

State of Georgia

2020 – 2024

Child and Family Services Plan

2021 Annual Progress and Services Report



Submitted by the
Georgia Division of Family and Children Services
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Attachments

- A. CFS 101s
- B. Child and Family Services Review Summary
- C. Continuous Quality Improvement Trend Analysis
- D. Disaster Plan
- E. Foster and Adoptive Parent Diligent Recruitment Plan
- F. Georgia CAPTA State Plan
- G. Georgia 2019 CAPTA Citizen Review Panels Annual Report
- H. Georgia Division of Family and Children Services Response to 2019 CAPTA Panel Report
- I. Health Care Oversight and Coordination Plan and Protocol
- J. Organization Charts
- K. Quality Assurance Stakeholder Survey Results
- L. State of Hope Round 3 Summary
- M. Training Plan
- N. Training Plan (supplemental guide)
- O. Virtual Roadshow Schedule (Regions 1 and 12)

A. General Information

a. Background

The Georgia Division of Family and Children Services (DFCS) administers programs funded under Title IV-B of the Social Security Act. The Division provides a wide range of human services that

are designed to promote self-sufficiency, independence, safety and well-being for all Georgians, including child welfare services and public assistance programs.

Through two primary functions: Social Services and the Office of Family Independence (OFI), DFCS assists and supports children and families. Social Services includes Child Protective Services (CPS), Foster Care and Adoptions. OFI administers Temporary Assistance to Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Medicaid and other self-sufficiency and family support programs, such as energy assistance. Eligibility for all OFI programs is based upon financial criteria as well as program-specific criteria, such as age or disability.

Georgia's child welfare service delivery system is state-supervised and county-administered. Direct services to children and families are provided through 159 county departments of family and children services (DFCS county offices) in accordance with state policy, direction, law and regulations.

DFCS county offices and state offices transitioned into a new organizational structure July 1, 2015 to increase effectiveness of field operations. Regions were grouped into 14 areas rather than 15, with Henry County being moved to Region 4, Rockdale to Region 5, Clayton to Region 13 and Cherokee to Region 1. Regional directors report to one of three district directors who report to the DFCS director of field operations. The northern district includes Regions 1 – 5, southern district includes Regions 6 – 12, and the metro district is made up of Regions 13 and 14 (which includes Fulton, DeKalb, Cobb, Gwinnett, and Clayton counties).

The organizational changes were intended to:

- Coordinate state office sections and units that support the Blueprint for Change efforts
- Increase operational effectiveness in Field Operations
- Create cohesion and consistency between regions within districts
- Establish a structure in Field Operations that equalizes workloads and supports equal allocation and deployment of staff resources

An organizational chart and regional map are appended to this report.

In 2014, Governor Nathan Deal created the Georgia Child Welfare Reform Council, modeled after the successful Criminal Justice Reform Council, to review child welfare practice and offer recommendations for improvement. The Council began meeting in May 2014 and completed a comprehensive review of Georgia's child welfare system. The Council's recommendations were incorporated in SB138, which became effective July 2015.

b. Vision/Mission/Values

The Children's Bureau (CB) made a call to action to the child welfare field to implement primary prevention strategies. By focusing on primary prevention, families can be strengthened before maltreatment has occurred and prevent the unnecessary removal of children from their homes and communities. At the same time, the CB recognizes that when foster care is necessary, it can be dramatically improved to focus on achieving timely permanency for all children and youth, including the thousands awaiting adoptive homes.

State Team Planning Meetings were hosted in 2018 and 2019 to facilitate the exchange between state child welfare agencies and partner agencies including Community-Based Child Abuse Prevention agencies (CBCAP) and the courts on how to implement a prevention vision. These meetings focused on outlining the state's vision of prevention to be incorporated into the 2020-2024 CFSP. The 2019 State Team Meeting was held in conjunction with the 21st National Conference on Child Abuse and Neglect to align concrete examples of prevention to state planning efforts.

To ensure coordination between child welfare, judicial/legal, and prevention entities, the following people served on the "vision" team at the state team planning meeting in Washington, D.C., March 12 – 13, 2020.

- Jerry Bruce – Georgia Court Improvement Project Director/Justice for Children, Division of Communications, Children, Families and the Courts Judicial Council/Administrative Office of the Courts
- Melissa Carter - Barton Child Law & Policy Center Director/ Emory University School of Law Clinical Professor of Law,
- Kym Crooms – DFCS Child and Family Services Plan Manager
- Rachel Davidson – Georgia Office of the Child Advocate Director
- Mary Havick – DFCS Deputy Director
- Colleen Mousinho – DFCS Program Practice and Guidance Senior Director
- Natalie Towns – DFCS Prevention Director
- Angela Tyner - Georgia Court Appointed Special Advocates Certified Child Welfare Law Specialist

The consensus of the team members is that the state's overarching vision and mission include language that supports the objectives of the national vision but an adjustment should be made to the guiding principles and values to more clearly reflect the state's commitment to aligning primary prevention efforts; reasonable efforts to prevent removal and achieve permanency; and efforts to improve the foster care experience. The team discourse additionally led to an

agreement that the state would not only emphasize primary prevention but would also highlight its dedication to secondary and tertiary prevention.

The onset of the COVID-19 pandemic precluded the team from reconvening to finalize documents, but via email exchanges, the three groups were able to develop a proposed statement that would serve as a unified vision that, once finalized with executive approvals, would be communicated simultaneously to constituents. “Collaborate with our communities to create systems of support throughout the entire continuum of services of prevention through intervention” has been added to the list of guiding principles (see below) and a supplementary statement to explain what that entails is denoted.

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/Values

- Demonstrate commitment to the safety of children in the decisions made and the actions taken
- Collaborate with our communities to create systems of support throughout the entire continuum of services of prevention (primary, secondary, and tertiary) through intervention. How the state intends to execute on this principle is described in the prevention vision statement below.
- Serve with compassion
- Provide caring, responsive and effective service
- Engage, listen and respond to our participants, communities and each other
- Collaborate with our communities to create systems of support
- Develop a competent, professional and efficient workforce that never stops learning and growing

Georgia’s Prevention Vision Statement

As a result of Georgia’s collaborative efforts, children and families will receive needed supports to prevent maltreatment and unnecessary removal of children from their homes and communities. Whereas,

- The entire continuum of prevention (primary, secondary and tertiary) and intervention is focused on strategies to ensure:
 - Children are able to live and thrive safely in their homes
 - Families are resilient and supported to meet their children's needs.
 - Safe and stable families are preserved and, where possible, disconnected ones are reunified
 - Shorter stays for children who enter foster care and a reduction in recidivism
 - Widespread knowledge of, access to and receipt of quality social, legal and preventative services
- Systems and workforces are in place to ensure that appropriate, meaningful, adequate and compassionate services and resources exist throughout the state
- The state will cultivate accountability for stakeholders to provide meaningful interventions and make reasonable efforts to support families' and caregivers' efforts to ensure the well-being of their children.
- The implementation of this vision will be a collective effort among agencies, communities, jurisdictions, families, staff and youth.

After the enactment of the Family First Prevention Services Act (FFPSA) the State developed four goals that would support the state's efforts to implement the provisions of the act that align with the state's vision for prevention measures:

- Safely prevent removals to foster care through targeted, effective, community-based prevention services.
- Support a model of extended family preservation that allows children to remain in their communities.
- Ensure children are appropriately placed in settings that meet individualized needs and preserve family and community connections.
- Leverage and invest in communities to provide adequate and effective service capacity statewide.

The primary goal of implementing Family First is to safely prevent removals to foster care and to maintain children in their community. While this is tertiary prevention, focusing efforts further upstream will help support a broader shift in the system towards promoting primary and secondary prevention. The Prevention and Community Support (PCS) Section supports all three levels of prevention and its goals are:

- To support community-based efforts to develop, operate, expand and enhance targeted projects and initiatives aimed at improving outcomes for children and families; and
- To support networks of coordinated resources and activities to strengthen and support families.

PCS is the state lead role for the Community Based Child Abuse Prevention (CBCAP) federal grant program and partners with state and local agencies and providers to fund support for children and families in communities throughout Georgia. It works in partnership with community-based public and nonprofit organizations committed to reducing the incidence of child abuse and neglect by targeting at-risk families with evidence-based prevention and early intervention techniques to ensure positive outcomes for children and families. PCS also functions as the Children's Trust Fund entity for the state of Georgia and is a member of the national Children's Trust Fund Alliance.

In an effort to assist the Division in providing Georgia with safe children, strengthened families, and stronger communities, PCS-funded services include parent education, screening and linkage to appropriate resources, training opportunities, high-quality home visitation, adolescent pregnancy prevention and youth development, and professional development for our providers.

PCS builds capacity in the prevention of child maltreatment throughout the state by providing grant funding, training, and technical assistance to community-based primary and secondary child maltreatment and adolescent pregnancy prevention activities. Primary, secondary, and tertiary maltreatment prevention efforts help local communities promote safe, stable nurturing relationships and environments for all Georgia's families. Our areas of focus include promoting primary and secondary child abuse and neglect prevention, early intervention and parent education.

PCS promotes the health, safety and wellness of Georgia's children and families by:

- Developing and enhancing community-based projects and prevention strategies which provide primary and secondary prevention programs for families to prevent child abuse and neglect
- Developing and maintaining state and local interagency collaborative efforts through systems integration and systems change aimed at improving outcomes for families and communities
- Raising awareness and the commitment to promote safe, stable, nurturing relationships and environments and prevent child maltreatment
- Creating the context for healthy children and families through the promotion of positive community norms about parenting programs, acceptable parenting behaviors and parents seeking help

- Engaging all sectors of the community to acknowledge that we all share responsibility for the well-being of children
- Promoting and enhancing Georgia's family resource centers, along with other family strengthening and support programs
- Ensuring caregivers with lived experience are engaged and have an integrated voice and presence in decision making processes
- Reducing adolescent sexual activity, pregnancies, births, repeat births, and sexually transmitted diseases and infections.
- Increasing the use of adolescent pregnancy prevention education for adolescents by initiating after-school, school-based, or community-based positive youth development programs
- Managing Georgia's Promoting Safe and Stable Families Program (PSSF) federal child welfare funding to develop and establish, or expand, and to operate coordinated programs of community-based family support services, family preservation services, family reunification services, and adoption promotion and support services

PCS staff serve as fiscal stewards of federal child abuse and prevention funds. Staff develop, manage, and monitor Georgia's statewide child abuse and prevention program; provide training and technical assistance to community partners to build capacity and serve as statewide experts on child abuse and neglect prevention issues. In order to ensure sustainability of programs and a smooth transition, PCS remains committed to supporting infrastructure development investments in communities. This investment includes the use of CBCAP dollars to support training and capacity building efforts for continuation contractors as well as any new contractors serving children and families. Staff at PCS provide training and follow-up coaching (through telephone contact and on-site visits) to support contractors' efforts in capacity building and sustainability.

A successful prevention-based child welfare system depends on foster care as a last resort; therefore, more children are able to remain safely in their home. "With a smaller system of foster care, the State can focus on empowering foster family homes to provide a support to families in a time of need or crisis. Children and youth can remain in their home communities, siblings can remain together, and critical child-parent bonds can be maintained. Foster parents must be a resource and allow families to remain actively involved in the lives of their children while out of their home" (ACYF-CB-PI-20-02)

The Division is actively involved in the planning to ensure children remain with their families and foster care is only utilized when absolutely necessary. The Division has established several practices at the state, local and regional level in support of this vision for families. The Division

additionally supports the CB's vision for achieving permanency. Regions are providing training and support to staff on utilizing guardianship as an option for families. During this report period, the number of adoptions and guardianships have increased. As well, relative caregivers are encouraged to become relative foster caregivers to provide additional supports to families.

The State's CPS Intake Communication Center (CICC) provides an option on the CPS Hotline Interactive Voice Response. When a caller selects this option ("option 6"), they are connected to services provided by the Prevent Child Abuse Organization. Parenting services and a host of other community services are provided. CICC partners with foster parents by being available to link them to field staff when emergencies arise after hours and when the case manager is unavailable. They track and provide support when a natural disaster occurs and when relocation is necessary for foster families. After hours support for safety check screenings for fictive kin or kinship placements assessment is also provided to ensure accurate and safe placements are occurring.

c. Legislation and Policy

2019 Federal Guidance

Information Memorandum 19-01: Model Family Foster Home Licensing Standards provided standards on foster family homes in response to the directives set forth in HR 1892: Bipartisan Budget Act of 2018 – Family First Prevention Services Act.

In response to the guidance, DFCS released CWSMT 2019-03, to announce policy changes involving model changes to foster family homes.

Information Memorandum 19-03: Family, Children, and Youth Voice demonstrated that family and youth voice are critical to a well-functioning child welfare system and to encourage all public child welfare agencies, dependency courts, and court improvement programs to work together to ensure that family and youth voice are central in child welfare program planning and improvement efforts.

In response to the guidance, the Policy and Regulations Unit convened the Federal Regulations workgroup to identify opportunities among the workgroup members to increase family and youth voice in child welfare practice. C3 coordinators increased efforts to involve youth in the state's strategic planning process and state representatives will participate in a national youth summit in August 2020. (See Youth Engagement section of this report.)

Passed 2019 State Legislation

House Bill 64:

A BILL to be entitled an Act to amend Article 1 of Chapter 7 of Title 19 of the Official Code of Georgia Annotated, relating to parent and child relationship general provisions, so as to require child welfare agencies to make efforts to determine whether a parent or guardian of a child who is the subject of abuse allegations is on active duty in the military; to require certain notifications to military installation family advocacy programs; to provide for the reporting of child abuse to military law enforcement in certain situations; to provide for immunity for the reporting of child abuse to military law enforcement; to provide for a short title; to provide for related matters; to repeal conflicting laws; and for other purposes.

This bill requires notification to military installation family advocacy programs of alleged child abuse to child of active duty military parent. It impacts intake, family preservation, foster care, confidentiality, and family support policies. To ensure policy included the legislative requirements, CWSMT 2019-08 and 2019-09 were released.

House Bill 79:

A BILL to be entitled an Act to amend Chapter 4 of Title 30 of the Official Code of Georgia Annotated, relating to rights of persons with disabilities, so as to provide that blind persons shall not be discriminated against by the courts, Department of Human Services, or a child-placing agency in matters relating to child custody, guardianship, foster care, visitation, placement, or adoption; to provide for definitions; to provide for rules and regulations; to provide for legislative findings and a purpose; to provide an effective date; to repeal conflicting laws; and for other purposes.

This bill provides that blind persons shall not be discriminated against by the courts, Department of Human Services, or a child-placing agency in matters relating to child custody, guardianship, foster care, visitation, placement, or adoption. It impacts policies and procedures related to disabilities and individualized caregiver assessments. To ensure policy included the legislative requirements, CWSMT 2020-02 was released.

Senate Bill 158:

A BILL to be entitled an Act to amend Titles 9, 15, 16, 17, and 41 of the O.C.G.A., relating to civil practice, courts, crimes and offenses, criminal procedure, and nuisances, respectively, so as to provide additional safeguards and protections against human trafficking; to authorize DFCS to provide care and supervision to children who are victims of human trafficking; to expand prohibitions against trafficking of persons for labor or sexual servitude; to revise the definition of prostitution; to increase the penalties for certain sexual offenses; to repeal the crime of pandering by compulsion; to provide that the use of certain property in connection with human trafficking constitutes a nuisance and to provide for what constitutes notice of such use; to provide for related matters; to repeal conflicting laws; and for other purposes.

This bill authorizes DFCS to provide emergency care and supervision to victims of human trafficking without a court order. This adds to the special exceptions currently allowed by law

and impacts Intake, Investigation, Foster Care placement, and service provision policies. To ensure policy included the legislative requirements, CWSMT 2019-08 and 2019-09 were released.

House Bill 472:

A BILL to be entitled an Act to amend Chapter 11 of Title 15 of the O.C.G.A., relating to general provisions of the Juvenile Code, so as to revise procedures concerning removal considerations; to provide for related matters; to provide for an effective date; to repeal conflicting laws; and for other purposes.

This bill provides the juvenile court authority to place children alleged abused or neglected in temporary alternatives to foster care to avoid placement in protective custody. The bill impacts child welfare policies related to the Juvenile Court process, Investigations, Family Preservation and Eligibility. To ensure policy included the legislative requirements, CWSMT 2019-08 and 2019-09 were released.

House Bill 478

A BILL to be entitled an Act to amend Article 8 of Chapter 5 of Title 49 of the Official Code of Georgia Annotated, relating to the central child abuse registry, so as to provide improvements to the operation of the child abuse registry; to provide definitions; to provide for notice of abuse allegations; to provide for reporting abuse cases to DFACS office; to provide for hearing on expungement of name from registry; to provide for related matters; to repeal conflicting laws; and for other purposes.

This bill changes the operation of the Child Abuse Registry, providing for expungement processes and increasing the age an abuser can be added from 13 to 18 years old. It impacts policies and practices related to the Child Protective Services Information System/Child Abuse Registry. To ensure policy included the legislative requirements, CWSMT 2020-01 was released.

House Bill 530

A BILL to be entitled an Act to amend Article 16 of Chapter 2 of Title 20 of the Official Code of Georgia Annotated, relating to students in elementary and secondary education, so as to prohibit parents or guardians from withdrawing or removing a child from a public school for the purpose of avoiding compliance with laws relating to mandatory attendance, school discipline, parental involvement, or parental responsibilities; to provide for additional requirements with regard to declarations of intent; to provide for referral to the Division of Family and Children Services of the Department of Human Services for investigation and enforcement; to provide for related matters; to repeal conflicting laws; and for other purposes.

This bill requires DFCS to assess cases where children have been withdrawn from school without a declaration of intent to home school who do not attend school for 45 days thereafter.

This impacts policy related to Intake and Investigation. To ensure policy included the legislative requirements, CWSMT 2019-08 and 2019-09 were released.

Senate Bill 167

A BILL to be entitled an Act to amend Code Section 15-11-211 of the Official Code of Georgia Annotated, relating to relative search by DFCS, so as to provide that a foster placement for a child adjudicated as a dependent child may be deemed as the child's fictive kin in determining such child's permanency plan; to repeal conflicting laws; and for other purposes.

This bill allows DFCS to be excused from considering a relative as a placement resource six months after receiving notice and failing to demonstrate interest. It also provides that after a child has been placed with a caregiver for 12 months it can be presumed that continuation in the placement is in the child's best interest. This impacts policy and practice related to the diligent search and selecting a placement resource. To ensure policy included the legislative requirements, CWSMT 2019-08 and 2019-09 were released.

Senate Bill 225

A BILL to be entitled an Act to amend Article 1 of Chapter 11 of Title 15 of the O.C.G.A., relating to general provisions regarding the Juvenile Code, so as to bring such provisions in conformity with the federal Social Security Act and the Family First Prevention Services Act; to amend Articles 3 and 4 of Chapter 11 of Title 15 of the O.C.G.A., relating to dependency proceedings and termination of parental rights; to amend Article 1 of Chapter 5 of Title 49 of the O.C.G.A., relating to children and youth services; to amend Article 2 of Chapter 13 of Title 50 of the O.C.G.A., relating to the Office of State Administrative Hearings; to provide for related matters; to provide for an effective date; to repeal conflicting laws; and for other purposes.

This bill impacts the placement of a child, Indian Child Welfare Act, case review/permanency plan, fair hearings, and Independent Living Program policy and practice. To ensure policy included the legislative requirements, CWSMT 2019-08 and 2019-09 were released.

Policy Updates

*The **Child Welfare Services County Letter (CWSCL)** disseminates changes in policy or practice in advance of a manual transmittal and is used to provide clarification regarding policy. The following CWSCL was released during the reporting period.*

CWSCL 2019-01

Released 7/1/2019

To announce changes to fair hearings as a result of the 2019 legislative session

*The **Child Welfare Services Manual Transmittal (CWSMT)** provides notification of changes in child welfare policy to DFCS staff via email and are published on ODIS. The following CWSMTs were released during the reporting period.*

CWSMT 2018-11

Released 10/1/2018

Policy Chapter 9 (Eligibility), Chapter 10 (Foster Care), Chapter 16 (Room, Board, Watchful Oversight), Chapter 18 (Support Services to Preserve or Reunify Families), and Chapter 19 (Case Management) were updated to incorporate provisions resulting from the Family First Prevention Services Act related to title IV-E maintenance payments for children in foster care, and fingerprint-based criminal records checks for adults working in CCLs.

CWSMT 2018-12

Released 11/1/2018

Policy Chapter 19 (Case Management) was updated to incorporate strategies outlined in the Child and Family Services Review (CFSR) Program Improvement Plan (PIP).

