES

The data show that between 40-50% of children are placed with at least one sibling. 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. Finding permanency for larger sibling groups and children with multiple service needs such as mental health, medical fragility, and delinquent behaviors can be difficult, as well as identifying a caregiver with the capacity to care for these children while deciding about permanency. Subsequently, children with complex needs are often placed in group home settings which makes the possibility of them maintaining permanent sibling connections even more difficult. The Division's Complex Care Coordinator is working with regional leadership and placement providers to address this issue.

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?*

In addition to traditional face-to-face visits, the Division has seen an increase in virtual visits via Zoom, FaceTime, and other tech platforms. QA case reviews document good practice related to the quality of visitation.

Staff recognize some barriers to visitation exist around transportation. When children are placed outside of their legal county, or when parents/caregivers relocate, the challenge remains to find providers who are able and willing to travel several hours for visits. The Division continues to engage service providers to assist with transportation needs. Another strategy is to utilize the family's existing supports. Staff also encourage foster parents to help with maintaining the bond between parents and siblings when appropriate.

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 is making efforts at every stage of the case to have 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. Staff are continuing to conduct diligent searches for connected individuals, including relatives and fictive kin, throughout the life of the case and connect the youth with 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 to have regular phone contact with the child. Keeping communication open ensures staff are informed timely if the individual chooses to be a placement resource later.

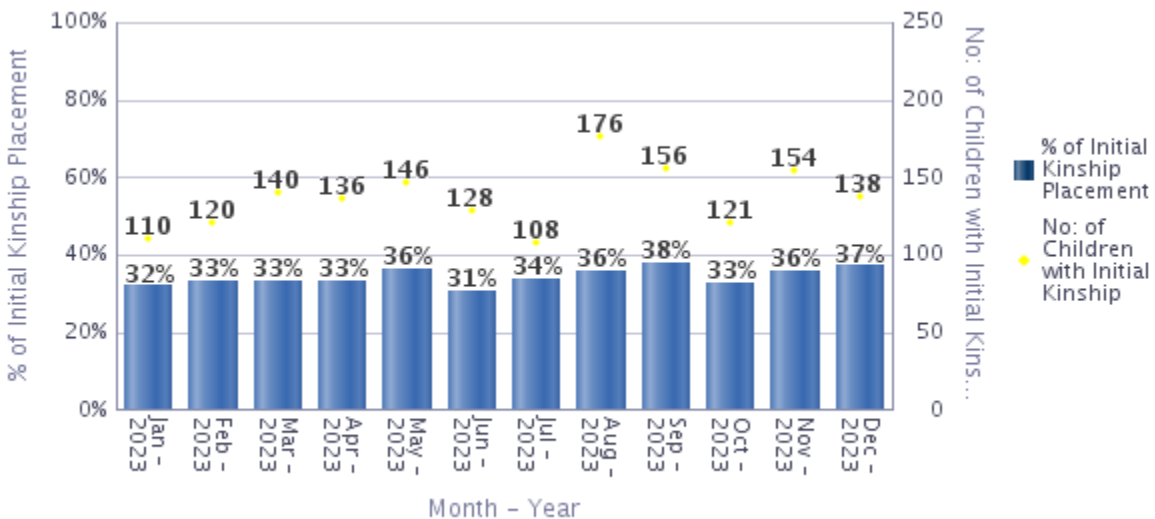
Item 10: Did the agency make concerted efforts to place the child with relatives when appropriate?

Division leadership promotes 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 children with relatives 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, criminal background checks, and fingerprinting completed prior to placement; however, sometimes kin have extensive criminal backgrounds and/or CPS history that prohibits them from being a resource.

The Division has in place a specialized Kinship Unit to support kin, address complaints, and provide guidance to staff. The Kinship Unit works closely with the Caregiver Recruitment and Retention Unit (CRRU) to address barriers to placement, get homes approved and monitor kinship placements. CRRU holds monthly support calls for kin

caregivers to hear from the Division, receive answers to questions and concerns, and learn about resources and upcoming training events. Regions hold weekly cadences to address issues and ensure accountability. 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.

Number of Foster Care Children Initially Placed in Kinship Homes (January - December 2023) – 34.4%



Source: DFCS Data Unit, Georgia SHINES (LENSES report)

One-third of children in care are initially placed with kin caregivers. The CRRU team works closely with potential relative resources identified through diligent search efforts to ensure they have the supports to become a caregiver for a child so that a subsequent placement move is into a kinship home.

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?

QA case reviews note slightly higher performance ratings for father engagement compared to previous years. This observation may be due to the sustained efforts throughout the CFSP reporting period to engage fathers and encourage legitimation.

APSR joint planning meetings have highlighted the need to understand and engage parents throughout the dependency process and encourage relationships with their children in care. Regular convenings with staff, stakeholders, and parents with lived experience have supported an increase in performance on this measure.

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

CFSR Round 4 Preliminary Data

Well-Being 1		State
Outcome WB1: Families have enhanced capacity to provide for their children’s needs.		12%
Item 12:	Needs and services to child, parents, and foster parents (8 of 65 cases)	12%
	12A-Needs assessment and services to children (28 of 65 cases)	43%
	12B-Needs assessment and services to parents (6 of 59 cases)	10%
	12C-Needs assessment and services to foster parents (17 of 37 cases)	46%
Item 13:	Child and family involvement in case planning (29 of 63 cases)	46%
Item 14:	Caseworker visits with child (32 of 65 cases)	49%
Item 15:	Caseworker visits with parents (15 of 58 cases)	26%

Source: DFCS Quality Assurance Unit (2024)

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?*

CQI analyses with staff and stakeholders identified root causes for low performance on this item are often due to challenges in obtaining needed assessments and services timely, including trauma assessments, and contacts with collaterals to assess progression and ensure services remain appropriate.

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

The Division routinely collaborates with stakeholders (e.g., MAAC, EmpowerMENT, Bethany, nSoro Foundation, and the University of Georgia Fanning Institute) to engage ILP-eligible youth and provide needed supports and services. Data are provided to county

leaders weekly that provide a detailed summary of case management practices, including monthly child visits and upcoming and overdue assessments. QA/CQI analyses noted a root cause of lower performance is often due to challenges in obtaining needed assessments and services timely. The Division expects to see improvements in this measure with the Argo provider portal, which is developed to create a simple and efficient process to complete service authorizations and connect with available providers.

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.

QA/CQI analyses noted a root cause for lower performance on this item is often due to lack of quality engagement with parents. QA reviews identified cases that 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. Staffing guides and tools for case managers have demonstrated some improvements in this measure.

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. CRRU team members discuss foster parent experiences and identified needs at each re-evaluation (during home visits and contacts prior to home visits). CRRU team members are accessible to 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 reaches out to placement case managers, supervisors, county directors, or other agency or community resources to identify assistance. 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 hold 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 individuals on the PAUSE call can identify and implement additional services to stabilize the placement and support the foster parent. The Division continues to work with providers to improve timely assessments and enhance service availability and accessibility for foster caregivers.

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?

Throughout the CFSP reporting period, issues impacting this item included 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 QA review noted improved performance on this measure, particularly with children and mothers.

The Division is exploring strategies to improve parent participation in case plan development and monitoring. Staff are encouraged to conduct ongoing case plan monitoring at each home visit and discuss the strengths and challenges of the case plan during the visit. CIP is encouraging judges and attorneys to set aside time for the parents to talk about their case plan involvement. This will provide additional oversight for staff to ensure parents are engaged early and often in case planning. Additional strategies are being discussed within QA and CQI teams.

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?

Frequency

Data reported in the annual Monthly Caseworker Visit reports show that case managers are meeting the “Every Child Every Month” goal to visit children in foster care at least once per month, with more than half of those visits occurring in the child’s residence, as required under PI-12-01. Throughout the CFSP reporting period, Georgia has exceeded the requirement that 95% of children in care receive at least one monthly caseworker visit. Data are available through the [Child Welfare Outcomes Report](#).

Quality

Regional supervisor summits are conducted quarterly by the QA/CQI teams and provide specific guidance on defining quality. CQI reviews 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. Cases are debriefed with supervisors to demonstrate what quality visits look like. Feedback from attendees is positive. This work is ongoing.

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?

Frequency

Throughout the CFSP reporting period, issues impacting this item included 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 step-parents. Frequency of visits can be a challenge when parents are not able to be located. Sometimes parents will refuse to make themselves available, change their residency, or avoid contact from the agency. Case managers attempt contacts by visiting multiple homes and neighborhoods, sometimes in unsafe areas, to locate parents who do not want to be contacted. Continued attempts may be via phone, letter, virtual unannounced and announced visits, and in-person visits. For case managers with high caseloads, this level of effort creates a challenge to completing more than one monthly parent contact.

Quality

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. CQI teams are developing strategic tools for staff to use in preparation for parent visits. QA Reviews have noted in cases where fidelity to the CQI strategy was maintained, the case rated a strength on items related to quality parental engagement. This observation has reinforced the alignment of quality performance with CQI-developed engagement tools for case managers and supervisors.

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

CFSR Round 4 Preliminary Data

Well-Being 2		State
Outcome WB2: Children receive appropriate services to meet their educational needs		56%
Item 16:	Children receive appropriate services to meet their educational needs (25 of 45 cases)	56%
Outcome WB3: Children receive adequate services to meet their physical and mental health needs		24%
Item 17:	Physical health of the child (24 of 54 cases)	44%
Item 18:	Mental and behavioral health of the child (8 of 45 cases)	18%

Source: DFCS Quality Assurance Unit (2024)

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 has committed resources to improve student performance and increase access to educational support services. The Division’s Educational Programming, Assessment and Consultation (EPAC) Unit provides 50 Regional Academies and over 25 Statewide Academies each year. Regional Education Academies provide training and engagement opportunities in the counties and are facilitated by the regionally assigned Education Support Monitor. Information shared during Regional Academies is often region- and county-specific and may include guest presenters who represent the local school systems and organizations within the area. Staff and attendees learn about local data, resources, and educational supports available for youth in care.

EPAC also reviews Individualized Education Plans (IEPs), averaging 80 per month, to ensure they are current and appropriately meeting the needs of the youth. EPAC data shows that 85% of reviewed IEPs are appropriate. If the incomplete or inappropriate accommodations are affecting the youth’s ability to learn or attend school, the Education

Support Monitor will initiate a meeting with the case manager and/or school and schedule an IEP meeting to address the situation.

Starting in 2024, EPAC has contracted with Tutor.com so that all children and youth in foster care have access to individualized tutoring. Tutors can assist with homework, improve writing skills, help students study for tests, and review difficult concepts. This service will be monitored to determine how free access to tutoring is supporting youth.

The Division works closely with the Department of Early Care and Learning (DECAL) and other child serving agencies and organizations to build an Early Childhood System of Care that promotes coordinated policy and collaborative service delivery to support the many young children with (or at risk for) social, emotional, and behavioral health needs and to promote healthy social and emotional development for all children. DECAL offers support for inclusion through a team of regionally based Inclusion and Behavior Support Specialists, who provide a variety of resources, strategies and support to programs, classrooms, and the community. They also work to promote and increase inclusive childcare options for children with disabilities and their families in their communities.

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?

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

In 2022, the Division created an Office of Health Law and Policy, which includes a Foster Child Passport Team and an Appeals Team. The primary goal of the Appeals Team is to advocate for children who are insured under the Amerigroup Georgia Families 360 (Medicaid) plan to ensure compliance. The Division hired three Medicaid attorneys to review claims, dispute decisions, file appeals, secure reversals, and negotiate resolutions. The team also provides specific training and education to DFCS field staff on all types of appeals, including psychiatric residential treatment facility (PRTF) admission denials and discharges, medical treatments including dental services, and non-PRTF psychological assessments and treatments. From July 2023 through March 2024, OHLP administratively appealed at least 200 denials of hospital stay or service and initiated another 67 fair hearing requests before the OSAH court. Additional OHLP reviews address dental benefits, pharmacy/prescription drug coverage, and support services (therapy/skills training). The team expects these efforts to continue improving timeliness and access to health care for youth.

In 2023, the Division developed several technology tools to support staff and caregivers to improve performance of this outcome. Timeliness and quality are expected to increase in 2024 as these tools are utilized statewide.

- **Communicare** is a set of interconnected web portals linked to the agency's case tracking system, and allows parents, foster and relative caregivers, and CASA staff to document and monitor children's needs and health appointments. The portal will allow parents to submit any medical records or other documents needed for the child, and for parents to communicate directly with the case manager and caregivers for the child. This resource will support foster parents to better care for youth with complex needs and ensure all their needs are met.
- The **Argo Provider Portal** replaces the current model of one-at-a-time phone/email service requests and correspondence between case managers and providers, often requiring multiple calls to identify a provider who has the capacity to provide a needed service. The Argo portal initiates a service authorization to multiple providers through the portal instead of sending individual requests. Case managers can also receive attachments from providers directly to their external documentation in Georgia SHINES. Early results show increased timeliness in the initiation of appropriate services for in-home support.

The Division refers all children younger than age five to [First Steps Georgia](#), a Department of Public Health (DPH) program that serves as a key point of entry where expectant mothers and primary caregivers with young children can receive screenings and referrals to community resources that will support their needs and the healthy development of their children. FSG provides relevant, age-appropriate educational materials on maternal health, newborn/child health, home and child safety, community and family safety, school readiness, and family economics/self-sufficiency. When ongoing support is needed, FSG may refer a family to a home visiting program. DFCS also refers families to *Babies Can't Wait* – a DPH early intervention program for children ages 0 - 36 months with developmental delays, and/or certain diagnosed conditions that have a high probability of resulting in delays. From January 2020 to June 2023, over 1,900 children between the ages of 0 – 36 months have been screened for early intervention services which resulted in the development of 708 Individual Family Services Plans (IFSP).

Staff and stakeholders are noting an increase in children with autism spectrum disorder (ASD), who require more specialized services. The [Georgia Autism Initiative](#) is a collaboration with physicians and public health district coordinators to record and/or administer ASD-specific screenings for early intervention. The most recent available data shows that from January 2018 to December 2022, over 3,500 children between the ages of 18 and 24 months have been screened for ASD across the state of Georgia.

CFSR Systemic Factors

Statewide Information System

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?*

Data are entered timely and are routinely checked for accuracy and completeness. Throughout the CFSP reporting period, the state can readily locate the four listed items for every child in foster care.

The State's CCWIS system (Georgia SHINES) records important demographic information for all children/families, foster care placements, and permanency goals for children in care. Georgia's Child Welfare Policy Manual requires data updates into Georgia SHINES within 72 hours of occurrence. 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. The Division assigns specialized staff – Performance Management Field Program Specialists (FPS) and Data Integrity Specialists (DIS) – to monitor the accuracy and completeness of this information. CCWIS enhancements resulting from AFCARS 2.0 will be used to support CQI/QA efforts by ensuring data quality and consistency for required items under review.

DIS staff in each region receive a monthly data quality report from the Data Unit. This report includes missing or incomplete case information that needs attention. The DIS contacts the assigned case manager on each identified case with missing data and collaborates to address the issues. DIS provides 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. When errors are identified, accounting staff will contact the case manager and/or supervisor to correct the data.

Data Quality

The below table demonstrates initial error-free data percentage from January through December 2023, prior to DIS review and correction. After the DIS work with the case managers, the error-free data percentage reaches 100% in these measures, ensuring that the Division maintains accurate and complete information on the demographics,

person characteristics, legal status, and placement location (address) of every child in foster care.

	Demographics	Person Characteristics	Legal Status	Placement Location	Goals for Placements (Permanency Goals)
Jan-23	99.85%	98.80%	99.64%	97.74%	92.49%
Feb-23	99.87%	99.38%	99.46%	98.24%	92.69%
Mar-23	99.93%	98.52%	99.65%	98.12%	92.69%
Apr-23	98.62%	98.65%	99.61%	98.07%	92.45%
May-23	99.46%	98.69%	99.51%	97.87%	93.00%
Jun-23	99.79%	98.96%	99.81%	98.08%	93.06%
Jul-23	99.74%	99.07%	99.72%	97.95%	93.97%
Aug-23	99.75%	98.91%	99.53%	98.15%	93.36%
Sep-23	99.75%	99.16%	99.70%	98.33%	93.24%
Oct-23	99.70%	98.39%	99.86%	98.66%	93.36%
Nov-23	99.72%	98.53%	99.81%	98.51%	92.72%
Dec-23	99.66%	99.03%	99.82%	98.09%	93.17%

Source: DFCS Data Unit, Georgia SHINES

Data Timeliness

The below chart provides timeliness of all placements (initial and subsequent) in Georgia SHINES during CY2023.

Placement Type	Total Placements	Within 3 Days	% Within 3 Days	Within 5 days	% Within 5 Days
DFCS Family Foster Home	5,510	2,005	36.39%	2,516	45.66%
CPA Family Foster Home	4,747	1,630	34.34%	2,082	43.86%
Kinship - Relative	1,870	624	33.37%	907	48.50%
Child Caring Institution	1,661	620	37.33%	755	45.45%
Hospital	989	277	28.01%	369	37.31%
Other	2,355	706	29.98%	920	39.07%

Total	17,132	5,862	34.22%	7,549	44.06%
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Source: DFCS Data Unit, Georgia SHINES

This table shows the number of days for a new placement to be entered into SHINES in 2023. Days shown are calendar days; DFCS policy requires all entries within three working days.

Any data point that is initiated by DFCS, such as placements, can be easily tracked for timeliness. Others, such as person characteristics or legal status, cannot be by using the data in SHINES. The case managers have virtually no control over how responsive the courts and medical providers will be for providing information in a timely manner. Demographical information is normally entered during the INV stage which would predate the child coming into FC. (Also, any update on a child’s demographical information, though rare, is also at the mercy of the reporter which makes timeliness determinations elusive.) At this point, it would be difficult to accurately report on timely data input other than for placements.

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’s Child Welfare Policy Manual requires developing written case plans for children in foster care by engaging the parents/guardians during the family team meetings. The Division finds that nearly all children in care have a completed case plan within 60 days. Additionally, 62-72% of case plans are approved by the court within 60 days, demonstrating that children are having their court hearings early and often.

	2019	2020	2021	2022	2023
Completed Case Plans within 60 Days	68%	77%	72%	74%	98%
Approved Case Plans within 60 Days	62%	70%	66%	68%	72%

Source: DFCS Data Unit, Georgia SHINES

The Division does not have strong supporting evidence that parents are routinely involved in the development of their case plans. The Division is exploring opportunities with CIP and the courts to improve parent engagement. Specific strategies will be developed and implemented for the CFSR PIP and are expected to increase performance in this measure.

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?*

CFSR Round 4 stakeholder interviews with attorneys and judges confirmed that courts are scheduling periodic reviews at least once every six months. Georgia SHINES data shows 99% of children receive an initial court review within the first six months of foster care, and 88-91% of subsequent reviews are held timely at least once every six months.

	CY2019	CY2020	CY2021	CY2022	CY2023
Timely Initial Periodic Reviews	15558/15767 99%	13902/14042 99%	12829/12969 99%	12403/12582 99%	12518/12688 99%
Timely Subsequent Periodic Review	14050/15767 89%	12377/14042 88%	11545/12969 89%	11408/12583 91%	11294/12689 89%

Source: DFCS Data Unit, Georgia SHINES

Practice Supports

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 their home. An additional periodic review shall be held within four months following such initial review. Georgia’s Child Welfare Policy Manual provides requirements and procedures for periodic reviews to align with state and federal laws.

SB 401 (2024) requires juvenile courts to collect timeliness data relating to adherence to dependency time frames and upload those data at least weekly to the Georgia Juvenile Data Exchange. The Administrative Office of the Courts will collect those de-identified data and provide a comprehensive aggregated report to the Legislature annually. This will support more accurate reporting in the future.

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?*

CFSR Round 4 stakeholder interviews with attorneys and judges confirmed that courts are scheduling permanency hearings at least once every 12 months. Georgia SHINES data shows 99-100% of children in foster care receive an initial permanency hearing within the first 12 months, and 97-99% of subsequent reviews are held timely at least once every 12 months thereafter.

	CY2019	CY2020	CY2021	CY2022	CY2023
Timely Initial Permanency Hearings	12405/12407 100%	11578/11580 100%	10445/10446 100%	9694/9696 100%	9931/9934 100%
Timely Subsequent Permanency Hearings	12064/12407 97%	11290/11580 98%	10321/10446 99%	9584/9700 99%	9846/9940 99%

Source: DFCS Data Unit

Practice Supports

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.

SB 401 (2024) will require juvenile courts to collect timeliness data relating to adherence to dependency time frames and upload those data at least weekly to the Georgia Juvenile

Data Exchange. The Administrative Office of the Courts will collect those de-identified data and provide a comprehensive aggregated report to the Legislature annually. This will support more accurate reporting in the future.

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?*

The below chart shows the average time, in months, from a child’s entry into care to the date of TPR to the finalization of adoption.

Year	Entry to First TPR	Entry to Second TPR	TPR to Adoption	Average Time to Adoption
2018	20.88	23.44	11.99	35.53
2019	21.22	24.66	12.73	37.34
2020	22.33	25.67	14.15	39.89
2021	24.63	27.8	13.82	41.6
2022	26.48	29.39	13.14	42.49

For the year ending December 2023, there were 5,420 youth eligible for TPR. Of those, 1,958 had a compelling reason documented and 376 had a timely TPR petition filed.

Georgia’s Child Welfare Policy Manual requires termination of parental rights to align with state and federal laws. There are several alerts within Georgia SHINES that notify staff when there is an upcoming or overdue issue for children who have been in care for 15 of the most recent 22 months without a TPR filed or voluntary surrender. 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.

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 RACs work on cases where parental rights have been terminated and the agency is trying to move them to permanency. For children without TPR, the RACs work with staff to develop the TPR packets and provide guidance on needed documentation. The county staff will pull the packet together, change the goal to adoption, and support the TPR filing. Regional CQI teams also support the RACs by developing best practice guides and toolkits for staff to use when a child is approaching the 15th month in care.

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?*

[Senate Bill 439 \(2020\)](#) 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. Each county currently has a process in place for providing notice to caregivers, relying on the child welfare agency (case manager or administrative staff) or the agency attorney. A 2023 survey of foster parents found that 67% of the 175 respondents regularly received notice of upcoming hearings.

Georgia Code §15-11-109 requires DFCS to give written notice of the date, time, place, and purpose of the review or hearing, including the right to be heard, to the caregiver of a child, the foster parent of a child, any pre-adoptive parent, or any relative caring for a child. The written notice shall be delivered to the recipient at least 72 hours before the review or hearing, except in the case of preliminary protective hearings or emergency hearings when such notice is not possible, by United States mail, e-mail, or hand delivery. Each county has a process in place for providing notice to caregivers, and therefore, there is no consistent data system that collects this information. The Division will collaborate with the Office of Technology and Georgia SHINES to develop a system that tracks the date that the notice is sent to each caregiver. Per the state statute, the notice includes language that the caregiver has a right to be heard.