CWSMT 2018-13

Released 12/5/2018

Policy Chapter 19 (Case Management) (Administration) was updated to incorporate provisions to support efforts to prevent children from running away and to locate children when missing from care.

CWSMT 2018-14

Released 12/10/2018

Policy Chapter 9 (Eligibility) and Chapter 10 (Foster Care) were updated to provide updates to the eligibility process for medical assistance and title IV-E funding for children in foster care.

CWSMT 2019-01

Released 3/1/2019

Policy chapter 8 (Family Preservation), chapter 10 (Foster Care), and chapter 19 (Case Management) were updated to incorporate policy changes related to Family Team Meetings (FTMs).

CWSMT 2019-03

Released 3/29/2019

Policy chapter 14 (Resource Development) and chapter 16 (Room, Board, Watchful Oversight) were updated to incorporate provisions resulting from the Family First Prevention Services Act involving model standards for family foster homes.

CWSMT 2019-04**Released 5/1/2019**

Policy Chapter 3 (Intake), Chapter 4 (Initial Safety Assessment), Chapter 5 (Investigation), Chapter 10 (Foster Care), and Chapter 19 (Case Management) were updated to announce policy changes to support the assessment, service provision, and coordination of services to families affected by caregiver substance use and prenatal exposure to substances.

CWSMT 2019-05**Released 5/1/2019**

Policy chapter 10 (Foster Care) updated to announce policy changes to promote positive outcomes for expectant and parenting youth in foster care

CWSMT 2019-06**Released 5/8/2019**

Policy chapter 10 (Foster Care) and Chapter 18 (Support Services to Preserve or Reunify Families) were updated to announce policy updates to the process for submitting referrals to CAPS.

CWSMT 2019-07**Released 6/17/2019**

Policy Chapter 3 (Intake) was updated to announce policy changes on responding to historical allegations of child abuse and neglect.

CWSMT 2019-08**Released 7/1/2019**

Policy Chapter 1 (Administration), Chapter 3 (Intake), Chapter 4 (Initial Safety Assessment), Chapter 5 (Investigations), Chapter 7 (Family Support Services), Chapter 8 (Family Preservation), Chapter 9 (Eligibility), Chapter 10 (Foster Care), Chapter 17 (Legal), and Chapter 19 (Case Management) were updated to announce policy updates resulting from the 2019 legislative session.

CWSMT 2019-09**Released 7/1/2019**

Policy Chapter 3 (Intake) and Chapter 17 (Legal) were updated to streamline procedures and announce policy changes resulting from the 2019 legislative session.

CWSMT 2019-10**Released 11/11/2019**

Policy Chapter 3 (Intake) and Chapter 10 were updated to announce policy changes regarding the handling of intake reports involving children that are not residents of Georgia, and purposeful contact following a screened-out intake report.

CWSMT 2020-01**Released 1/10/2020**

Policy Chapter 20 (Child Protective Services Information System (CPSIS): Child Abuse Registry) was updated to align policy with the legislative changes resulting from HB 478 (2019) governing the operation of the child abuse registry.

CWSMT 2020-02

Released 2/17/2020

Policy Chapter 1 (Administration) and Chapter 14 (Resource Development) were updated to ensure adherence to Title II of the Americans with Disabilities Act of 1990, as amended (ADA), and Section 504 of the Rehabilitation Act of 1973.

CWSMT 2020-03

Released 3/20/2020

Policy Chapter 10 (Foster Care) and Chapter 18 (Support Services to Preserve or Reunify Families) were updated to reflect changes to the support services programs.

d. Key Accomplishments Executive Summary

Historical Overview

In July 2014, the former DFCS division director set out to develop the best child welfare agency in the world. He led the Agency in the adoption of a Blueprint for Change – a three-pillar approach to reforming Georgia’s social service system. Most of the strategic work that the Agency engages in serves to positively impact these pillars:

- Social services practice model
- Robust workforce
- Constituent engagement

The current director, Tom Rawlings, maintains a commitment to remain focused on executing the pillars of the Blueprint. There will be particular emphasis on workforce development over the next five years. “Workforce development has been one of the three pillars of our Blueprint, and for good reason,” noted Director Rawlings. “Without a strong workforce, we cannot keep children safe or implement consistently our practice model.” The State will prioritize the workforce by creating an organizational structure that empowers frontline staff while assuring accountability and quality; recruiting, hiring, retaining and mentoring good staff; and encouraging and rewarding innovation. The belief is that to “create an agency that can recruit, retain, and raise up the best possible child welfare workforce, we must support our front-line workers and supervisors, train them well, give them the freedom to make hard choices in uncertain environments, and help them learn from errors without blaming them solely on the basis of a bad outcome.” A large part of the Agency’s mission over the next few years will be to instill a “just culture.” This kind of culture is created, in part, by understanding and instilling the

nine foundational principles as outlined in an article by Eileen Munro.¹ Essentially, there must be a shift in how good and bad performance is conceptualized, recognizing that human error is unavoidable, and having a shared understanding of how to reasonably manage risk and uncertainty.

The State also continues to journey to become a State of Hope. A State of Hope is a collaborative approach in which people from all walks of life share a vision of safety and success for every child, family and individual who lives in their community. It is a place where public and private organizations – nonprofits, philanthropies, government, businesses and communities – collaborate closely to help achieve that vision. As a result, children are safer, families are stronger, and communities are more supportive places for all members to thrive.

State of Hope (SOH) is an intentional and creative initiative designed to engage a broad base of community stakeholders to transform the lives of Georgia’s most vulnerable residents. It is a shift in thinking for the system that serves families, taking reactive policies and programs and reshaping them into proactive efforts designed in partnership with families and communities. The goal is to have communities that support individuals, children and families in a way that reduces the risk of harm or abuse and allows them to thrive.

The SOH builds on the Communities of Hope concept started by Casey Family Programs, a national philanthropic foundation, and the work of the Northwest Georgia System of Care Advisory Council (SOC) and the Northwest Georgia Region of Hope. Georgia is the first state in the country to attempt a State of Hope – identifying and anchoring multiple Region of Hope sites across the state. While the original work of the Northwest Georgia Region of Hope focused solely on child welfare issues, the SOH will have a broader focus.

What separates the SOH from other collaborative initiatives is the use of human-centered design thinking and having the voices of youth at the center of the design process. Communities will be able to take the ideas that have been designed by youth to inform the strategies that they choose to implement with their collaborative partners. Human-centered design is an innovative approach for solving complex challenges in which people, and the needs of those people, are at the center of the design process. This process involves building to learn — and learning while building — through inspiration, ideation and implementation.

In 2018, the hope was to identify and anchor three additional Region of Hope collaborative sites across the state. Today, the State has amassed 130. While the Division does not solely “own” the SOH and the transformative work that can only happen within individual communities, the Division has committed to be the convener of this collective impact approach in partnership with several key stakeholders. No single group or organization alone can raise up strong,

¹ Munro E. Decision-making under uncertainty in child protection: Creating a just and learning culture. *Child & Family Social Work*. 2018;1–8. <https://doi.org/10.1111/cfs.12589>

healthy, thriving communities. The biggest impact will be made through multiple organizations working together across systems in support of the same goal.

The anchor opportunities are the Division's priority areas for the State of Hope. These areas are broad enough that the Division believes most communities can and will connect with them.

- Education – Improving the educational attainment of vulnerable youth, most importantly the graduation rates of youth in foster care
- Trauma – Increasing the awareness of trauma informed practices, the impact of trauma and how to mitigate its impact
- Quality Caregiving – Improving the quality of caregiving across a continuum including, but not limited to, birth parents, kin caregivers, foster/adoptive parents and the larger caregiver community
- Economic Self-Sufficiency – Strengthening and supporting individuals and families on their path toward independence

The State of Hope will encompass the entire state from border to border, transcending geographical communities and zip code boundaries. Every child in America deserves to live in a Community of Hope, and this statewide approach ensures that will be the case for every child in Georgia. This work cannot be done alone. It will take the partnership and collaboration of every sector of this state to be successful.

The Office of Family Independence endeavors to achieve the additional goal of self-sufficiency wherein families and individuals have sustainable financial independence, have voice and choice in services, and are self-directed.

The state has achieved numerous accomplishments over the last federal fiscal year that demonstrate the State's determination to uphold the aforementioned vision, values and strategic direction. A comprehensive description of the state's performance, accolades and areas needing improvement are documented in the Assessment of Performance section of this report, but below is a condensed sample of some of Georgia's best work.

e. Social Services Practice

Practice Model

In 2015, the State elected to roll out a comprehensive, value-based practice model across the state. A major component of this plan - Solution-Based Case Practice (SBC) – was created as a result of over 25 years of research on common factors that consistently demonstrate the best results for children and families. It is an evidence-based practice that targets family and

individual behavior change to prevent maltreatment from reoccurring. Science confirms that there are some specific teachable caseworker characteristics that, when done with consistency and fidelity, will make a significant difference in outcomes. The statewide roll-out of SBC was completed in October 2017.

Georgia has begun to build upon the tenets of SBC as it begins development of phase two of the Division's comprehensive model. A draft plan was first introduced October 2019, and later adapted by Director Rawlings to include a theory of change. The final draft was completed and submitted on December 11, 2019. As part of this plan, steering committees were formed of county, regional, district and state internal stakeholders from various roles and external representatives from CASA, Office of Child Advocate, Court Improvement Program and other providers. The Practice Model Steering Committee convened in January and February 2020 and are currently on track to meet their related CFSP goals and objectives. Practice model coaches continue to work with staff to support SBC and the Division is progressing along with the development of a Practice Standards Guide.

CFSR Outcomes

While practice model developments are in the works, the State continues to make progress in other practice areas. The state's last CFSR review was conducted in 2015, and the corresponding Program Improvement Plan concluded March 2020. Five of the 10 required CFSR Items were met (Items 1, 4, 5, 6 and 13). Those that were unmet are Items 2, 3, 12, 14 and 15. All five Items associated with Permanency Outcome 2 (Items 7 – 11) – continuity of family relationships and connections is preserved for children - have demonstrated significant positive gains since 2015. The State was at 32% at the conclusion of the CFSR review in 2015 and at 47% as of May 2020. There was also an incline in conformity with Safety Item 1 – timeliness of initiating investigations of reports of child maltreatment. The State rated at 88% for the October 1, 2019-March 31, 2020 review period, up from 66% in 2015. The State's greatest strength has been Item 7 – placement with siblings. Georgia quality assurance rating for this item peaked at 90% May 2020.

CFSP Goals

Georgia developed and submitted a 2020-2024 Child and Family Services Plan (CFSP) in June 2019. The start of implementation began October 2019. In this first year of the plan, the State has followed through on most of the planned action steps for the objectives and has achieved 11 of its CFSP target measures. Although target measures have not yet been set for the workforce development project that the State is doing in collaboration with the National Child Welfare Workforce Institute, the State has successfully completed both the planning and exploration phases.

Of the CFSR outcome items, Safety 2, Well-Being 2, and Well-Being 3 measures exceed the established targets. Other positive achievements include an increase in the timely transfer of cases from Investigations to Family Preservation, the establishment of the Parent Advisory

Council; increase in the number of children age 0 -5 who are enrolled in an early education setting; increase in State of Hope sites; increased usage of the Court Process Reporting System by county judicial systems; and an increase in the number of persons who have received training through the Multi-Disciplinary Child Abuse and Neglect Institute. The State also hosted 78 stakeholder meetings statewide to address service array needs in the regions. More details regarding these CFSP objectives and measures are documented in this section as well as the Plan for Improvement Section within this report.

Plans of Safe Care

The state has other areas of achievement as it relates to practice. There has been an increase in the development of Plans of Safe Care on appropriate cases and the Division works with the Douglas County Juvenile Court and other partners on a grant that assists the court system in working with substance exposed infants. The Division works on the project, reviewing policies and practices. A practice change resulting from these interactions is that prenatal exposure cases will no longer be substantiated for the use of marijuana.

Call Center

In collaboration with the Rapid Process Improvement (RPI) team, the CPS Intake Communication Center (CICC) Theory of Change Rapid Process Improvement Plan was developed with the goal to decrease/eliminate the redundancies and non-value-added steps, redirect CICC's focus from initiating the investigation/assessment at intake to gathering information to formulate an intake decision, and to bridge the decision making process with Field Operations. The plan decreased the keystroke process of entering a report into the GA SHINES database by 30%. This intake process allows for reports involving an 18 year old child with no other children involved, to be assessed as an Information and Referral rather than as a full Intake to be screened out as it does not meet the age criterion of a Child Protective Services report. The process allows for a synthesized narrative, a mitigated justification statement by both the Intake case manager and supervisor, and requires five or less years of only CPS history for all cases that area assigned.

CICC enhanced the staff's skills in assessing for present and impending through training and then developed a protocol that requires a verbal case staffing on all immediate or 24 hour Initial Safety Assessment assignments which resulted in a 20% decline in the assignment of unnecessary immediate and 24 ISAs.

To better assist the field staff while also responding to immediate request responses from Law Enforcement (LE), CICC created Standard Operating Procedure (SOP) Law Enforcement Immediate Assistance Assignments that changed CICC's response to these types of requests. CICC ceased completing Intakes with limited information and began processing Information & Referrals (I&R) with an additional request to the to the CICC Point of Contact(s) to provide enough information to complete quality intakes after meeting with LE and/or child/family This process lowered the number of unnecessary and limited information Intakes.

In support of the field staff, CICC created a nonverbal timeframe notification to support the needs of the field. From 7 PM to 7 AM notifications to counties regarding new intake reports, screen outs, etc. do not include a telephone notification unless the intake is assigned as an Immediate Initial Safety Assessment or Investigation or “Law Enforcement has requested assistance.” This includes all weekdays, weekends and holidays. CICC continues to send the email notifications as currently required 24/7 throughout the workday (7:01 AM to 6:59 PM) along with completing the telephone notification.

CICC created the Improvement Team which focuses on Child Welfare and Call Center Operations improvements in CICC. One of the team’s goals is to improve the child welfare section of CICC centered around the improvement of its review process. The first step in reaching this goal was revamping the Quality Improvement Review Guide which now uses a holistic approach to reviewing for safety as well as adapting questions around the RPI process. To increase the number of reviews completed monthly, along with the QA team, the Administrators and Supervisors complete random peer reviews focusing on the quality of the intake product.

In collaboration with the Child Welfare Quality Assurance (CWQA) team, CICC has an assigned CWQA member who completes random second level review of reviews completed by CICC leadership in an effort to ensure consistent quality integrity improvement.

With the passing of HB 530 Education which prohibits parents or guardians from withdrawing or removing a child from a public school for the purpose of avoiding compliance with laws relating to mandatory attendance, school discipline, parental involvement, or parental responsibilities and prior to the updated policy and GA SHINES (Special Circumstances-School Withdrawal) option, CICC developed the protocol to complete Information & Referrals for this type of reported information from the school to ensure the agency was adhering to the law.

CICC developed the DFCS CICC Process for Excessive and Harassing Reporters: This SOP outlines a clear process to identify and reroute reporters to a voicemail system when they make excessive and/or repeated reports to CICC. This may be considered harassing to CICC staff, county staff, or the family who is being reported. These reporters place strain on CICC’s ability to manage call volume of other reporters who are making new and genuine reports of child abuse and neglect. These reporters negatively impact relationships between DFCS and the community when a specific family is investigated multiple times for false or malicious reports.

CICC developed a point of contact for foster parents, kinship providers, and private placement providers. The standard operating procedure 19-04 provides that foster parents, kinship providers, and private placement providers with access to the county when they have been unable to reach a county point of contact (POC). CICC coordinates immediate communication between the listed entities and the field POC to ensure professional internal customer services.

The Emergency SHINES History Checks for Kinship Placements and Temporary Alternative to Foster Care SOP 20-02 ensures the availability and accessibility to SHINES history as a part of

the on-going effort to further increase the operational support and customer service provided by CICC. In order to make informed Kindship and/or Temporary Alternative to Foster Care arrangements, the SOP requires CICC provide GA SHINES history to case managers in the field.

CICC developed the Maltreatment in Care (MIC) Statewide Notification to provide a process for notification at the regional level (Regional Field Program Specialists) when Maltreatment in Care (MIC) intakes are received. The unit reorganized and restructured the Call Center telephone script so frontline staff are better able to control the flow of the call, information gathering, and ensure a power statement conclusion of the call and developed a procedural change that reduced the utilization of the process of triaging reports when call volumes are high.

In response to the COVID-19 pandemic, the agency developed the DFCS Child Welfare Temporary Direct Services Continuity Standard Operations Procedure (SOP) 20-01 where CICC is required to inquire and document reporter knowledge if families are currently or have recently been sick. This protocol greatly improves the agency staff's knowledge level thereby improving safety when first meeting the families the agency serves.

Diligent Search Efforts

The modified Kenny A Consent Decree pertains exclusively to Fulton and DeKalb counties, two of Georgia's most populous counties. It requires that diligent search efforts for parents and relatives must be undertaken and documented within 60 days of a child entering foster care (Decree Outcome 5). The threshold standard for this measure is 95 percent. The 27th decree report period, January 1, 2019 – June 30, 2019 was the second consecutive reporting period that the region surpassed the requirement and the third consecutive reporting period of improvement. Of note, 31 out of the 59 children (52%) in the sample were initially placed with relatives and kin caregivers within the first 60 days in care. This is a significant increase from the 35 percent placed with relatives in the first 60 days during the previous period. The increased focus on placing children with relative and kin caregivers continues to be encouraging and is vital to increasing permanency outcomes.

Adoptions

Adoptions have consistently increased over the last six years in Georgia. The State has earned adoption incentive funds for the past five. For FFY 2019, 1,413 adoptions were finalized. This is a significant increase as compared to the three prior years. There were 1,029 adoptions finalized in FFY 2016; 1,286 in FFY 2017; and 1,233 finalizations in FFY 2018. The State has consistently increased adoptions over the past six years.

Due to Georgia's continuous improvements with adoption outcomes, the State adoption director was invited to participate in an adoption roundtable with Health and Human Services (HHS) Secretary Alex Azar. She was one of only eight attendees invited from around the nation and Georgia was one of two states asked to participate. Additionally, in January she was asked

to be a member of a panel at the Foster Care and Adoptions managers “Call to Answer” meeting.

The Modified Kenny A. Consent Decree requires that for all children whose parental rights are terminated or released during the reporting period (and any appeals completed), at least 80 percent will have their adoptions or guardianships finalized within 12 months of final termination or release of parental rights. As recent as decree report period 24, the state’s performance on this measure was 43 percent. Since then, the state has been steadily improving, culminating in an improvement in the state’s performance to 81 percent for period 27. To meet this outcome, a dedicated Kenny A. team member meets monthly with each county to review cases, as far as 18 months into the future, to identify barriers and deploy the appropriate prescriptive strategy. Other strong components include partnering with the ICPC director, who utilizes her team and interstate contacts to assist with those difficult out-of-state cases, as well as close communication and interaction with regional adoption coordinators (RACs). Additionally, Region 14 (Fulton and DeKalb counties) has formed two stellar adoption teams - one in each county. Each team is led by a dynamic, committed, driven and seasoned professional, whose goal is to lead their respective team to success by finalizing adoptions within the requisite 12 months. Under their leadership and watchful eyes, for the past two years or four consecutive reporting periods (RPs), Region 14 has consistently improved its delivery of timely adoption finalizations: RP25 = 60%; RP26 = 69%; RP27 = 81%; and RP28 = 81%.

National Training Development and Curriculum

Georgia was selected as a pilot site for the National Training Development and Curriculum (NTDC) pre-service training curriculum by Spaulding for Children. This remarkable opportunity will allow the State to develop an evidence-based, state-of-the-art curriculum. This will be the first time Georgia has updated its pre-service training in nine years. Prospective caregivers could potentially receive a training that will prepare them to provide for children who suffer from trauma. In addition, the curriculum will enable caregivers to receive ongoing guidance and support, which is equally important to preparedness and retention.

There are eight federal grant-funded site locations for the pilot. The Site Infusion team worked with Spaulding for Children to obtain information on how the pilot would be implemented in Georgia. Region 4 was selected as the implementation site, while Region 6 was selected as the comparison site. Implementation began in February 2020 with Train-the-Trainer curriculum. The Train-the-Trainer session was conducted with Region 4 staff, select child placing agencies who serve Region 4 and state office staff. The plan is to roll out NTDC in July 2020.

Structured Analysis Family Evaluation (SAFE) model

The 2019-2024 Diligent Recruitment Plan guides the recruitment efforts of the Caregiver Recruitment and Retention Unit (CRRU) Within the plan is a description of how CRRU will roll out the Structured Analysis Family Evaluation (SAFE) model. Staff, providers, and foster home

development contractors were trained in 2019 on how to administer the SAFE assessment tools and write a SAFE evaluation. SHINES was enhanced to support the implementation of the SAFE model.

Reunification Events and Trainings

The Reunification Unit hosted a statewide awareness campaign to celebrate National Reunification Month June 2019. Georgia hosted fourteen events in each region to celebrate the accomplishments of families who have overcome an array of challenges to reunify families safely and successfully. Community partners such as mental health and substance abuse providers, courts and judges, foster parents and others were recognized for the vital role they play in helping to reunify, strengthen and support families. The event was an inspiration to parents, particularly those going through the recovery process, demonstrating that it is possible to confront and resolve the issues that led to their separation, and to re-join with their children.

The Reunification unit is partnering with the Safety team, Policy Unit and Education Unit to develop a robust, statewide training on conditions for safe return. The training will be administered to front line case managers and supervisors teaching them that conditions for safe return should be directly correlated with the specific safety reasons that precluded the in-home safety plan from being put into place. Key stakeholders such as judges, CASA, and service providers are developing an implementation plan that anticipates rolling out training by the end of 2020.

Provider Services and Transitional Needs for Youth

One of the most important responsibilities of the Division of Family and Children Services is to ensure youth within Georgia's foster care system successfully transition into young adulthood and beyond. In 2019, the Care Coordination Treatment Unit (CCTU) formerly known as PRO was established as a state office function responsible for the facilitation, navigation and management of high-end, complex cases of youth in foster care. Georgia has recognized that without appropriate services, planning, and support, youth in care who do not have the appropriate connections to people and resources as they transition out of care demonstrate higher rates of homelessness, unemployment, poverty, delinquent or criminal behaviors, and dependence on various types of public assistance as they become older.

Via the Fiscal 21+ initiative, the Division has enhanced transition planning for adolescents and young adults in care who have moderate to severe cognitive and developmental disabilities; a population of youth who will become "dependent adults" (21 years of age and older) and continue to require care and oversight for the balance of their lives. The initiative affords opportunities for improved practice to support comprehensive and timely case planning. The ability to address the needs of this population became particularly critical as the Division faced funding restrictions which limited the Agency's capacity to continue payments for placement and services. A group of state office directors (Fiscal, Well-Being, and Permanency and

Placement Services) convened and facilitated Fiscal 21+ staffings with DFCS county/regional staff and others to accelerate safe transitions in care to appropriate community settings and/or agencies. The Fiscal 21+ project has been sustained by the newly created State Office Care Coordination Treatment Unit (CCTU). Hence, there has been additional exploration of child welfare system components to address the transitional needs of high-end children and youth. These think tanks have been done in collaboration with DFCS leadership/field staff and additional state office and community partners.

Fewer youth have been placed with non-contracted providers. The CCTU and Office of Provider Management guided private providers through the contracting process and a consistent monitoring and tracking process was instituted. Licensed care coordinators were assigned to all state psychiatric residential treatment facilities (PRTFs) as well as certain high utilized inpatient hospitals. CCTU played a pivotal role in the participation and proper transitioning of youth who would otherwise be designated as “long stays.” They assess for medical necessity, treatment planning and work with the field to navigate complex systems, appropriate lower levels of care and community-based resources.

Educational Services

The Division has been working diligently to increase its capacity to provide education support services to school age youth in foster. The Educational Programming, Assessment and Consultation (EPAC) Unit was established for this purpose. District Managers recently began sending monthly reports to regional directors highlighting the education services and supports provided to the field. The EPAC Unit provided 1,155 youths with tutoring and completed 3,536 educational diagnostic assessments over the course of this report period. The Georgia SHINES system established a new interface with the Department of Education which is a major boost for information sharing. The 2020 CFSP target measure for Well-Being Item 2 – children receive appropriate services to meet their educational needs was 49%. As of March 2020, the state was at 56%.

The Early Childhood Education Unit exceeded their CFSP target for enrolling children ages 0 to 5 in early childhood education settings. The target for enrolling children in Early Head Start, Head Start, Pre-K or and other quality rated childcare funding programs was 67%; the State achieved 82%. See the Constituent Engagement and Workforce Development sections below to read other extraordinary work being done in collaboration with partners in support of youth success.

Outcome 4: Maltreatment in Care mandates that of all children in foster care during the reporting period, the rate of victimization shall be no more than 8.50 victims per 100,000 days. To meet the requirements of this outcome an allocated Kenny A. staff member is assigned to review all Maltreatment in Care investigations and provide feedback. This staff member has many years of experience in child welfare and when gaps are identified she provides guidance and coaching in the assessment of safety in these investigations, as well as ensuring all Kenny A. requirements are met.

LGBTQA Services

Over the next five years the agency will be providing greater support to youth who identify as lesbian, gay, bisexual, transgender, queer (or questioning), intersex, and asexual (or allies). A survey was created by Children's Rights to be disseminated to child welfare staff within the Division. Questions were included in the June 2019 Celebration of Excellence survey that was provided to youth ages 17 – 21 and will be included in the December 2019 Teens R For Me survey to youth 14 – 17 years old. Once analyzed, these surveys will inform the youth development team which includes Chafee staff. It will provide insight on services and supports that are needed for LGBTQIA youth to feel supported and connected to appropriate resources. It will also provide a greater understanding of the knowledge and support DFCS field staff need to further support youth on their caseload who identify as LGBTQIA.

Medication Consultations

DHS Medical Director Dr. Priyanka Patel works with WPAC to coordinate consultation and medication staffings and provides recommendations to staff in the field. Dr. Patel completed a 64 psychotropic medication consultations, 25 psychotropic medication reviews, and 11 other (usually medical consultations) over the report period. Additionally, Dr. Patel completed 184 medication management staffings. WPAC completed medication case reviews and follow-ups for each of the medication management staffings. Dr. Patel has developed a rapport with Amerigroup's medical director, Dr. Osoba. Dr. Patel and Dr. Osoba have staffed and collaborated on critical cases involving youth in foster care who needed mental/behavior health services at a high level.

SHINES

The following are notable Georgia SHINES accomplishments during this reporting period:

- Established new interface with Department of Education (April 2019)
- Enhanced Resource Development module to support S.A.F.E. implementation (August 2019)
- Enhanced several modules to support the State's Kinship Care Continuum (November 2019)
- Improved existing CPS Alerts functionality – Phase II (December 2019)
- Improved case documentation of Expectant and Parenting Youth (December 2019)
- Improved identification of Discharge Caregiver when children exit foster care (December 2019)
- Implemented system changes to support legislative mandates – HB 472/HB 530 (March 2020)

In addition to notable system enhancements, the State has transitioned application maintenance and operational activities from vendor to state (Office of Information Technology). This was effective January 1, 2020.

f. Robust Workforce

The State has long recognized the value of a stable and well-trained workforce, and the challenges that often go hand in hand with a highly transient social services workplace. As mentioned earlier, the State has been working with NCWWI to research root causes for turnover and to execute strategies for better developing agency professionals. The Planning Phase of the project commenced October 2019 and by March 2020 the Exploration Phase had been completed. The Implementation Phase is scheduled to occur September 2020-May 2021. A Comprehensive Organizational Health Assessment (COHA) was completed by 2,198 survey respondents which equates to a 67% response rate. Data was additionally collected through 28 focus groups and individual interviews of Division staff and external stakeholders. Findings from the assessment are being used to prioritize focus areas.

Training is important to professional growth and to the retention of a qualified child welfare workforce. Over 1,500 frontline staff were given a three-day training on voluntary kinship. External stakeholders such as judicial partners and services providers also took the training. Areas of study included topics such as present danger, impending danger, protective capacities, child vulnerabilities, threats of serious harm and out-of-home safety planning management. Technical assistance and practice guidance are being provided to frontline staff each month via conference calls using software platforms such as Skype and Microsoft Teams, and voluntary kinship elements are now being tracked via GA SHINES.

Many improvements in practice can be attributed to the numerous trainings provided by quality assurance (QA) specialists to staff at all levels, from frontline workers, county and regional directors, to leadership. QA and continuous quality improvement (CQI) teams provide written summaries to field staff following QA reviews. A QA specialist is assigned to each region to partner with them to strive for continuous improvement. Because of the training provided to staff by the CICC, they were better able to assess for present and impending danger. This training along with a new protocol for verbal case staffings on immediate or 24-hour initial safety assessment assignments resulted in a 20% decline in unnecessary assignments of immediate and 24-hour initial safety assessments.

The Agency's Training and Professional Development Unit concentrated on timely training for newly hired child welfare staff, supervisory mentorship and training and building collaborations with other State Office Program areas. The Unit rolled out a shortened version of the Georgia Child Welfare Training Academy in the first quarter of 2019. This revised schedule reduced the length of the new worker training from a 15-week program to a 6-week program. The purpose

of this change was to reduce the length of time between hire date and readiness for case practice. This was significantly important for the Field Operations as a result of systemic hiring and onboarding issues that led to increases in the vacancy rate for front line social services case managers.

The Training and Professional Development Unit successfully launched a new training for supervisors called the DFCS Supervisor Academy. This academy replaces the former supervisors training called Putting the Pieces Together. The new academy is an immersive practical, relevant learning experience for all new social services supervisors and is an entirely new curriculum. 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. Some of this feedback is used in supporting supervisory development when they began mentoring at the conclusion of the academy.

The Supervisor Academy is 13 classroom days total. The modules are listed in the Assessment of Performance (Systemic Factor) section of this report. Since launching the new Supervisor Academy, participant feedback has been great. There have been several staff members who have completed both versions of supervisory training and have stated the new academy is much improved. They described it as more realistic, to the point and teaches skills that are more relevant to day-to-day supervisory responsibilities. The Supervisor Academy is “fluff free,” in that all knowledge, skills and activities are directly relevant to DFCS social services supervisory duties.” The focus is a “boots on the ground” learning experience. Supervisors should leave the Supervisor Academy with the practical knowledge and skills they need to immediately begin their job as a supervisor in any SS program area.

The foundational template for the Supervisor Academy is “purposeful supervision”—how to supervise in a manner which directly impacts the child welfare outcomes of child safety, permanency and well-being. It is progressive and cumulative: Module 3 directly builds on the knowledge and skills taught in Module 1; and Module 4 builds on Module 2. Partnership is a key part of it. Supervisor Mentors are present for the entire class, with a special Supervisor Mentor Panel during Module 3. The CFSR Unit helps the trainer present the CFSR section of Module 3 in every class, and the DIS Unit presents a 5-hour supervisory SHINES session they developed to every class. Supervisory certification is built into the curriculum and is based on successful completion of the classroom component as well as in-office field-based learning activities.

Technology has been advantageous for scaling up the way staff are trained. DFCS released a newly updated Learning Management System (LMS) in September 2019 and piloted the AVEnues virtual reality system developed by Accenture. The Accenture Virtual Experience Solution (AVEnueS) is a learning method that harnesses the power of technology to transform how caseworkers are trained and continue their skill development. This training opportunity provides case managers with the opportunity to come to a deeper understanding of their own thinking process in how they make decisions and develop opinions while working with families

involved in the child welfare system. The AVEnues learning method is designed to increase the pace with which child welfare case managers become seasoned decision makers. The hypothesis is that the pace of learning can be accelerated by dropping case workers into immersive, virtual experiences that replicate what they are likely to see in the field.

The experience utilizes an Oculus headset that immerses case managers into a real-life case that requires decision making around safety. It is a fully immersive, 360-degree experience filmed in a real home with real actors, with whom users speak with their voice as they would with a real family. It is as real as it gets without being on an actual home visit. Accenture has developed multiple scenarios targeting various skillsets and competencies critical in the decision-making process for child welfare staff. Georgia has had the opportunity to pilot this training from May 2019 thru December 2019. During this pilot, over 90% of participants reported the training improved their skills in engaging families and prepared them with a realistic expectation for home visits. 100% of participants reported the training improved their ability to observe, inquire and interpret human behavior; to articulate their professional opinion verbally and in writing; and to reflect on the power dynamic present when working with families.

Staffing levels are also an important element for building work capacity, decreasing the dearth of experience and growing subject matter expertise. Over the report period, each region was assigned a human trafficking specialist. The EPAC Unit added an education quality specialist to work with the Georgia Appleseed program to address discipline and tribunal issues, and all vacancies were filled in the Early Childhood Education section. Operating at full capacity allowed the team to concentrate on four areas of work: educational programming, school readiness, training and technical assistance, and parenting youth in care. This work helped to ensure that children in DFCS custody are enrolled in the most appropriate quality rated early learning setting through comprehensive referral and support services and, for children who cannot benefit from a traditional quality rated early learning setting, ensure they receive appropriate early education alternative support services such as curriculum training to foster parents and/or enrolling children in a homebased or home visiting program.

The inclusion of the technical assistance component of the work allowed staff to educate internal and external partners on the importance of early learning and development for children in foster care under the age of five including the importance of early brain development, how to work with children who have experienced trauma, and how to offer trauma-informed care. The EPAC unit held 152 Education Academies, training approximately 1,928 stakeholders about special education laws; school discipline and tribunals; how to complete education stability plans; and how to advocate for foster youth.

Individualized education plans (IEPs) was on the rise this past year. Between March 2019 and April 2020, 491 IEPs were reviewed. EPAC staff completed 1,003 case consultations with case managers, supervisors and other support staff, assisting them with enrollment issues, expulsions, IEP recommendations and special education issues.

In support of the work they do to provide appropriate health services to youth, the WPAC unit hosted the 1st Health Summit on October 10, 2019, in Macon. Some of the topics covered include the importance of EPSDT and early detection of childhood disorders, Medicaid waivers, psychotropic medication trends for youth in care, Local Interagency Planning Team (LIPT) meetings, and children medical services. A Medicaid Navigation Guide for youth in care was completed and given to staff to walk them through the steps necessary to help a child maintain their Medicaid eligibility.

g. Constituent Engagement

New Procedures for Providers

Georgia's Office of Provider Management works extensively with the state's contracted providers and other stakeholders to continuously assess the needs of those who use their services and to advance new processes and tools for operation. They worked with the providers to develop a progressive discipline process to formalize the disciplinary and corrective measures so there would be an overall consensus on how provider compliance and progress is tracked and assessed. The unit incorporated new methods for fostering and facilitating technical assistance to providers as a whole, thereby, more effectively troubleshooting concerns and identifying possible areas of growth to help reduce the likelihood of future non-compliance.

Another accomplishment arising out the Office of Provider Management's effective engagement with their constituency is an on-call rotation schedule of identified resource developers who will be on call each week to answer inquiries from contracted CPA providers and others regarding CPA foster homes. Moving forward, there will be one centralized person that providers and others can go to, to address related foster home concerns. Since implementation, OPM has received an abundance of positive feedback from providers who prefer the consistency and how it has helped resolve the question of who providers should go to, to get answers to basic resource development questions. Providers view this change as a supportive resource that has strengthened OPM's partnership with contracted CPA providers. An additional step toward that strong partnership, OPM now hosts regular CPA partnership meetings to provide them with relevant updates, supports and resources; to respond to questions, and discuss issues or new developments that broadly affect contracted CPA providers.

Navigation of Behavioral Health Systems and Networks

The CCTU has worked with constituents statewide to find a way to enable families to better navigate Georgia behavioral health systems and networks. Families who need intensive in-home supports, resources and/or psychiatric treatment which they cannot afford, or insurance will not/no longer cover due to medical necessity are being identified through post adoption

cases, biological families or hospitals. The ability for families to navigate disjointed and inefficient service delivery systems especially when in crisis are taxing and services often are not available in rural communities. These system gaps result in limited community capacity to support families with complex needs, abandonment at local hospitals and multiple ER trips. For those who enter foster care, it may result in delayed positive permanency outcomes. In a collaborative effort with statewide partners CCTU is using family behavior health support guides and limited state funds to support families in need of treatment for their children/youth and intensive in-home support referrals or preventive care.

Youth STEAM Exhibition and Leveraging of Funds

Because of their extensive interactions and co-labor with a multitude of non-profits and public entities, the Afterschool Care Program has been able to serve 71 counties and reach 30,000 students via 39 partner organizations. The Afterschool Care Program funds quality year-round out-of-school time programming to low-to-moderate income youth ages 5-17. It focuses on providing eligible organizations with the resources to reach students, and subsequently their families, in their local communities who can benefit from Science, Technology, Engineering, Arts and/or Math (STEAM) focused project-based learning and youth apprenticeships.

The program was able to host 300 participants from 37 programs at the Youth Steam Exhibition July 11 – 12, 2019. For the exhibition, 39 programmatic teams come together for 1.5 days to enjoy workshops for both youth and adult supporters and to participate in the STEAM competition which features the State's best

STEAM projects. The funding awarded from the Afterschool Care program covers necessary expenses like personnel, transportation for students and facility costs. This allows programs to use other funding sources to provide more expansive supports to the youth and families including literacy programs for adults, food pantries and other household supports. The collective impact of the Afterschool Program funding combined with fund sources from other programs is the delivery of provisions that supports the whole family unit thus supporting the economic foundation of the communities that are impacted.

Early Childhood Education Enrollments

As previously noted, the Early Childhood Education unit was able to exceed their target goal of getting 67% of eligible children enrolled in an Early Head Start, Head Start, Pre-K or other quality rated childcare funding program. The successful achievement of 82% did not occur in a silo. Numerous agencies had to work cooperatively together to make it happen. The execution of a data sharing agreement with the Department of Early Care and Learning helped to bolster results by allowing for additional data collection and analysis gained through the Georgia Cross Agency Child Data System (CACDS). The agreement facilitates timelier and quality data outputs that drive service array and allocation decisions for the 0 to 5 population.

Education Policy and Legal Advocacy

The results of EPAC's commitment to its partnerships is a heightened level of legal and policy advocacy for youth, an increase in cross-discipline information sharing and an assured platform for the youth voice. The Representatives from the unit presented at the Department of Education Federal Programs Conference, Georgia Conference on Children and Families and the Families, Adoptive and Foster Parent Association Conference to help stakeholders learn how to use EPAC services. The following list is of groups the unit has been forging a relationship with to secure educational supports:

- Georgia Appleseed – a nonprofit agency which provide advocacy, pro-bono legal representation and training to assist foster youth who are facing expulsion from school. In collaboration with Georgia Appleseed, EPAC, provides trainings to Division staff, child-caring institutions and foster parents, covering topics such as special education law, student discipline best practices, enrollment, mental health advocacy, and equity issues. In addition, Georgia Appleseed provides free legal consultation to case managers and education support monitors to help prepare for legal advocacy of a foster youth facing school expulsion.
- Georgia Education Climate Coalition (GECC) – an auxiliary group of Georgia Appleseed that focuses on school climate issues (school discipline, equitable access to services, mental health awareness and training, legislation that impacts school climate and student access. EPAC's participation in the coalition ensures the voices of Georgia's foster youth are heard. In addition, the Coalition disseminates pertinent educational legislation information that is shared with Division's staff and external stakeholders.
- Georgia Regional Educational Service Agency (RESA) – a Georgia Department of Education (GADOE) partner whose focus is to improve the effectiveness of educational programming across the state. As with GECC, EPAC's participation in the coalition ensures the voices of Georgia's foster youth are heard.
- State Advisory Panel for Special Education (SAP) – this panel advises GADOE on provisions of special education and related services for students with disabilities. Statewide member organizations (DJJ, DFCS/EPAC, Parent-to-Parent, Higher Education partners, etc.) are present to ensure that recommendations for policy changes are from a group that represents all parts of the state of Georgia.
- Together Georgia – is an alliance of children and family service providers. In collaboration with Together GA, EPAC shares information regarding educational rights, policies and practices effecting Georgia's foster youth. Additionally, EPAC provides consultation to the providers covering student-specific educational concerns.
- Georgia Court Appointed Special Advocates (CASA) - a nonprofit organization dedicated to improving the lives of children in foster care throughout the state. By advocating for

children who have experienced abuse or neglect, our volunteers amplify each child's voice and help change a child's story. In collaboration with EPAC, GA CASA provides trainings to CASA volunteers covering topics such as Special Education law, student discipline best practices, enrollment, mental health advocacy and an overview of EPAC services.

Constituent Engagement for Older Youth

In addition to the younger children, older youth have also benefitted from the State's persistent and effective collaboration with partners. See examples below.