The agency's technology modernization efforts include the CommuniCare portal, which provides a calendar of activities and email notices to caregivers about upcoming events, including court hearings. This technology will also support uniformity in notification.

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?*

Throughout the CFSP reporting period, Georgia continues to operate 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.

Stakeholder engagement throughout the QA process utilizes surveys to gather information related to service delivery and systemic factors. Stakeholders can participate in both the case specific interviews and their overall assessment of the child welfare system. Stakeholders are asked to provide a rating of Excellent, Good, Fair or Poor in applicable areas based on their role with the agency. 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 others across the child welfare system.

Stakeholders include but are not limited to:

- Legal stakeholders (judges, SAAG (Special Assistant Attorney General), CASA (Court Appointed Special Attorney), GAL (Guardian Ad Litem), Citizen Panel Member, etc.)
- School personnel (teachers, counselors, principals, etc.)
- Law Enforcement
- Medical Providers (doctors, dentist, hospitals)
- Mental Health Providers (therapists, counselors, hospitals)
- Homestead/Parent Aide Providers
- Other service providers (substance abuse, Domestic Violence, parenting classes)
- DFCS Case Manager/Supervisor

Throughout the CFSP reporting period, the QA team has consistently provided comprehensive evaluative data and trend reports that document conformity with standards that address safety, permanency, and well-being.

Continuous Quality Improvement (CQI)

Evaluation and implementation of program improvement measures are promoted through the state's CQI efforts. Each region has an assigned QA Specialist to assist the CQI teams with educational needs related to CFSR. CQI teams include frontline staff and supervisors, county leadership, and the regional C3 Coordinator. CQI teams are operational in all fourteen regions and the Child Protective Services Intake Communications Center (CICC). CQI teams use Gilbert's Behavior Engineering Model to conduct root cause analysis. This model includes six categories within two domains that indicate the areas that influence the work: Environment (Expectations and Feedback; Tools and Resources; and Incentives and Consequences) and Individual (Knowledge and Skills; Capacity; and Motivation). Each team also uses a Performance Improvement Process planning worksheet to develop and evaluate strategies. This process consists of five phases: Performance Analysis, Cause Analysis, Intervention Selection and Development, Implementation and Change Management, and Evaluation. When developing interventions, CQI teams create a Quality Improvement Plan (QIP). Once the performance problem and cause have been analyzed, the strategy is included in the QIP, as well as how it will be measured, and its expected outcome. CQI training is provided to individual teams on an as needed basis to ensure they understand, and can effectively use, the CQI tools and resources.

In 2022-2024, the Division created a leadership CQI team consisting of regional C3 Coordinators, field program specialists, county and regional directors, and program directors in safety, permanency, and well-being. The team met monthly to review the QA data and practice standards, explore root causes for observed performance, and consider strategies to improve outcomes. The state CQI team did not implement strategies but Regional C3 Coordinators and CQI leads attended these convenings and shared the recommendations with their regional teams. Regional teams received this information and incorporated it, as appropriate, to develop and evaluate local initiatives. Additional CQI discussions continue to be held with external stakeholder groups (e.g., courts, caregivers, providers) to review existing data and develop strategies and solutions to improve observed performance.

- For example, in Region 4, Through cause analysis, it was determined that the **root cause** /performance problem was: 1. Lack of quality engagement as it relates to needs and services of children, parents, and foster parents. 2. Supervisory staffings were compliance driven rather than being of quality; also lack of expectations/feedback. 3. Lack of supervisory oversight.
- In an attempt to positively impact Items 12, 14, and 15, the **CQI strategy** was created. The strategy consists of 8 staffing review questions in which the CQI team completes monthly targeted case staffing reviews (for foster care and family preservation) and provides feedback to the supervisors. The emphasis is around the supervisors structuring their staffings around the 8 review questions. In order

to **monitor** the efficacy of the strategy, the results of the targeted case reviews are tracked and trends identified/discussed. Additionally, the cases reviewed for CWQA are examined to determine if the strategy was utilized (the staffings structured around the components of the 8 review questions).

- In looking at the targeted monthly case review results, from over the past 12 months, although the scores fluctuate, there does appear to be a positive trend to indicate that the scores are showing improvement. Additionally, the May 2024 CWQA review, the region's well-being items scored higher compared to the last 2-3 years' performance.
- The heart of the CQI strategy is the **feedback loop**. The CQI Team reviews supervisor staffings each month (CQI specialist will provide a secondary review of the same cases in order to ensure accuracy). The results of the reviews are sent, by email, to the Supervisor and County Director, and the reviewer will then meet with the Supervisor, via Teams, to go over a 10-15 minute debrief discussion on the results of the review.

The QA/CQI teams rely on the OSRI reports to pull de-identified review guides for distribution each month. The Ratings by Case report is used for preparation for case debriefs as needed. The State Rating Summary report is used to pull the data for each month's trend charts (statewide data, and then broken down by district and regions). The QA/CQI team can also pull county level reports from this resource if needed. The Face Sheet and Participants Interviewed reports are used to track the number and type of participants engaged regularly through the review process. The QA/CQI teams regularly use the 18 Item Specific reports to look at breakdowns of performance for each measure within the items and to evaluate case practices (strengths and areas needing improvement). The analysis of information from these reports is used to develop statewide trend reports and the content for the regional focus groups.

Throughout the CFSP reporting period, the state maintained an operational quality review system. Prior to the Covid-19 pandemic, the review process was conducted primarily in-person. Since 2020, reviews and interviews have shifted to a virtual format. The QA team has maintained 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?*

The Division has been successful at ensuring that initial training is provided to 100% of staff. The Human Resources department automatically registers new staff for the New Worker Training, which has resulted in increased participation and on-time completion. The Training and Professional Development unit receives notification from Human Resources twice each month with the number of newly hired staff, which allows the Training unit to match the availability of training to the number of new staff. This process eliminates any delays for new staff receiving required training courses. 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.

The below chart describes the number of new case managers and the median number of days to complete the new worker training during the CFSP reporting period. New Worker Training must be completed within 120 days of hire.

Year	Number of New Workers	Median Days to Complete Training	Percent Completing New Worker Training	Percent completing within 120 Days
CY2023	884	98	99%	88%
CY2022	928	84	99%	95%

Source: DHS Office of Human Resources

New staff are paired with a Field Practice Coach (FPC) within several days of hire if the region has one available. Seasoned staff can volunteer for the FPC role and must receive specific training and certification from the Training Unit before starting. CFSR Round 4 stakeholder interviews demonstrated the positive experiences of new case managers when a FPC was available to mentor. Feedback from case managers with an assigned FPC mentor reported being better prepared for the role and greater understanding of the required policies and procedures.

Findings from the Comprehensive Organizational Health Assessment in 2022 reported that nearly three-quarters of case manager respondents agreed that “information given in the interview was enough to make an informed decision about the reality of the job” (73%), and that “training they received when they were hired prepared them for this job” (70%). Two-thirds of case manager respondents (66%) agreed that “the agency hires people whose experience/ education prepared them for the job”.

The COHA was developed through a multi-year partnership with the National Child Welfare Workforce Institute (NCWWI) and will not be repeated, so the Division is developing focus groups, surveys, and other tools to collect more comprehensive data on the preparedness of new workers for their jobs.

The agency has developed a Case Manager Competency Tool to be utilized by front line supervisors. The purpose of the “Case Manager Competency Development Tool” is to provide purposeful feedback and guidance to assist the supervisory-case manager skill development process. This tool focuses on important aspects of case practice that are not routinely addressed during monthly case staffings and is meant to supplement post-child welfare academy case manager learning and development. A key feature of the tool is to determine if the case manager has received sufficient training to be prepared for their role. Data will be shared in future APSRs.

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?*

Continuing professional development opportunities are available to 100% of staff. Training hours are available through conferences, summits, and DFCS provided courses. Courses are available in both in-person and virtual formats. Staff are required to complete 20 hours of ongoing training annually.

The below chart demonstrates the percentage of staff completing continuing professional development hours in each calendar year.

	2019	2020	2021	2022	2023
0-19 hours	66%	76%	66%	58%	63%
20+ hours	33%	24%	33%	42%	37%

The Division’s career pathway requires staff to have completed the 20 hours of professional development training annually to be eligible for a promotion. Staff who obtain a Master of Social Work or a master’s degree in behavioral sciences are eligible to receive a 10% pay increase when they begin employment or when the degree is obtained (for current employees). A 10% salary supplement is also offered to employees who have or obtain the Licensed Clinical Social Worker (LCSW) credential.

The Supervisor Academy training is required for new supervisors within 45 days of promotion and includes online and in-person components, as well as over-the-shoulder mentoring and administrative functions. Instructors for this course are former supervisors and county directors. The Supervisor Academy is an immersive practical, relevant learning experience for all new Social Services Supervisors and is an entirely new curriculum in FY24. This curriculum is also implemented in partnership with the supervisor mentor program. Supervisor Mentors sit-in throughout the modules to serve as experts to provide experiential knowledge and feedback to classroom participants and carry forward

that knowledge during the individualized mentorship sessions. The supervisor mentor program focuses on the educative, administrative and supportive functions of supervision to help support retention of both supervisors and front-line case managers. Feedback on supervisor academy and mentoring is reported to be positive and supportive of new supervisors in being prepared for their role. Evaluation data is currently unavailable, but the Division is developing a method of formal data collection to be launched shortly.

After completing the initial supervisor academy training, supervisors must complete 20 hours of ongoing professional development annually.

The Division has offered a “Raise the Bar” legal training course for several years which includes a mock trial experience. This training is facilitated by a former judge and prepares staff for court. Staff evaluations of the course have been routinely positive, so CIP added funds to increase the course availability for staff. The Division continues to develop and evaluate additional training opportunities for staff, including podcasts, short on-demand videos that address a variety of topics, and workshops on request.

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?*

Initial Caregiver Training

The Caregiver Recruitment and Retention Unit (CRRU), in partnership with Training and Professional Development, announced the statewide rollout of a new research-based, pre-service training for Georgia caregivers in February 2024. The National Training and Development Curriculum (NTDC) will replace the current IMPACT foster parent pre-service training. NTDC has been adapted to address the needs of Georgia families and equips potential foster, kinship, and adoptive parents with the information, resources, and tools needed to parent a child who has experienced trauma, separation, or loss. NTDC also gives parents access to information and resources needed to continue building their skills once they have a child in their home through Right-Time Trainings (RTT). RTT is available online at any time. Designed as a hybrid model that can be delivered both virtually and in-person, the curriculum and RTT themes are accessible from the agency’s learning management system, IOTIS.

	2019	2020	2021	2022	2023
Foster caregivers required to meet annual training hours	4,365	4,216	3,974	3,643	3,670
Foster caregivers completing the annual training requirement by the end of the calendar year	3,094	3,227	3,015	2,718	3,615

Source: DFCS Office of Provider Management

Ongoing Caregiver Training

Resource Development (RD) staff must verify that all approved foster caregivers obtain a minimum of fifteen (15) hours of Continued Parent Development (CPD) each calendar year. Foster caregivers are now afforded more flexibility in obtaining those hours; the policy now allows that annual training hours can also be obtained from personal growth and development activities (e.g., counseling, support groups, stress management, nutrition, etc.). Hours from these activities need to be verified with a written statement by the professional providing the service.

The Caregiver Coaching Academy continues to assist caregivers with obtaining their ongoing CPD hours by providing caregivers with one hour of training for each session they attend. Caregivers can also obtain training through the Georgia Center for Resources and Support, which offers several live trainings each month and hundreds of on-demand courses tailored to specific needs of children and families. TBRI trainings are encouraged for caregivers to support caring for youth with behavioral or complex needs. Participants report positive feedback after attending a TBRI training. The Division also utilizes a relative support network to include monthly sessions for relatives on topics directly related to children in foster care and relative supports. Completed caregiver trainings are tracked and monitored in Georgia SHINES.

Caregiver Feedback Surveys are administered to caregivers during their annual re-evaluation, requesting feedback on a variety of topics. OPM regularly review the survey responses and works to address any areas of concern. The below table summarizes the foster parent experience related to training and preparedness in 2023. Over 90% of respondents agreed that the training offered to them helped them to meet the needs of the child(ren) in their care.

Tell us about your experience as a Foster Parent			
	Yes	No	Total
Did you feel confident in your ability to meet the	84	2	86

needs of the child(ren) placed in your care?			
Did you feel that your family was well matched with the child(ren) placed in your care?	76	6	82
Do you feel that you were offered support services to help you meet the needs of the child(ren) placed in your care?	71	12	83
Do you feel that you were offered training which could help you meet the needs of the child(ren) placed in your care?	76	7	83

Source: DFCS Diligent Recruitment Plan, 2023

Initial CPA/CCI Staff Training

New case management staff of licensed agencies (CPAs) and facilities (CCIs) are required to complete a 40-hour Foundations classroom training. The Office of Provider Management (OPM) team monitors training compliance. At the conclusion of each training course, participants are assessed on their knowledge. A passing score is 80%. When CM staff don't complete the training by the required deadline, a non-compliance letter is sent to the agency, advising that the staff member is not able to continue serving in a CM role until the training has been completed. These individuals are required to be removed from the CM role and reassigned to another position within the agency.

OPM request participant feedback via surveys to determine if the Foundations course trained them adequately to do their job. In the most recent survey, 100% of child welfare workers and 83% of supervisors said it did. OPM regularly reviews the feedback to make enhancements to the Foundations training.

	2019	2020	2021	2022	2023
CPA/CCI staff required to complete RBWO Foundations	137	117	86	148	129
CPA staff completing the course by the end of the calendar year	129	83	71	108	125

Source: DFCS Office of Provider Management

Ongoing CPA/CCI Staff Training

OPM holds a monthly partnership meeting with all CPA providers, and quarterly partnership meetings with CCI and ILP providers. These partnership meetings are held in a virtual format. In these meetings, OPM provides training on various topics, technical

assistance, policy updates and discusses trends related to program operation. Feedback from providers suggests that they find the trainings beneficial, and the trainings meet the attendees' expected goals.

When child welfare policy is newly developed or updated, the information is shared throughout the agency and to providers via the GA+SCORE website. This site is a single point of access for foster caregivers, RBWO providers, and DFCS staff. GA+SCORE also provides direct links to training registration for RBWO Foundations, IMPACT/NTDC and Train-the-Trainer, Reasonable and Prudent Parenting, Every Child Every Month, Casey Life Skills Assessments, and others.

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.*

The state provides an array of services to support children and families through a continuum of public and private agencies, organizations, and funding sources. During CFSR4 stakeholder interviews, gaps were noted for services relating to transportation and housing in rural areas, substance abuse services, particularly for fathers, specialized services for children with complex needs, and ABA therapies for children with autism disorders. Stakeholders also expressed concerns about long waiting lists and the quality of some of the services. Assessments and services for parents is an area of concern for the Division, with ongoing exploration of barriers and solutions. The Division is coordinating with public and private agencies, and the state Legislature, to better understand and address these service needs. The recent technology modernization efforts are targeted toward improving several noted service timeliness or quality gaps.

Assessment Services

- Systems are in place to ensure children are referred for trauma and health assessment within 10 days of entering care. The Argo Provider Portal was developed as part of the Division's technology modernization efforts and allows for service authorization requests to be sent out to all providers quickly. The portal supports staff in selecting a provider that can provide the service in a timely fashion. Case Managers can use the Argo Provider Portal to access a more expansive list of possible providers and connect with providers who can offer more individualized services. Case managers can also receive attachments from providers directly to their external documentation in Georgia SHINES. Early results show increased timeliness of service initiation.

Basic Services

- The Division has developed a statewide safety net for basic services through [State of Hope](#), an initiative that seeks to encourage nonprofits, philanthropies, government, businesses and communities to collaborate closely to build local safety nets that will prevent conditions that contribute to disparities in education, threaten a family's self-sufficiency and could lead to child abuse and neglect. Community providers who are invited to join the State of Hope ecosystem receive up to \$50,000/year in grants supported by CBCAP, PSSF and CAPTA.
- In 2023, there are 455 sites participating in the SoH ecosystem (funded and unfunded organizations).

Health Services

- The Division has expanded access to health services through telemedicine. Clients can connect with therapists and providers outside of their community using virtual visits, reducing the likelihood of transportation barriers or long wait lists.
- The amended FY24 state budget included \$15 million in transferred and new funding to support construction of the Gateway child and adolescent crisis stabilization unit in Savannah.

ILP Services

- The Division has expanded services for older youth, by leveraging the resources of the Chafee/GA-RYSE Independent Living program and CREW-Cultivating the Rising Experienced Worker program, along with the [Multi-Agency Alliance for Children \(MAAC\)](#). Older youth in care have increased access to transportation, employment, healthcare, and housing supports in their communities. Life skills programs are routinely offered for youth, and transitional meetings include local service providers and youth advocates, so that young people can ask questions

and receive specific guidance on their needs directly from the individuals responsible for the programs.

Language Services

- When there is a language barrier, translation services are available for clients. The Georgia Department of Administrative Services (DOAS) secured a statewide contract for translation and interpretation services. Staff can request translation services for non-English speakers through regular protocols. For the deaf and hard-of-hearing community, the Georgia Commission on Interpreters maintains a list of recommended sign language interpreters who have demonstrated knowledge of legal settings and legal language.

Substance Abuse Treatment

- The Division has expanded partnership opportunities with substance abuse treatment providers and recovery community organizations (RCO) through the Department of Behavioral Health and Developmental Disabilities (DBHDD). These collaborations support caregivers with substance use disorder often by using peer recovery coaches to help families who are experiencing similar circumstances. DBHDD supports the Georgia Council for Recovery to offer the Certified Addiction Recovery Empowerment Specialist (CARES) Academy to create a workforce of peers. The CARES Academy is a 40-hour training course with lectures and workshops, and the first of its kind in the country to be Medicaid billable.

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?

The state provides an array of services to support children and families through a continuum of public and private agencies, organizations, and funding sources. During CFSR4 stakeholder interviews, challenges were identified with individualizing services, particularly in case plan development, families in rural communities, and for children with complex needs, including autism disorders. Stakeholders also expressed concerns about long waiting lists and the quality of some of the services.

The Division developed a survey to obtain feedback from people with lived experience on a variety of metrics relating to their involvement with the child welfare system. In December 2022, 81 youth responded to the survey; all were age 14-17 and currently in foster care. In February 2023, 186 foster and adoptive caregivers responded to the survey. The below table shows the responses for the service-related questions.

		Excellent/Good	Fair/Poor	Skipped/Unable to Answer the Question
YOUTH	How responsive was DFCS and other providers to your specific racial and cultural needs?	77%	16%	7%
	How well did DFCS and other providers make sure you received the services and supports you requested?	63%	35%	2%
	How satisfied are you with the services and supports offered to you by DFCS?	91%	5%	4%
CAREGIVERS	How responsive was DFCS and other providers to your specific racial and cultural needs?	72%	18%	10%
	How well did DFCS and other providers make sure you received the services and supports you requested?	59%	41%	0%
	How satisfied are you with the services and supports offered to you by DFCS?	75%	23%	2%

Source: DFCS Lived Experience Survey, Dec 2022 and Feb 2023

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 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. Convenings are often scheduled to provide information on the state’s CFSP and CFSR goals to targeted audience, including legal and judicial partners, foster and adoptive caregivers, service providers,

CAPTA Panel members, and others. Attendees are provided opportunities to have in-depth discussion on available child welfare data and encouraged to use their personal or professional lens to make recommendations for improvements. Comments and ideas resulting from these convenings are included in the APSR and incorporated into strategic planning for the state's child welfare system.

Each of the 14 regional C3 Coordinators host at least one regionwide stakeholder meeting and four quarterly service array-focused meetings per year. Invited providers are from the CPAs and CCIs, 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 performance outcomes, 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. Comments and ideas resulting from these convenings are included in the APSR and incorporated into strategic planning for the state's child welfare system.

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). Monthly meetings are held with providers including the Multi-Agency Alliance for Children (MAAC) and members of Together Georgia, as well as locally based providers from around the state. Comments and ideas resulting from these convenings are included in the APSR and incorporated into strategic planning for the state's child welfare system. 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.

Technology Modernization

As part of the agency's technology modernization effort and in response to requests from foster parents and CASAs, the Division launched CommuniCare statewide in January

2024. CommuniCare is a set of interconnected web portals specifically designed to support and enhance child welfare programs. It serves three primary user groups – Court Appointed Special Advocates (CASAs), foster parents, and parents – and seamlessly integrates with Georgia SHINES to ensure efficient and secure data management and communication. CommuniCare was launched in DFCS regions 2 and 5 in October 2023. CommuniCare features include chat capabilities, multi-channel notifications, mobile friendly access, secure data management, child data and case documentation access, document upload and sharing, calendar sharing, and appointment creation.

Data Sharing

The Division provides child welfare data to the public through the [DHS data dashboard](#) and continues to promote feedback loops with the field, judges, medical providers, educators, and the CAPTA Citizen Review Panels. Community members are permitted to participate in DHS Board meetings – the meetings are open to the public.

DFCS continues to work with the Department of Behavioral Health and Developmental Disabilities (DBHDD) and the Department of Public Health (DPH) regarding Plans of Safe Care and ways to provide services for families with substance affected newborns. Many contracted organizations receive referrals directly from DFCS, as well as hospitals, healthcare providers and courts.

The Georgia Department of Education provides access for DFCS case managers and Education Support staff to the [Department of Education \(DOE\) Statewide Longitudinal data \(SLDS\) dashboard](#). This dashboard allows staff to view historical education records including enrollment history, attendance, assessments, and grades, and current information such as school and special education services. In participating schools, Individual Education Plans can be assessed. DFCS Education Support Monitors also complete educational evaluations and connect youth to tutorial resources as needed.

The Division has monthly leadership calls with the Court Improvement Program to review concerns, share data, and collaborate on solutions to improve permanency outcomes. CIP has provided feedback on direct case involvement, bringing both concerns and successes to the agency along with recommendations. DFCS staff also participate in the Justice for Children committee of the Georgia Supreme Court, regularly sharing CFSR performance data and trends with the judges, attorneys, and legislators in attendance.

Provider meetings are routinely held with the Multi-Agency Alliance for Children (MAAC), Together Georgia, the Adoption and Foster Parent Association of Georgia (AFPAG), the Foster Stronger Coalition, and others. The Commissioner also participates in Supreme Court of Georgia's Justice 4 Children Committee, Safe Harbor Commission, and the First Lady's Children's Cabinet.

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.

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?

The Division regularly coordinates with other federally funded agencies and organizations serving overlapping populations of children and families.

The Housing Choice Voucher Program is funded totally by federal funds from the Department of Housing and Urban Development (HUD). No State appropriations are used in the administration of this program. The Georgia Department of Community Affairs (DCA) administers the Housing Choice Voucher Program within 149 of the state's 159 counties. The 10 counties which DCA does not administer are: Bibb, Chatham, Clayton, Cobb, DeKalb (Decatur), Fulton (Atlanta), Glynn, Muscogee, Richmond, and Sumter. These counties are served by their own respective housing authorities.

The DFCS Well-Being team coordinates the statewide efforts for housing vouchers for youth transitioning out of foster care. An MOU with the Department of Community Affairs is in development as of summer 2024, and all housing authorities in the state are being contacted for collaboration. This effort will result in expedited housing availability for young adults. In addition, DFCS staff in each region maintain their own protocols to request HUD resources for preventing foster care entry or for kin caregivers. Georgia's housing voucher program maintains a [long waiting list](#) of applicants. Staff can encourage or assist families to request HUD vouchers from the local housing authority and be placed on the waiting list or referred to a local HUD-approved program that provides rapid re-housing. The Division has a partnership with Project Community Connections, Inc., a non-profit that provides housing assessments, counseling, and advocacy for families in metro Atlanta. For every family placed into housing, PCCI also provides case management and follow-up services.

Throughout the CFSP reporting period, Georgia SHINES data show that at least 80% of children aged 0-5 were enrolled in an early education setting (i.e. Early Head Start, Head Start, Pre-Kindergarten, or other quality rated childcare programs). Georgia has 32

agencies that offer Head Start and Early Head Start services through a variety of models based on the needs of the local community. These models may include center-based care, home visiting, childcare partnership locations, and family childcare homes. These services are provided to over 28,000 low-income preschool children birth through five-years-old and their families.

The Early Childhood Collaboration Unit (ECCU) was created to provide 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 Georgia Pre-K). Quarterly training is provided for DFCS staff, foster caregivers, and placement providers to provide information on the resources available from the Early Childhood Collaboration Unit (ECCU). With an emphasis on building and fostering relationships that support educational stability at an early age, the ECCU works collaboratively with partners to ensure the educational needs of this population are met. Partners include the county DFCS offices, other state agencies, and external stakeholders, such as the [Georgia Head Start State Collaboration Office](#), whose mission is to foster partnerships between federally funded Head Start programs and other entities in the state that serve low-income children (birth to school entry) and their families.

The Division has an established referral process that provides a direct pathway to enrollment in Head Start. Staff worked collaboratively with the State's Head Start Collaboration Office, Head Start Association, and all Head Start and Early Head Start grantees throughout the state to develop this Head Start Referral Process:

1. DFCS Field Operations Staff initiates the Head Start referral and submits it via email utilizing the DFCS HS/Pre-K Referral Form.
2. Early Childhood Coordinators contact the HS/EHS Programs for availability and provide status updates (enrollment availability and next steps for enrollment) to field operations.
3. The Head Start Grantee contacts the Foster Parent/Case Manager to schedule the application appointment.
4. After completion, the grantee emails the Early Childhood Coordinator to provide an enrollment update.

Child Welfare Policy 10.16 describes requirements and practice guidance to submit the Head Start referral form electronically to dfcs.headstart@dhs.ga.gov on all children age birth to five years. Referring children to Head Start is always the first choice. However, due to the families' immediate supervision needs, enrolling the children in Head Start programs is often challenging. Observed barriers are related to the program requirements, enrollment process, and slot availability. In addition, Childcare and Parent

Services Benefits (CAPS) are more accessible and often utilized in situations where Head Start programming is unavailable.

The Department of Public Health (DPH) is a partner to provide screening and support to birth mothers and families with substance use issues, and to provide health assessments for infants and young children through Children First, the single point of entry for all DPH Child Health programs and services for children from birth to five years old. Children First links eligible children to early intervention services, as well as other public health programs and community-based resources.

The Division utilizes [Georgia Gateway](#) as a streamlined, one-stop-shop resource for individuals in the community to apply for, check, or renew benefits, as well as report household or income changes and upload required documents. Georgia Gateway served as a critical tool throughout the Covid pandemic to ensure users were able to remotely request medical assistance, childcare benefits, SNAP, or TANF, and explore eligibility for other cash and food assistance programs. Participating agencies on the Gateway platform include DFCS, Department of Community Health, Department of Early Care and Learning, and Department of Public Health. Gateway continues to be updated for a more user-friendly experience and to provide additional resources. This work is ongoing.

The Division's Prevention and Community Support Section (PCS) is currently leading, supporting or serving in a partnership role in all statewide early childhood and child maltreatment prevention efforts in Georgia, and is committed to continued collaboration, participation in strategic planning processes, enhancing relationships among partners, assuring alignment of early childhood strategies and activities, presenting information to policy-makers and advocacy groups, maintaining a focus on the vision, and providing leadership in all arenas. PCS also prioritizes ensuring that our services are well integrated into the state's continuum of family-centered, preventive services for children and families. For example, home visiting programs funded through Maternal, Infant, Early Childhood Home Visiting (MIECHV) grant, which is administered through Georgia's Department of Public Health, benefit from the referral and screening services provided by the First Steps program funded by PCS partially through CBCAP.

The Division of Child Support Services (DCSS) within the Department of Human Resources serves as a resource for DFCS case managers and communities to support non-custodial parents in caring for their children. The DCSS Fatherhood Program is well-regarded within the counties and holds monthly "fatherhood conversations" to provide individualized support and resources to interested parents, including emotional wellness training and accountability coaching. The most recent fiscal year data show that 4,588 Georgians received services from the program, 865 enrolled participants were referred to GED or short-term training programs, \$5.5 million collected, and financial support was

provided to 10,585 children whose parents are enrolled. The DCSS Fatherhood Program partners with Omega Psi Phi fraternity, Georgia Department of Labor, Georgia Department of Corrections, the Technical Colleges of Georgia, the Department of Veterans Affairs, and the Goodwill Career Center.

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?*

Throughout the CFSP reporting period, DFCS continues to be successful in ensuring that state standards and child welfare policies are applied consistently to all approved foster homes statewide, for both CPA foster homes and DFCS foster homes. DFCS Resource Developers (RDs) complete comprehensive written evaluations of the overall quality and functioning of each approved caregiver on an annual basis that includes a recommendation for reapproval or disapproval. RDs also 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. A home cannot be approved without pre-service training or a medical and safety screening.

Performance Based Placement (PBP) is a system of monitoring and data reporting that generates scores for RBWO providers. PBP scorecards are produced quarterly using providers' self-reported data, data from Georgia SHINES, and results from OPM monitoring activities. Scores are distributed to providers and posted publicly each quarter. DFCS case managers use provider scores to inform placement decisions. OPM uses provider scores to identify opportunities for technical assistance and training. Any PBP score below 70% is a failing grade and will require a Program Improvement Plan (PIP). A PIP is required whenever a provider fails to achieve at least a score of 70% in any of the overall review categories which are Safety, Permanency and Well-Being, and/or if scores within those categories are below the 70% threshold.

The below chart demonstrates the number of scored programs (Child Caring Institutions, Child Placing Agencies, Independent Living Programs, and Transitional Living Programs) in each quarter of FY2022-2023, and the number that earned less than 70%. For CCI and CPA, fewer than 10 programs out of 100+ reviewed in each quarter scored less than 70% and required a PIP.

	FY2023					FY2022			
	Q4	Q3	Q2	Q1		Q4	Q3	Q2	Q1
CCI	4/118	5/116	3/118	5/120		5/125	4/127	3/129	7/131
CPA	7/104	7/103	4/102	8/104		3/100	2/101	1/106	3/109
ILP	20/44	9/44	11/44	19/53		23/54	22/61	23/67	23/66
TLP	2/9	2/9	0/9	0/9		1/10	1/10	1/10	2/10

Source: DFCS Office of Provider Management

The Monitoring Specialists with OPM conducts Safety Checks twice each year of all providers. Safety Checks review all RBWO staff and CPA caregivers for five required safety check items:

1. Criminal Background Check
2. Pardons/parole history
3. Sex offender history
4. CPS history
5. Department of Corrections

Throughout the CFSP reporting period, OPM staff completed 100% of the required Safety Checks. Each Safety Check review looks at all five required safety check items and a Corrective Action Plan (CAP) is requested if there are any safety checks out of compliance. CAPs were requested due to non-compliance with at least one of the safety check items. OPM does not collect data to show which safety checks were non-compliant for each Safety Check Review.

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?*

DFCS continues to be successful in ensuring that the State complies with Federal requirements related to approving foster care and adoptive placements.

DFCS Child Welfare Policy and RBWO Minimum Standards uniformly outline the requirements for criminal background checks. Staff must conduct a check of the Georgia crime information databases on adult household members as needed when providing Child Protective Services (CPS), including when assessing Safety Resources and Temporary Alternatives to Foster Care, as well as a check of national and state crime information databases utilizing electronic fingerprinting (Live Scan) on any prospective foster and adoptive parent before the applicant may be finally approved for placement of a child, regardless of whether foster care maintenance payments or adoption assistance

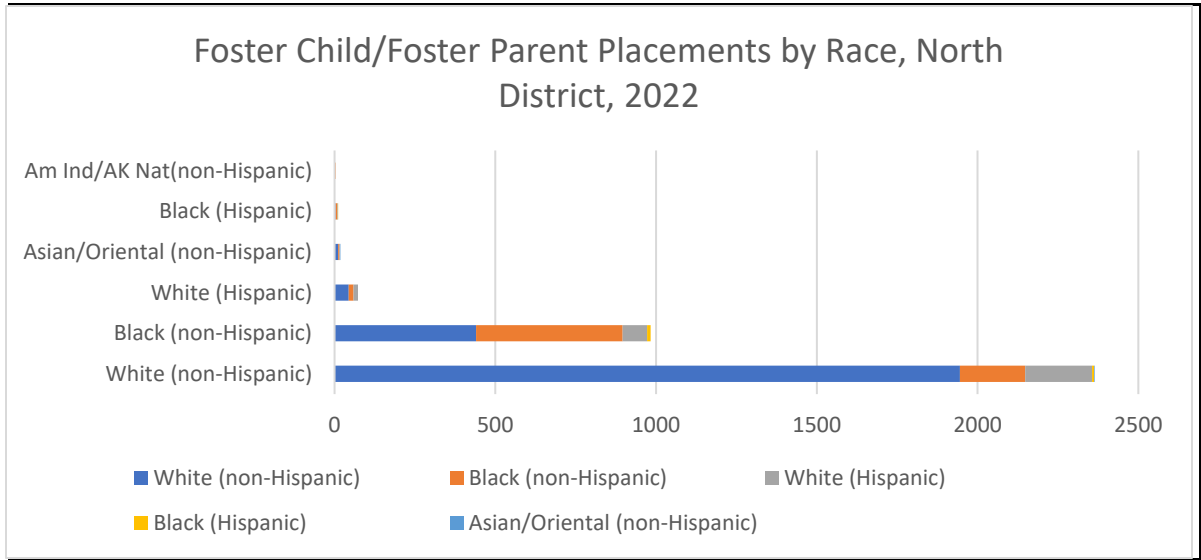
payments are to be made on behalf of the child. This includes all adults (age 18 and over) residing in the home (permanently or temporarily) who have access to children placed in the home. The Office of the Inspector General (OIG) within the Department of Human Services is responsible for reviewing criminal background information and providing clearances on CPA families, CCI direct care staff, and CPA/CCI case support workers. OIG also provides criminal background checks for DFCS foster family homes determination if they may be approved to provide foster care.

CPA providers are required to update the criminal background check during the annual re-evaluation period. In the instance that a re-evaluation is not completed timely and the home goes into unapproved status in SHINES, the CPA is required to have the criminal background check completed on the caregiver and submitted to OPM so that the home can be placed back into approval status. OPM has developed a process by which CPA providers will be sent alerts at multiple time intervals when there is a criminal background check coming due. This is in place to aid CPA providers in tracking upcoming criminal background checks that are due to be repeated.

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?*

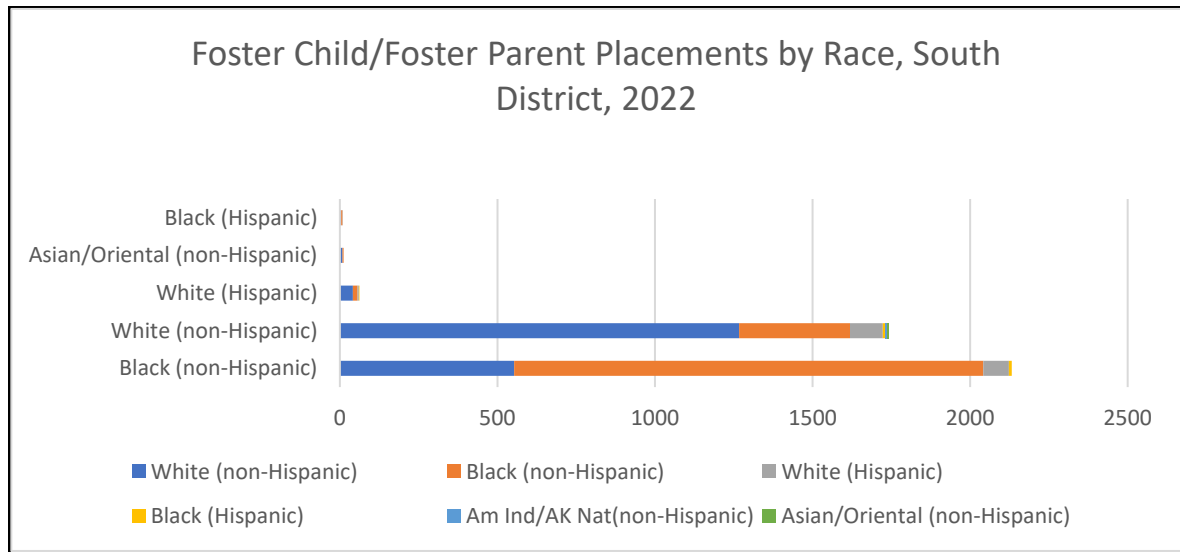
The Division is working to ensure that the diligent recruitment of prospective foster and adoptive parents reflects the ethnic and racial diversity of children in the State's care. Data on the demographics of children in care can be found at dhs.georgia.gov/division-family-children-services-child-welfare.

Foster Child/Foster Parent Placements by Race, North District, 2022



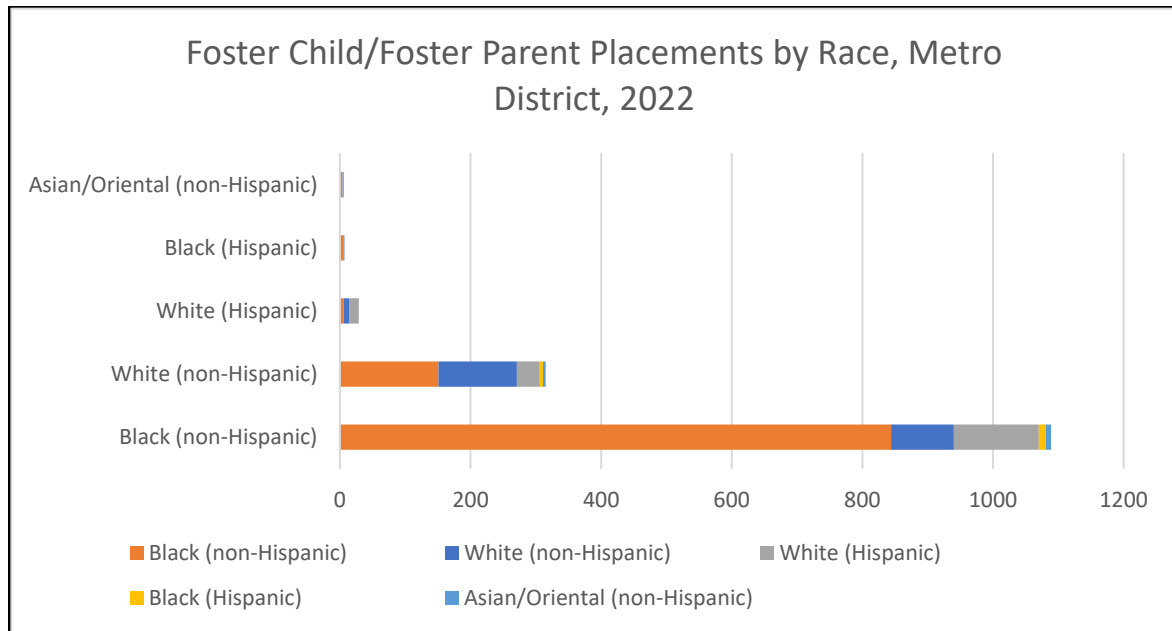
SOURCE: DFCS Data Unit, Georgia SHINES

Foster Child/Foster Parent Placements by Race, South District, 2022



SOURCE: DFCS Data Unit, Georgia SHINES

Foster Child/Foster Parent Placements by Race, Metro District, 2022



SOURCE: DFCS Data Unit, Georgia SHINES

The figures above show the race/ethnicity of placements for children in care (y-axis). In most cases, the race/ethnicity of the child matches that of the foster placement. The Division recognizes this opportunity to recruit additional Hispanic and Asian caregivers to serve as placement resources for children.

To ensure continued recruitment of caregivers that reflect the racial and ethnic diversity of children in care, OPM is only considering applications for providers that are offering placement services that meet the current placement needs of the Division. OPM posts the current placement needs on the GA+SCORE website. Interested providers are directed there when they have interest in obtaining a contract with the Division as a placement resource.

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?*

The Division's Interstate Compact on the Placement of Children (ICPC) works with all 50 states, District of Columbia, and the Virgin Islands, to facilitate timely placements for children. Cases are monitored weekly by ICPC staff to ensure timeliness. ICPC staff maintain a database of all cases and send monthly updates to regional CRRU staff that identify any home study requests that are approaching the 60-day overdue mark. CRRU

teams are required to respond to ICPC with the requested progress updates on the overdue cases within five days of receiving the information. In many regions, CRRU staff have developed a Standard Operating Procedure manual to define the processes and timelines required to complete interjurisdictional home studies within the prescribed time frames. Regions with active SOPs in place and dedicated staff can adhere to the required timelines. ICPC also sends monthly updates to other states when overdue home studies are identified; however, responses are not always received within the requested five-day period.

ICPC Foster and Adoptive Home Study Requests

		CY2022	CY2021	CY2020
Georgia as Sending State	Number of ICPC home study requests sent to other states	302 -98 for Adoption -204 for Foster	265 -115 Adoption -150 foster	266 -103 Adoption -163 Foster
	Number of ICPC placements	138/302 (46%) -61 for Adoption -77 for Foster	107/265 (40%) -60 Adoption -47 Foster	139/266 (52%) -79 Adoptions -60 Foster
	Timely home study completed by other states	94/302 (31%)	93/265 (35%)	81/266 (30%)
Georgia as Receiving State	Number of ICPC home study requests received from other states	707 -184 for Adoption -523 for Foster	706 200 Adoption 506 Foster	702 209 Adoption 493 Foster
	Timely home study requests completed for other states	192/707 (27%)	178/706 (25%)	126/702 (18%)
	Number of ICPC placements	194/707 (27%) -58 for Adoption -136 for Foster	220/706 (31%) -76 Adoptions -144 Foster	140/702 (20%) -61 Adoption -79 Foster

Source: National Electronic Interstate Compact Enterprise (NEICE)

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

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).

In 2019, the Division partnered with the National Child Welfare Workforce Institute (NCWWI) in a 4-year Workforce Excellence project. Throughout the CFSP reporting period, the following progress measures were achieved:

1. A Comprehensive Organizational Health Assessment (COHA) to better understand organizational culture, work conditions, staff selection and retention, practice supports, community engagement, racial equity, workload, professional development, supervision, and leadership.
 - a. The initial COHA survey (2019) included approximately 330 closed-ended items and several open-ended items. Of the 3,445 staff invited to participate, 2,198 staff members completed the COHA survey, for a response rate of 64%. The 2019 COHA process also included seven individual interviews and 21 focus groups resulting in participation by 194 staff and stakeholders from across the state.
 - b. The follow-up COHA survey in 2022 included approximately 330 closed-ended items and one open-ended item. Of the 2,946 staff invited to participate in the follow-up COHA survey, 1,165 staff members responded, for a response rate of 40%, though only 990 (33%) completed the whole survey and approximately 340 staff responded to the open-ended prompt: “please share any other thoughts or information that would be helpful for us to know about the health and functioning of your organization”. This response rate was noticeably lower than the baseline response in 2019.
 - c. Strength areas identified were:
 1. A workforce that is passionate about what they do and supports one another to grow and learn and utilizes self-care to mitigate the stressors inherent in the work.
 2. Staff appreciation for local leaders and supervisors who are available and supportive and who encourage staff development.
 3. Continued positive relationships with community partners, and efforts by staff to advocate for clients and serve their communities in a culturally responsive way.

2. The agency utilized the results from the COHA to develop and prioritize strategies for the Action Teams. Three Action Teams, one in each DFCS District, were formed and tasked with identifying and developing workforce strategies associated with workload and /or workforce conditions. Examples of strategies included:
 - a. Peer Support Groups. Outcome measures for consideration included job satisfaction, self-care practices, ability to recognize secondary trauma, and identification of a professional support network.
 - b. Teaming. Outcome measures for consideration included staff retention, improved staff morale, increased positive feedback from constituents (or decrease in complaints), and increase in the documentation of shared decision making at the case manager level.
 - c. Two additional action teams were developed in 2023, focusing their efforts on supporting new employees. One example of new employee support is the assignment of a Field Practice Coach (if available in their county) within a few days of being hired, to walk them through “real-life” case management.
3. The Workforce Excellence Implementation Team worked on building and transitioning to a Workforce Advisory Council.
 - a. The goals of the Council will, as stated in the charter, “*harness the unique experience of all members in partnership to lead the journey towards our agency’s goal of achieving a diverse workforce equipped with the knowledge, skills, abilities, values and resources to ensure the safety of Georgia’s children and foster the well-being of their families*”.
 - b. The Workforce Council will prioritize effective communication, and action teams will serve as the hub of the workforce to leverage university partnerships in innovative ways and invest in formal workforce development infrastructure. The Division has established guidance for counties and regions interested in developing an Action Team. Feedback and lessons learned from current Action Teams identified this as a need to support the Division’s sustainability goal to have Action Teams existing in all regions, continuously supporting the commitment to workforce excellence.
4. Student cohorts were selected each year to participate in a specialized MSW program at Albany State University, Georgia State University, and the University of Georgia. The project saw 40 total NCWWI Graduates during the CFSP period, with the final cohort graduating in 2024.
 - a. The initial NCWWI University Partnership led to the implementation of the Intercultural Development Inventory® (IDI®) tool across university programs. The IDI tool is the premier cross-cultural assessment of intercultural competence that is used by thousands of individuals and organizations to build intercultural competence to achieve international and domestic diversity and inclusion goals and outcomes. In support of IDI implementation and sustainability, University

partners and DFCS staff have become qualified administrators to help administer the IDI tool.