- Increase of financial literacy learning opportunities for youth - In July 2019, the GARYSE Chafee Program piloted a Financial Literacy Fair in the Metro Atlanta area. The event, planned for 200 youth and 75 adults, was held at the Georgia Tech University Hotel and Conference Center. The purpose of the event was to increase knowledge and awareness around various topics related to financial literacy. The effort aimed to grant ILP-eligible youth an opportunity to participate in Individual Development Account (IDA) training, to have an onsite review of their credit report, and to learn of the Chafee services for which they may be eligible, such as the Education and Training Voucher. The Division partnered with the University of Georgia J.W. Fanning Institute to provide the Education Voucher Training to youth. The Multi-Alliance Agency for Children (MAAC) provided the IDA training utilizing the Jim Casey Youth Opportunity Passport curriculum. The adult supporters participated in the Your Money, Your Goals Financial Empowerment training and were afforded continued education training hours for their participation.
- In December 2019, during the Division's annual Teens R 4 Me Conference, the Division piloted its first Reality Fair for foster youth through a partnership with placement provider Creative Community Services, or CCS. The Reality Fair concept is a unique opportunity for youth to experience some of the financial challenges they will face when they start life on their own. It is a hands-on experience in which youth are randomly assigned a career with corresponding starting salaries with deductions. They were also assigned a family relationship scenario that included the addition of spouses and/or children. The youth then complete a budget sheet requiring them to live within their monthly salary while paying for basics such as housing, utilities, transportation, clothing, childcare and food. Additional expenditures such as entertainment and travel are factored in as well. Throughout the fair, they were exposed to many temptations for additional spending, and were challenged to learn how to balance their wants and needs to live on their own. After the youth have visited each of the various booths covering components of independent living, they were required to balance their budget, and then sit down with a staff volunteer counselor for review.

- Creative Community Services had conducted such an event for youth for several years and shared their concept for replication during this event. This partnership allowed the Division to host the Reality Fair with nearly 120 youth in attendance. The Division also solicited support from other community partners and stakeholders to participate. Over 28 partnering agencies served as vendors to provide education and employment information to youth upon exiting the Reality Fair event. The youth were able to engage with the partners after navigating through the fair and experiencing the difficulties of making life decisions with limited income and additional responsibilities.
- Establishment of housing partnerships to increase opportunities for youth exiting care - As a result of the Foster Youth to Independence (FYI) initiative which provided Tenant Protection Vouchers for youth exiting or aging out of the foster care system, the Division has been working in partnership with the Department of Community Affairs to support their request for funding to extend additional housing opportunities for youth in Georgia.
- Establishment of a pilot program to develop on-campus college supports for foster youth through partnership with EMBARK Georgia - Utilizing the strength of the existing partnership between the Georgia/RYSE Chafee and the Embark Network based at the University of Georgia's JW Fanning Institute for Leadership Development, an RFP process was developed to will allow a small sample of Georgia's postsecondary institutions to house a campus coach, funded in part with Chafee funds, to provide direct support to a group of young people with foster care experience utilizing the campus coach model developed by the Seita Scholars program based at Western Michigan University. A small subset of University System of Georgia and Technical College System of Georgia institutions were identified as preferred applicants based on data of existing ETV recipients. A total of 11 institutions across the state applied for and received funding to be utilized during the FFY 19/20 academic year.
- A meeting was held between the GARYSE Chafee Program, J. W. Fanning, and representatives from the 11 institutions to kick-off the initiative and allow the programs to share their existing efforts, or their plans to develop programming on their campuses to support the populace. The goal of the initiative is to improve the retention of foster youth at post-secondary institutions and to increase the financial, social, and academic supports provided during their matriculation.
- To increase the Division's reach and education services to youth who need more focused and streamlined education and enrichment support services in the mostly highly populated area of the state, the Division has partnered with the Multi-Agency Alliance for Children (MAAC) who now serves as the Lead Education Agency for Fulton and Dekalb Counties. As the lead, MAAC provides education support services to school age youth who are in grades 7 – 12 including:

- Providing tutorial services (when those services are not available or have been exhausted in the LEAs for children and youth in foster care) using certified teachers/Process, track and monitor extracurricular and enrichment services for youth ages
- Conducting educational assessments
- Creating Education Action Plans
- Recruiting and assigning parent surrogates
- Creating service provision and support plans for youth who:
 - have been identified as special needs
 - have Individualized Education Plans
 - have 504 Plans
 - are in GNETS or at-risk of being placed in GNETS programs
 - are Talented and Gifted

Statewide Child Abuse and Neglect Prevention Plan

In the early 1990's, several agency heads and stakeholders came together to create a Statewide Child Abuse Prevention Plan under the leadership and facilitation of the Governor Zell Miller, the Children's Trust Fund and the Georgia Child Abuse Prevention Coalition. The purpose of the plan was to establish statewide models of collaboration that could be replicated at the local level to decrease duplication of efforts and increase efficiency in the delivery of prevention services – with the goal of decreasing the occurrence of child maltreatment in Georgia.

Prevent Child Abuse Georgia and DFCS' Prevention Section facilitated an update to this plan beginning in FY19. This plan will not be owned by any individual organization; instead, it will be developed and approved by all involved agencies. The process began with a meeting of state agency commissioners and the executive directors of prevention organizations to participate in a facilitated discussion addressing why Georgia needs a comprehensive Child Abuse Prevention Plan; the proposed method and approach; and what needs to occur to ensure the plan meets the approval of all involved agencies.

Then a state level workgroup was brought together to determine the process for creating the plan. Workgroup participants include representatives from the following agencies:

- Georgia Department of Public Health
- Georgia Division of Family and Children Services

- Georgia Department of Early Care and Learning
- Georgia Department of Juvenile Justice
- Georgia Center for Child Advocacy
- Georgia Department of Education
- Prevent Child Abuse Georgia
- Georgia Bureau of Investigations
- Georgia Department of Behavioral Health and Developmental Disabilities
- Georgia Early Education Alliance for Ready Students (GEEARS)
- Voices for Georgia's Children
- The Office of the Child Advocate
- The Court Improvement Project
- Georgia Council of Juvenile Court Judges
- Georgia Chapter of the American Academy of Pediatrics
- Georgia Family Connection Partnership
- Georgia State University
- Child Fatality Review Board
- Children's Hospital of Atlanta
- United Way of Greater Atlanta

There were two online surveys for providers and community members; and over 20 provider and community meetings across the state (with community stakeholders, business leaders, local human service organizations and parents/community members) that were utilized to solicit community input for the plan. Lastly, the statewide workgroup will have two sessions to synthesize the information from the surveys and focus groups and develop the plan. The plan will go to individuals who participated in the statewide meetings for public comment. Then the plan will be presented to the state agency commissioners and the executive directors of prevention organizations for approval. The goal of the plan will be to identify areas and targets for improvement as it relates to primary and secondary prevention in Georgia and for services and resources to be expanded to meet the areas of improvement to improve child outcomes and reduce the occurrence of child abuse and neglect.

Essentials for Childhood Initiative

The state of Georgia has had a Steering Committee of representatives from a variety of state agencies working on the Center for Disease Control's (CDC) Essentials for Childhood Initiative since 2013. That initiative is a collective impact framework aimed at decreasing child maltreatment in a state by promoting safe, stable, nurturing relationships and environments (SSNREs) for all children and families. In 2013 the Georgia Department of Public Health, along with key partners, applied for the CDC's first funding opportunity for Essentials. Although not successful in becoming one of only five funded states, the applicant group quickly decided that we would continue to move the work forward without funding after a proposal from the CDC to provide technical assistance and support to interested unfunded states. Since 2014, this Steering Committee has been meeting on a regular basis in addition to attending annual Reverse Site Visits at the CDC, participating in monthly conference calls and webinars, and having frequent conversations with CDC Essentials staff. The Steering Committee consists representatives from the following agencies:

- Georgia Department of Public Health
- Georgia Division of Family and Children Services
- Georgia Department of Early Care and Learning
- Banyan Communications
- Georgia Center for Child Advocacy
- Strengthening Families Georgia
- Prevent Child Abuse Georgia
- Georgia Department of Public Health
- Georgia Department of Behavioral Health and Developmental Disabilities
- Georgia Early Education Alliance for Ready Students (GEEARS)
- Voices for Georgia's Children

Since 2015, funds have been provided by PCS for the Georgia Essentials Work. This funding allowed the director of Prevent Child Abuse Georgia to coordinate steering committee meetings and facilitate the project. Additional funds were set aside to contract with the Georgia Center for Non-Profits to conduct a landscape mapping of the agencies and programs that worked with children and families and determine how they aligned with the four goals of Essentials, which are:

- Raise awareness and commitment to promote safe, stable, nurturing relationships and environments.
- Use data to inform actions.
- Create the context for healthy children and families through norms change and programs.
- Create the context for healthy children and families through policies

The group also examined strengths and areas in need of improvement as it relates to primary and secondary prevention not only within the Division but within the entire state of Georgia. From this scan, the recommendations and priorities were developed in an Implementation Plan attached. This fiscal year, The Georgia Essentials for Childhood Initiative officially launched and expanded outside of the work of the Steering Committee. Representatives from disciplines across the state serve on workgroups to carry out the Implementation Plan. These workgroups include Communications and Outreach, Data, Policy, Programs and Systems Integration. This process set up a framework for Essentials for Childhood Georgia to the continue to assess agency and State's strengths and areas needing improvement related to prevention services, provide information that can be used to modify goals and objectives based on data and information available to the Essentials Workgroups and provide a multi-agency group to monitor of progress.

Parent Advisory Council

The Prevention Section is very excited about the formation and realization of the Georgia Parent Advisory Council (GA PAC) for the Division. The Council has had nine meetings so far, with their inaugural meeting and orientation training held in June 2019. During their second in-person meeting in the fall of 2019, the GA PAC developed their own vision, mission and goals for the fiscal year:

GA PAC Vision: Resilient communities where families are strengthened through authentic parent voices

GA PAC Mission: Parents and caregivers working with GA DFCS and our partners to build relationships with families, to develop parent leadership, and to advocate for parent informed policy and practice.

Goal 1 - Participate in various campaigns and initiatives to raise awareness and promote the importance of collaborating with parents and other service providers and key partners to strengthen and support families, create supportive communities and promote innovative child abuse prevention strategies.

Goal 2 - Participate in training projects that help strengthen families, build supportive communities, and increase awareness of the five research-based protective factors that give parents what they need to parent effectively.

Goal 3 - Work with PCS to provide input into written materials and other resources, website, and social media platforms to encourage parent input and ensure that all materials are parent friendly.

These are just a few examples of how Georgia has been able to successfully leverage its engagement with the community and internal stakeholders to enhance processes, create new protocols, stretch funding, and amplify services to children, youth and families. There are numerous other examples throughout this report especially the Collaborations section. More descriptions of significant work born out of partnerships at the regional level are in the Assessment of Performance section which includes outcomes from the C3 coordination efforts to achieve lead and lag measures related to service array.

B. Collaboration

a. Overall Engagement

For several years, Georgia's engagement with stakeholders and partners has been intentional, strategic and rewarding. Agency responsiveness to the community and quality assurance were two systemic areas described as positive in the Division's last Child and Family Services Review (CFSR). The review report (2015, reissued 2017) mentioned the State's commitment to collaborative partnerships as a strength, noting its decision to lift up constituent engagement as one of the pillars of the Blueprint for Change and to institute the C3 initiative to support the integration of the key planning and reporting structures: CFSP, CFSR and CQI. In addition to those efforts the state has since begun to develop a "HOPE Ecosystem" which is a network of community sites around the state that have joined the State of Hope (SOH) initiative. Through technical assistance, coordination and funding, the Division supports these sites as they provide local safety nets to prevent conditions that could lead to child abuse and neglect.

Not only has the state incorporated structures and feedback loops to ensure substantial and meaningful outreach to internal and external stakeholders, it has provided several platforms for sharing data and allowing constituents an opportunity to offer their assessment of the agency strengths and areas needing improvement. In response to stakeholder feedback that the agency should work harder to breakdown historical child welfare silos and increase transparency to achieve meaningful and sustainable collaborative efforts, the State incorporated objectives and strategies in its 2020 – 2024 CFSP that would not only guarantee consistency and frequency of collaboration, but would also track the results of those efforts. The Office of Strategy, Innovation and Engagement are working to increase SOH sites from 54 in 2019 to 204 by 2024 and build at least 30 formal civic, philanthropic and faith-based

partnerships. As part of the CFSP, C3 coordinators conduct case record reviews to track ongoing communication between case managers and providers, and court and judicial partners have incorporated objectives related to joint trainings between agency staff and legal and judicial officials.

Understanding that quality communication is a two-way street, Georgia has worked to become better at listening. Agency staff are mindful that in earlier years the agency tended to host meetings nearly exclusively to deliver information. Mechanisms for dialogue and expression have been enhanced to ensure the State is doing a better job of hearing what partners have to say about agency and community processes, concerns and achievements, and what they have been working on within the community to further the State's vision for strengthening families. The Quality Assurance (QA) Unit interviews stakeholders during case reviews including children, parents, relatives, foster parents, service providers, legal representatives, case managers, and supervisors. Feedback from over 1,500 case participants has been incorporated into QA reviews between April 2019 and March 2020. At the executive level, DFCS sponsors four Destination Hope events a year. These are regional "roadshows" that are often multi-day events with members of agency leadership and targeted audiences (i.e. educators, law enforcement, health care providers, congregant caregivers, foster parents, etc.). They recently added an entire segment for birth parents, considering their needs and ways to better support them. The aim is to identify and address specific issues impacting the safety and permanency of children, and the overall well-being of families. Birthparent segments are generally closed sessions due to the nature of the discussions and the often-confidential information discussed. The intent is to have an intimate conversation with limited participants. Prior to COVID, the meetings were held in a private setting. Currently, with the use of TEAMS, the meeting invite is only sent to those who are essential to the conversation with the birth parent(s). As these segments provide great feedback and insight, they have been incorporated into the schedule for all Roadshows starting with 2020. The roadshows are coordinated by the Office of Strategy, Innovation and Engagement (OSIE). They often use feedback garnered by C3 coordinators at their stakeholder meetings and documented on monthly C3 reports to do a pre-assessment of the region, and then use that information to help drive the agenda.

b. Consultation and Collaboration with Families, Children, Youth, and other partners

The most common and arguably most effective method for collecting input from stakeholders is convening them into a meeting: cross-agency, advisory council, regional stakeholder, roadshow, townhall, panel, summit, conference and other target audience forums. For Georgians, there is no shortage of meaningful gatherings. During the report period, C3 coordinators collectively facilitated over 78 quarterly stakeholder meetings with over 1400 constituents, statewide, to discuss specific areas of concern as they relate to service array and each of them has hosted

one or more large-scale, regionwide meetings. Participants of these meetings include birth and foster parents, youth, and representatives of a wide sector of professions and expertise including education, health, legal, service providers, group homes, community service agencies, faith-based ministries and other outreach groups. Unlike the annual, regionwide stakeholder meetings where audiences tend to be more expansive and varied, quarterly meetings may focus on a more targeted audience. Youth, birth parent and foster parent participation at these tend to be fewer than in the broader annual meetings. There are a few exceptions, particularly in regions where the service array objective is related to the increase of foster homes or care portals. It is common, however, to have a birth parent or youth make a presentation (in person or pre-recorded) at the annual meetings.

Often, coordinators will administer surveys to their constituents to make sure they are including points of interest on their meeting agendas and are adequately capturing their sentiments about topics that were discussed. The feedback elicited from these events are captured on C3 reports which are shared with program area leads. While the agendas for the annual regionwide meetings vary, uniform components of the meeting include:

- A review of the state's CFSP (and/or PIP) goals, objectives and interventions
- Sharing of data to demonstrate and assess the state's progress in improving CFSR outcomes
- A "state of the region" segment whereas the regional director provides a snapshot of how the region is faring in comparison to the rest of the state. The director will often use this time to highlight the demographics of the region and areas of most need (i.e. additional foster homes, increased community services, enhanced engagement, court cooperation, etc.) and how others can help
- A discourse with meeting participants (often in the form of breakout group sessions) to allow them an opportunity to describe their contributions to helping achieve state objectives, offer recommendations, ask questions and brainstorm possible courses of action.

Stakeholders may provide input and even recommendations regarding the goals and strategies within the CFSP. Extensive input was collected from stakeholders at the regional level in the development of the CFSP. Nevertheless, the State must do a better job at making an effort to respond to the input that has been collected. Annual meetings for the first year of implementation of the CFSP will occur in the summer of 2020. Stakeholders will be asked for their thoughts regarding the State's progress thus far on the plan and will be given an opportunity to voice concerns, kudos and commitments to enhance their efforts to support plan objectives. They will be able to share this information in the meetings, in post-meeting surveys and via direct contact with C3 coordinators. The feedback will be documented on C3 reports that will be shared with program area leads. Stakeholder insights are incorporated into the APSR reports.

- The program leads include stakeholder feedback they have received from their program area meetings within their narratives in the APSR, particularly the CFSP section of the report
- The Quality Assurance team contributes their findings from stakeholder surveys primarily into the Assessment of Performance section of the APSR. The results of these surveys are additionally captured in the CFSP as the results are part of the target measures for Goal B, Strategic Focus B (service array), Objective IV.
- The CFSP Manager additionally incorporates stakeholder feedback, gleaned from C3 reports and Annual APSR Joint Collaboration meetings, throughout the APSR report.

Although the State has made strides in gathering information from partners, it now needs to take further steps to address information received (i.e. respond to recommendations and other input) and ensure conversations are not just started, but remain ongoing as needed. The State has done notably well with this with regard to addressing court barriers and concerns. The State's legal team received copies of the C3 reports which captured barriers regions were facing and began making presentations and Q&A sessions at C3-coordinated meetings around the state to respond to issues that were captured on the reports.

Joint monitoring of progress generally takes shape in quarterly stakeholder meetings, APSR joint collaboration meetings and ongoing program-specific meetings that program directors partake in with subject matter experts and their peers within partner agencies. C3 coordinators work with their constituents to set, implement and track lead and lag measures to improve in some area of service array. Stakeholders play a prominent role in the modification of lead/lag strategies which directly correlate with the aim to improve in CFSP target measures related to CFSR Items 2 and 12.

There has been little input from stakeholders regarding the modification of the overarching CFSP goals, but that may be because they had a strong voice in determining what they would be (workforce development, practice model, service array and stakeholder engagement) and are therefore satisfied with them. There has been little input regarding the modification of the strategies as well. This may be because this is just the first part of the first year of the plan. As state progress becomes more evidenced and known, it is likely stakeholders will become more vocal about what they would like to see adjusted. They will be able to voice their satisfaction (or dissatisfaction) with the goals and strategies in upcoming stakeholder meetings and will be given an opportunity to indicate if they would like to recommend adjustments, additions or deletions. They will additionally be offered an opportunity to commit to actions they can do to help support achievement of the plan.

Program leads are asked to include in their annual reports the collaborative work they do with constituents, feedback they have received and descriptions of how stakeholders have helped

monitor and/or implement their strategies. This information is rolled over into the State's APSR by the CFSP manager or federal programs director. Beginning in September, the program leads will be asked to report on a more frequent basis (quarterly) in an effort to obtain more thorough details.

See more about these measures and their results in the Assessment of Performance section of this report. At the state level, the agency hosts an annual APSR joint collaboration meeting in partnership with the Children's Bureau regional program specialists. In past years, the meeting agenda was similar to the ones used for regional meetings and the venue was within the community setting such as a community center, church, courtroom or conference center. Because of the COVID-19 pandemic, the state cancelled its original face-to-face setup and redesigned the meeting into a four-day, virtual format. Each day, a different segment of the CFSP and program service area was featured.

Due to positive feedback on the virtual format, and the ongoing challenges presented by COVID-19, the Division will continue hosting virtual APSR Joint Collaboration meetings. Two rounds of meetings will be scheduled (fall 2020 and spring 2021) to support continuity of discussions, and meetings will be scheduled by topic to ensure attendees can participate in all areas of interest. Stakeholders will be encouraged to provide feedback during and after each meeting, and the Division will be supported in incorporating feedback and suggestions into the work.