5. The Division is implementing steps to enhance the existing IV-E Education Program from three university partners to four additional schools. This will increase collaboration across participating universities and the Division, establish a curriculum that focuses on key child-protection competencies, and expand leadership-focused academic offerings.
6. Leadership Academy, known as Leadership Influence for Tomorrow (L.I.F.T.)
 - a. L.I.F.T. participants were paired with one of the 36 Leadership Development Coaches for ongoing mentoring and support. The Coaches were trained with NCWWI's virtual coaching program. The Leadership Academy developed the leadership skills of middle managers within the agency by completing five (5) modules focused on Fundamentals of Leadership, Leading Change, Leading for Results, Leading in Context and Leading People.
 - b. Academy participants were also 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. The L.I.F.T. Academy saw a total of 39 graduates over three cohorts. The 4th cohort was cancelled due to low participation numbers.
 - c. 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. Evaluations of the L.I.F.T. Academy demonstrated overall participant satisfaction, particularly the trainer-facilitated 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).

Feedback Loops

The NCWWI Workforce Excellence Team offered periodic updates for staff on the Workforce Excellence Project and the agency partnership with NCWWI via newsletters and regular information sessions. Presentations have been given during the agency's Friday Café 212 meetings and regular communication updates in agency newsletters.

Technical Assistance

Technical assistance was provided by the National Child Welfare Workforce Institute and The Butler Institute for Families related to the 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.

Strategic Priority 2: Practice Standards

The strategic priority of “Practice Standards” included seven specific objectives, which are described in further detail below. These objectives were designed to collectively meet the goal of “Effective practice resulting in positive outcomes for families.”. During the CFSP period, several adjustments were made to the objectives resulting from legislative or agency leadership priority changes, budget allocation revisions, or the global COVID-19 pandemic. Lessons learned from this focus area include the need for more training and resources to improve practice, and the kinship program implementation has been well received by staff, kin caregivers, and stakeholders.

Objective 1: Execute Practice Model Implementation, Phase 2

The Division adopted Solution Based Casework (SBC) as a component of Georgia’s Comprehensive Practice Model with the goal of utilizing it to positively impact outcomes across the child welfare continuum of safety, permanency, and well-being. During the Phase 1 implementation, Georgia concentrated primarily on introducing SBC skill-building through three stages: training stage, case consultation stage, and certification stage. Throughout the CFSP reporting period, the following progress measures were achieved:

1. A Practice Model Steering Committee was created in 2020 to identify, evaluate and prioritize activities needed for Phase 2 SBC implementation.
 - a. The Steering Committee met several times to develop the Practice Model Standards Guide to communicate the Division’s practice standard priorities.
 - b. Due to staffing shortages and restrictions on in-person meetings resulting from the COVID-19 pandemic, the steering committee did not complete development of the comprehensive practice model guide for the state. The Division dissolved the team in 2021.
2. Training was provided to staff to help convey the practice model goals and standards.
 - a. The Division encouraged practice model implementation by providing training supports for staff, including simulation classes for new hires, facilitation, and modeling for family team meetings, and leveraging Practice Model Coaches to mentor workers on enhanced interview skills and provide one-on-one support to supervisors in the development of their staff.

- b. Regional Field Program Specialists provided ongoing support through consultations and regular staff meetings.
3. Supervisors are encouraged to enroll in “Supervisor Simulation”, a two-day virtual training where supervisors practice leadership and communication skills, facilitate discussions, role play, and participate in feedback loops with peers. Topics include case staffing, individual conferences, challenging conversations with team members and leadership, and celebrating the team. The topics covered can be immediately applied to the real-life, daily responsibilities of supervisors.
4. Supervisors are also offered a multi-module “Supervisor Academy” course that addresses the transition from case manager to supervisor, the essentials for day-to-day supervision including an introduction to SBC supervision, and purposeful documentation. The course also includes conflict management, team development, developmental coaching, and transformational supervision that is built on NCWWI materials.
5. Collaboration with stakeholders during focus groups and roadshows, including youth, courts, placement and service providers
 - a. The tenets of SBC were reviewed, assessed, and developed as an integral component of the Comprehensive Practice Model. Collaborative partners were 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.
 - b. State and regional CQI Teams helped to assess and utilize strengths and needs related to implementing strategies to directly impact Phase 2 of SBC.
6. Practice model feedback was requested from frontline case managers and supervisors, regional directors and C3 Coordinators.
 - a. Feedback was also requested from the CFSR mentors who led the process to provide over-the-shoulder support to improve overall outcomes and supervisory capacity. 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 met to further align the mentoring efforts collectively.
 - b. QA review teams provided regular feedback to case managers and supervisors following case reviews, to ensure staff were familiar with current policy and procedures.

Benchmarks

The Division expected improvements in CFSR Safety, Permanency, and Well-Being outcomes resulting from full practice model implementation. The chart below demonstrates the expected and observed performance for each outcome during the CFSP period, as reported by the Division’s Quality Assurance Unit. The highlighted items identify when the observed outcomes met or exceeded expectations. Some of these declines can be attributed to impacts from the COVID-19 pandemic, which re-shaped many of the child welfare system practices, from in-home visits to service provision to court hearings.

	FY2020		FY2021		FY2022		FY2023		FY2024	
	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs	Exp	Obs
Safety 1	90%	83%	92%	83%	93%	89%	94%	87%	95%	86%
Safety 2	29%	31%	33%	32%	36%	32%	38%	16%	40%	32%
Permanency 1	17%	19%	18%	19%	19%	15%	20%	11%	20%	23%
Permanency 2	44%	44%	46%	50%	48%	45%	49%	39%	50%	38%
Well-Being 1	18%	17%	20%	16%	22%	11%	24%	3%	26%	12%
Well-Being 2	49%	58%	52%	58%	55%	68%	58%	53%	60%	56%

Source: DFCS Quality Assurance Unit

Implementation Supports and Collaborative Partners

SBC Implementation was accomplished statewide through staff training, policy updates and an established fidelity review process. The largest barrier during the implementation process was establishing certification through proficiency and seeing ongoing evidence of SBC in practice during fidelity reviews. The certification process took much longer than expected. The Division expected to achieve certification by June 2018. However, it was not until October 2019 that 80% of staff received certification. While this timeline exceeded initial plans, these progress timelines and challenges were to be expected considering the size of Georgia’s workforce and depth of implementation. The Division eliminated the certification process in October 2019, as it was only intended to be a temporary mechanism to demonstrate staff proficiency in understanding the practice as the agency moved to fully integrate SBC into the child welfare training and practice.

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

The Division identified several action steps to address performance gaps related to the assessment of safety. The focus was placed on multiple objectives that included addressing process factors, causal factors, and systemic factors to promote high quality standards for Child Protective Services. Throughout the CFSP reporting period, the following progress measures were achieved:

1. An assessment plan was developed for 2020, that included focus groups, data review, and policy updates, leading to the development of a staff tool to improve casework practice.
2. The High Priority Review Team was a method for addressing the needs of the population most at risk for maltreatment (age 0–5).
 - a. The HPRT received a list of high-risk cases each week from the Data Unit utilizing the predictive criteria gathered from join plant sessions and focus groups. The case reviews analyzed previous CPS history, quality of interviews and observations, identification of safety threats, quality of safety planning, and supervisory support. Feedback and recommendations were provided to county/regional leadership after each case review.
 - b. The team collaborated with county staff to ensure that all necessary external services and necessary actions were identified to ensure safety for high-risk cases by using "one on one" support and consultation.
 - c. These steps were intended to develop staff competencies around investigations and safety decision-making and ensure ongoing feedback loops that include new frontline staff and supervisors.
 - d. In October 2022, the team was dissolved, and a new Safety Bridge process was developed in 2023, which worked similarly to the HPRT by reviewing physician-referred abuse cases of young children age 0-5 from with unknown maltreaters, and working closely with the county staff to enhance the quality of safety planning and oversight of the child.
3. The Safety Section supported the development and revision of toolkits for staff, and established feedback loops for case managers and supervisors.
4. The CFSR Impact Plan mentor process ensured that supervisors had a clear understanding of what is needed in a comprehensive risk and safety assessment.
 - a. The CFSR Impact Plan focused on the five unmet PIP items from CFSR Round 3, which includes the assessment of safety.
5. The Case Manager Competency Tool serves as a resource for supervisors and mentors to evaluate new staff monthly during the first year in their position. The tool is used to support conversations with case managers and explore knowledge and practice, and to look for improvement opportunities in their work. Feedback is provided one-on-one to ensure transfer of learning.

6. Regular training and support activities were implemented, including virtual Lunch and Learns, Café 212 monthly learning calls, and unit meetings for live learnings. The policy manual was updated to describe requirements and provide practice guidance on initial safety assessments (ISA) and utilization of the Family Functioning Assessment tool.

Benchmarks

CFSR Safety Outcome 2 was identified as the benchmark measure for this objective. The state intended to observe improvement in Safety Outcome 2 from a baseline of 27% in 2019 to 40% by 2024, as reported by the Division’s Quality Assurance Unit. The expected (E) and observed (O) Safety Outcome 2 performance is reported below.

Federal Fiscal Year	Safety Outcome 2	
	Expected	Observed
2020	29%	31%
2021	33%	32%
2022	36%	32%
2023	38%	16%
2024	40%	32%

The Division anticipated improved performance on CSFR Safety Outcome 2, as well as enhanced staff skills for identification of safety factors, present and impending danger, and improved ability to recognize and develop parental protective factors to reduce child maltreatment. The Division also expected to see improved matching of appropriate safety services to children and families based on an enhanced understanding of family needs.

Implementation Supports & Collaboration

The Division engaged the Training and Professional Development Unit, district and regional leadership, Quality Assurance Unit, Safety Section, Policy and Regulations Unit, and Field Program Specialists to support activities related to this objective.

Objective 3: Strengthen the Kinship Continuum Program

The Division launched its Kinship Continuum program in 2018 and identified several action steps to strengthen the program. Throughout the CFSP reporting period, the following progress measures were achieved:

1. Track the number of families serviced by the Kinship Navigator program, and to increase the number of kin families that receive full approval as foster parents.

	CY2020	CY2021	CY2022
Number of families receiving Kinship Navigator services	1,000	2,121	1,900

Source: DFCS Kinship Continuum program

2. Provide support to caregivers.
 - a. The Kinship Navigators average 20 referrals/month for each Navigator and provide the following array of supports to caregivers: supportive listening, refer and link families to resources, provide individualized support to families, participate in community meetings/events, identify sponsors for families, and attend family team meetings, agency staffings, court and school meetings (e.g., IEP).
 - b. Navigators also assisted families with completing benefit applications, navigating state systems, completing paperwork to become a foster parent, and tracking foster care payments or resolving payment issues.
 - c. Covid-19 restrictions limited navigators' ability to provide in-person support to caregivers, many of whom experienced challenges with navigating virtual platforms. The program developed a laptop loaner program to reduce barriers to completing online applications, trainings, and educational meetings/legal hearings.
3. Partner with Early Childhood Collaboration Unit and the Department of Early Care and Learning (DECAL) to develop Early Head Start/Head Start priority designation for children living temporarily with kinship caregivers because of DFCS involvement.
4. Partner 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.

Implementation Support / Evaluation

1. The Kinship Continuum Unit maintains eight Kinship Navigators working across the state, who are supported by six Kinship Coordinators and two Kinship District Managers. The state office is managed by a Kinship Program Director and Kinship Navigator Program Manager.

2. The Kinship Navigator Program infrastructure was supported by a mini-grant funding process to provide direct support to kin caregivers and a fidelity tool to ensure consistent statewide implementation of the program model.
3. Kinship Navigator Portal <https://dhs.georgia.gov/kinship-care-portal>
4. Monthly kinship caregiver support webinars starting in FY22, focusing on educational and behavioral health services
5. Monthly state-wide “Yes we KIN” technical assistance calls. Over 100 agency staff participate each month to review practice trends, data, and on-going kinship efforts across the state. Kinship staff continue to participate in county staffings to address placement concerns and prevent disruptions.
6. SHINES enhancements to track safety requirement completions for kin caregivers (completed 2019)
7. Kinship Policy (Chapter 22) of the Child Welfare Policy Manual to provide guidance to staff (completed 2020).
8. Program Instruction 23-10 (issued October 2023) provided guidance to states on the ACF Final Rule that required title IV-E agencies to assure that a licensed or approved relative of kinship foster family home receives the same amount of Foster Care Maintenance Payments that would have been made if the child was placed in a non-relative foster home. Policies were appropriately updated in December 2023.
9. The Kinship Navigator (KN) evaluation was managed by Georgia Family Connection Partnership (GaFCP) and implemented by the Kinship Navigator Evaluation Team. This team consists of evaluation specialists from the GaFCP Evaluation and Research Team including, AnthroEval Consulting, LLC, Village Research and Consulting Group, and Metis Associates.
 - a. The Kinship Navigator (KN) advisory committee included KN staff and organizational partners. The advisory committee provided feedback to the Kinship Navigator Evaluation Team regarding evaluation questions, methodology, data collection instruments, and use of findings.
 - b. In summer 2022, evaluators administered surveys to DFCS staff by evaluators, and interviews were conducted with a sample of community organizations, kinship navigators, and caregivers. Surveys included the following components:
 1. What kinds of supports and services does the Kinship Navigator program provide to caregivers?
 2. What impact does the Kinship Navigator program have on the well-being of caregivers and families?
 3. 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?
 4. How does the Kinship Navigator program coordinate services with local and state level agencies to support kinship families?

5. What system level changes are needed to improve service delivery and support to kinship families?

Evaluation results were used throughout the CFSP reporting period to make improvements to the KN program, including staff training and agency-caregiver partnerships. Evaluation data identified caregiver supports and services that could not usually be addressed even with navigator assistance, such as financial assistance with utilities and housing. The KN program continues to rely on evaluation data to improve staff awareness of caregiver needs and make the necessary connections with support services.

Collaboration Supports

Funding was provided to counties identified through the Family Connection Network (including Berrien, Brantley, Catoosa, Dawson, DeKalb, Douglas, Effingham, Fulton, Gilmer, Harris, Jefferson, Jones, Toombs, Treutlen, and Warren) to provide enhanced KN program supports, including emergency assistance and stipends for kin caregivers serving in a liaison role in the local support group.

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

The Division identified several action steps to enhance support services for older youth between age 18-21 with a specialized “Connected by 21” unit. Preparations were made to create an implementation plan, convene three district youth listening sessions to learn what young people needed, convene workgroups to build out services for youth in the areas of housing, education, health, and employment, and to create child welfare policy to provide guidance for staff. The implementation plan was completed in 2018 when House Bill 906 (2018) enshrined extended care youth services into state law, and the youth listening sessions and workgroup convenings were completed in 2019. Funds were not appropriated by the state legislature to fully implement the CB21 unit and the initial plans were amended.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. The extended foster care child welfare policy requirements and guidance remain in unapproved status, but draft documents were presented to youth with lived experience for their feedback in March 2023. Staff turnover within the GA-RYSE/Chafee Program paused the development and approval of several required documents, including eligibility verification, exit checklists, case closure notices, and discharge notices.
2. The Scattered Site Independent Living placement options for youth and young adults in extended foster care were enhanced in August 2021. Youth focus groups, surveys, and panel discussions led to the scattered site placement changes.

- a. Fourteen trainings were offered to private agency placement providers, Division staff, foster parents, judicial partners, and other community stakeholders were trained on the new requirements for independent living scattered site placements.
 - b. The new changes included the implementation of a readiness assessment for potentially eligible youth, a tiered structure for scattered placements with milestones to be achieved before matriculating to the next tier, and an action plan for youth who were not deemed ready for such placement at the time of the assessment. The scattered site structure supports young adults to achieve independent living over the course of the placement.
 - c. Young adults who are placed in scattered site housing 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.
3. Senate Bill 107 (2021) provides 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.
 4. The GA-RYSE ILP website provides information for young adults currently or formerly in foster care to access Medicaid. Amerigroup meets quarterly with DFCS and the Department of Community Health to discuss updated policies and practices that impact health care for foster youth, including system barriers for former foster youth to access health coverage.
 5. The United Way of Greater Atlanta has partnered with the Division and local businesses to develop Career Ready ATL, a youth-centered workforce development initiative that creates and funds apprenticeship programs aligned to high-demand occupations that can provide a pathway to a “living wage” career with opportunities for growth and economic mobility. These youth apprenticeship opportunities target youth of color, current or former foster youth (age 16-24), young parents, and youth disconnected from school or workforce in the Greater Atlanta region. Convenings with former foster youth were held in 2021-22 where youth were invited to share their experiences in career placement and readiness, in order to better design the program and meet their specific needs. Career Ready ATL equips youth with high quality college and career opportunities that eliminate achievement gaps and lead to sustainable careers and greater economic prosperity. Youth are prepared with paid, hands-on work experience alongside coursework to grow talent in all fields, not only trades.
 6. 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.

- a. In 2023, three agency-sponsored youth boards (representing GPAC, GA EmpowerMEnt, and Amerigroup) collaborated to create the Ubuntu Youth Engagement Collaborative Team. The youth leaders meet monthly to review areas of practice and policy, and initiate opportunities for change. Youth review data from Georgia SHINES, NYTD surveys, CFSR case reviews, and other sources as needed.
- b. The Ubuntu collaborative also develops and disseminates youth-created surveys to gather specific feedback from current and former foster youth in a variety of areas. Feedback from these youth surveys is used to develop new recommendations to improve child welfare policy and practice.

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 of 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., Bethany, Amerigroup, United Way of Greater Atlanta, Georgia State University, Covenant House and other internal and external organizations who have a commitment and interest in young people in care and their success.

The Division partners with the Fanning Institute of the University of Georgia to provide Education and Training Vouchers (ETV) for youth and young adults. This collaboration has yielded service improvements for youth seeking post-secondary education, including projects to serve students more effectively through the school's Designated Point of Contact (DPOC), and training materials to better educate youth and young adults about available ETV supports.

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

The Division identified permanency roundtables at the 13th month in care as an action step to ensure children are appropriately placed in settings that meet their individualized needs and preserve their connections.

The target benchmark was 65% on CFSR Item 5 and 50% on Item 6, within Permanency Outcome 1. These were not met during the CFSP reporting period, but the state reached 60% and 30% respectively, on the [2024 QA case reviews](#). Factors affecting the

accomplishment of goals and objectives were related to resource challenges resulting from the reallocation of staff responsible for facilitating and tracking roundtables. Midway through the CFSP reporting period, the Division began to shift away from roundtables and toward case consultations (often at 6 or 9 months, and again at 12 months).

Throughout the CFSP reporting period, the following progress measures were achieved:

1. Case consultation guides were developed 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 also discussed to focus on the family's individual needs and determine the best permanency option for the child.
2. Promoting Reasonable Efforts (PRE) team process uses collaborative partner calls to address reasonable efforts to prevent removals (which includes services to families). PRE Team participants include the case manager and supervisor, health care and service providers, and other agency representatives involved with the family.
 - a. The PRE Team process serves as an additional opportunity to address case plan development and 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 a Family Team Meeting has been held with the family and determines if there are any reasonable efforts that would prevent removal.
 - b. In cases where an out of home placement is necessary, the PRE Team staffing helps to ensure the identified placement meets the child's individualized needs, maintains their connections to family and community, and identifies the conditions that should be met for the child to safely return to the home.
 - c. Feedback from staff and participants is positive, indicating that early case planning and service referrals help to keep children out of foster care.
3. As part of the Division's technology modernization efforts, Argo Placements was developed during the CFSP reporting period. Argo Placements is a tool designed to help case managers find the most appropriate homes for children in foster care.
 - a. The Argo portal allows DFCS staff to search for available homes (DFCS and CPA foster homes) that meet the individualized needs of the child. The portal is linked to Georgia SHINES and is pre-populated with the relevant data for the child (e.g., demographic data, religion, primary language spoken, school attendance zone, physical or behavioral health needs, and number/age of siblings).
 - b. Available homes are rated on the strength of the match to the child's needs, and the case manager can send the application directly to the best match.
 - c. Argo Placements was launched in Regions 1 and 5 in 2023, and made available statewide in January 2024. Early staff feedback is positive.

4. DFCS continues to utilize the Placement Assistance Utilizing Stability Exploration (PAUSE) Process, which is a multi-agency approach to prevent unnecessary placement changes and promote placement stability. PAUSE uses a staffing model to improve collaborative relationships with caregivers, reduce emergency and 72-hour discharge notices, and stabilize placements or extend move time. Even when a placement is not salvaged every time, the process has reduced the number of requests for immediate removals.
 - a. Feedback shared in staff surveys of PAUSE indicates that children have benefited from reduced disruptions, individualized services, and stronger teamwork to support youth success in placement.
5. The Division has scheduled numerous trainings for staff and providers on the technology tools for identifying appropriate placements. Regional CQI teams have developed conversation guides for PRE and PAUSE staffings, to ensure necessary information is captured and shared with all participants.
6. The most utilized service for providing placement stabilization support throughout the CFSP reporting period to adoptive families is the ADOPTS program. ADOPTS (Addressing the Distress of Post-Traumatic Stress) 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.
 - a. 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.
7. The Adoption and Guardianship Services Unit (created in March 2021) supports building capacity for post-permanency families. 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.

Implementation Supports and Collaboration

From 2021-2022, the Adoption and Guardianship Services 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.

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

The Division relies on the [Educational Programming, Assessment, and Consultation \(EPAC\) Unit](#) to provide educational academies to increase staff awareness of educational services for youth. These academies also expand the scope of information-sharing beyond Education Support Monitors, so that more frontline case managers and supervisors are knowledgeable about educational entitlements and advocacy resources.

While the target benchmark of 60% on CFSR Well-Being Outcome 2 was not met during the CFSP reporting period, the [state reached 56% on 2024 QA case reviews](#). Factors affecting the accomplishment of goals and objectives were related to resource challenges resulting from the staff turnover throughout the Division.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. The EPAC Unit delivered over 400 educational academies to staff and stakeholders across the state. Due to restrictions on in-person gatherings related to the global Covid-19 pandemic, all educational academies were delivered virtually. These online training sessions targeted a variety of topics, including supporting youth with navigating virtual school, resources for special education and mental health, developing an Educational Stability Plan, post high school planning and resources, and student educational rights under federal and state laws.
 - a. Regional Education Academies provide training and engagement opportunities in the counties and are facilitated by the regionally assigned EPAC Education Support Monitor for the county/region. Statewide Education Academies provide training and engagement opportunities that can be attended by anyone throughout the state. The Statewide Academies have different facilitators based on the topic and intention of the session.
 - b. Education Academies are available to staff and stakeholders who want to attend, including child caring institutions, private agencies, and foster parents.
 - c. For each educational academy, participants are asked to complete a feedback survey online. Throughout the CFSP reporting period, over 95% of participants reported that the information was useful and 88% would use the information in their work to advocate for youth.

Educational Academies Provided

	2020	2021	2022	2023
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Regional Academies	217	76	50	81
Statewide Academies	7	15	28	25

2. Throughout the CFSP reporting period, the Out of School Services Program (funded with TANF) supported out of school and summer programming for school-age youth, age five to 17, that provide targeted learning loss activities resulting from the Covid-19 educational losses for school aged youth. Through a partnership with United Way of Greater Atlanta, more than 60 programs were funded to support educational efforts throughout the State.
3. DOE 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 assists Division staff to identify IEPs, complete educational diagnostic assessments, and provide tutoring for youth.
4. In 2023, EPAC established a contract with Tutor.com to provide on-demand tutoring services to youth in care. The contract allows for 5,000 hours per year, with unused hours rolling over into the next year. Staff and stakeholders are receiving ongoing training and awareness of this resource and how to enroll students on the platform.
 - a. EPAC monitors the program usage monthly to analyze the days and times when the service is most often used by students. Analyses also provide description of the grade level of student users, the course subjects being requested, and the time spent on the platform.
 - b. Early 2024 results show that elementary grades (K-3) are the most frequent users of the service.
5. The Division has a contract and partnership with the Multi-Agency Alliance for Children (M.A.A.C.). Through the Learn, Educate, Achieve, Dream, and Succeed (LEADS) Program, MAAC provide educational wraparound services to youth in grades 9-12th in Dekalb and Fulton Counties.
 - a. Community partners across the state are encouraged to provide specialized educational services statewide.
 - b. For example, Care Solutions, Inc., a small organization that has money available from Communities 4 Children, donated over \$8,000 toward book bags for youth in group homes. EPAC identified the group homes, and the organization sent book bags filled with supplies to the youth at the beginning of the school year.

6. House Bill 855 (2020) requires school personnel to immediately and deliberately assess, when a youth enters foster care and/or changes placement, whether exposure to trauma has had or is likely to have an adverse impact on the foster care student's educational performance, including both academics and classroom behavior. School protocols shall also consider the impact of trauma to determine eligibility for special education and related services. Every school is charged with developing a Trauma Informed Educational Support (TIES) plan to address how trauma has impacted the youths' academic ability.

Implementation Supports and Collaboration

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 youth in foster care. The dashboard allows DFCS staff to view historical education records including historical attendance, current school, enrollment history, historical grades, state assessment history and identifies special education services. This access and collaboration with DOE allow DFCS to ensure youth are connected to resources and have all the supports they need.

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

The Division assigned Education Support Monitors (ESM) to ensure youth have individualized education plans when warranted, by reviewing random IEPs from their respective regions for quality. Reviews occurred monthly, with a target of 5% of the cases to be reviewed each month.

While the target benchmark of 60% on CFSR Well-Being Outcome 2 was not met during the CFSP reporting period, [the state reached 56% in 2024 QA case reviews](#). Factors affecting the accomplishment of goals and objectives were related to resource challenges resulting from the staff turnover throughout the Division.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. EPAC reviewed over 3,000 Individualized Education Plans for youth in foster care.
 - a. Analysis of the data throughout the CFSP reporting period showed that 70-85% percent reviewed IEPs were current and appropriate, ensuring that the required services were being provided to meet the youth's educational needs.

	2020	2021	2022	2023
IEPs Reviewed	742	700	957	863

2. EPAC developed an IEP protocol. If an IEP has not been uploaded, is incomplete, has expired, or the accommodations are not appropriate, the ESM will send two notifications to the Case Manager. The first notification is sent immediately, the second is sent within thirty (30) business days to the Case Manager and Supervisor. The IEP should be corrected and/or uploaded into Georgia SHINES within 30 to 45 days of receiving the notice. EPAC will also send a notification to the child’s school to ensure the IEP has been updated and is saved in Georgia SHINES. Escalation protocol requires that the EPAC District Manager send a notification to the Supervisor and County Director if no response is received within thirty (30) business days.
3. Due to the new AFCARS elements, the EPAC team began in February 2024 to request all student records and taking the responsibility to ensure all youth that have IEP’s have been identified and current IEPs are uploaded and documented in SHINES.
4. The EPAC Unit provides 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 EPAC is used to inform future training and supports to staff.
5. EPAC provides additional monitoring of academic support services provided by Child Caring Institutions (CCIs) and group homes. Due to the vulnerability of youth who reside in these settings and the varying academic needs of each youth, EPAC serves as an additional support for these institutions.
 - a. Educational advocacy varies based on the needs of the youth, from youth who have multiple foster care placements and need coordination of their school academic records to youth who have identified special needs and would benefit from increased school and learning engagement.

Implementation Supports and Collaboration

EPAC partners closely with the Georgia Department of Education and Local Education Agencies/school systems throughout the state of Georgia to ensure the appropriate academic services are provided to youth in foster care. EPAC Education Support Monitors advocate on the youth’s behalf to ensure quality services and academic monitoring is provided.

Strategic Priority 3: Service Array

Objective 1: Establish and Maintain a Parent Advisory Council

The Division worked to establish a Parent Advisory Council (PAC) to enhance primary and secondary community-based prevention and to increase parent leadership and engagement within the Division. Several action steps were identified to ensure parents were engaged. The Division contracted with the National Children's Trust Fund Alliance to provide support, technical assistance, and training for the PAC. The Alliance has worked with several states to develop and coordinate PACs and was instrumental in the creation of Georgia's PAC.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. The Division expected to have full parent engagement by September 2024, with a parent representative from each of the 14 DFCS regions. The PAC is fully formed, and members are stable, including a foster parent and kin caregiver. The Division met its benchmark to have at least 75% of PAC members participating in trainings and meetings by the end of the CFSP reporting period.
2. In 2022, PAC members established rules and procedures on term limits, membership, meeting attendance requirements, and in-person meeting protocols. The PAC currently operates under these guidelines, with ongoing support from PCS staff.
3. The Prevention and Community Support (PCS) Section leads the efforts to provide information to the PAC on different evidence-based primary and secondary prevention programs. Presentations are provided to PAC members in bi-monthly meetings.
4. The PAC was tasked with recommending services to PCS that would be most helpful to families and communities. To achieve that objective, PAC members participated regularly to provide input on the state and regional Child Abuse and Neglect Prevention Plan (CANPP). PAC members were also invited to participate in the grant proposal review teams for CAPTA, PSSF, Second Step, Sources of Strength, teen pregnancy prevention programs, and Family Resource Centers. PAC members receive a stipend for their time in these efforts.
5. Throughout the CFSP reporting period, PAC was invited to develop projects and activities in partnership with the Division. PAC members developed training videos to support staff training. The training videos highlighted parent engagement in child welfare and supported parent leadership.
 - a. PAC presented at child welfare conferences, regional leadership summits, community engagement meetings, APSR Joint Planning meetings, and CFSP stakeholder interviews.

- b. PAC members also participated in a parent advocacy fellowship program supported by Casey Family Programs. Georgia was one of four states selected to participate.
- 6. PAC engaged with the Strengthening Families Georgia Leadership Team, the Alliance National Parent Partnership Council (ANPPC), the Georgia Department of Education and Department of Juvenile Justice, and in 2024, joined the Child and Family Services Review (CFSR) stakeholder interviews. PAC members will continue to be engaged in the CFSR PIP development and monitoring process, to ensure ongoing opportunities for feedback. Parents and stakeholder groups routinely provide positive feedback for their role in these activities.
- 7. The Prevention Section maintains 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.
 - a. The DFCS PAC Staff Liaison conducts one-on-one “check-in” phone calls with each of the PAC members to create opportunities for feedback, and discuss requests for additional support or suggestions for improving the GA PAC.

Implementation Supports and Evaluation

The Prevention Section obtained feedback through evaluations developed by the National Alliance of Children’s Trust Funds. At the end of in person meetings, the GA PAC members complete the evaluations on the meeting and their activities. The Alliance, as an independent entity, collects, analyzes, and provides PCS staff with the data from the evaluations.

The Prevention Section schedules one meeting session each year dedicated to receiving feedback from the GA PAC on how they think things are going, successes, challenges and areas needing improvement. The PAC 2024 feedback was reviewed and many of the recommendations were incorporated into the development of the Child and Family Services Plan (CFSP).

Objective 2: Target 0-5 Early Childhood Education

The Division identified several action steps to improve early education for youth age 0-5, by increasing the number of children who were enrolled in Early Head Start, Head Start, Pre-Kindergarten, or other quality rated childcare programs. The Division supported this objective by enhancing the knowledge of case managers and supporting them in making decisions regarding the best available early childhood setting.

Progress was expected across two key measures, including increasing the percent of children ages 0-5 who are in an early childhood education setting from 64% to 75% by 2024, and improving CFSR Well-Being Outcome 2 to 60%.

While the target benchmark of 60% on CFSR Well-Being Outcome 2 was not met during the CFSP reporting period, [the state reached 56% on 2024 QA case reviews](#) and the percent of children ages 0-5 enrolled in an early childhood education setting increased to 80% for the duration of the reporting period. Factors affecting the accomplishment of goals and objectives were related to resource challenges resulting from staff turnover throughout the Division.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. The Division created Childcare Reference Guides in place of the toolkit to address the immediate needs of the frontline staff. The Reference Guides address early education needs of all children with DFCS involvement, as well as enrichment needs and supervision guidance.
2. The Early Childhood Collaboration advisory workgroup quarterly meeting convenings were delayed to May 2022 due to the Covid-19 pandemic. This workgroup now meets bi-annually to discuss new policies and practices that impact children in foster care age 0-5, and to ensure CFSP, CFSR, and other federal-level goals and objectives for early learning and childcare services are incorporated into the state's planning.
3. The Early Childhood Collaboration Unit (ECCU) holds monthly management meetings with DFCS leadership and field operations staff before implementing new initiatives to solicit their input and feedback on how the changes may impact their work.
4. The Division provided quarterly training on early childcare and education to case managers, supervisors, and foster parents.
 - a. Trainings were provided on Impact of Trauma, Brain Development, Evolving Landscape of Early Childhood, Childcare Support for Children in Foster Care, Serving Young Children in Foster Care, and Available DFCS Childcare Support Services. The Division collaborated with the Multi-agency Alliance for Children (MAAC) to provide training on supporting expectant and parenting youth in care.
 - b. Trainings are evaluated via surveys provided to participants. Surveys are disseminated following each training session. The survey question topics included respondent demographic information, satisfaction of virtual training format, previous training related to early childhood education supports, helpfulness of training, most informative topic, application to future work, and areas of interest for future trainings. The results are used to improve subsequent training courses by modifying content to include topics requested by staff recommendations. Based on the overall participant feedback, 90% of participants found the training platform used, the topic, and information provided to be helpful.

Implementation Supports and Collaboration

The Prevention and Community Support (PCS) Section coordinated with DECAL, DBHDD, and the [Georgia Early Education Alliance for Ready Students \(GEEARS\)](#) in the development of the [Georgia Association for Infant Mental Health \(GA-AIMH\)](#). The AIMH supports a range of early childhood professionals who address the social, emotional and developmental needs of young children and their families.

Objective 3: (PIP → CFSP) Train and market available youth services to supervisors and frontline staff.

The Division implemented several activities during the CFSP reporting period to train and market available youth services to supervisors and frontline staff. The CFSP benchmark set a target to partner with providers and stakeholders to deliver joint training experiences and enhance the training experience of the Learning Management System (LMS) with support from the DHS office of Communications. Progress towards this objective was measured by increased staff understanding of appropriate and timely health screening, although no initial metrics are available for comparison purposes.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. The Wellness Programming, Assessment, and Consultation (WPAC) Unit sponsored quarterly training sessions for staff, foster parents, and placement providers on child health and wellness topics including ADHD and Mood Disorder, Children's oral Health, Children 1st (a DPH service), Psychotropic Medications, Chafee ILP, Understanding Trauma, Early and Periodic Screening, Diagnostic and Treatment (EPSDT), and Behavioral Health Services.
 - a. Feedback survey responses were minimal, but respondents felt the training was helpful and improved their knowledge.
2. WPAC participated in Café 212, a monthly statewide forum designed to provide information, data, and resources for staff on a variety of topics. The WPAC presentation on Café 212 highlighted available services and supports for youth and staff.
3. WPAC developed a Medicaid Navigation guide targeted to former foster youth and youth preparing to exit care on how to maintain Medicaid eligibility, to prevent any lapse in coverage.

- a. A companion document was also developed and distributed to community partners, service providers, and staff to provide guidance on how to ensure youth maintained their Medicaid eligibility. Medicaid eligibility criteria were published on the GA-RYSE website; youth are encouraged to access Georgia Gateway directly through the GA-RYSE site.
4. WPAC partnered with mobile health clinics to establish temporary services in county DFCS offices to ensure youth have access to care when needed.
5. WPAC partners with Amerigroup and the Department of Public Health to collect health service utilization data for youth in care. WPAC provides these data reports to each region to assist them in addressing service gaps for youth in care.
 - a. 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.
 - b. 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.
 - c. 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.
 - d. Children 1st Monthly Report: includes a list of children that were referred to Children 1st from DFCS for developmental assessments, as well as the status of those referrals (both CPS & Foster Care referrals).

Implementation Supports and Collaboration

WPAC continues to meet quarterly with the Department of Public Health (DPH) and bi-monthly with the Department of Community Health (DCH) and Amerigroup to address barriers to services for youth in care. Additionally, DCH and Amerigroup have partnered with the Division to develop a Trauma Assessment protocol for youth in care.

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

The Division implemented several action steps to support this objective, including holding at least one service provider stakeholder meeting per quarter in each region, tracking and monitoring service quality and gaps, and reviewing quarterly regional reports to assess service array and service improvement objectives.

The CFSP set a benchmark for the state to hold at least one service array stakeholder meeting within each region four times each year, resulting in 55+ stakeholder meetings annually. The CFSP also set a target benchmark of 40% on CFSR Item 12. Regional stakeholder meetings were held quarterly in each region throughout the CFSP reporting period, but the benchmark of 40% on CFSR Item 12 was not met; however, the [state reached 12% in 2024 QA case reviews](#). Factors affecting the accomplishment of this objective were related to lack of timeliness of service initiation and lack of engagement from staff with parents, children, and collateral contact service providers.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. Regional C3 Coordinators convened quarterly stakeholder meetings with service providers operating in the region, including child placing agencies, school boards, law enforcement, mental health and substance abuse providers, state agency partners (DBHDD, DPH, DJJ), and others. Stakeholder meetings also address policy, practices, processes, and other issues/concerns.
 - a. Many stakeholder meetings were held virtually due to continued COVID concerns but several were held in-person after restrictions were lifted. These meetings were developed to discuss identified service needs and gaps, CFSR performance data, and ongoing partnerships.
 - b. Staff have reported that the service array meetings have been helpful in creating a platform for them to share information and strengthen their partnership with community providers. Post-meeting surveys are used to obtain feedback from attendees and assist in planning future service array meetings.
2. Service array stakeholder meetings are monitored with quarterly reports submitted by C3 Coordinators to their regional leadership and the Federal Plans Unit that include descriptions of service array meeting agendas, discussions, and meeting outcomes.
 - a. 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 collaborate to create the meeting agendas around desired goals and practice improvements for their region.
 - b. Discussion topics have addressed 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 mental health and substance abuse services.
3. Feedback is regularly received from service providers in the region who attend the stakeholder meetings. Providers also 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.

- a. New service providers attend these stakeholder meetings to introduce themselves to staff and other providers, and the C3s can 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.
4. C3 Coordinators participate in the regional CQI team to develop Quality Improvement Plans (QIP) and related strategies.
 - a. CQI teams complete monthly random case reviews to determine if the strategies are being used in the region and used with fidelity.
 - b. Regional CQI teams develop their own mechanism in measuring the progress of a strategy. In most cases, QA case reviews provide indicators that identify if the strategy is working as intended, or if modifications are needed.
 - c. Regional CQI teams also analyze their CFSR data and performance to develop or enhance the strategies to improve outcomes.

Implementation Support and Collaboration

Training and technical assistance is provided by the district and regional leadership, Quality Assurance Unit, CQI program managers, and the Federal Plans Unit.

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

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

The Division implemented several action steps throughout the CFSP reporting period to leverage communities for increased service capacity, including establishing State of Hope sites to build local safety nets for families, establishing a plan for ongoing civic organization engagement, and hosting agency leadership roadshows to engage directly with stakeholder groups.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. State of Hope (SoH) was initiated in 2017. In 2024, the Division surpassed the target of 204 partner sites and is providing support to over 450 programs.
 - a. The SoH sites are non-profit organizations, philanthropies, government organizations, businesses, and community providers to create a safety net system

of care that prevents conditions that lead to child maltreatment and out-of-home placement. These program sites also receive training and technical assistance from the Division's Office of Community Partnerships through regular webinars, "Big Idea" workshops that focus on Program Evaluation, Storytelling, Grant writing, and Fundraising, networking events, and a web-based portal of resources and supports.

- b. Many of the first-year sites continue to participate in the SoH ecosystem. While not all SoH sites were awarded funding for their programs, all are a part of the SoH ecosystem, and are able to access the portal and attend experiential learning events. Sites are supported through a mix of federal and state funding sources. Several unfunded SoH sites have been able to leverage their SoH involvement into grant awards from other sources.
 - c. The Division has recruited several SoH sites to participate in other projects that provide early support services to families to prevent the need for out-of-home placements.
2. The Department of Human Services (DHS) partnered with the Devereux Advanced Behavioral Health Georgia and other community partners to open Grace's Place in January 2024, a commercial sexual exploitation recovery center for youth. The facility serves up to 24 youth age 12-17, for up to six months, and provides individualized services including case management, treatment planning, housing and transitional living options, and therapy.
 3. The Gateway child and adolescent crisis stabilization unit was constructed in Savannah. This center serves youth ages 14 and older and offers certified peer specialists, a clinician, and family therapy.

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

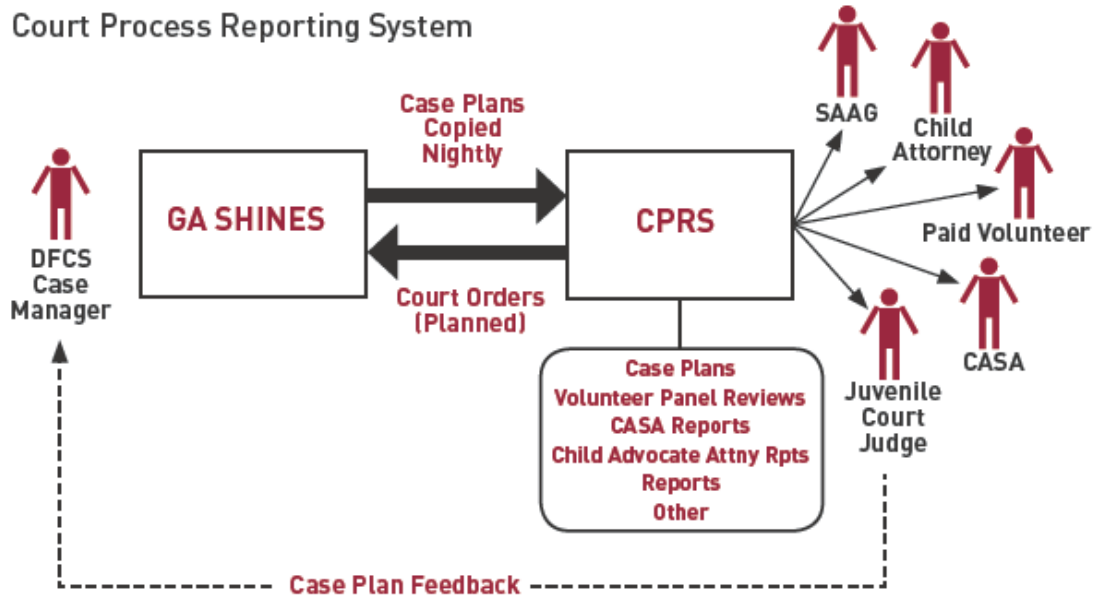
The Division identified several court-related barriers that were impacting permanency for children, including delays in filing petitions, delays in scheduling hearings, court hearing continuances, and poor communication between the Division, attorneys, and judges. The Division collaborated with its court partners to identify several action steps intended to make improvements in these barriers, including full implementation of the second phase of the Multidisciplinary Child Abuse and Neglect Institute, continued utilization of Cold Case Project reviews, continued implementation of the Court Process Reporting System (CPRS), and utilization of title IV-E funds for parent and child attorney representation.

Throughout the CFSP reporting period, the following progress measures were achieved:

1. The state surpassed the target of 75% of the total population of Georgia residents included in the penetration rate for the Multidisciplinary Child Abuse and Neglect Institute (MDCANI) Part 1, by reaching 79%. The target of 55% for MDCANI Part 2 was not met, with the state reaching 45%.
 - a. MDCANI was not delivered in 2020 or 2021 due to the restrictions on in-person gatherings related to the Covid-19 pandemic. Courses resumed in 2022.
 - i. 2022: 8 trainings and 602 participants
 - ii. 2023: 9 trainings and 470 participants
 - b. Throughout the CFSP reporting period, the Division has supported the efforts of the Court Improvement Program (CIP), the Office of the Child Advocate (OCA), and the Children's Justice Act Task Force (CJATF) to provide the MDCANI training sessions statewide. The MDCANI faculty provide in-depth training to DFCS staff, judges, attorneys, CASA/GAL, and other court partners. 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.
2. In 2023, the MDCANI faculty began developing a Part 3 course, which is an immersive, skill-building experience to apply what has been learned in Parts 1 and 2. This course encourages attendees to think critically about all aspects of a dependency case with the goal of strengthening hearing quality and ensuring better outcomes. Several Part 3 courses are scheduled for 2024.
3. Judicial stakeholder meetings are convened in the regions after MDCANI trainings to review compliance with best practices in child welfare cases and continue assessing CFSR performance and outcomes.
 - a. These stakeholders are engaged in substantial, meaningful, and ongoing consultation and collaboration to improve outcomes.
 - b. The C3 Coordinators in each region are encouraged to attend these stakeholder meetings to provide guidance and support for interpreting CFSR data and using CQI to evaluate strategies for improvement.
4. The Cold Case Project maintains five attorney fellows and three non-attorney fellows. The Court Improvement Program is no longer recruiting additional fellows. In 2023, the Cold Case fellows reviewed 206 new cases and conducted 436 follow-up calls on new and existing cases. In CY2023, 97 children who were part of the Cold Case Project achieved permanency.
5. The state continues to meet the target of 100% of Georgia counties utilizing the Court Process Reporting System (CPRS). CPRS has at least one registered user from each of the 159 counties. There were 78,385 total orders uploaded to CPRS in CY2023. Total logins to CPRS include 63,740 by CASA and 32,250 by SAAGs. In CY 2023, there were 177 court calendar users and 171 Superior Court clerk users (using the secure adoption document portal).