An advantage of using the Microsoft Teams software is that participants could visually see one another and type comments in the chat field throughout the duration of the meeting. This brought a level of familiarity and efficiency to the sessions in that no one had to wait to be recognized to interject a question and the facilitator could respond to inquiries as they arose rather than waiting until the close of the presentation. Although those with multiple interests in topics had to jump on different calls on different days, by breaking the meetings up into segments, the State was able to reach more stakeholders, and include people from a greater geographical range. There were 265 participants overall. Recordings of the meetings were emailed to all those who had been invited to them, regardless of attendance. Each meeting began with an opening from DFCS Senior Director Colleen Mousinho, followed by words of support and guidance from Children's Bureau, Region IV Program Specialist Donna Dummett; brief summary of the components of the State's CFSP by CFSP Manager Kym Crooms; and a presentation of CFSR other related outcomes data by Quality Management Director Steve Reed. Participants of the meetings included agency staff (from frontline to executive branch), members of the judicial/legal community, private providers, youth, foster parents, parent advisory council members, educators, community and public service agency representatives, Administration on Children and Families staff and other related stakeholders. Below is a brief synopsis of information reviewed and feedback received in each of the meetings.

Prevention

April is Child Abuse Prevention Month and Natalie Towns, the Prevention and Community Support (PCS) section director kicked off the joint planning meetings on April 27. She and Deputy Director Deborah Chosewood gave an overview of the Prevention and Community Support Section structure and services the unit provides as well as an overview of Georgia's Parent Advisory Council (PAC). She and Julia Day Neighbors, Executive Director of Prevent Child Abuse Georgia made a presentation on the Georgia Child Abuse Prevention Plan. Consultant Chris Allers led the 57 participants in a discussion around prevention strategies, resources needed for implementation of local plans and challenges such as COVID-19 that may impact implementation.

Participants shared insight, asked questions and speculated on what should be considered next steps for those who work in the prevention community. Most found the meeting helpful; someone from the Head Start program noted that she had not previously realized the quantity of partners and initiatives available for families in Georgia. Another partner shared information on exploratory work around existing poverty-informed trainings in order to educate individuals, organizations, and communities on proven models to improve outcomes for individuals living in poverty. Others talked of increasing access to family mental health services, economic support, family-friendly work policies, substance use programs, and life skills and financial literacy training for youth. Someone mentioned that it is key for service workers to recognize the association between food insecurity and child abuse prevention.

In recognition of possible upcoming challenges, stakeholders offered up various strategies. For example, one attendee said the State should consider that strategies to address "disproportionality and disparities are often the same strategies used to improve well-being for all children and families and should incorporate the principles of cultural competence and the recognition of biases." Although COVID-19 presents its own set of unique challenges, the attendees tended to agree that it gives an opportunity to be able to get creative in how others including are reached and the State's ability to use telemedicine to increase access to healthcare, particularly to address mental health issues. The current climate of the environment may further trigger the building of more infrastructure and capacity of communities and the education sector to help increase family resilience. There may need to be a greater focus on expansion of evidence-based afterschool, out-of-school, and summer programs.

One of the sources shared on the video call was a community action guide published by PCA:

<https://abuse.publichealth.gsu.edu/files/2020/02/PCA-Community-Action-Guide-2020-FINAL.pdf>

Someone else talked of developing safe messaging toolkits designed for multiple platforms to promote awareness in non-traditional areas and to develop new non-traditional partnerships.

There were two discussion questions asked in the Prevention APSR meeting:

1. How do you think COVID-19 will Impact plan implementation?
2. What do you feel local communities will need in order to develop & implement local plans?

Given the plan was already developed, from the feedback received during the meeting from the first discussion question, the Prevention Section and PCA Georgia decided to write a forward to the plan addressing the potential impact of the implementation of the plan as a result of COVID.

From the second discussion question, the Prevention Section and PCA Georgia will use the feedback received from the meeting to inform the planning of the implementation of regional plans this Fall.

Well-Being

April 28, 2020, 91 stakeholders participated in the APSR video conference focused on meeting the behavioral and physical health needs of youth. DFCS Well-Being Director Carmen Callaway stated the underlying foundation for well-being is supported by policy and practices. She invited meeting participants to use the chat feature or unmute their microphones to delve into a discussion around the effects of childhood trauma over a lifetime.

Case managers on the call were queried regarding what they have found to be the greatest needs of youth in care. Response included the need for dental work and Co-Star funding for braces. Amerigroup representatives confirmed their partnership with the agency, made a presentation on the health benefits of the Georgia Families 360 program and responded to comments made about the lack of access to care. Youth on the call shared some of their experiences and challenges. Regional staff noted the lack of insurance options in rural areas and having to travel long distances for care. Others mentioned the lack of access to medicines and difficulty in getting procedures scheduled. Someone with a helpful tip noted that care coordinators are available to help with medical authorizations and using the application to find providers that accept insurance.

Among the speakers was Shemkia Reid-Harris, manager of the Wellness Programming, Assessment and Consultation Services program and Well-Being Section Data and Systems Manager Nesha Jairam. They talked about the State's care coordination policies and provided data results from the DHS medical director, Dr. Priyanka Patel, consultations and significant health conditions reports. They shared that as of February 2020, 31% of the 12,567 youth in care was diagnosed with a medical condition. The most common conditions are prenatal drug exposure (historic diagnosis), failure to thrive (historic diagnosis), asthma, epilepsy, diabetes

and traumatic brain injury. The Well-Being director identified a video that would assist meeting attendees in better understanding how trauma affects the health of a youth (How Childhood Trauma Affects Health Across a Lifetime: <https://youtu.be/95ovIJ3dsNk>).

There has not been any specific follow up to the Joint Collaboration meeting. In future Joint Collaboration meetings, the Well-Being Unit would like to ensure that more attention and time is given to youth voice and youth shared experiences as it pertains to support in the areas of their mental and physical health. The desire is to create more opportunities for youth to provide their insight regarding ways the State can effectively support them (in partnership with Amerigroup). The Independent Living Program is in the process of creating a Youth Advisory Committee that will be an integral part in meeting these youth engagement objectives. State representatives will be participating in a national youth summit in August 2020 and the hope is that lots of new ideas will be generated that can be adopted into State practice, including active involvement with CFSP/APSR development, tracking, monitoring and implementation.

Permanency

For their part, on April 29, the Permanency Unit engaged in an interactive discussion to examine efforts to ensure children are appropriately placed in settings that meet individualized needs and family and community connections are preserved. Multiple efforts involving a wide variety of partners exist to ensure quality caregiving and timely permanency for children in Georgia's foster care system. The goal for the meeting was to focus on strengthening the State's most effective initiatives and system alignments to assure achievement of core permanency goals. Three decision points in the life of a case - conditions for return, case consultations, and permanency roundtables – were explored in particular. Tammy Reed, director of Permanency and Placement, led the conversation and posed the question of how to best create buy-in from the courts and direct service providers for conditions for return. The query generated several responses; the following points were made:

- Case plans need to include the baseline expectation for return (non-negotiable safety issues), as distinguished from services provided to enhance and improve long-term success. Too often case-plan completion is confused with return. As a regional director interjected, "It is critical to ensure the parents are fully aware of those conditions."
- Youth need to be engaged in the case planning. Including the youth in the discussions around conditions of return is not seen often enough. Staff tend to discuss the options around the youth, but not with them.
- Case plans vary greatly which requires different actions toward the goal whether it be reunification, non-reunification, or some other objective.
- Cases need effective family team meetings in the beginning of the case for case planning. FTMs help to move cases forward when there is input from the family. It often begins this way, but then becomes robotic in the next steps. This is when partnering is extremely important.

- Sometimes permanency, in the sense of reunification, is truly not an option.
- Pre-team calls are helpful for identifying conditions for return.
- Continual checkups for youth who have reunified with their parents and constant updates on how that process is going is important, for at least 6 months, especially at critical ages such as 15 or older.

A second topic centered on what CASAs would like to see in a supervisor/case manager case consultation. One of the CASAs on the call stated that she would hope that the consultation included follow-up on tasks outlined in the last consultation; consideration for conditions for return; opportunities for increasing the frequency and duration of family time; discussions around options for maintaining parental bonds and familial connections over severing rights. She also expressed the importance of the supervisor checking to see if the case manager felt supported. There was a general consensus that cold-case staffings and roundtables are helpful. However, someone pointed out that diligent searches need to be improved and fathers need to be explored more. Another claimed that it is sometimes difficult to get DBHDD to the table. Nevertheless, the staffings and roundtables are a vehicle for going back and reviewing the case history and making sure everything possible has been done to achieve permanency.

One of the youth on the call described her experience with the system, stating that while it is not perfect, she appreciates the strides that have been made. In particular, she said the process for transitioning youth from foster care to family or adulthood has improved. The policies have positively evolved but “once policy truly meets practice..., Georgia will exceed all goals in improving the system.” Another attendee, a retired judge, emphasized the importance of working with the children who are back in the home. “Too many times we have the parents complete a safety plan then return the child/ren” she said. “That does not tell you what you need to know about how healthy the family is or is going to be.”

As a reminder, the director of the Office of Child Advocate pointed out that the case plan does not necessarily have to be 100% complete; rather the standard is “substantial compliance.” At the same time it is vital to ensure that as safety threats are mitigated and families are reunified, that the behaviors/threats are not likely to return. Georgia’s Court Improvement Project coordinator recognized that there has been a lot of appellate cases in the last few years where DFCS moved forward with TPR even though the parent had completed everything in the case plan. “It seems that our case plans are not providing the clarity they need. And of course, in so many of our courts right now, even families that are ready for reunification are not getting it because many courts are not having video hearings,” he cautioned.

The former judge surmised that it would be good to have a specialized team who could be the experts on how to get services to high-level youth. This might be a way to counter caseworker turnover which is detrimental for these youth.

Several partners participated in the stakeholder discussions during the April 26th meeting. The agency was actively addressing the practice shifts required as a result of the COVID pandemic. During this meeting the permanency continuum was discussed inclusive of our Conditions For Return work. A

workgroup was already developed with our partners from legal, child advocate, and agency partners. This work is ongoing, and strategies are actively being developed to build capacity for the regions. Training has been developed, and the practice will be piloted in Region 4.

The Division also wants to establish a parent support network for birth parents, where parents who have been through the reunification process serve as peer mentors to parents who are currently going through this process. It is now in the initial planning phase and the hope is to have more information about this initiative soon. The reunification manager will join this work spearheaded by our prevention section to further our work around Condition for Return.

Georgia's Kinship Care unit convenes quarterly meetings with the program's evaluation team, kinship advisory committee, community partners and staff. Stakeholder feedback is utilized to inform program implementation, identify successful strategies and major challenges. This approach also assists in determining the extent expected changes in child or youth outcomes occur, and whether these changes can be attributed to the navigator program activities. In order to understand the complexity of this work, qualitative and quantitative data collection methods are used to gather and assess input from stakeholders. Data collection methods include:

1. Focus groups
2. Key community partner interviews
3. Kinship Caregiver and Staff Surveys

Throughout the year, the Office of Provider Management (OPM) conducts several workgroups which consistently include placement providers. The workgroups are utilized to discuss what is going well, areas needing improvement and opportunities. OPM frequently surveys our providers to review the recommended changes by the workgroups. OPM then reviews each survey and applies the recommendations if applicable. If not, the reasons some changes were not instituted is discussed during contract meetings.

The Reunification unit has met with various stakeholders regarding developing conditions for safe return when children are in out-of-home care. With these meetings, the hope is to inform practice around returning children to their homes as soon as it is safe and appropriate to do so. Legal and child advocate partners are included in the planning meetings for conditions for return.

Safety

The final session of the APSR Joint Collaboration meetings was spent reviewing data trends related to safety practice and exploring the state's framework for assessing safety. The 66-person discussion covered topics related to interactions with families who are involved with family preservation services and families where parents have custody but are operating with an out-of-home safety plan. Safety Director Laresa Price called on county level staff to offer their perspective on service provision opportunities and gaps. They described the benefits of the Impact Case Reviews and supervisor mentors. Safety Manager Tripp Jones described the procedures for developing out of home safety plans. As a cause for concern, one of the callers

said that there has been an increase in using grandparents as a safety resource and these cases are being closed without a legal connection being established.

A C3 coordinator responded to the speculation that during the pandemic fewer cases were being reported, but reported allegations tended to be more critical than usual. She identified steps case managers were taking to ensure contacts were being made as frequently as possible even if they had to be made virtually. Contacts are being escalated to face-to-face status as appropriate. When this is done, the staff take special care to ensure proper social distancing.

There was a significant discourse on policies, practices and training. The safety manager informed the group that training regarding kinship care had been completed and technical assistance and virtual refreshers are made available to staff the last Thursday of each month. A family preservation manager shared a case flow chart that is used as a reference guide and said that the safety videos they use were created in collaboration with the State's professional excellence team.

Additional suggestions to incorporate have not been received since the April meeting. Feedback loop meetings with the field, Judges, Medical Providers, Educators, and CAPTA Panels continue to ensue. DFCS has been working with DBHDD, OCA, and DPH regarding Plan of Safe Care and ways to enhance practices.

DFCS has regular meetings with Partners including-OCA, CIP, DBHDD, DPH, Department of Education, and CASA.

Additional meetings are held with Providers monthly including MAAC and members of Together Georgia and additional providers from around the state.

DFCS has attended Court Improvement Project meetings talking with Judges about their concerns and providing clarification regarding agency policy and practice.

DFCS has worked with OCA receiving feedback regarding appropriate removals of children. The agencies have developed a joint effort in Pre-removal Staffings that include OCA staff, regional staff, and masters level employees to staff cases prior to the removal of a child from their home for foster care.

CAPTA Panels provide an assessment of the agency with recommendations. They provide feedback from interaction they have had with their community partners and interaction with agency staff. 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 served.

c. Collaboration with Tribes

Although the State does not have any federally recognized tribes, the Agency has a liaison who meets bi-monthly with the leadership of the state recognized Georgia Tribes. The Governor's Council on American Indian Concerns provides a forum for the agency to update tribal councils on policies, programs, services and progress toward achieving state goals and objectives. The

leaders, in turn, are given opportunities to review policies as they are being crafted and to contribute their ideas. Tribal leaders are invited stakeholder meetings. Although one registered for the APSR joint collaboration meeting, she was unable to participate. See section N of this report for a more detailed description of how the State engages tribes.

Collaboration with Courts and Members of Legal and Judicial Community

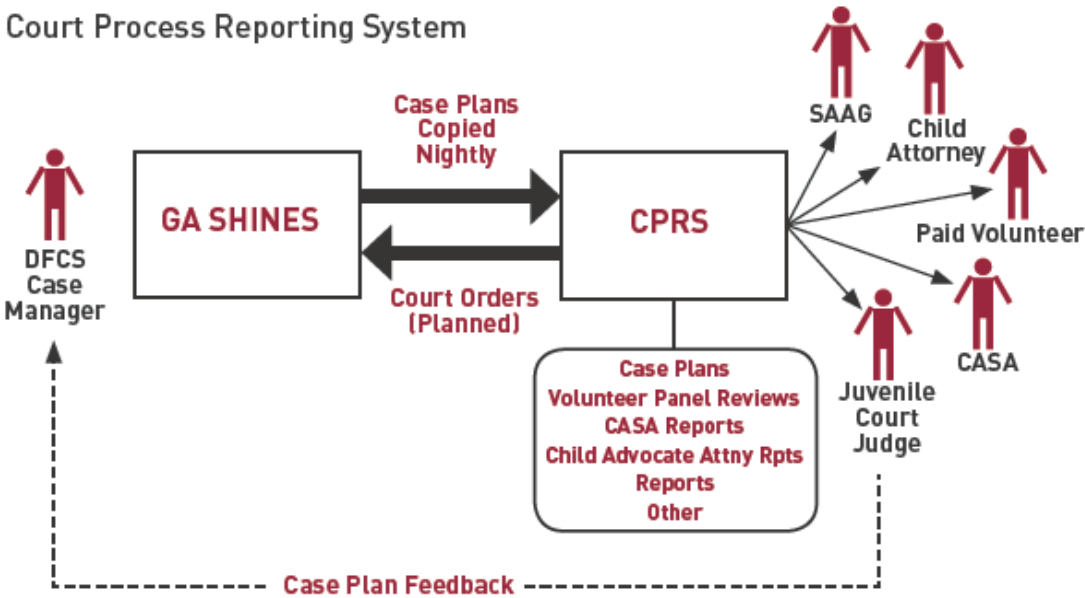
DFCS conducts monthly collaborative meetings with the Office of the Child Advocate (OCA), the Court Improvement Project (CIP), and the Barton Child Law and Policy Center of Emory University (Barton Center) in an effort to stay connected and focus on shared goals.

Since 2015, court collaborations have included No Reasonable Efforts meetings, child fatality review sessions, mock trial trainings, Child Support Accountability Court, SAAG staffings, task force meetings, judicial breakfasts and drug court meetings.

For the CFSP, many stakeholders within the judicial community were interviewed by federal partners and served on PIP development and policy workgroups and the PIP steering committee. Many of these same professionals served as part of a taskforce generated to review the final drafts of the CFSP. They worked alongside program area leads and the State's child welfare general counsel to incorporate strategies in the plan that would enhance the partnership between the courts and the Agency. See the Plan for Improvement section of this report to read more about the collective work around the Multi-Disciplinary Child Abuse and Neglect Institutes, Cold Case Project reviews and implementation of the Court Process Reporting System (CPRS).

The Division works collaboratively with a large contingency of judicial stakeholders for the continued monitoring/modification, and reporting of the CFSP. These collaborative efforts occur in a variety of different settings. Collaboration for monitoring and reporting often occurs through complementary meetings such as Court Improvement Initiatives, Multidisciplinary Child Abuse and Neglect Institutes, judges meetings, and many other gatherings. Admittedly, the Division must be more intentional to bring together these judicial stakeholders for specific discussions regarding the CFSP goals and strategies and avenues to accomplish those objectives.

Court Process Reporting System



The State’s Court Improvement Project (CIP) works with court clerks to enable the clerks to upload court orders to CPRS. CPRS then transfers these files to SHINES on a daily basis. This “real time” data sharing network assists both DFCS and CIP to comply with the requirements of Georgia’s juvenile code, access data from Georgia’s Department of Education for children in care, and gain access to data from Georgia’s Department of Juvenile Justice.

CIP has been an ongoing project since 2009 and focuses on identifying and removing barriers to children achieving legal permanency. Local regions reach out to program directors and General Counsel, sometimes by way of C3 reports, to make them aware of court barriers and concerns. They then reach out to the CIP to address them with SAAGs, juvenile court judges, DFCS staff or others as needed. C3 coordinators have hosted stakeholder meetings expressly for the purpose of discussing these issues. CIP team members, program leads and the General Counsel have supported these meetings by presenting and/or leading Q & A sessions. There is usually significant participation by judicial and court officials at Agency roadshows and they willingly guide conversations on court procedures and practices.

A team of judicial professionals (CIP staff, attorneys, judges, child welfare agency leadership, and the CBCAP lead) attended the State Team Planning Meeting in Washington, D.C., in March 2020, to help state teams work on common goals and align the visions of CIP, CFSP and Community Based Child Abuse Prevention (CBCAP). The team worked together to determine a prevention vision that all units could support and promote to their constituents.

DFCS staff attended the annual Juvenile Court Judges Conference where they listened to the concerns of the judges and provided them with clarification around Agency policies. They worked with the Office of the Child Advocate to ensure appropriate removals of children and encourage pre-removal staffings. They continue to work with the Douglas County Juvenile

Court to successfully handle cases where there is a prenatally substance-exposed infant. The Douglas County Juvenile Court Quality Improvement Center (QIC-CCCT) grant core team, Women's Treatment Recovery Services (WTRS), and CIP have had ongoing and meaningful collaboration that directly impacts the agency's work with the courts, legal representation of children, and family plans. The QIC-CCCT demonstration site is creating a model for a systemic response to maternal substance use and prenatal exposure to substances that will strongly inform statewide efforts. WTRS has worked with the Agency to align policy and access timely services for mothers. The CIP presented to the CJA Task Force and will work with that force's reinstituted Child Representation subgroup ongoing. The director and staff attorney also participated in a session to identify objectives related to child representation and plans of safe care for the new CAPTA plan.

All of the following entities have significant engagement with the agency and are primary partners at the table, regularly helping the agency to assess strengths and gaps, review goals, objectives and interventions and monitor progress to enact the State's vision for child welfare:

- Administrative Office of the Courts / Court Improvement Program
- Office of the Child Advocate
- The Attorney General's Office
- Georgia Court-Appointed Special Advocates (CASAs)
- Georgia Council of Juvenile Court Judges
- Emory Barton Child Law and Policy Center

Areas of interest and topics of discussion with these groups include trauma-informed courts, ICPC border agreements, GAL representation for children in foster care, child abuse protocols, legal standards, prevention of sex trafficking, and evidence-based parenting and trauma treatment for adult drug court participants and their children.

d. Collaboration with Youth

The Children's Bureau urges states to meaningfully engage and integrate the voice of families and youth in the work of child welfare. Information Memorandum ACYF-CB-IM-19-03 disseminated August 2019 emphasized the need for agencies to be intentional in how they involve youth in their planning and implementation of services. Georgia has traditionally engaged in activities that support its youth, working to ensure their issues and concerns are addressed, their victories are celebrated and that their opinions are respected. Common platforms such as youth panels, surveys, townhalls and listening sessions were used to gain insight into the youth conscious. However, in recent years, the state has worked to be more innovative in its approach to getting youth involved and plans to be more proactive in developing opportunities for youth to not only hear their counsel but also to allow them to have more influence over the state's strategic planning, training and decision making.