- a. Increasing CPRS usage was also a goal of the CIP Strategic Plan in 2020. Through the efforts of the Division, the Administrative Office of the Courts, and the Attorney General's Office, utilization of this portal has become institutionalized for staff and court partners across the state.

Court Process Reporting System



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:

1. **Child Protective Services:** CPS utilizes an Investigation when an Initial Safety Assessment (ISA) indicates a present danger situation, an impending danger safety threat, or the reported maltreatment allegations fall into specific categories requiring the assignment of the report to investigation. During the investigation, families are engaged using DFCS' Practice Model as informed by Solution-Based Casework (SBC). SBC is best thought of as the architecture that holds practice to a consistent focus on safety outcomes. At the heart of SBC is the belief that by building a partnership with the family, a true focus on developing pragmatic solutions to the family's everyday problems can be achieved. Documenting and celebrating the successes of the family are also acknowledged and provide a framework for the family to sustain positive change moving forward. By using the SBC model, the case manager is able to follow a conceptual map for family-centered practice from assessment through case closure.
2. **CPS Intake Communication Center (CICC):** DHS developed a centralized system for receiving reports of abuse and neglect in 2013. The Statewide Child Protective Services Intake Communications Center (CICC) is responsible for receiving reports of abuse for children residing in Georgia. CICC receives reports 24 hours a day, seven days a week, of known or suspected instances of child abuse and neglect, including reports of physical or mental injury, sexual abuse or exploitation or negligent treatment or maltreatment of a child under circumstances that indicate that the child's health or welfare is threatened. For the purposes of child abuse and neglect reports, the term "child" shall mean an individual who has not yet attained 18 years of age, who is not an emancipated minor.
3. **Family Preservation Services:** Family Preservation Services (FPS) is described by the Family Preservation and Support Services Act of 1993 (PL 103-66) as a continuum of family-focused services for at-risk children and families. 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.

4. Prevention and Community Support (PCS): The Prevention and Community Support Section (PCS) works within the Division and in partnership with community-based organizations to reduce child abuse and neglect. Using state and federal funding streams, PCS supports the use of evidence-based and evidence-informed practices and programs to improve outcomes for children and families. PCS also functions as the Children's Trust Fund entity for the state of Georgia.
5. Family Support Services: DFCS has a two-track differential response system to address reports of known or suspected child abuse and neglect, Investigations and Family Support Services (FSS). 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.
6. Caregiver Recruitment and Retention: The Caregiver Recruitment and Retention Unit (CRRU) diligently recruits and retains foster and adoptive parents through ongoing recruitment and retention efforts which include: the development of a statewide coordinated recruitment and retention plan; the development and implementation of regional foster and adoptive parent recruitment and retention plans; the use of child-specific recruitment efforts to assist in the recruitment of foster and adoptive parents; the use of targeted efforts to recruit caregivers who are able to meet the needs of a specific group/category of children (e.g., medically fragile, teens, siblings); the use of targeted efforts to recruit sufficient placement resources in each local school district so children entering care are able to remain in the same school they were attending prior to removal; and the use of regional and state data to communicate the recruitment needs and the results of recruitment and retention efforts.
7. Adoptions: Adoption 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 DFCS. An integral part of adoption services is working with birth parents as they decide whether adoption is in the best interest of the parent and child through a voluntary or non-voluntary Termination of Parental Rights (TPR).

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

The [Georgia Center for Resources and Support \(GCRS\)](#) continues to be available to all adoptive families residing in Georgia, including those who have adopted internationally. The center offers a number of resources and supports, including live and on-demand classes for adoptive and foster parents, therapeutic adoption clinicians, and a lending library of books, articles, and DVD resources for adoptive and foster families. Regional Resource Advisors are available throughout Georgia to assist adoptive families by providing advice, support, and training. 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 tracking mechanisms or data to identify the number of Georgia families have adopted internationally. Families who have adopted internationally are eligible for other contract post-adoption services provided by the Division with a waiver.

Services for Children Under the Age of Five

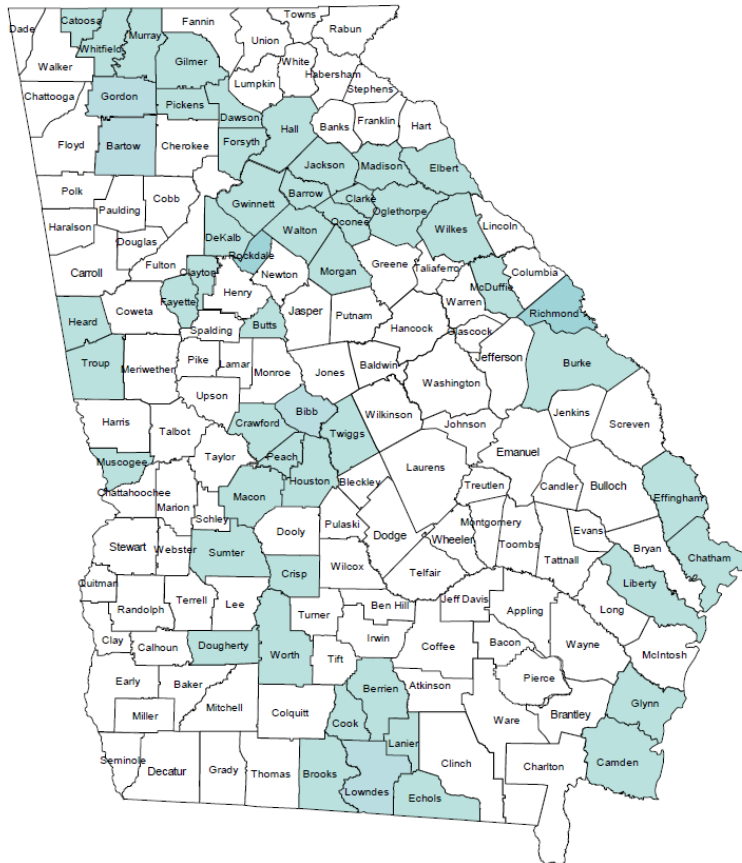
The Division provides funding support through CAPTA, CBCAP, and PSSF to provide evidence-based home visiting programs which serve families with children birth to five years of age. These programs also collaborate with the Department of Public Health (DPH) Home Visiting programs that provides Healthy Families and Parents as Teachers with funding support from the federal Maternal Infant Early Childhood Home Visiting (MIECHV) grant. The curricula provide families who are pregnant and/or parenting with children under the age of five with services and supports that focus on linking pregnant women with prenatal care, promoting strong child/parent attachment, and coaching parents on learning activities that foster the child's development and support the parents' role as their child's first and most important teacher. Home visitors for these programs conduct regular screenings to help parents identify possible health and developmental issues. Each of the home visiting programs is required to conduct Ages and Stages

Questionnaires (ASQ) and monitor the child’s development, making referrals to Babies Can’t Wait when appropriate. 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.

Statewide

Evidence-Based Home Visiting Program Counties Served

As of October 1, 2023



Source: DFCS Prevention and Community Support Section. Sites include the following models: Early Head Start, Home Visiting, Healthy Families America, Nurse Family Partnership, and Parents and Teachers

Babies Can’t Wait (BCW) is Georgia’s early intervention program through DPH 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 collaborates with Georgia's [Children's Medical Services \(CMS\)](#) program to support children with special health care needs.

The Division also funds a screening and referral program called First Steps Georgia. This program, funded with support from CAPTA and CBCAP, offers screenings to pregnant mothers or parents with children birth to five years and links families to appropriate programs/services/resources. The screening tool asks about the family to establish any risk factors, such as history of domestic violence or child welfare involvement, lack of healthcare or insurance, substance misuse or mental health issues. The screener will offer referrals, as appropriate. In the case of parents who need no referrals, they are offered the Find Help Georgia online resource and some information about child development, safe sleep, and other pertinent universal parenting information.

A Plan of Safe Care (POSC) is completed for all infants affected by prenatal substance exposure or fetal alcohol spectrum disorder, even where there is not a specific allegation of maltreatment. The POSC may be completed by the DFCS case manager when there is an allegation of maltreatment that requires an investigation. The POSC may also be completed by the mother's health care provider during the prenatal period or immediately after birth. The Division is expanding funding for providers to accept referrals of substance-affected infants with no maltreatment alleged, for the development and monitoring of the POSC for the infant and family. Descriptions of these providers and their services can be found in the [CAPTA State Grant](#) section of this report.

The DFCS Office of Provider Management (OPM) ensures that placement providers that provide care for foster children under the age of five are meeting the safety, permanency and well-being needs of the children served. Providers are required to report and document the services that are being provided to children; this information is used to calculate performance measures for each provider. OPM also conducts safety reviews, annual comprehensive reviews, and performance-based placement reviews to ensure that providers are meeting their contractual obligations and providing quality services to the children. OPM has also identified the need for more caregivers to support sibling groups, which often includes children under the age of five. OPM is working with CPA providers on their recruitment and retention plans to ensure that they are recruiting caregivers who can meet the needs of this population.

[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 81 critical incident/child fatality reviews in CY2023.

This process involved completing thorough case record reviews and individually debriefing over 300 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. 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.

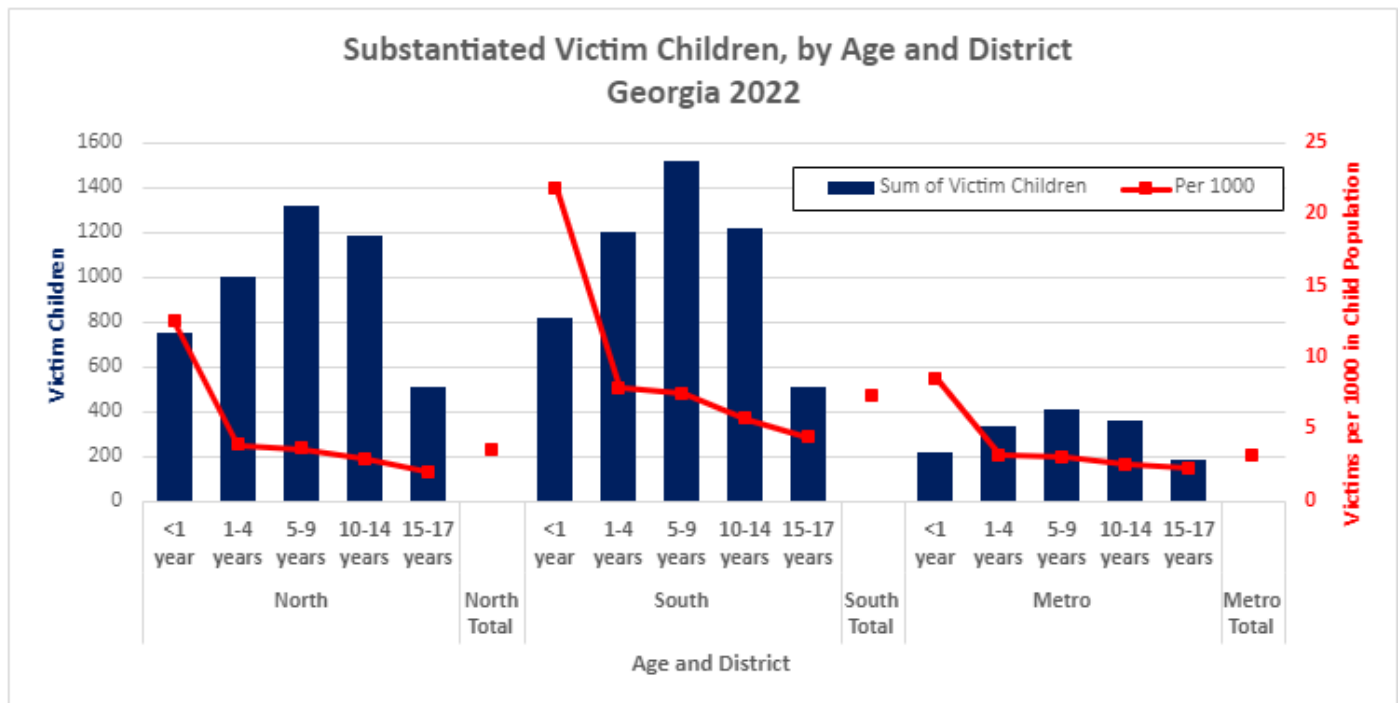
In advocacy of Georgia's families and DFCS direct service professionals, these reviews provide a candid glimpse of the work and how system improvements could foster better supports and help DFCS professionals serve families. The Division is partnering with external child welfare system stakeholders, 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.

The Division also supports the statewide plan to prevent child maltreatment fatalities through the [Child Abuse and Neglect Prevention Plan \(CANPP\)](#). This effort was initiated in 2019 with a convening of child-serving agencies and organizations. Entities were tasked with identifying a representative champion to participate in strategic planning. Over the course of the next year, over 30 meetings were held across the state which included more than 635 individuals representing state and local government leaders, providers of human services, educators, civic and business leaders, parents, caregivers and members of faith-based organizations. Additionally, two surveys soliciting input from providers and parents/caregivers were distributed and completed by nearly 800 Georgians. The surveys and planning sessions yielded six strategic objectives and 50 strategies for preventing child maltreatment and maltreatment-related fatalities in Georgia. A state plan incorporating the input from this diverse group was developed and in mid- 2020 was approved by state leadership. The Georgia Essentials for Childhood Steering Committee has been charged with overseeing the implementation of the CANPP, monitoring progress toward the plan's goals, assisting in the development of regional plans, and reviewing progress toward the plan on an annual basis. In FY23, the Division collaborated with the Department of Early Care and Learning (DECAL), the Department of Behavioral Health and Developmental Disabilities (DBHDD), and the Georgia Early Education Alliance for Ready Students (GEEARS) to promote the inclusion

of infant/early childhood mental health in the [Mental Health Parity Act](#) passed in 2022. The group also completed a crosswalk between the new legislation and the CANPP strategies. This work is ongoing.

Populations at Greatest Risk for Maltreatment

Younger children, particularly those less than 12 months of age, have the highest risk of substantiated maltreatment. The below chart demonstrates the substantiations by the child’s age and district of residence. While the Metro District reports lower overall numbers of substantiations, the South District reports higher rates compared to the North and Metro Districts.



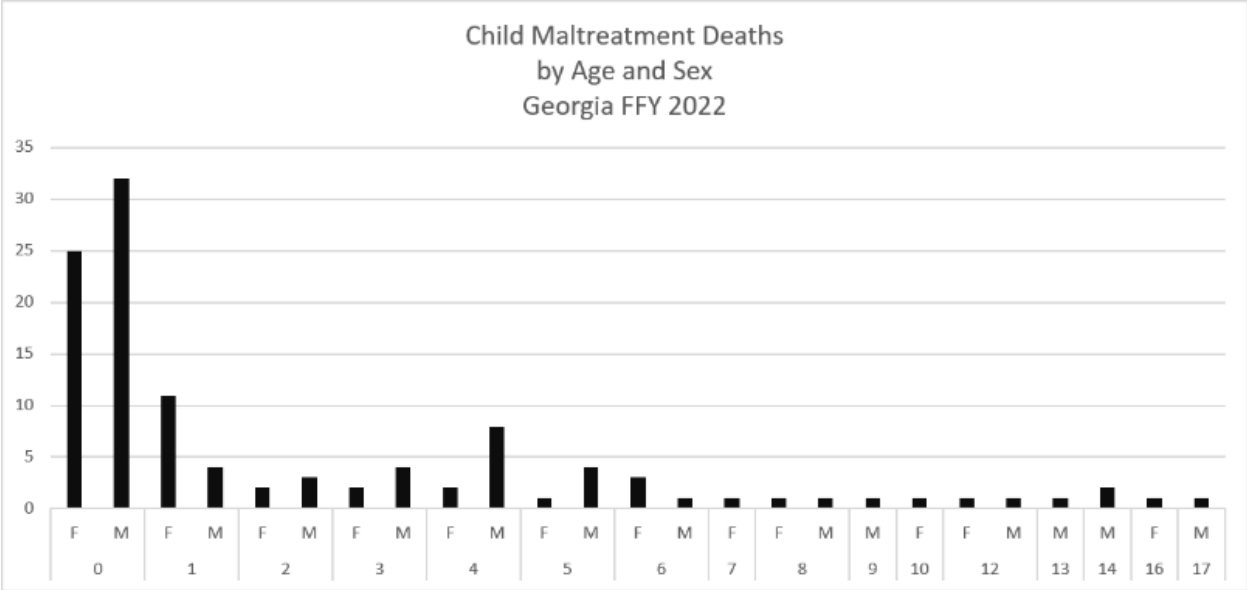
SOURCE: DFCS Data Unit, Georgia SHINES

Females were slightly more likely than males to be substantiated victims of maltreatment. Data from Georgia SHINES reports 5,887 substantiated female victims and 5,611 substantiated male victims in CY2022.

In FFY2022, there were 114 child deaths from maltreatment, and 85% of victim children were age five or younger. Children less than 12 months of age represent the group with the highest risk of maltreatment-related deaths. With an estimated child population in Georgia of 2,518,550, the rate of death from maltreatment is 4.53 per 100,000.

Maltreatment Related Deaths (FFY2022)		
Child's Age at Death	Number of Deaths	Percent
0	57	50.00%
1	15	13.16%
2	5	4.39%
3	6	5.26%
4	10	8.77%
5	5	4.39%
6	4	3.51%
7	1	0.88%
8	2	1.75%
9	1	0.88%
10	1	0.88%
12	2	1.75%
13	1	0.88%
14	2	1.75%
16	1	0.88%
17	1	0.88%
Grand Total	114	100.00%

SOURCE: DFCS Data Unit, Georgia SHINES



Source: DFCS Data Unit, Georgia SHINES

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.

As an example, DFCS' Safety Bridge program partners with the children's hospital liaisons to identify young children referred by physicians for abuse injuries where no maltreater is identified. The Safety Bridge facilitates ongoing consultations with staff and service providers to ensure young children at greatest risk are protected. Cases are monitored weekly for up to six months and aggregate data trends are used to improve local safety planning efforts. PSSF also uses the data to develop the annual needs assessment and better target local services to children at risk of maltreatment-related fatalities. The CANPP was developed using multiple data sources, including DFCS and Kids Count, and continues to be updated locally to reflect observed trends in abuse, neglect, and maltreatment-related fatalities.

[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:

1. Eligibility: State, County or City Governments; other Public Entities, including institutions of higher education;
2. 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.
3. Faith-based and community organizations that meet eligibility requirements are eligible to receive awards. Individuals, sole proprietors, foreign entities and for-profit 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. 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 can be found at pssfnet.com.

PSSF services are determined by an annual community needs assessment and Departmental priorities. The annual Statement of Need solicitation for community-based services in Georgia is designed to reinforce ongoing service and population priorities, support the state's five-year Child & Family Services Plan, and address needs identified in the state's quality assurance reviews and other, annual and ongoing input from staff and stakeholders as solicited through:

- Consultation with Division leadership, unit and program managers
- Consultation with community stakeholders
- DFCS Survey

Feedback from these multiple stakeholder sources on special or under-served populations, under-served communities, specific service needs, and service delivery approaches will be incorporated in the annual Statement of Need, and reflected across 14 different service models (program models), and will be a factor in the decision process regarding funding of programs annually.

Most needed services in the previous 5 years across all program areas were crisis intervention (24/7 support services), therapeutic services (EBM) for both caregivers and children, parent education (EBM), life skills, mentoring, transportation, and childcare.

Most frequent services identified as critical placement prevention strategies included emergency childcare and after school supervision, crisis intervention, in-home behavior management, services for victims of domestic violence and their children, and therapeutic services for caregivers and children.

PSSF is committed to building capacity in its community-based network through opportunities to support personal and professional development by sponsoring specialized training that promotes family engagement and enhances the effectiveness of program services and service delivery, to improve outcomes.

Family support services addressed prevention and risk reduction of child maltreatment by promoting well-being of the entire family. Families were identified as eligible if they were not currently known to DFCS, were screened out, referred for services, or had an unsubstantiated investigation. PSSF grantees addressed home visiting, healthy relationships and co-parenting, prevention and early intervention, and services for

homeless youth. PSSF also provided funding assistance to safety net programs awarded for a State of Hope grant.

Family preservation services addressed the prevention of repeated maltreatment and preserving families. Families were identified by a previous DFCS involvement – family preservation or foster care – or relatives who are caring for children who are not their own. PSSF grantees addressed placement prevention, crisis intervention, post-placement aftercare to support reintegration of children into their communities, and substance abuse treatment/recovery support to prevent relapse.

Family reunification services promoted and sustained permanency for children and their families to prevent repeated maltreatment. Eligible families had children who were removed from their care and were in foster care or another temporary placement. PSSF grantees provided supervised family visitation and parent reunification services to assist caregivers in addressing the behaviors that resulted in the placement of their children into foster care and help prepare for the children’s return to the home.

Adoption promotion and post-permanency support services promoted and sustained permanency and community connections for children and families. Eligible families had children exiting foster or relative care to adoption or guardianship, and youth who were transitioning to adulthood and would not achieve adoption by age 18. PSSF grantees provided adoption promotion services to prevent disruption/dissolution and emancipation services to help youth establish meaningful adult connections.

In response to the Families First Prevention Services Act Caregivers with a Plan of Reunification with Children in Foster, Relative/Kinship, or Voluntary Kinship Care

Parents, already facing many personal challenges, struggle to make progress on the conditions they must satisfy before their children can be returned to the home. Lack of resources and a stable support system often undermines their ability to effectively address the issues that resulted in their children’s removal, prepare for the safe return of their children, and help sustain a stable home post-reunification. In addition to often what is a lack of capacity to understand what is required of them or how to do it, many challenges facing these parents include substance use or mental health issues, lack of basic life skills, unemployment, lack of suitable housing, poor parenting skills, affordable childcare, and access to transportation.

To help address this special population, the FRS/Parent Reunification service model was designed to provide additional supports and services to help parents meet the conditions set forth for the return of their children, prepare for their return, navigate through the transition, and help sustain reunification.

New training modules to be added and incorporated to prevention and awareness training (professional development opportunities for direct program staff will be):

- **Commercial Sexual Exploitation of Children (CSEC) Awareness Training**

Develop an online awareness training specifically for PSSF providers, in the format of a 1-hour online course. Available for all PSSF direct service providers. The goal of the course is to increase program awareness of the CSEC population's specific needs, reduce risk, promote prevention strategies and best practices, and provide relevant resources for follow-up and continuing education.

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:

4. 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
5. 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
6. Foster parents and/or children in foster care to stabilize the placement and prevent disruption
7. Families for whom reunification is the goal, to prepare for and sustain reunification
8. Families whose children have returned home from foster care to prevent repeat maltreatment and sustain permanency.
9. 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 2,850 families and 4,760 children will be served by FFY24 Family Preservation services, amounting to approximately 27% of the total PSSF budget. The rationale 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.