Annually, Georgia hosts what may be its most engaging and interactive event for youth inclusion, the Teens R for Me conference. It is a multi-day, overnight adventure for older youth who are in foster care. The conferences are filled with enjoyable workshops and activities that seek to equip youth with skills necessary for a successful transition into adulthood. Topics cover information that seek to ensure the youth will be safe, healthy, educated, employable, and connected to a supportive circle of people. Often, this is a groundbreaking experience for youth, some of which have not previously spent time away at a camp or a hotel vacation. They get to learn, engage with their peers, and make lasting memories. Several agency staff serve as volunteers and chaperones thereby getting a chance to talk with the teens one on one. Because youth get to help plan the event and even facilitate some of the activities, staff also get to view this unique experience from their perspective. Also, from a statewide perspective, Georgian school graduates are celebrated in the spring when they achieve an academic diploma, degree or vocational certificate. The state hosts a Celebration of Excellence program that features accomplishments by students who have made it to these milestones while in care. Surveys were administered at these two events to gather information on how LGBTQIA youth need to feel supported and connected to appropriate resources.

As the state works to develop statewide plans and reports, it generates feedback from stakeholders regarding the state's achievements over the past year and primarily uses a state-level APSR joint collaborative meeting to feature data and presentations reflective of the past year. At these meetings, the state discusses current challenges and gaps in performance and invites the attendees to help address the concerns. The youth voice at these gatherings are critical because they help to paint the full picture. Fewer youth participated in the 2020 meetings than the 2019 meeting, primarily because of COVID-related challenges. However, there were at least two youth on each virtual call. There were four to six youth on the Well-Being and Permanency calls. How the state is doing is not just described from the agency personnel, or adults from other related fields (health and community providers, educators, judicial and law enforcement officials, etc.) but also from the purview of the young people who are directly impacted by the work. In past years, youth have been recruited to participate in panel discussions, offer ideas for agenda topics and even placed in a co-facilitating posture matched with another professional. The state supports the youth in these roles by participating in pre-meetings to allow them time to discuss topics of interest and to consider their thoughts and reflections prior to being placed in the spotlight. The young adults are usually assigned a point person they trust to help them get rid of the "butterflies" and make them feel at ease as they tell their difficult stories. The authenticity of their reflections often generates a shift in the mood of the meeting, reminding the attendees of the critical nature of our work and helping the group to be better able to set priorities that drive goal and strategy development. The meeting in April was the first time in a while that youth participated in a collaboration meeting with the Safety Unit.

In the region, youth are served by Independent Living Program (ILP) specialists. As noted in the state's 2020 CFSP, the state John H. Chafee Foster Care Program for Successful Transition to

Adulthood (Chafee) is commonly known as ILP in Georgia and is also referred to as Georgia Resilient, Youth-Centered, Stable and Empowered (GA RYSE). “The program serves approximately 3,000 youth and young adults ages 14-25 who are in various stages of transition statewide. Chafee, including the Education and Training Voucher (ETV) program, provides supports and services to youth who are likely to age out of foster care and to young adults ages 18-21 who have opted to remain in care or have left foster care.”² Additionally, the Ansell Casey Life Skills Assessment (ACLSA) is used to assist providers in determining the independent living skills of the youth that they serve, ages 14 years and up.

In recent years, the state has created new prospects for ensuring youth viewpoints are not lost in the conversations about them. At the state level, youth serve on a youth policy council helping to review policies before they are dispatched, and in the regions, C3 coordinators help to recruit youth to participate on panels that screen applicants for State of Hope (SOH) grants. “SOH builds on the Communities of Hope concept started by Casey Family Programs, a national philanthropic foundation, and the work of the Northwest Georgia System of Care Advisory Council and the Northwest Georgia Region of Hope. Georgia is the first state in the country to attempt a State of Hope – identifying and anchoring multiple Region of Hope sites across the state.” Recognizing the state’s strategic plan drives much of what the state prioritizes throughout the year, and that much of the planning begins at the local and regional levels, the C3 coordinators are being deliberate to make sure youth have a view of the child welfare work at that level from more than just the receiving end. While youth have always been invited to attend regional stakeholder meetings, coordinators are offering opportunities for them to help design the meetings, co-facilitate and plan them. Young talent has been recruited to be speakers at case manager and supervisor summits and regional roadshows (executive-level sponsored, stakeholder multi-day events). Virtual meeting capabilities have helped staff to become creative in their outreach to youth. During the COVID-19 public health emergency, ILP specialists have host webinars on topics like health awareness and healthy eating. They have also featured youth in reunification videos. This year’s graduation recognition celebration included a Summer Summit Zoom Party.

It is not only essential for the Division staff to be connected to youth it is also crucial for community partners to be understanding of their mindset. The Georgia Campaign for Adolescent Power and Prevention (GCAPP) hosted a virtual meeting for young people to discuss their feelings regarding COVID-19. The Georgia CASAs hosted a special breakfast for teens and the managed healthcare provider Amerigroup featured youth as primary guests at their townhall. Along with the youth, community stakeholders take part in transitional roundtables to ensure they understand the employment, housing, health and education needs of the younger generations. The state has an exceptional relationship with Georgia’s Multi-Agency Alliance for Children (MAAC) which serves as the lead education agency for Fulton and DeKalb Counties. As the lead education agency MAAC provides education support services to school

² Georgia 2020-2024 Child and Family Services Plan Report, submitted June 2019

age youth who are in grades 7 – 12 such as tutorial services, extracurricular and enrichment activity tracking, educational assessments, education action plans, parent surrogate assignments and support for students who have been identified as talented and gifted or special needs, has an individualized education plan or 504 plan. Education specialists of the agency Education, Programming, Assessment and Consultation (EPAC) program work with the Georgia Appleseed program to address discipline and tribunal needs of youth. Trainings are provided to foster care liaisons in partnership with the Department of Education and the REACH Georgia Scholarship program to help promising low-income students graduate from high school, gain scholarships and be academically successful post-graduation.

Youth engagement coordinators of the MAAC EmpowerMENT team were invited to the state's retreat for C3 coordinators January 9 -10, 2020. The setting presented an opportunity for both sets of the coordinators to highlight aspects of their work. They had a substantial dialogue whereas the youth coordinators were able to show off technology skills and demonstrate how creatively gifted they can be when given a chance and the C3s were able to gain ideas on how they can get youth enthusiastic about becoming more intricately involved in the state's strategic planning processes. From that dialogue and other discussions, the C3s now have a point of contact to help them discover interested youth in their respective regions and many of them are considering mentorship options where they would mentor a youth in a way that may spark an interest in a child welfare career. In the upcoming year, many C3s will permit some youth to have a "corner" in their online newsletters, co-facilitate their quarterly meetings, participate in some of their continuous quality improvement meetings and shadow staff. The state already has a youth policy advisory council and the state is considering leveraging this vehicle to present not only proposed policies, but to also allow this platform to be "ground zero" for proposing CFSP and PIP strategies that would directly affect young people.

Fortunately, Georgia has a strong history of engaging youth in state planning activities, but it was often as a minimally participatory bystander. It has been largely understood that youth need to tell their stories, and adults need to ponder how their decisions impact youth outcomes. Indeed these honest and sometimes heart wrenching accounts have likely led to the prevention of other child traumas and unnecessary disruptions. However, the prevailing myth had been that youth do not know enough about the work processes to be able to directly address policies and practices. Increased transparency, more opportunities for exposure to the "behind the scenes" processes, and intensified consistency has better enabled youth to demonstrate their effectiveness. Close-knit settings (and mentorships) can be transformative, allowing youth to feel more comfortable in expressing their opinions and the warmth of their enthusiasm to be felt. The state will continue to seek ways to view the work from the youthful prism, but it will also work more keenly at putting that youthful energy in prominent positions to build leadership strength and impact real change.

e. Stakeholder Involvement in Assessing, Reviewing and Monitoring Progress

As mentioned earlier, the State extensively shares and retrieves data, provides information and updates, and collects input from stakeholders with varying perspectives. In addition to convening stakeholder meetings and reviewing C3 reports, Georgia gathers constructive input from stakeholders by establishing and participating in relevant workgroups and councils. Many of the workgroups were “ground zero” for forming the goals and strategies for the current CFSP. Program staff often turn to these audiences to improve coordination of efforts, review the feasibility of strategies, learn more about work being done outside of the agency that impact shared objectives, and to seek opinions on possible improvements or needed adjustments. As an outgrowth of these kinds of meetings, the Agency is involved in several collaborative projects and initiatives that align well with the State’s vision for making children safe and strengthening families for a stronger Georgia. See Section C of this report for more information on existing feedback loops that have been and continue to be used to monitor progress on strategies and objectives. Below is a list of recent group activities, work produced from those conversations, assemblies and associations, and a sample of some of the CFSP goals and strategies related to the work.

CAPTA Panel

CAPTA panel members provide feedback from interactions with their community partners and agency staff. Regular meetings are held to assess progress on topics such as policy changes and recommendations, safety assessments, court process improvements and barriers, staffings, voluntary kinship, child abuse protocols, family preservations practice, practice improvements, and trainings. Most prominently, the panel has been providing written and verbal feedback regarding Plans of Safe Care. They review data regarding outcomes and types of cases received. In light of information obtained, the agency adjusted monthly case review questions and the review process.

Goal B, Strategic Focus A, Objective 1 – Practice Model

Goal B, Strategic Focus A, Objective 2 – Performance gaps related to assessment of safety

Goal B, Strategic Focus A, Objective 3 – Kinship Continuum

National Training and Development Curriculum for Foster and Adoptive Parents.

Georgia was selected as a pilot site for the National Training and Development Curriculum for Foster and Adoptive Parents. This pilot is designed to help develop a national evidenced based curriculum for state use. Georgia has opted to partner with 13 agencies to assure implementation in the pilot region. The 13 agencies and Region 4 received the train-the-trainer curriculum February 2020 and will participate in training for their prospective caregivers. They

will provide feedback and lessons learned to Spaulding for Children. The final curriculum is projected to be developed and ready for consideration by 2023.

Georgia Cares

The Agency works collaboratively with Georgia Cares to coordinate efforts to meet the needs of treatment and recovery victims. Data provided by DFCS regions, the call center, SHINES and Georgia Cares specialists are used to set meeting goals, review processes, and troubleshoot areas of concern as needed. Consultations include research of informed practices and evidence-based assessments.

Multi-Agency Alliance (MAAC) Crisis Continuum

The MAAC Crisis Continuum is a collaboration in partnership with the State Placement Resource Office that is designed to prevent otherwise difficult to place youth from having to stay in a hotel while awaiting foster care placement. A dedicated MAAC staff works with youth who are placed in designated crisis homes for 30 days while an appropriate long-term plan is developed. MAAC implements an intervention model that is informed by High Fidelity Wraparound practice and trauma responsive principles. The process relies heavily on youth voice, developing a culture of support, securing sustainable resources and helping young people achieve and maintain permanence. MAAC utilizes a System of Care perspective; believing that individuals, agencies and child serving systems all play a role in positive outcomes for youth. The team receives weekly census reports and meets monthly to review a narrative analysis of project accomplishments to include by objective, goals, feedback, staff activity, program progress, or any other phase of contractor activity to assist the Division in program evaluation. The continuum will continue to engage in strategic planning and active recruitment efforts to expand the capacity of the Crisis Continuum program.

Goal B. Strategic Focus A, Objective 4 – Connect by 21

Goal B, Strategic Focus A, Objective 6 – Education Assistance

Goal B. Strategic Focus B, Objective 3 – Market youth services

Georgia's Interagency Directors Team (IDT)

As part of a cooperative agreement among high-level agencies, an Interagency Directors Team (IDT) meeting is held monthly with representatives from Department of Behavioral Health and Developmental Disabilities (DBHDD), Department of Human Services (DHS), Department of Juvenile Justice (DJJ), Department of Community Health (DCH), Department of Public Health (DPH), Department of Education (DOE), Department of Early Care and Learning (DECAL), and Georgia Vocational Rehabilitation Agency (GVRA). The work of IDT informs policy and practice and allows for shared resources and funding. IDT currently consists of more than 20 representatives from state agencies and nongovernmental organizations to promote increased cooperation, coordination, and integration at the administrative and service delivery levels

between the parties for the benefit of children and adolescents in need of or in receipt of behavioral health services, and their families.

As a result of this work, this multiagency workgroup, along with its non-governmental partners, have developed and continue to improve Georgia's System of Care State Plan which, in part, outlines strategies to increase access to community-based services. For example, this initiative developed and published a behavioral health map that uses a no-wrong-door approach to strategically guide caregivers through the system to identify appropriate resources based on a youth's specific need(s) (e.g., a developmental disability, a behavioral health/substance abuse, DFCS involvement, and/or legal involvement with the Department of Juvenile Justice).

Several CFSP goals and strategies are supported by this work.

RBWO MWO and Specialty Program Designation Workgroup

Collaboration to include DFCS field staff, RBWO private providers and state office partners to assess Maximum Watchful Oversight (MWO) through Medically Fragile placements designed to care for children who require serious to severe emotional, behavioral or psychiatric management and/or complex health procedures, special therapy or specialized equipment/supplies to enhance/sustain their lives. Our high-end population fall within these RBWO characteristics and are primarily placed within our RBWO provider network (CCIs and CPAs). Additionally, there appears to be a statewide lack of understanding of MWO – SMFWO program designations, resulting in inconsistent practices related to referrals, placement, placement stability, discharges, and rates. The workgroup is designed to take a deep dive into the practices and processes that contribute to these issues and provide recommendations to DFCS senior leadership for systematic changes.

High Needs Population Workgroup

The primary goal of this workgroup which consisted of DFCS field staff, RBWO private providers and state office partners is to clearly define and identify all “high end” populations within the Georgia foster care population. Benefits and outcomes include: to show accountability to our youth for long-term solutions, improve cross-agency collaboration and partnership, ensure cost effective strategies to support the needs of high-end children/youth and reduction to safe transitions.

- Develop one and/or most reliable data source(s)
- Draft a consistent, definition of children/youth with “high-needs”
- Identify the number of children that will be classified as “high-end”
- Review, prioritize, and identify projects existing and/or in-progress
- Identify a clearly defined process for service delivery including collaboration and map to specific interventions that meet the needs of children and youth

- Ensure the interventions are incorporated into policy and practice
- Develop change management activities for implementation of the improved service delivery model

Common Language to Care Workgroup

Early in 2019, partners who are key to the health management and support of youth in care were convened and instituted as a Care Coordination Team Unit (CCTU). This unit manages medically high-end youth cases and meets with DFCS staff and health partners to discuss the concerns and challenges identified to support the health needs of youth and young adults in care, specifically as they age out of our care. A healthcare summit was hosted by the Division as well in October 2019 to bring together these kinds of key leaders to help direct child/youth service supports within Georgia child welfare system. Topics deliberated include:

- Current State of Health Support of Youth in care
- Early intervention supports
- Children medical services
- Local teaming for positive outcomes
- Resources for extended care

Together Georgia

Together Georgia has an annual executive retreat in which Together Georgia member executives, senior leaders and DFCS leaders participate. Together Georgia has approximately four specialized monthly meetings with Together Georgia member providers including CCI, CPA, Family Preservation/Behavioral Health and faith-based providers. Members from DFCS state office participate in these meetings quarterly to address any needs/concerns being expressed by RBWO providers. In addition, Together Georgia sponsors a Georgia Conference on Children and Families, which was attended in 2019 by more than 500 public/private sector, child welfare providers and vendors. The conference is the largest annual interdisciplinary event in Georgia designed to bring together the community that serves children and families. DFCS CFSP manager serves on the board that develops this conference and helps coordinate the conference as well as DFCS staff and workshop presenter participation. Featured at the conference are specialized tracks, plenary sessions and networking opportunities with the goal of improving outcomes for the children and families served. A full spectrum of disciplines and organizations serving Georgia's children and families join together for this event, including child advocacy, juvenile justice, social service, education, legal counsel and the faith-based community. The conference provided a forum to improve competencies, learn from experts in the field and network with other professionals who have a wealth of experience. A sample of workshop sessions from this year's conference themed A New Playbook: For Families included:

- Data Driven Decision Making
- FFPSA: Understanding the Accreditation Process for QRTPS
- The Impact of Workplace Culture
- The Impact of Maternal Substance Abuse and Child Development
- Georgia's Opioid Abuse
- Building a Response to Trauma
- The Sex Trafficking of Georgia's Children
- How to Utilize DFCS Education

Along with Together Georgia, the Office of Provider Management, and Department of Juvenile Justice Residential Child Care Licensing conduct a quarterly New Provider Orientation that provides introductory information each year to approximately 700 participants who are interested in becoming RBWO providers. Another collaboration event with Together Georgia is Practice Matters which are quarterly meetings with DFCS and RBWO providers to discuss what is going well, address needs and develop strategies to address the identified needs.

The state's EPAC Unit made presentations at the Georgia Conference on Children and Families regarding educational assistance, IEPs and early education. (CFSP Goal B, Strategic Focus A, Objectives 6 and 7; Strategic Focus B, Objective 2)

Provider Leadership

Foster Family-based Treatment Association (FFTA), GA Alliance of Therapeutic Services (GATS), Together Georgia, RBWO Providers, EmpowerMENT, Residential Child Care Licensing (RCCL) and DFCS leadership participate every other month in a Provider Leadership collaboration meeting. This meeting is co-lead by RBWO providers (a representative is selected quarterly) and DFCS leadership. In this meeting, providers can discuss any systematic needs and/or ask questions. DFCS leadership utilizes this opportunity to discuss any changes within DFCS, pending policies changes, discuss legislation changes, and provide information on upcoming meetings/trainings as well as other collaboration opportunities.

Collaboration with RBWO private providers, DFCS senior leadership, Department of Education, DFCS Well-Being Unit, Care Coordinators, Residential Child Caring Licensing, Georgia Cares, Criminal Justice Coordinating Council (CJCC), DFCS TeenWork, CPS Screening Unit, DFCS Fiscal Director, Department of Juvenile Justice, DFCS GA/RYSSE, Together GA, DFCS Education and Training Unit, Family Focused Treatment Association (FFTA) and Georgia Alliance of Therapeutic Services for Children and Families (GATS)

Throughout the year, OPM conducts several workgroups. The workgroups are used to discuss the areas of need. In these meetings, they discuss as a team what is going well, areas of

improvements and opportunities. This workgroup always includes RBWO private providers and internal stakeholders depending on the topic of discussion.

At the conclusion of each meeting to discuss upcoming fiscal documents, OPM e-blast a survey to approved RBWO providers to review the recommended changes by the group to give an opportunity for each provider to provide feedback. OPM then reviews each survey and applies the recommendations if applicable. Reasons for not instituting changes are reviewed during the contract's meeting.

Provider management-related workgroup activity include:

- Development of the Foster Parent Conflict Workgroup to address existing conflict of interest cases within the private and public sector
- Review the RBWO Minimum Standards every upcoming fiscal year to discuss any policy changes, and recommendations.
- Review the Performance Based Measurements to discuss any changes with the measurements.
- Review the Contract Deliverables every upcoming fiscal year to discuss any changes.
- Review the Resource Development Track training to modify to meet the needs of our RBWO private providers.

Work conducted in these work groups impact several of the CFSP areas of focus especially the State's efforts to ensure appropriate placement settings (CFSP Goal B, Strategic Focus A, Objective 5)

Caregiver Recruitment and Retention Unit (CRRU)

The Caregiver Recruitment and Retention Unit (CRRU) continues to host quarterly statewide meetings with Resource Development staff to discuss policy, best practice and trends. Information is provided through weekly cadence calls held with Resource Development staff to discuss data, trends, etc. The CRRU Director engages with the leadership of the Adoptive and Foster Parent Association of Georgia (AFPAG) to bridge the communication gap between the Association and the Division. This engagement includes discussing grievances and complaints and assisting with planning the annual AFPAG conference. Gwinnett county has agreed to pilot the Parent 2 Parent (P2P) meetings. CRRU provided training in February to both the Gwinnett County permanency staff as well as the providers who serve Gwinnett county. The training consisted of reviewing the P2P process and participants viewed an example of the P2P meeting. Gwinnett seeks to implement the first P2P meetings in March 2020.

CRRU, OPM and the Kinship Unit directors meet at least quarterly with the Placement and Practice Guidance leadership to discuss caregiver trends and how the work with caregivers

intersect. The purpose of the collaborative meetings is to ensure uniformity and consistency with each unit's work with caregivers.

Work conducted in these work groups impact the State's efforts regarding several areas of the CFSP including Goal B, Strategic Focus A, Objectives 3 and 5.

Afterschool Care

The Afterschool Care Program is rooted in community and interagency partnerships to provide quality access in the out-of-school time arena. The collective work has supported two Temporary Assistance for Needy Families (TANF) goals including (a) End the dependency of needy parents on government benefits by promotion job preparation, work and marriage and; (b) Prevent and reduce the incidence of out-of-wedlock pregnancies by providing quality, safe and affordable care options for youth that allows parents to work, attend school and reduce reliance on government benefits. The Afterschool Care Program is pleased to partner with the following entities:

Community Based Organizations – The Afterschool Care Program partnered with 26 community based non-profit organizations to provide out-of-school programming throughout the state. These partnerships included the Georgia Alliance of Boys & Girls Clubs, YMCA Of Metropolitan Atlanta, YMCA of the Central Savannah River Region, Carrie Steele-Pitts Home, Horizons Atlanta and Horizons Savannah. The partnerships with YMCA of Metropolitan Atlanta and Horizons Savannah are specifically to meet the needs of youth in foster care. These two organizations focused on providing access to youth development and physical activity programs for the youth who are in the state's custody.

Public Agencies – The Afterschool Care Program partnered with 13 public entities (school systems, local government, etc.) to provide out-of-school programming throughout the state. These partnerships included Georgia State University, Georgia College and State University, City of Fitzgerald, Savannah-Chatham County Public School System and the Albany Area Community Service Board.

State Level Leadership Teams – The Afterschool Care Program sits on the Afterschool and Youth Development (ASYD) Advisory Board to provide guidance and clarity to Georgia's Afterschool and Youth Development Standards. On this board, the Afterschool Care Program works with additional agency leaders (Georgia Department of Education, Georgia Department of Public Health, Georgia Department of Early Care and Learning) to further inform youth development matters at the State level. Community partners are encouraged to provide feedback through contractor orientation meetings, quarterly contractor one-on-one calls and consistent monthly email communication.

Work done with these groups significantly impacts the State's efforts to ensure quality educational assistance, effective practices for positive outcomes and preserving family and community connections (CFSP Goal B, strategic focus A and B).

Early Childcare

Georgia Early Childhood Collaborations Unit (ECCU) works collaboratively with the Georgia Head Start Association to streamline information shared with Head Start Grantees throughout the State. Activity includes joining advocacy events, presenting at conferences hosted by the association, and attending board meetings. ECCU works closely with the Childcare and Parenting Services (CAPS) program at the Department of Early Care and Learning (DECAL) to ensure seamless childcare services are provided for children in DFCS custody and those involved in CPS cases. The teams have jointly developed processes to help support and assist case managers and foster parents with obtaining and renewing childcare services to prevent disruptions of placements. The teams meet monthly to analyze current processes and adjust as needed.

ECCU works collaboratively with the DECAL Head Start Collaboration Office to ensure that children in DFCS custody under the age of five are enrolled and receive the benefits of the comprehensive services offered by Head Start and Early Head Start programs statewide. Both partners provide training and technical assistance opportunities to one another and the community. The teams meet monthly to discuss trends, enrollment, and best practices related to young vulnerable children.

Additionally, ECCU supports HS/EHS enrollment efforts by referring eligible children to grantees and facilitating recruitment days at the program's local county DFCS offices. To bring awareness to this partnership, ECCU launched a statewide awareness campaign. Six DFCS–GHSA Partnership Forums were a part of that campaign. All forum agendas included a review of DFCS child welfare system, Head Start policy on foster care enrollment, information on the Head Start Information Memorandum involving the new foster care definition around kinship care and eligibility, the importance of trauma-responsive care, and time for tailoring each grantee's referral & communication protocol with the state DFCS office.

DFCS – GHSA Foster Care Partnership Forums

December 16, 2019 - Hosted by Tallatoona CAP., the Head Start/EHS grantees included for this forum were Tallatoona CAP, Family Resource Agency of North GA, and McIntosh Trail.

January 9, 2020 - Hosted by DECAL EHS-CCP at DECAL main office, 2 Martin Luther King Jr. Drive, SE, East Tower, Atlanta GA, 30334, the Head Start/EHS grantees included for this forum were, DECAL EHS-CCP, Sheltering Arms, Ninth District, Quality Care for Children, YMCA Metro Atlanta.

January 16, 2020 - Hosted by CSRA Head Start at Collins Head Start Center, 1321 Suwanee Quintet Blvd., Augusta, GA 30901., the Head Start/EHS grantees included for this forum were, Washington County NB & PW Club, Burke County EHS, Emanuel County EHS, and CSRA EOA.

February 6, 2020 - Hosted by Baldwin County Head Start at Baldwin County Early Learning Center, 100 North ABC Drive, Milledgeville, GA 30163., the Head Start/EHS grantees included for this forum were, Macon Bibb EOC, Middle GA CAA, Fort Valley State Head Start, Jasper County Head Start.

February 11, 2020 - Hosted by Coastal GA CAA Head Start in Hinesville at the Liberty County Performing Arts Center, 2140 E Oglethorpe Hwy, Hinesville, GA 31313., the Head Start/EHS grantees included for this forum were, Economic Opportunity Authority Savannah Chatham County, Inc., Coastal Plain Head Start, Coastal Georgia Head Start, Action Pact Head Start, and Telamon Head Start.

February 25, 2020 - Hosted by Southwest GA Community Action Council, at their community partner site: Georgia Learning Resources Systems (GLRS) at 915 S McKinley St, Albany, GA 31701, the Head Start/EHS grantees included for this forum were, Macon Bibb EOC Head Start & EHS, Enrichment Services Program, Randolph County Board of Education, and Southwest GA Community Action Council.

CFSP Goal B, Strategic Focus B, Objective 2

Department of Early Care and Learning (DECAL) Inclusion and Behavior Support

ECCU partners with DECAL's Inclusion office to ensure that children enrolled in quality rated early learning programs who require additional services and resources receive individualized early education and care. This partnership allows ECCU to link programs to services that will educate teachers and program staff on how to best support children who have a difficult time transitioning. DECAL regionally assigned Inclusion and Behavior Support Specialists provide a variety of resources, strategies and supports to programs, classrooms, and the community. These resources and supports include, but are not limited to: Bright from the Start approved training and Intensive Professional Development designed to empower child care providers, early learning professionals, families, and communities to identify and utilize available resources to ensure that all children are successfully included in early care and learning environments. They also work to promote and increase inclusive childcare options for children with disabilities in their communities.

ECCU additionally partners with the DECAL Child and Family Development Office to provide training to their family ambassadors on early learning and development from a child welfare perspective. These trainings are hosted twice per year. The DECAL Early Education Family Ambassadors are fathers, mothers, foster parents, or other guardians of young children in childcare or early intervention. Family ambassadors serve as leaders in their community, engaging families from their communities in activities to provide them with information about child development and strategies they can use to support their children's school readiness.

CFSP Goal B, Strategic Focus B, Objective 2

ECCU/Foster Parent Partnerships

ECCU works collaboratively with internal and external partners to offer foster parents early learning and development training, service navigation, case consultation, and educational programming. ECCU attends foster parent conferences, calls, association meetings, and trainings to educate and advocate on behalf of children in DFCS custody and foster parents to ensure that foster parents are equipped to offer the best care to children under five in DFCS custody.

Education Programming and Consultation (EPAC)

As noted in the Key Accomplishments: Constituent Engagement section above, EPAC has been excitedly working to build community partnerships and collaborations with Georgia Appleseed, Georgia Education Climate Coalition (GECC), Georgia Regional Educational Service Agency (RESA), State Advisory Panel for Special Education (SAP), Together Georgia, CASA, and MAAC.

With funding and support from America's Promise Alliance, DFCS implemented Project Graduate 2.0 with the long-term goal of developing strategies that will enable the Division to sustain and replicate this work statewide. The strategic objectives are:

- Leverage the support of state and local education partners to provide more seamless coordinated services that will improve the academic outcomes of Georgia's foster children and youth.
- Strengthen the system's ability to address and respond to the concrete needs of foster youth regarding their educational goals more efficiently
- Build the internal capacity of DFCS staff and its partners to analyze and utilize educational data for programmatic decisions making and targeted interventions.

Achievement of these objectives would likely result in:

- Increased stability of placement for youth in foster care.

- More executed data sharing agreements with Local Education Agencies (LEA) in Fulton and DeKalb counties and increased representation at roundtables that are focused on educational goals for youth in care.
- Increased likelihood that foster youth in Georgia feel supported in ways that advance healthy development and well-being and reduce the impact of negative life experiences.
- Increased number of partners who develop and implement practices and policies that affect foster youth and their educational goals
- Increased number of DFCS county staff who develop and implement practices and policies that positively affect foster youth and their educational goals
- Increased graduation rates of foster youth

TeenWork/CREW

Georgia CREW/TeenWork is supported by partners both internally and externally. Internal partners include colleagues and programs within the Well-Being Section such as: Afterschool Care program; Educational Programming, Assessment and Consultation (EPAC) EPAC; Georgia Resilient, Youth-Centered, Stable, and Empowered (GA RYSE) Program/Independent Living Program Independent Living Program (ILP). Support from Afterschool produces partners that provide worksites and hard skills training for youth, and EPAC along with ILP refer youth who may meet the criteria and eligibility requirements for services offered. Another internal agency resource is the Interagency Workforce Opportunity Resource Committee (iWORC) that includes representatives from various Department of Human Services (DHS) programs such as: SNAP, SNAP E&T, SNAP Nutrition Education, Community Services Block Grant (CSBG) program, Temporary Assistance for Needy Families (TANF), Independent Living Program, Refugee, Division of Child Support Services (Fatherhood Program and Parental Accountability Court) and DHS Legislative Outreach.

A new initiative was introduced in the employer relation service model. Active and new employers were gathered to form a Table Talk Roundtable Discussion group with the purpose of giving input around issues, challenges, and best practices for preparing youth for the on-the-job experience. Members of the group also offer their expertise in facilitating youth training sessions which is a new concept to the program. The External partners include organizations such as: United Way of Greater (UWGA); Atlanta CareerRise; Georgia Department of Juvenile Justice (DJJ); local Chamber of Commerce offices in select regions; and 88 employer partners who provide opportunities to youth for hands on work experience in the summer. These external partners play an active role in shaping the quality of trainings and support provided to youth that led them to being potential leaders and contributing community citizens.

CFSP Goal B, Strategic Focus A, Objective 4

WPAC

DCH (Department of Community Health) - WPAC meets with DCH many times throughout the month to address any issues related to Amerigroup (DCH provider the oversight for the contract with Amerigroup). Additionally, DCH assists with access to services and working with Amerigroup to coordinate services for critical cases for youth in care. DCH and WPAC have meet to review DCH contract with Amerigroup to align DFCS policies with Amerigroup's contract obligations. DCH has is a partner in on quarterly executive healthcare leadership review committee and provide feedback on our psychotropic and significant health conditions reports, as well as any other health related issued that involve youth in foster care. DCH and WPAC exchange data as it relates to psychotropic medications, trauma assessments, PRTF approvals and denials, CSU approvals... etc. Since DCH is the contract owner for Amerigroup a lot of DCH's interactions and involvement is alongside Amerigroup.

Amerigroup - WPAC meets and collaborate with Amerigroup many times throughout the month to address various issues such as training needs for staff, communication barriers between the care coordination and DFCS staff, Medicaid eligibility issues, coordination of ongoing projects such as MAU (Mobile Assessment Unit) and Clinic days. WPAC continues to work with Amerigroup and Fulton and Dekalb DFCS to coordinate the ongoing health initiative. Fulton County had a clinic at the Fulton County Juvenile Court once per month and Dekalb has a MAU a the Dekalb Office every 2 weeks at the Dekalb County Office. Amerigroup provide feedback on the number of youth that were seen at Fulton County Juvenile Court Clinic, and Dekalb MAU. WPAC and Amerigroup exchange various types of data throughout the month. Amerigroup provide bimonthly psychotropic medication reports, trauma assessment reports, monthly PRTF admissions report, monthly claims data for EPSDT, dental, and trauma assessments.

Rev Max- WPAC and Rev Max collaborated to complete the Medicaid Navigation Guide for youth exiting cases. WPAC and Rev Max work together to address Medicaid eligibility issues that impact youth's access to services through Amerigroup.

Care Coordination Treatment Unit (CCTU) - WPAC and CCTU collaborate on cases, for example if CCTU is involved in a case where there is concern about a child's psychotropic medications then a referral is made to WPAC to coordinate a consultation with Dr. Patel. CCTU are included on those staffing as well. WPAC refer a case to CCTU if WPAC is involved in a case with a child that has major behavioral/mental health needs and staff need support regarding placement or services. WPAC Program Manager, CCTU Director, and CCTU Supervisor meet regularly to discuss ongoing communication between the units and how to communicate and address needs of youth that are considered "high risk" or "high needs." CCTU also works to bridge the gap between the Division and community partners to end sexual exploitation. January 2020, the unit hosted the 2nd Annual Human Trafficking Providers Summit.

Interagency Directors Team (IDT) - WPAC Program Manager is a member of IDT. WPAC has been involved in a couple work groups to develop a plan to address continual Medicaid eligibility for youth that exit care as well telemedicine work group. WPAC is collaboration with Georgia State SOC LIPT Director to provide training to DFCS staff, external partners, caregivers, and state holders on LIPT (Local Interagency Planning Team) meetings.

DPH (Department of Public Health)/Children 1st WPAC continue to collaborate with DPH/Children to identify barriers in the field around referrals submissions and reporting results. WPAC meets with DPH on a quarterly basis to address these barriers. WPAC along with DFCS leadership and DPH are in the final phase of the MOU.

Several of the aforementioned collaboratives work with the State to support positive outcomes related to youth health and wellness, thereby positively impacting the State's CFSP Goal B, Strategic Focus B, Objective 3.

Chafee

Through efforts with the Child Abuse and Neglect Prevention Plan and the Georgia Essentials for Childhood Initiative as described in key accomplishments, stakeholders such as Early Childhood, Education, Public Health, Behavioral Health, Child Welfare, the Courts, policymakers and other statewide and local prevention organizations are involved.

In the Child Abuse and Neglect Prevention Plan, the above-mentioned stakeholders were involved, in addition to parent and community members. The State was able to get input from all these stakeholder groups on what they considered to be paramount for inclusion into the plan. Participants provided the information and verbiage for the goals, strategies and objectives that were ultimately included in the Plan. Input was gathered from 21 regional provider and parent/community member meetings across the state, online surveys and a public comment period in which participants in the process were provided with the opportunity to give their feedback on the draft of the plan and how well it captured their input. The Plan will be operationalized at a regional and/or local level so that stakeholder groups can provide continuous feedback on an ongoing basis. Additionally, the stage agency representatives will have an opportunity to revisit the plan annually for potential updates and to the progress of the implementation of the plan.

Through the Georgia Essentials for Childhood initiative, the aforementioned stakeholder groups as members of the Steering Committee in the development of the Initiative's goals and also the implementation plan. The stakeholder group meets quarterly to provide regular and ongoing feedback on the implementation plan. Additionally, now we have working groups that are operationalizing the implementation plan, most of which meet monthly. The co-chairs of the working groups report out to the Steering Committee on the work of their committees as a piece of the ongoing feedback loop. The working groups are also comprised of state agency representatives, as well as representatives from other child serving organizations.

The goals and objectives that the working groups are implementing through the Initiative include the following:

Goal 1: Georgia has created the context for healthy children and families through policies.

Objective 1.1: Increase policy development and implementation that positively impacts the lives of children and families in Georgia.

Initiative 1.1.1: Develop and promote a Child Safety, Stability and Nurturing Policy Agenda.

Working Groups: Policy

Goal 2: Georgia is committed to creating safe, stable, nurturing relationships and environments and preventing child maltreatment.

Objective 2.1: Increase the use of strategic communications and collective action to create safe, stable nurturing relationships and environments.

Initiative 2.1.1: Implement a Collective Impact and Strategic Communications Capacity Building Initiative.

Working Groups: Communications and Outreach, Data

Goal 3: Georgia has created the context for healthy children and families through programs.

Objective 3.1: Increase the consistent use of AIRS Taxonomy terms among I&R providers.

Initiative 3.1.1: Standardize the use of AIRS taxonomy to support the identification and classification of parenting and parent support programs.

Working Groups: Systems Integration

Objective 3.2: Increase the availability of information about evidence-based programs for consumers.

Initiative 3.2.1: Implement an evidence-based program data collection and sharing protocol.

Working Groups: Data, Programs, Systems Integration

Initiative 3.2.2: Conduct a comprehensive inventory of parenting programs that are evidence-based, evidence-/research-informed and promising practices.

Working Groups: Communications and Outreach, Programs, Systems Integration

Objective 3.3: Increase the availability of evidence-based, research-informed, and promising-practice-based parenting skills programs to Georgia families.

Initiative 3.3.1: Conduct a Parenting Skills Program Continuum Study.

Working Groups: Programs

Initiative 3.3.2: Implement a Parenting Skills Program Mapping Project.

Working Groups: Programs

Initiative 3.3.3: Develop a State-level Parenting Skills Program Sustainability and Expansion Plan.

Working Groups: Programs

Initiative 3.3.4: Form a Parenting Skills Support Network.

Working Groups: Communications and Outreach, Programs

Initiative 3.3.5: Conduct a Home Visiting Education Campaign.

Working Groups: Communications and Outreach

Goal 4: Georgia has created the context for healthy children and families through norms change.

Objective 4.1 Increase public perceptions that we all share responsibility for the well-being of children.

Initiative 4.1.1: Partner with Banyan Communications and DFCS on Social Media Campaign.

Working Groups: Communications and Outreach

Objective 4.2 Increase public perceptions that all parents and caregivers need help at times.

Initiative 4.2.1: Design and Implement a Social Media Campaign aimed at destigmatizing help seeking by parents/caregivers.

Working Groups: Communications and Outreach

Goal 5: Georgia uses data to inform solutions.

Objective 5.1: Increase the use of the BRFFS ACEs data in creating safe, stable and nurturing relationships and environments.

Initiative 5.1.1: Conduct a BRFFS Data Development and Promotion Initiative.

Working Groups: Communications and Outreach, Data, Policy, Systems Integration

Objective 5.2: Increase the use of other data sets for planning and evaluation purposes.

Initiative 5.2.1: Implement an ACEs Data Review, Linkage and Promotion Initiative.

Working Groups: Communications and Outreach, Data, Programs

CFSP Goal B, Strategic Focus A, Objective 4

Call Center

CPS Intake Communication Center (CICC) actively engages mandated reporters in each county/region of the state to ensure they have the necessary tools and understanding to provide quality information on intake reports. These meetings also provide a platform for mandated reporters to provide ongoing, valuable feedback on how CICC can improve customer service and intake procedures.

CICC began having quarterly collaboration meetings with the DFCS Policy unit to clarify understanding of Intake policy. These meetings have since been increased to monthly meetings. Representatives from CICC, Policy, CD/NF/SI Team, and Field Operations/County Staff are present to collaborate and clarify the collective understanding of Intake policy.

CICC has worked with the Lead DIS on the identification of hundreds of duplicate case IDs. This included documenting them on a log, then the duplicate case IDs are compiled and submitted to the lead DIS who assigns them to regional DIS to merge the cases. This project has been placed on hold to allow the DIS time to complete the needed merges identified at this time but has already resulted in hundreds of duplicate case IDs to be merged.

CICC worked with the county and the State Office leadership to redesign a standard operating system for the county to override the assignment of cases from CICC where no maltreatment is identified. This override information is tracked and submitted to State leadership monthly. Regional field staff also collects and maintains the number of overridden cases sent in to CICC. The data is reviewed by a team of field partners for quality assurance along with the CICC quality assurance team and administrators and discussed monthly on a cadence call to monitor progress and case decision.