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:

1. Not known to the child welfare agency
2. Who have been the subject of a report of suspected child abuse or neglect who:
3. Were assigned to Family Support
4. Were screened out or were the subject of an unsubstantiated investigation
5. Have prior CPS history (closed but referred for follow-up supports/services)
6. Victims of domestic violence and their children
7. Homeless families and youth
8. Pregnant and parenting teens
9. Under-educated and under employed caregivers and families with few or no social support network

It is estimated that 2,490 families and 5,700 children will be served by FFY24 Family Support services, amounting to approximately 27% of the total PSSF budget. The rationale 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.

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:

1. Families with children in foster care
2. Families with court-ordered or court-supervised relative placement

It is estimated that 4,020 families and 5,840 children will be served by FFY24 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:

1. Foster/adoptive children and youth, *particularly those with special needs.*
2. Foster, pre-adoptive and adoptive parents
3. Relative caregivers

It is estimated that 200 families and 260 children will be served within the PSSF network and another 750 families and 475 children with State contracts by Adoption Promotion and Permanency Support services in FFY24, 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.

[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. Georgia's KN supports are available statewide, however the available resources and access to services vary depending on the family's location. The program serves as a one-stop-shop for information and support and received 4,434 referrals during calendar year 2023. Kinship staff provided over 800 caregivers with information and referral only (I&R) and provided services for over 3,500 grandparents and other relatives who were raising relative children.

Throughout the CFSP reporting period, the Kinship Navigator program served thousands of families with a variety of supports and resources. The COVID-19 pandemic impacted the KN program's ability to host large in-person seminars in 2020 and 2021, but webinars were scheduled to provide education on mental health, meeting children's educational needs, and developing boundaries with biological parents, and drive-through events were held to provide household essentials to over 600 kinship families. Additional visibility efforts included billboard and radio advertisements during kinship care month.

From October 2022 – September 2023, the 1,802 families who entered the program were engaged in 7,847 encounters. These encounters could be provided in person, via emails, phone calls or virtual contacts. During these encounters, Navigators were working to provide information, referrals, and other supportive services to families. Close to 10% of families received only one encounter during the time period, with over fifty percent (55.3%) receiving two (13.8%), three (15.2%), four (15.4%), or five (10.9%) encounters. On average, enrolled caregivers were engaged 3.1 times, with a maximum of twenty-four encounters reported for one caregiver. During any encounter, each support provided is categorized as information, referral, direct service, or other. The vast majority of support provided were categorized as information (98.8%) or referral (63.3%). Direct service was the least frequently provided (5.7%) and usually related to assisting with basic (58.9%) or financial (23.3%) needs. For example, Navigators provided help to caregivers to complete applications for services such as TANF or SNAP, delivered basic needs such as diapers or clothing, or least frequently accompanied caregivers to assist with a specific service.

Throughout the CFSP reporting period, the Kinship Navigator grant was used to develop a mini-grant funding process for support groups and direct services to caregivers. The Kinship Navigator Program provided 48 mini grants from 2020-2024 totaling \$250,000. Also, a fidelity tool was developed to ensure consistent implementation of the program model and enhance Georgia's program for consideration in the title IV-E Prevention Services Clearinghouse.

In September 2020, the Division initiated a full evaluation of the KN program. The evaluation of the KN program focused on documenting program implementation, impact on caregivers and children, and changes in the system of services that may influence service delivery and/or relationships between the Kinship Navigator Program and community, regional, and state agencies. As such, the evaluation design includes both process and outcome evaluation components. Program participant data were collected via GAKinDS, the program database. All kinship staff utilize the GAKinDS database to manage referrals, collect information on families they serve, and track all family interactions and services provided. Families and organizations continue to be referred through the KN portal linked directly to GAKinDS.

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 2023 funds of \$738,977 supported telecommunication services (cell phones and smart phones) for foster care caseworkers. Having access to high-speed internet-capable 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 [Policy 10.18: Purposeful Contacts in Foster Care](#). 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.

Georgia has demonstrated proficiency since 2011 in meeting the federal requirement for monthly caseworker visits to children in care. Since FFY 2015, Georgia has exceeded the requirement that 95% of children in care receive at least one monthly caseworker visit. Georgia has also exceeded the requirement that at least 50% of the total number of monthly visits made by caseworkers to children in foster care must occur in the child's residence.

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).

Adoption Incentive funds supported the work to move children to permanency. The agency has ongoing strategies to promote placement stability for youth who continue to experience disruptions.

1. \$333,000 to staff the Post-Adoption and Guardianship unit, which works with staff, adoptive, and guardianship families who may be in crisis. The goals of the Unit are to enhance the stability and support of post-adoptive/guardianship

families; to reduce the likelihood of discontinuity; and to build well-being and resilience.

2. \$70,000 to provide recruitment and retention training and support to caregivers and ensure children sustain in their homes and communities. Funds were utilized to highlight and celebrate caregivers who went above and beyond to achieve permanency for the youth in our care.
3. \$160,000 to a collaborative effort with the Georgia Appleseed program. This program works directly with the Division to advocate for youth experiencing school suspensions and expulsions. Georgia Appleseed utilizes lawyers with advocacy experience and knowledge of educational requirements.
4. \$190,000 to develop a project with Adoption-Share. The project utilizes technology to match youth free for adoption with caregivers interested in adopting. This was a year-long project that garnered seven adoptions. The Division did not extend a subsequent contract with this provider, but instead chose a different provider to support the development of Child Life Histories. This partnership has dramatically improved the agency's ability to prepare and update Child Life Histories, allowing children to be placed on adoptive status sooner.

The Division is also collaborating with a provider that offers recruitment for children waiting for adoption. This vendor works directly with the family and the children in the home to review the history and ensure all permanency possibilities have been identified. Adoption Recruitment Day and incentive payments for receiving homes will also be supported with Adoption Incentive funds. The Division intends to continue the work with Georgia Appleseed and the vendors who are preparing the Child Life Histories and recruitment work. A technology component is in development that will allow the foster and birth parents the ability to share information via a portal. This work is ongoing.

[Adoption Savings Expenditures](#)

Adoption savings funds are reinvested back into Georgia's Adoption budget. Georgia used the Adoption savings throughout the CFSP reporting period to support the following Pre and Post Adoption services agreements:

Georgia Center for Resources & Support (GCRS)- To maintain operation of the Georgia Center for Foster and Adoption Resources by developing and delivering a comprehensive program for accessing and developing post placement services for foster and adoptive families. Services are available on a statewide basis.

Reunion Registry- 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.

Adoption Services- To recruit, assess, prepare, and train families who will be able to parent children with special needs and to provide the family support services that will assist them in maintaining the placement of these children to the point of finalization and even beyond.

ADOPTS (Addressing the Distress of Post-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.

ATEAM- To provide adopted teens in grades 6-12 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.

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.

Child Life History- Completion of child life histories, which is a critical element in the adoption process. This must be completed in order to secure permanent homes for children in the custody of DHS.

Statewide Child Recruitment Adoption Services- For children waiting for permanent custody, youth waiting in foster care without an identified placement who: are age 9 and older with a goal of adoption, and at the discretion of the state, children who are under age 9 with mental or physical special needs or who are part of a sibling group.

Family Match- Provides To match children in need of an adoptive family with licensed, approved, and waiting families through a database driven system for hopeful adoptive parents that works with Child placement agencies and recruitment organizations.

Photo-listing- To maintain a photo listing website for children waiting for adoption and a toll-free inquiry line.

Wednesday's Child 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.

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.

Family First Prevention Services Transition Grant

Throughout the CFSP reporting period, DFCS has used FFPSA Transition Grant funds for operational costs to support the implementation of the Family First Act by funding salaries for the DFCS Family First Team and the following contracts:

1. 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 (CQI) processes to assure successful implementation of the Family First Act
2. Sam Wolfe Strategies for assistance with Request for Proposal (RFP) development to initiate contracts with providers of the selected Family First prevention services for Georgia
3. Lexicon Strategies, LLC for communication support and strategies to continually inform all parties of pertinent family first updates and developments
4. Carl Vinson Institute of Government at the University of Georgia for ongoing support with fidelity monitoring, data collection and analysis, and continuous quality improvement of the evidenced-based programs

Activity	Expenditures (as of March 1, 2023)
Chapin Hall- Technical Assistance	\$418,973.49
Sam Wolfe Strategies- RFP Development and Support	\$6109.38
Lexicon- Communication Support	\$945,313.22
Carl Vinson- CQI, Fidelity Monitoring, and Data Support	\$217,790.34
DFCS Family First Team	\$657,327.75

During SFY 2024, the Division procured and implemented two of the five evidence-based programs included on the state’s Family First Prevention Plan: Multisystemic Therapy and Functional Family Therapy in Chatham, Cherokee, DeKalb, and Richmond counties. The services are provided to children, youth, and families being served in the Family Preservation program area. This is Phase One of a multi-phased gradual implementation effort. The initial counties were selected based on geographical factors and service needs for the adolescent population. Implementation officially began in November 2023, system

enhancements for Georgia SHINES began in April 2024, and CQI team reviews will provide data updates in June 2024.

During the CQI Central Team meeting in April 2024, members learned more about current family engagement trends within the Family First space shared by providers through a facilitated panel discussion highlighting success and challenges in service delivery. Discussion emphasized the importance of clarity of purpose, and providers shared their perspectives on how real-life examples illustrated therapy's effectiveness in resolving conflicts. Providers also acknowledged family challenges and logistical barriers (e.g., work conflicts) by some families as barriers to service participation.

The transition act funds are available for expenditure through the end of SFY 2025. The remainder of the funds will be used for the DFCS Family First team, contracts with Chapin Hall and Carl Vinson, provider training on the selected evidence-based programs, assistance with crisis stabilization placements for youth in care, and updates to Georgia SHINES to incorporate the case work and invoicing tasks associated with Family First requirements into the system.

The goal is to gradually implement the five Family First prevention services (Multisystemic Therapy, Family Functional Therapy, Brief Strategic Family Therapy, Parents as Teachers, and Healthy Families America) throughout the state which will be available to children, youth, and families being served in family preservation as well as expectant and parenting youth in foster care.

[John H. Chafee Foster Care Program for Successful Transition to Adulthood](#)

Throughout the CFSP reporting period, the Division collaborated with agencies and stakeholders to support youth in their transition to adulthood. Some examples are:

1. 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 have access to the federal Foster Youth to Independence (FYI) Vouchers. DCA uses local housing authority to make the vouchers available to those who need them and are eligible.
2. Atlanta Covenant House Homeless shelter to support employment readiness programs, life skills training, clothing and toiletry items, electronic and technology items, transportation costs, and assistance with acquiring vital documents and cell phones/calling cards.
3. For LGBTQ+ youth across the state, there are multiple services and supports available to assist with counseling, therapies, medical care, and housing. The Division's Chafee Program staff are knowledgeable about resources in each region for LGBTQ+ youth and direct the youth to the appropriate providers for their specific needs. Monthly support groups are hosted by MAAC and All 1 Family; regional staff encourage youth to attend the sessions. For caregivers of LGBTQ+ youth, many regions have a PFLAG

chapter which provides a safe space and education on how to be an ally. Several regions have LGBTQ+ affirming health services, including therapists, counseling, and PreP availability at the local health department. Safe housing options for older youth and young adults are available through Chris 180, the Rainbow Program, and [Lost-n-Found Youth](#), which is a 24/7 resource providing services to LGBTQ+ youth experiencing homelessness.

4. The [Hilton Foundation](#) along with the [United Way of Greater Atlanta](#) are investing over five years to support career development with [CareerReady ATL](#) effort to scale and sustain youth apprenticeship opportunities. Former foster youth are engaged regularly to advise the project and ensure high-demand career pathways are tailored to the specific needs of youth in Georgia. The Division's Cultivating the Rising Experienced Worker (CREW) team works to create placements for summer paid work with some of the partners.

[National Youth in Transition Database \(NYTD\)](#)

Throughout the CFSP reporting period, the Division developed and implemented standards of practice to improve NYTD data entry during the reporting periods. 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 4th month of the review period.

NYTD outcomes data are distributed to the annual Teens R 4 Me conference attendees for their review and awareness. The information is also displayed on large posters throughout the conference for youth and stakeholders to view during the youth portions of the conference. NYTD outcomes data reports are shared with the GPAC youth advisory council and Ubuntu Youth Engagement Collaborative during the annual retreats. Looking at the most recent available NYTD outcomes, the majority of surveyed youth report being connected to a supportive adult (96%). The 2022 report also shows that youth are successfully educated on how to access Medicaid, mental health and medical services. Leveraging these connections to supportive adults is an integral part of the state's plan to address growth areas for young adult outcomes.

The Division's Chafee Program staff are exploring efforts to expand the scope of NYTD data dissemination during the next CFSP reporting period.

[Education and Training Vouchers \(ETV\)](#)

Georgia's ETV program design and delivery remains largely unchanged from prior years. Recent enhancements include:

1. Technology that allows students to determine eligibility and manage their ETV independently.
2. Payments made more efficient through direct deposit to schools.
3. Increase in delivered trainings via MS Teams and Zoom, along with more individualized trainings to students and stakeholders.

Throughout the CFSP reporting period, the Division has continued to identify activities to engage young people who are in the state's care and oversight. Through virtual programming 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 throughout the declared state of emergency.

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. Through this program, Georgia is the first state to have established a Designated Point of Contact (DPOC) for youth experiencing foster care as well as youth experiencing homelessness at every institution within the 53 campuses of the University System of Georgia and the Technical College System of Georgia. Seventeen Georgia campuses have developed campus-based support programs to further serve students and help them stay on track to graduate.

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

TRAINING FOR YOUTH

The GA-RYSE Chafee program encourages the Independent Living Specialists to provide monthly calendars and reminders of the various training sessions and workshops for ILP-eligible youth. Some trainings are held in partnerships with Amerigroup, Georgia State University, and the Multi Agency Alliance for Children (MAAC).

The trainings are often developed and offered following requests or high levels of interest by youth, including Healthy Relationships, Professional Development, Nutrition, Investments, Housing, Voting, Citizenship, Stress Management, Self-Care, Parenting Skills, Transportation and Maintaining an Automobile, and Pride Awareness and other workshops targeted to LGBTQIA+ youth

support students who have experienced foster care. 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.

7/1/2022-6/30/2023: 279 students received ETV support. This includes 88 first time voucher recipients.

7/1/2023-6/30/2024: 233 students received ETV support. This includes 97 first time voucher recipients.

[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 ICWA liaison. The Liaison works closely with the Georgia Tribes, led by Marian McCormick and Royce McCrory (Lower Muscogee Creek), Paul Brannen and Harley McGahee (Cherokee of Georgia Tribal Council), and Glenn Jones and Rhonda Bennet (Georgia Tribe of Eastern Cherokee). Tribal leaders are invited to attend or present at the state APSR joint planning and regional stakeholder meetings. In 2024, the Division scheduled a CFSR stakeholder interview session for the Georgia Tribes to share their experiences receiving services from and partnering with the child welfare agency; due to schedule conflicts, only one tribal leader was able to attend.

The Liaison regularly participates in meetings of the [Georgia Council on American Indian Concerns](#). The Council is chaired by Nealie McCormick, of the Lower Muscogee Creek tribe. The meetings provide a forum for the agency to inform the tribes on available DFCS programs and services to support continued collaboration and participation. Meetings are scheduled monthly via Zoom or in-person at various locations around the state. Throughout the CFSP reporting period, the Liaison attended the Council meetings, facilitated presentations to the Council members on DFCS programs and services, and shared draft child welfare policy with tribal leaders to gather their input.

In 2023, the Court Improvement Program identified a Child Welfare Law Specialist (CWLS) attorney to serve as an ICWA Liaison for the courts, and to partner with the DFCS Liaison to improve awareness of ICWA among case managers, judges, and attorneys. The Liaisons attend state and national meetings that advance tribal interests and increase awareness of ICWA, including the National Indian Child Welfare Association meeting for state ICWA representatives. This work is ongoing.

ICWA

Georgia has no federally recognized tribes, but efforts to comply with ICWA are ongoing.

Training - The agency continues to require annual ICWA training for all child welfare staff. The training addresses topics like establishing a child's eligibility, notification of the tribe, active efforts to prevent breakup of the Indian family, and expert witnesses. The training includes knowledge checks throughout and requires a passing score on a final to ensure comprehension. The Division is supporting CIP to develop ICWA training for attorneys and judges.

Compliance - The Liaison continues to monitor Georgia's ICWA compliance through semiannual regional reports and Georgia SHINES data reports.

Technical Assistance - The Liaison continues to provide technical assistance on a case-by-case basis to DFCS staff.

Data

Case managers ask each family during initial interviews if they are of Native American heritage. If responses to those questions indicate that the child could be a member or eligible for membership in a federally recognized tribe, they begin efforts to determine eligibility. The Data Unit provides regular updates to the Liaison on the number of children identified as eligible for membership in a federally recognized tribe, and how the requirements of ICWA were met for each case.

CFSP/APSR Exchange

All tribal leaders are invited to present or attend Georgia's annual APSR Joint Planning meetings. Tribal leaders are invited and encouraged to participate in monitoring of the CFSP and the development of the APSR each year. 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:

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In FY24, 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 activities that support the identified objectives of the state's CAPTA Plan. Several objectives of the CAPTA Plan also align with Georgia's CFSP goals and the CFSR Systemic Factors.

In 2023, administrative support to the panels is provided by DFCS, with assistance from the Fanning Institute at the University of Georgia. The annual citizens review panel report, as well as the Division's written responses to the panel recommendations, are attached in the Appendix.

In 2024, Georgia initiated the transition to remove the "dual role" status of the Child Fatality Review (CFR) Panel and the Children's Justice Act (CJA) Task Force, to dissolve the Child Protective Services (CPS) Advisory Committee, and to establish regional citizen review panels within three child welfare service districts of the state – North, Metro, and South. The regional panels are representative of the communities that are directly served by the child welfare system. The regional panels include individuals with lived experience or professional expertise in the prevention and treatment of child abuse and neglect and have interest in making improvements to the child welfare system in Georgia. After June 2024, the CFR Panel and the CJA Task Force will continue to function in their primary role and provide their expertise to improve the state's child welfare system, albeit no longer as CAPTA Panels.

Georgia DFCS (DFCS) engaged the JW Fanning Institute for Leadership Development (Fanning) to support in the transition to District aligned citizen review panels. Three phases of work were included in this plan: to review/assess previous panel structure; plan and identify structure for regional panels and support initial rollout of regional

panels. Fanning has a long history of partnership with DFCS as well as connections in the child welfare field in Georgia which made this partnership a natural fit.

In phase 1, Fanning supported DFCS with planning and review of the existing structure of the CRPs. This work included gathering document review, analyzing current panel structure and membership, and rosters. Fanning staff met with each of the panels, along with the DFCS staff, to hear final recommendations from each of the CRPs. In phase 2, Fanning supported DFCS in the development of a transition plan for membership of the CRPs. Primary activities included identifying structure for the district aligned CRPs, developing a comprehensive recruitment plan, including the development of the application software and reference software processes as well as supporting the promotion of the opportunity across the state.

Once the recruitment process was finalized and the application tool was developed using Qualtrics, a soft deadline was established for prospective applicants to complete the application after which Fanning organized the application data for review. Members of the prior panels were recruited to review membership applications through a blind review process; DFCS was not included in the scoring. An initial threshold of five applicants for the north, metro and south regions were offered positions and were also offered the opportunity to travel to San Diego for the National CRP Conference. Two members of the fourth panel, the youth advisory panel, also traveled to the conference. Fanning supported the travel logistics and reimbursement for panel members for travel to the conference.

Following the conference, additional applicants were offered membership to the panels using the blind scoring results. Fanning and DFCS are currently planning District orientation meetings for each of the newly formed panels and the all-panel retreat scheduled for August 2024. The orientation process will address requirements of the panel members, including that panels are charged with assessing the child welfare system in the regions and at the state level, and that the panels will meet at least quarterly and work together to develop an annual report that makes recommendations to improve the child welfare system in their communities and for the entire state. CAPTA funds are available to support panel member attendance at the national conference, the quarterly panel meetings, and the annual retreat.

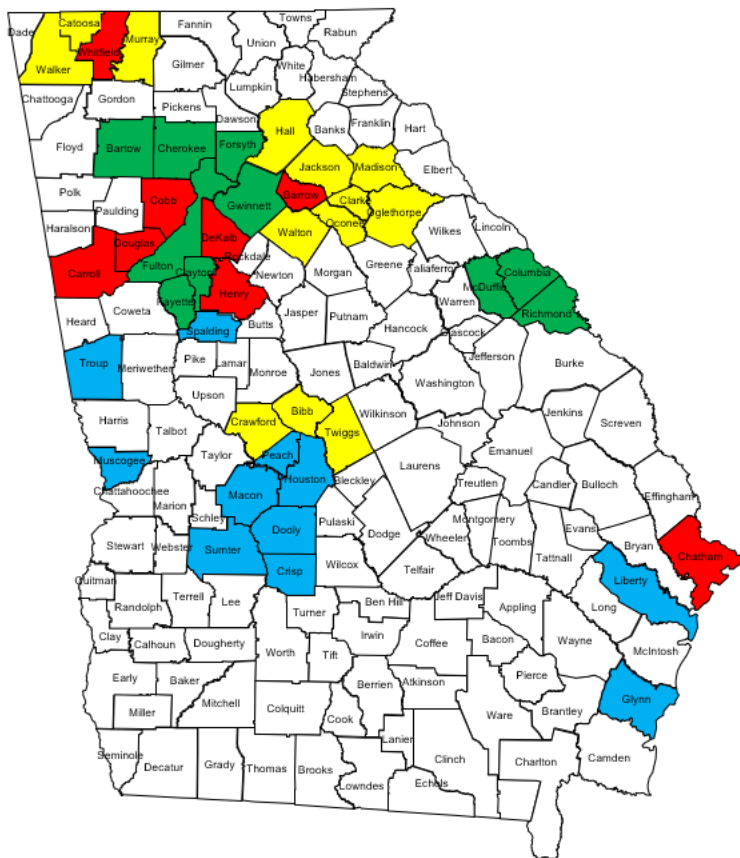
Infants Affected by Substance Use/Abuse

Throughout the CFSP reporting period, Georgia's CAPTA State Grant supported the development, implementation, and monitoring of plans of safe care (POSC) for substance-affected infants by providing funding and technical support to the Department of Public Health, Mary Hall Freedom Village, Carroll County Family Treatment Court,

Family Connection Partnership, BrightPaths, Wellroot, Recovery Place, Communities on Schools of Catoosa County, Hope House, and several other community providers, including 19 First Steps sites across the state, and three Family Resource Centers. These partnerships aim to expand community-based support, substance abuse recovery and treatment, and home visiting services that provide ongoing monitoring of POSC for infants and their families referred from DFCS. These programs are encouraged to connect with their local First Steps, Community Service Boards, substance abuse treatment providers, and other resources for supports and collaboration.

The notification pathway for POSC referrals in a jurisdiction with a contracted provider relies on the DFCS Recovery Specialist routing the intake information directly to the provider within three business days of receipt of the intake report, and the provider has 24 hours to confirm receipt of the referrals, three business days to make initial contact with the family, and 60 days to develop the POSC with the family. In jurisdictions where a contracted provider is not available, the county DFCS staff continue to respond to these referrals with POSC development, service referrals and monitoring. CAPTA funded POSC partners must also adhere to [Child Welfare Policy 19.27: Plans of Safe Care for Infants Prenatally Exposed to Substances](#).

Georgia Division of Family & Children Services Plan of Safe Care Partnerships



Partner	Color
DPH / 1 st Care	
Home Visitation / Parenting	
Substance Treatment Center	
*Multiple Partnerships	

Source: DFCS Recovery Specialist; Data as of August 2023

In FY24, the Division released a funding opportunity announcement requesting applications from community providers to support POSC development and monitoring. Sixteen applications were received, and seven were recommended for funding.

CAPTA State Grant

The Division supported the following projects in FY24 with CAPTA State Grant funds and supplemental CAPTA funding from the American Rescue Plan Act. Georgia engaged with the Division’s Safety and Permanency program staff, PSSF and CBCAP program staff, families in recovery, hospital and healthcare providers, Department of Public Health staff, family treatment court programs, health policy partners with Georgia State University, and other stakeholders to plan for the use of CAPTA funds in the community. Discussions addressed how other funding sources were targeting children and families with identified needs, and which services were most needed in underserved and marginalized communities.

The state has not experienced any barriers or challenges in accessing or utilizing the supplemental CAPTA funds. All CAPTA ARPA funds have been encumbered as of October 1, 2023. Funds will be fully liquidated by September 30, 2024. ARPA funds have supported expanding services for Plan of Safe Care providers and enhancing community capacity through social-emotional learning to students in Georgia schools, housing supports for families in metro Atlanta, and basic safety net services through multiple community partners across the state.

Activity	CAPTA Priority	General CAPTA	ARPA CAPTA
Child Welfare Summit	Training and Workforce Development (Area 6, 7, 13)	\$40,000	x
Multi-Disciplinary Child Abuse and Neglect Institute (MDCANI) Training	Workforce Development (Area 7)	\$150,000	x
Mandated Reporter Training	Workforce Development (Area 7)	\$47,386	x
Mary Hall Freedom Village	Plans of Safe Care (Area 7, 10, 13)	\$100,000	\$100,000
Carroll County Juvenile Court	Plans of Safe Care (Area 7, 10, 13)	\$49,984	\$149,952
Family Connection Partnership	Plans of Safe Care (Area 7, 10, 13)	\$65,258	\$65,257
University of Georgia	CAPTA Administrative Support	\$124,664	x
Sources of Strength	Community Capacity and Interagency Collaboration (Area 11, 12, 13)	x	\$288,000
Accenture AVenues virtual reality renewal	Workforce Development (Area 7)	\$168,000	x

Project Community Connections, Inc.	Interagency Collaboration for housing (Area 13)	x	\$586,088
Department of Behavioral Health and Developmental Disabilities	Interagency Collaboration and Plans of Safe Care (Area 7, 10, 13)	\$258,060	x
First Steps Georgia / Home Visiting Programs	Plans of Safe Care (Area 7, 10, 13)	\$800,000	x
Click Safe mobile emergency response tool	Workforce Development (Area 7)	\$383,940	x
State of Hope Community Partnerships	Enhancing Community Capacity and Interagency Collaboration (Area 11, 12, 13)	x	\$345,000
Youth Villages	Enhancing Community Capacity and Interagency Collaboration (Area 11, 12, 13)	x	\$500,000
Department of Public Health	Interagency Collaboration and Plans of Safe Care (Area 7, 10, 13)	\$986,442	\$400,000
Unite Us	Enhancing Community Capacity and Interagency Collaboration (Area 11, 12, 13)	x	\$1,500,000

The CAPTA State Grant supported scholarships for staff to attend the Child Welfare Summit, which provides training on child abuse and neglect. This is a 2.5-day, multidisciplinary conference also funded in part by the Court Improvement Program and 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 2023, 636 professionals attended the Summit; of those, over 100 DFCS staff were supported by a CAPTA scholarship. This training also supports the CAPTA requirement to improve legal preparations and representation (section 106(a)(2)(B)(ii)).

The CAPTA State Grant supported the Office of the Child Advocate in delivering ten MDCANI trainings. MDCANI is an intensive, two-day training covering every aspect of a dependency case, including reasonable efforts to prevent removal. MDCANI training materials 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-removal needs) and other topics the faculty deem appropriate for the specific jurisdiction receiving training. Attendees to MDCANI include DFCS staff, law enforcement, legal and judicial partners, CASA, and attorneys. In 2023, nine trainings were delivered drawing 470 attendees for MDCANI Part 1 (The First 75 Days) and Part 2 (Focus on Permanency).

The CAPTA State Grant supported the [Mandated Reporter training](#) developed by Care Solutions and promoted on the DFCS website. In 2023, 49,248 participants enrolled in the mandated reporter training and 40,568 certificates of completion were earned. Most trained participants were educators, but other child-serving professional disciplines were also represented.

The CAPTA State Grant supported Georgia's [Family Connection Partnership](#) in delivering the Family and Infant Neurodevelopmental Education (FINE)/ Social Emotional Engagement – Knowledge and Skills (SEE-KS) Training at Memorial Hospital in Savannah and Hamilton Medical Center in Dalton. The FINE/SEE-KS program is an educational pathway in infant and family-centered developmental care for all healthcare professionals working in neonatal care. The overall goal is to improve the outcomes in neonatal care and train NICU staff to develop POSC for families with a substance-exposed newborn. To date, no POSC have been developed by hospital staff due to staffing shortages.

The CAPTA State Grant supported a contract for Accenture's [AVEnues](#) virtual reality experience which is used for recruitment and new case manager training. The virtual reality (VR) training experience supports caseworkers in their decision making during a scenario of an initial virtual home visit. Wearing VR goggles, the user takes up the caseworker role, hears a report that a child is being mistreated and visits her at home. In that virtual home, the user practices observing, asking questions of each family member, and then interpreting their behavior. At the end of the experience, the user makes a critical decision to find if the home is safe enough for the child, or the child should be removed from his/her family.

The CAPTA State Grant supported a program with Youth Villages to provide family preservation and in-home support services to 36 families in regions 13 and 14. The Intercept program aims to prevent foster care placement and provide post-reunification stabilization services.

The CAPTA State Grant supported a partnership with [Project Community Connections](#) to develop a program for families experiencing homelessness in the greater Atlanta area. Limited transportation and childcare options, no access to a phone or the internet, language barriers, and an inability to take time away from work are just a few of the obstacles facing families. This partnership aims to address those challenges by providing immediate, situational, and culturally relevant assistance to get 50 families into safe, affordable housing in one year and avoid family separation.

The CAPTA State Grant supported the Department of Behavioral Health and Developmental Disabilities (DBHDD) to partner with community organizations that will support the development and monitoring of Plans of Safe Care (POSC) for infants affected by prenatal substance use, and to address the health and substance use disorder treatment needs of the affected family or caregivers. Establishing linkages to the

substance abuse provider community and peer recovery coaches are examples of the deliverables included in the project. In FY24, DBHDD received CAPTA funds to support Recovery Place and Hope House.

The CAPTA State grant supported the First Steps program. First Steps is coordinated by the Prevention and Community Support Section (PCS) and Georgia's Maternal, Infant, and Early Childhood Home Visiting (MIECHV) grantee (the Department of Public Health). [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. Four sites were recommended for funding in FY24, to serve 1,050 families with the First Steps program and 175 families with Home Visiting. The program staff develop and monitor Plans of Safe Care for prenatally exposed infants who are referred from the local DFCS office. Caregivers are also encouraged to voluntarily enroll with the home visiting program to receive ongoing services and supports for their family. Training and technical assistance is provided by the University of Georgia.

The CAPTA State Grant provides ongoing support to 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](#) is a unique safety app that 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 can 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.

The CAPTA ARPA Grant continued supporting community partnerships by providing funding for the [State of Hope \(SoH\)](#) program, which aims to build local safety nets that improve family self-sufficiency and reduce the incidence of child maltreatment. SoH also receives funding from the PSSF grant. Applicants are eligible to receive CAPTA funding if they meet the Priority Areas as identified in Georgia's CAPTA State Plan. In FY24, CAPTA-funded SoH awardees included youthSpark, a program serving vulnerable justice-involved youth at risk of trafficking or homelessness, and Community Helping Place, providing assessments and referrals to over 30 families for services to stabilize the families and prevent children from entering foster care.

In FY24, the Division continued the Memorandum of Agreement with the Department of Public Health (DPH) to support POSC using the CAPTA State Grant and the ARPA Grant. DPH trained its First Care nursing staff to receive DFCS referrals of prenatally exposed

infants in selected counties, to contact the families for POSC development, and to enroll the families in ongoing monitoring and home visits. These visits ensure the infants and their families are healthy and connected to any needed services in the community.

The Division initiated a partnership in FY24 with Unite Us to develop a closed loop referral platform that provides outreach and screening to identify and address social needs for children, particularly those in the CHINS, Family Preservation, and Family Support program areas. Future support will be provided with a mix of federal and state funds.

FY25 Plans

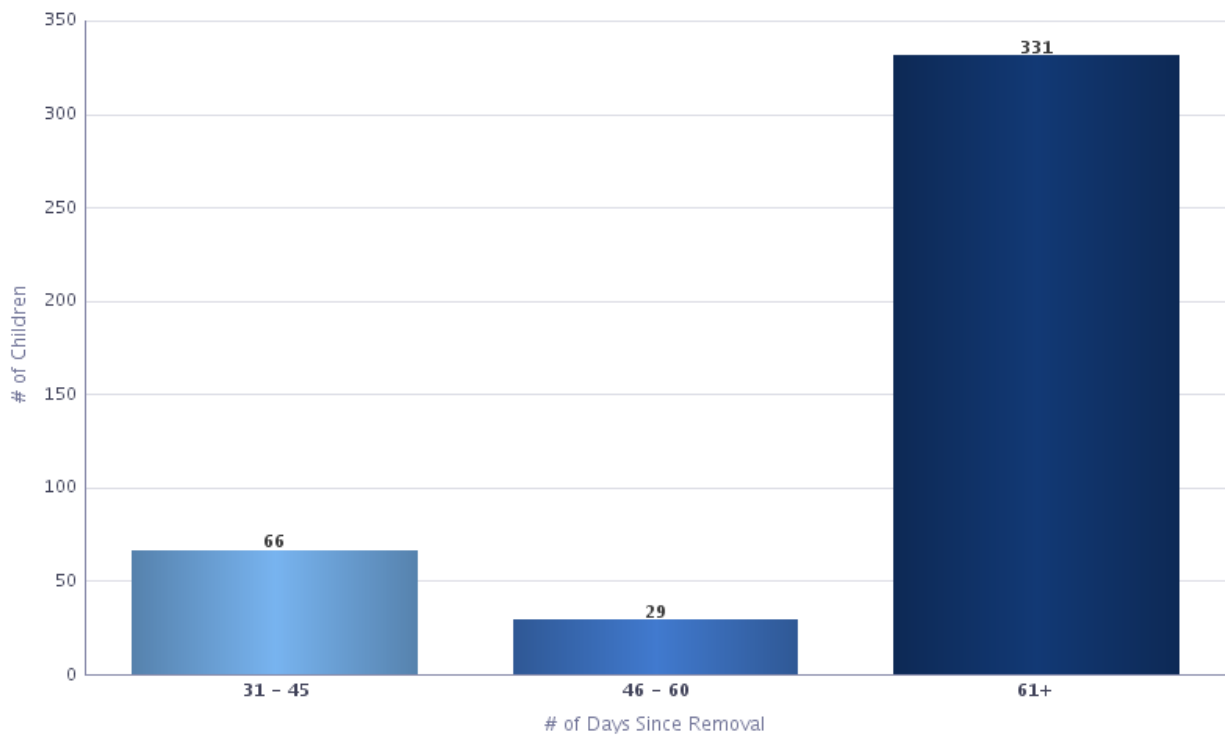
The Division is working with the state’s CAPTA Panels and other stakeholders to explore additional opportunities in FY25 that leverage the CAPTA State Grant and expand community collaborations. In addition to continuing support for workforce development initiatives and POSC partnerships, the Division is exploring opportunities to expand prevention and early intervention services to prevent maltreatment and subsequent out-of-home placements. Recommendations from the youth advisory board – now also serving as a CAPTA citizen review panel – and the Parent Advisory Council include equity for youth with intersecting identities (youth of color, identify as LGBTQ2IA, expectant and parenting, and/or low socio-economic status), engaging families in their case plan development, and supporting families with services in the communities. The Division will explore opportunities to direct CAPTA funding to these types of programs.

Legal Representation

Data reported from Georgia SHINES shows that 95.7% of children in foster care over 30 days (10,067) as of April 17, 2024, had legal representation. This report excludes children with legal status as “temporary voluntary” or “Short term emergency care”.

Children in Care over 30 Days without Representation (4/17/2024)

# of Children Under 18 In Custody Over 30 Days:	10,067
# of Children In Care Over 30 Days Without Representation:	426
% of Children In Care Over 30 Days With Representation:	95.77%



Source: Georgia SHINES, LENSES report

To increase awareness and improve data quality, a Permanency Unit team member coordinates with each region and provides support for staff. The Georgia SHINES Job Aid is shared to remind staff on the procedures to input representation data into the case.

Section G: Statistical and Supporting Information

Update on Targeted Plans

DFCS Disaster Plan

No changes were made to the 2020-2024 DFCS Disaster Plan. Several tornadoes and Hurricane Idalia affected Georgia during FY23.

January Tornadoes

- Red Cross provided aid to 431 families and 1,057 individuals in ten counties. DHS staff assisted with sheltering operations in Spalding, Troup, Henry, and Cook Counties.

March Tornadoes

- Red Cross assisted 135 families and 245 individuals in ten counties. DHS staff assisted with sheltering operations in Bibb, Baldwin, Macon, and Spalding Counties.

August Hurricane Idalia

- Red Cross assisted 247 families and 712 individuals throughout 11 counties. DHS staff assisted with sheltering operations in Camden and Lowndes Counties.

Multiple updates were made to the DFCS Disaster Plan and the following appendices.

- State/Regional/District Contacts.
- Emergency Action Response Notification System
- Pre-Disaster County Assessment Form
- Drills and Exercises
- Civil Rights/Translation/Interpretation/Non-Discrimination
- LEPSI Vendors

As with FY22, the DFCS Disaster Plan was not utilized for COVID-19. Counties did replenish PPE made available to the Department of Human Services through the Department of Public Health Stockpile Warehouse. Items included KN95 masks, disposable face masks, non-latex gloves, face shields, paper gowns, antibacterial cleaning wipes, and COVID-19 Antigen Self Tests.

Health Care Oversight Plan

No changes were made to the 2020-2024 Health Care Oversight Plan. During 2023, there were no physician consultations and medication management staffing were completed. The medical director's role continues to be vacant. WPAC advises DFCS staff to discuss concerns about psychotropic medication with the prescribing physician.

WPAC continues to facilitate escalated medication consent for youth in crisis stabilization. WPAC processed 589 medication consent requests between January - December 2023, and 88% of the medication consent requests were returned to the facility within 24 - 48 hours. WPAC noted that the 88% return rate within 48 hours is a decrease from 95% in 2022. The observed delay was often due to the county needing more time to determine if the medication was appropriate. WPAC staff noted that the county is taking longer to speak with the crisis stabilization unit (CSU) concerning medications. To address this, the county is provided with a CSU contact with each medication consent to discuss concerns.

WPAC continues to send out quarterly psychotropic medication reports to each region to reconcile psychotropic medication list and medication consents in Georgia SHINES. The reports were sent out in March, July, September and December of 2023. The reports contain Medicaid pharmacy claims data, which includes child's name, medication, dosage, providers name, and the date the subscription was filled. Staff continue to consult with the prescribing physician regarding concerns on psychotropic medications for youth in foster care until another process is identified. The escalated medication consent protocol continues to be in place to expedite medication consent for youth in CSUs.

The trauma assessment guidance is still under review.

Juvenile Justice Transfer Data

Georgia SHINES data identified three youth who transferred from DFCS to DJJ custody during 2023. Of these, two were in South District and one was in Metro District.

Education and Training Voucher Data

7/1/2022-6/30/2023: 279 students received ETV support. This includes 88 first time voucher recipients.

7/1/2023-6/30/2024: 233 students received ETV support. This includes 97 first time voucher recipients.

Inter-Country Adoptions

The state did not have any children who were adopted from other countries and who entered into state custody in CY2023 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, 2024.

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).¹

Demographics on Social Services Case Management

Staff Characteristic		Total	Percent
Gender	Female	1553	92%
	Male	142	8%
Race/Ethnicity	Am. Indian	2	0%
	Asian	8	0%
	Black	1061	63%
	Hawaiian/Pac. Isl.	0	0%
	Unknown	33	2%
	Hispanic	58	3%
	White	533	31%
Age Group	<26	186	11%
	26-30	275	16%
	31-35	268	16%
	36-40	220	13%
	41-45	241	14%
	46-50	213	13%
	51-55	144	8%
	56-60	80	5%
	61+	68	4%
A	Not Indicated	157	9%
B	Less Than HS Graduate	0	0%

¹ 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).

Staff Characteristic		Total	Percent
C	HS Graduate or Equivalent	62	4%
D	Some College	13	1%
E	Technical School	2	0%
F	2-Year College Degree	11	1%
G	Bachelor's Level Degree	1127	66%
H	Some Graduate School	2	0%
I	Master's Level Degree	318	19%
J	Doctorate (Academic)	0	0%
K	Doctorate (Professional)	4	0%
M	Specialist in Education	2	0%
Pay Grade			
	G	777	46%
	H	277	16%
	I	214	13%
	J	317	19%
	L	95	6%
	M	15	1%

SOURCE: DFCS Data Unit and DHS Office of Human Resource Management

There were a total of 1,695 Intake and CPS workers who had at least one active case during the 12-month period ending March 31, 2024. 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.

Highlighted Column Shows average load for a Foster Care Caseworker in CY 2023.

REGION	COUNT	AVERAGE	MEDIAN
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1	112	23	23
2	92	23	22
3	90	21	19
4	96	16	16
5	103	21	18
6	58	20	21
7	66	25	24
8	55	22	20
9	42	20	18
10	62	18	17
11	102	27	28
12	70	26	26
13	148	19	18
14	191	14	13
	1273	21	19

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 Code	Job Title	PG	Special Entry Salary	Working Titles
SST010	Social Svcs Tech 1	D	\$ 32,000.00	
SST011	Social Svcs Tech 2	E	\$ 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
			\$ 43,926.79	Master's Degree
SSP071	Social Svcs Spec 2	H	\$ 43,926.79	Bachelor's Degree
			\$ 47,819.47	Master's Degree
SSP072	Social Svcs Spec 3	I	\$ 47,819.47	Bachelor's Degree
			\$ 52,101.41	Master's Degree
SSP073	Social Svcs Spec Spv	J	\$ 52,101.41	Bachelor's Degree
			\$ 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	L	\$ 61,992.72	Lead Field Program Specialist
SSM010	Mgr, Social Svcs - Social Services Administrator - County Director 1 - County Director 2 - Deputy County Director 4	L	\$ 59,166.61	Social Services Administrator
			\$ 61,874.95	County Director 1
			\$ 65,000.00	County Director 2/Dep CD 4
SSM011	Mgr 2, Social Svcs - Social Svcs Program Director - County Director 3	M	\$ 65,000.00	SS Program Director
			\$ 71,158.17	County Director 3
SSM012	Mgr 3, Social Svcs - Deputy County Director 5/6 - County Director 4	N	\$ 75,000.00	Deputy County Director 5/6
			\$ 79,758.74	County Director 4
SSM013	Sr Mgr, Social Svcs - County Director 5 - County Director 6	O	\$ 85,000.00	County Director 5
			\$ 88,000.00	County Director 6
SSM014	Dir, Social Svcs - Regional Director *RD Admin Asst - \$40,000	P	\$ 100,459.43	Regional Director (R1-R12)
			\$ 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 Grade G	Social Services Specialist 2 Grade H	Social Services Specialist 3 Grade I	Social Services Specialist Supervisor Grade J
Bachelor's Degree Special Entry \$40,387.99	Bachelor's Degree Special Entry \$43,926.79 or 10% promotional increase (whichever is higher)	Bachelor's Degree Special Entry \$47,819.47 or 10% promotional increase (whichever is higher)	Bachelor's Degree Special Entry \$52,101.41 or 10% promotional increase (whichever is higher)
Master's Degree Special Entry* \$43,926.79	Master's Degree Special Entry* \$47,819.47 or 10% promotional increase (whichever is higher)	Master's Degree Special Entry* \$52,101.41 or 10% promotional increase (whichever is higher)	Master's Degree Special Entry \$56,811.55 or 10% promotional increase (whichever is higher)
<p>DFCS Qualifications:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Bachelor's degree from an accredited college or university. <p>Notes:</p> <ul style="list-style-type: none"> • All new hires come in as SS Spec 1. • If selectee has a Masters degree in a behavioral science, the special entry salary is \$43,926.79 (10% above SS Spec 1 entry). • SS Spec 1 employees prior to June 1, 2021, are eligible for promotion to SS Spec 2 after 1 year. • SS Spec 1 employees hired June 1, 2021, or after will become eligible for promotion to SS Spec 2 after 2 years. 	<p>DFCS Qualifications:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Two (2) continuous years of experience at lower level Social Svcs Spec 1 with GA DFCS or public child welfare experience from another state <input type="checkbox"/> Successful completion of new worker and all advanced skills trainings <input type="checkbox"/> 3.0 or above on their last Performance Management Review and being in good standing <input type="checkbox"/> No disciplinary action within one (1) year. 	<p>DFCS Qualifications:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 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 <input type="checkbox"/> Successful completion of all Professional Excellence and/or professional development trainings offered by DFCS <input type="checkbox"/> 3.0 or above on their last Performance Management Review and being in good standing <input type="checkbox"/> No disciplinary action within one (1) year 	<p>DFCS Qualifications:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Two (2) years of experience at lower level Social Svcs Spec 2/3 with GA DFCS or public child welfare experience from another state <p>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.</p> <p><i>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.</i></p>

*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.

DFCS Organizational Chart