The Unit has been partnering with CWQA in the development and testing of the new Quality Assurance Review Guide and collaborating with the Governor's office (Constituent Services & Call Center Development Leadership) focusing on Call Center operations

Additional collaborative efforts include the development of a standard operating procedure to allow law enforcement to request for an immediate response from the department on possible non-maltreatment concerns without opening a case by making these requests an immediate Information and Referral. Collaboration is ongoing with the field around Maltreatment In Care cases. The reclassification of staff positions/job titles efforts have involved HR, CICC and Field Operations leadership and are ongoing at this time. Work with the SHINES team is also occurring to improve business and design requirements related to the following:

- Screen-Outs approval requirements changes for Intake Stage Closure
- Screen Out & Referred approval requirements changes for Intake Stage Closure
- CDNFSI Screen Outs approval requirements changes for Intake Stage Closure

- CDNFSI Screen Out & Referred approval requirements changes for Intake Stage Closure
 - Remove requirement for CDNFSI Report or Referral for a Screen Out and Screen Out & Referred Duplicate Report
 - Alerts to the CDNFSI Review Team when a CDNFSI Intake Report is approved (in care and not in care) for all Stages
 - Enhanced Forms for Child Fatality Notification, Near Fatality Notification, Serious Injury
- CFSP Goal B, Strategic Focus A, Objective 2

Quality Assurance and Continuous Quality Improvement

Internal and external stakeholders engaged through the Quality Assurance review process have included, but have not been limited to:

- Legal stakeholders (Judges, SAAG (Special Assistant Attorney General), CASA (Court Appointed Special Attorney), GAL (Guardian Ad Litem), Citizen Panel Member, etc.
- School/Daycare personnel representatives
- Law Enforcement
- Medical Providers
- Mental Health Providers
- Homestead/Parent Aide Providers
- Other service providers (substance abuse, domestic violence, parenting classes)
- DFCS Case Managers/Supervisors
- Foster parents/CCI and CPA Staff
- Fictive Kin/Relatives

The input of these case participants has aided in the assessment of agency strengths and areas needing improvement to monitor the State's progress towards quality improvement.

The QA team maintains substantial ongoing and meaningful collaboration with the above stakeholders through the QA review process. Both external and internal stakeholders are drawn from the participants of the case specific interviews. For example, a service provider would be asked case specific questions about the family with whom they work. In addition, this same service provider would be interviewed as a stakeholder and asked questions related to their overall services, relationship, and collaboration with all the DFCS agencies they work with, not just the agency for which they were being interviewed for case specific information.

Stakeholder surveys are completed during the QA review process with case managers, Supervisors, foster parents, service providers, and legal representatives. When completing formal Stakeholder surveys, stakeholders are asked to provide a rating of Excellent, Good, Fair or Poor in applicable areas based on their role with the agency. Each stakeholder is asked to rate the areas of their knowledge (i.e. service provision, legal). Not all stakeholders are able to provide feedback ratings on all areas, and if necessary certain areas will be marked “NA” for a particular stakeholder. Specifically, through the stakeholder survey portion of the QA review process, participants are asked to provide feedback with regards to the following:

- Staff accessibility to external organizations (easy to locate, return telephone calls timely, etc.)
- The effectiveness of staff partnership with outside agencies/organizations
- The effectiveness of services provided to meet the needs of families served by the agency (includes the availability of services, and the individualization of services to meet needs)
- The effectiveness of providing services to foster parents, allowing foster parents a voice in legal proceedings, and forming positive partnerships with our fostering resources
- The preparedness and presentation of agency staff for legal proceedings, and their level of meaningful engagement with legal representatives to include Judges, SAAGs, GALs, and CASAs
- The timeliness and quality of service referrals for families, and the agency’s effectiveness in partnering with service providers towards meeting the needs of families
- The effectiveness of initial and ongoing training provided to staff to prepare them for job responsibilities
- The level of support offered to agency staff to aide in their ability to make critical case management decisions

While no certain number is assigned to stakeholders to be interviewed monthly (i.e. 20 foster parents, 5 judges, etc.), reviewers utilize professional judgment when engaging stakeholders and every effort is made to obtain quality information from our internal and external partners.

Individual reviewers contact relevant stakeholders associated with the state’s case sample on a monthly basis. Each reviewer then enters the overall stakeholder ratings into the Child Welfare Quality Assurance Stakeholder Database. Stakeholder data is pulled following each month’s review and forwarded to respective regions as a part of the sharing of review results.

Between April 1, 2019 and March 31, 2020, the QA team interviewed 1,561 case participants (external and internal stakeholders) in conjunction with the review process. The input of these

stakeholders in conjunction with information gathered through records reading was utilized to formulate CFSR ratings. Formal stakeholder surveys were completed with 670 case participants.

Both statewide and region-specific review results were shared with internal stakeholders through the dissemination of written regional summaries, Performance Improvement Collaboration (PIC) meetings, and Quality Assurance Reviewer participation in annual regional stakeholder meetings. Each region receives their individual stakeholder feedback results the month following their Quality Assurance Review. Stakeholder feedback through surveys is gathered for each region, compiled, and shared statewide bi-annually via a six-month trend report. The most recent stakeholder survey results (February 2020 – July 2020) are attached. The QA team shares stakeholder survey results with regions at the conclusion of each review in conjunction with other exit documents (executive summaries, data reports, Performance Improvement Collaboration presentations). The QA team does not have any direct information with regards to strategies that are initiated to improve practices (specific to survey results) once the stakeholder surveys are shared with the regions.

External stakeholders are able attend regional CQI meetings as well as PIC meetings to offer feedback related to agency strengths and needs, as well as systemic factors impacting the work; however, regions extend invitations to CQI and PIC meetings based upon the relevance of the topics being discussed and/or region meeting protocols. Therefore, the level of participation vary region to region and month to month. . Generally, stakeholders tend to show up to regional meetings when invited. Fewer stakeholders, however, participated in the state-level PACCC (PIP, APSR, CFSP, CFSR, CQI) bi-monthly meetings facilitated by the state CQI manager. External stakeholders from CASA and MAAC have routinely attended and been apprised of statewide data and performance indicators and afforded the opportunity to offer input and suggestions for improvement. The state revamped the PACCC meetings, putting executive agency leaders in the facilitation role, but the meetings were discontinued in July 2019. The QA team does not engage with Tribes during the review process currently, due to the nature of the cases selected for review.

While nearly all CFSR outcome item target measures within the CFSP are impacted by the work the QA team does with stakeholders, one of the most specific goal areas impacted is CFSP Goal B, Strategic Focus B, Objective 4

SHINES

With every project the Georgia SHINES team initiates, the team engages state office and field staff (end users) to determine what changes are necessary to meet the business needs. In instances where system changes will impact interface partners and provider community (placement and delivered services), input is solicited. This includes engagement in most aspects of system development life cycle – gap analysis, requirements/design, and end-user testing.

Most recently, the team facilitated several focus group sessions, which included providers (delivered services) and DFCS staff (various roles/responsibilities). The purpose of the focus groups was to engage participants in conversation regarding service authorizations – what works, what does not work, and if something could change, what? Feedback received was used to identify develop a gap analysis and identify high-level business requirements for service authorization functionality in Georgia SHINES and expanding provider Portal to support automation of service authorization.

Several CFSP Goal areas are impacted by the work SHINES and its collaborators perform.

Training and Professional Development

The Training and Professional Development Section has focused on increased support and collaboration with other state office sections and the field during this APSR period. Examples include but are not limited to:

- Partnering with the Data Integrity Specialist to develop standardized SHINES classroom training and placing those trainings in the DFCS LMS System
- Partnering with the Policy Unit to develop and release Policy Spotlight videos for the field to highlight policy changes and best practices
- Developing video presentations on important legislative policy changes
- Providing in-person over the shoulder support and mentoring to field staff
- Through partnership with the Georgia State University Professional Excellence Program, providing monthly child safety briefing tidbit

Collaborative efforts have supported the development of a new training with the legal and safety sections to support changes made to the State Child Protective Services Information System. DFCS has had a long-standing relationship with the Georgia State University Professional Excellence Program. They have provided support to DFCS throughout this period by providing both training and technical support to the Training unit and staff in the field.

Technical Assistance they have provided includes, but is not limited to:

- Evaluation of DFCS Training Programs
- Technological support in the development of podcast, webinars and other communications videos
- Facilitated focus groups to assist with developing new training curriculum
- Monthly collaborative meetings with the Training and Professional Development leadership team

- Facilitate bi-annual collaborative partnership meetings
- Classroom Management Facilitation Training
- Delivered the trainings to new and veteran child welfare staff to include but not limited to:
 - Raising the Bar/ Navigating the Legal System/Mock Trial Training
 - Partnering with Dads
 - Recognizing Secondary Traumatic Stress for Case Managers
 - Recognizing Secondary Traumatic Stress for Supervisors
 - Opioid Use, Impact and Treatment
 - Supporting LGBTQ Youth
 - LGBTQ Youth in the Child Welfare System: On the Path to Equity
 - Navigating the Teen Zone
 - Various other webinars, podcasts and online trainings for staff

The Child Welfare Training Collaborative (CWTC) CWTC is a partnership between the Georgia Division of Family and Children Services and Georgia State University's School of Social Work Professional Excellence Program. It offers training to community partners (e.g. DFCS, law enforcement, placement providers, early care, education, behavioral health, juvenile courts, pediatric health providers, Court Appointed Special Advocates, and other community and government organizations) throughout the state of Georgia. Bringing everyone to the same table creates an opportunity for community partners to have a shared understanding of issues facing children and families and also strengthens collaborations to promote better outcomes for Georgia's children. Trainings provided to the community include, but are not limited to:

- Trauma 101: Understanding the Impact of Trauma on Children
- Brain 101: Understanding the Impact of Trauma on Brain Development
- Trauma/Brain 201: Building Resiliency

The work of the Child Welfare Training Collaborative is guided by an advisory council made up of 41 representatives from 34 organizations. This board meets once each quarter to discuss evaluation, successes and strategic planning for the future.

Other Training Collaborations

Athens Technical College - Continues its partnership with the Institute for Online Training and Instructional Services (IOTIS) at Athens Tech. IOTIS manages the Learning Management System

so that Education and Training can schedule and track training hours, certification and provide online training. This system allows DFCS internal staff, foster parents and private providers the ability to access the training resources. An updated system was rolled in September 2019. The new system will be a technology upgrade to the current system and provide greater access to reporting and tracking of data. The agency will also be adding the capability to track training for Foster Parents and Private Child Provider Agency staff. This will allow better collaboration of training opportunities as well as tracking of training hours. This is a major advancement as the agency can now push trainings to these stakeholders.

Care Solutions- Continues its partnership with Care Solutions to offer Medical Mandated Reporter Training. Monthly metrics reports are made available to DFCS by Care Solutions to monitor the number of people in Georgia who are completing this training

Technical College System of Georgia- DFCS continued to partner with the Georgia Schools of Technology, DHS Regional Training Center and the Methodist Home to provide regional training hubs for staff. This enables staff to be able to attend training closer to home.

Newlife Casting- The agency has partnered with NewLife Casting to provide professional actors for the Georgia Child Welfare Simulation training. This has enhanced the simulation training tremendously to increase the realistic aspect of the training. Prior to, the agency was utilizing staff to play the roles of characters. While this was great, professional actors offer skills and talents that agency staff cannot bring. Evaluations from the trainings have supported improvement in content.

Accenture- The agency has partnered with Accenture to pilot the use of AVE nueS Virtual Reality training for child welfare staff. AVE nueS helps caseworkers refine their skills and become more alert and cognizant of the many signals and safety indicators they observe. It uses immersive storytelling and interactive voice-based scenarios to completely transform how caseworkers hone their data-gathering and decision-making skills. AVE nueS creates the foundation for a highly skilled workforce that can rapidly discuss the decision points all practiced caseworkers face. AVE nueS uses virtual reality (VR) technology to transport trainees into simulated environments and engage them with realistic scenarios. AVE nueS uses an immersive 360° headset to help trainees develop observation skills to identify important decision points. AVE nueS creates the foundation for a highly skilled workforce who can rapidly discuss the decision points all practiced caseworkers face.

Several CFSP Goal areas are impacted by the work the Training and Professional Development Section and its collaborators perform. Most profoundly impacted are CFSP Goal A and CFSP Goal B, Strategic Focus A, Objective 1.

Here is a sample list of collaborative entities that are working to help achieve goals within the CFSP

Goal A: A competent, satisfied, effective and ever-developing workforce

Strategic Focus: Workforce Development

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

Goal B: Effective practice resulting in positive outcomes for families

Strategic Focus A: Practice Standards

Objective 1: Execute Practice Model Development – Phase Two

Collaborative partners include: Internal and external steering committees; CASA; Office of the Child Advocate; Court Improvement Project; and practice model coaches

Objective 2: Address performance gaps related to the assessment of safety

Collaborative partners include: CFSR Impact Plan team; focus groups, CAPTA Panel

Objective 3: Strengthen the Kinship Continuum Program

Collaborative partners include: Annie E. Casey Foundation; Second Chance, Inc.; Kinship Readiness Assessment team; judicial partners; CASA; and school officials

Objective 4: Implement Connected By 21 to provide supports to young adults age 18 – 21

Collaborative partners include: MAAC; University of Georgia J.W. Fanning Institute; CASA

Objective 5. Ensure children are appropriately placed in settings that meet individualized needs and preserve family and community connections

Collaborative partners include: Together Georgia; Foster Family-Based Treatment Association (FFTA); GA Alliance of Therapeutic Services (GATS); RBWO Providers; EmpowerMENT; Adoptive and Foster Parent Association of Georgia; and Residential Child Care Licensing (RCCL) Provider network (the collaboration of partners in this area is expansive)

Objective 6. Increase the Division's ability to support youth who need additional educational

Collaborative partners include: CASAs, MAAC, Georgia Appleseed, Georgia Conference on Children and Families; Education Federal Program Conference; and Department of Education

Objective 7. Individualized Education Plans (IEPs)

Collaborative partners include: same as above

Strategic Focus B: Service Array

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

Collaborative partners include: Prevent Child Abuse Georgia; The Alliance; PAC council members

Objective 2. Target 0 to 5 early childhood education opportunities

Collaborative partners include: Georgia Headstart Association, DECAL, CAPS, Adoptive and Foster Parent Association of Georgia

Objective 3. Train and market available youth services to supervisors and frontline staff

Collaborative partners include: MAAC; Medicaid; Guide, Inc.; Amerigroup; Department of Community Health; Department of Public Health; Children 1st

Objective 4. Leverage regional stakeholder meetings to address service array, and monitor to ensure implemented services are effective

Collaborative partners include: Care Portal; Promise 686; Georgia Department of Labor; Office of Child Support; Parent Court; Live the Promise; Bridge 11; CASA; Georgia EmpowerMENT; Clayton County law enforcement; SAAGs; CASAs; Underdue Social Services/Embracing Arms, inc.; Loving Helping Hands; Georgia Center for Child Advocacy; and Youth Villages (the partner list for this objective is expansive)

Goals C: An engaged and diverse community that serves to promote partnership and holistically support families

Strategic Focus: Community partnerships, family engagement, inclusion and equity

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

Collaborative partners include: Kids in Need of Defense (KIND); Gwinnett Outreach Initiative; Gwinnett Centro e Apoyo Familiar Esperanza (CAFÉ); Interfaith Children's Movements; United Way of Greater Atlanta; Georgia DBHDD (the partner list for this objective is expansive)

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

Collaborative partners include: Office of the Child Advocate, Juvenile Court Judges; SAAGs; Court of Georgia's Committee on Justice for Children (J4C); Georgia Administrative Office of the Courts; Cold Case Project; MDCANI; and Children's Justice Act task force

C. Update on Assessment of Performance, Plan for Improvement, and Progress to Improve Outcomes

a. Update to the Assessment of Performance

A Child and Family Services review was conducted in 2015. At the time, Georgia was not found to be in substantial conformity with federal requirements in seven outcome areas and five systemic factors. The two areas within conformity were quality assurance system and agency responsiveness to the community. In response to the findings, the State developed a Program Improvement Plan (PIP) which became active April 2017. The State had two years to implement the strategies within the plan and an additional year of tracking, monitoring and evaluation. When the PIP period concluded March 2020 the state had met five of the CFSR outcome target measures: Items 1, 4, 5, 6 and 13. All of the items except 5 were met by 2018. Item 5 was met February 2019. The following chart identifies PIP items that were achieved and, as of May 2020, how the State rated on all of the items that were included in the PIP.

Figure 1: Program Improvement Plan Target Measures

Table 1. Program Improvement Plan Targets						
Outcome	CFSR Baseline	PIP Target	State Performance as of May 2017	State Performance as of May 2018	State Performance as of May 2019	State Performance as of May 2020
Safety Item 1	66%	73%	Achieved	Achieved	Achieved	86%
Safety Item 2	59%	68%	28%	45%	36%	27%
Safety Item 3	43%	49%	77%	29%	21%	29%
Permanency Item 4	68%	74%	77%	Achieved	Achieved	71%
Permanency Item 5	42%	49%	28%	40%	Achieved	51%
Permanency Item 6	27%	33%	37%	Achieved	Achieved	23%
Permanency Item 12	25%	29%	17%	19%	14%	15%
Well-Being Item 13	42%	47%	49%	Achieved	Achieved	43%
Well-Being Item 14	59%	65%	58%	53%	44%	45%
Well-Being Item 15	31%	36%	38%	26%	19%	18%

Data Source: Quality Assurance

b. PIP UPDATE

The State has not met any of the five remaining PIP Items over the past year (Items 2, 3, 12, 14, and 15). However, there has been measurable improvement for Items 3 and 14. Item 2 has additionally demonstrated a recent (two month) upward trend as of March 31, 2020.

There are several key practices statewide that are impacting the State's ability to achieve PIP goals:

- Risk and safety assessments that are not comprehensive and conducted continually throughout the life of a case
- Gaps in contact with children and families; or contacts with children and families that are insufficient in frequency based on the circumstances of the case
- Lack of quality and consistent engagement with parents
- Supervisory oversight to ensure that case documentation is reviewed frequently and thoroughly, and that case directives are thorough based on the case circumstances and followed up on timely

A summarization of the State's current progress towards PIP goals is depicted in the chart below:

Figure 2 PIP Goals Comparison - Individual Program Performance

Child and Family Services Review (CFSR) Round 3 Georgia: Program Improvement Plan (PIP) Goals Comparison Statewide Performance (All Program Areas)				
CFSR Items Requiring Measurement	Item Description	PIP Baseline (CFSR Findings)	State Performance as of March 31, 2020	PIP Goal
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry into Foster Care	58.7%	22%	68.0%
Item 3	Risk and Safety Assessment and Management	43.3%	30%	48.5%
Item 12	Needs and Services of Child, Parents, and Foster Parents	24.6%	14%	29.3%
Item 14	Caseworker Visits With Child	59.3%	45%	64.5%
Item 15	Caseworker Visits With Parents	31.1%	15%	36.2%

Data Source: Quality Assurance

Additionally, based on individual program performance (summarized below), PIP goals were not met in *any* program area for the most recent 6-month period (October 2019-March 2020). Permanency cases consistently rated higher for all PIP Items, while in-home services cases were problematic particularly related to Items 3, 12, 14, and 15. *CPS cases across the state remain*

the most problematic. 7 out of 10 possible outcomes are at or below 20%. Of greatest concern, Family Support Services cases rated at 0% for Item 2 and at only 4% for Item 12, and Family Preservation Services cases rated at only 10% for Item 12.

Figure 3 PIP Goals Comparison - Statewide Performance

Child and Family Services Review (CFSR) Round 3 Georgia: Program Improvement Plan (PIP) Goals Comparison Individual Program Performance (Permanency/Family Support/Family Preservation)						
CFSR Items Requiring Measurement	Item Description	PIP Goal	State Performance March 2020	Permanency	Family Support	Family Preservation
Item 2	Services to Family to Protect Child(ren) in the Home and Prevent Removal or Re-Entry Into Foster Care	68.0%	22%	25%	0%	27%
Item 3	Risk and Safety Assessment and Management	48.5%	30%	41%	13%	13%
Item 12	Needs and Services of Child, Parents, and Foster Parents	29.3%	14%	18%	4%	10%
Item 14	Caseworker Visits With Child	64.5%	45%	54%	23%	37%
Item 15	Caseworker Visits With Parents	36.2%	15%	17%	13%	13%

Data Source: Quality Assurance

As a result of PIP findings, the State rolled over some of the PIP interventions in the new 2020-2024 CFSP. Some of the interventions were moved into the current plan because additional progress was needed or because the strategies were beginning to demonstrate promise and progress appeared to be underway. The following CFSP strategies originated from the PIP:

- CFSP Goal B. Strategic Focus A. Objective V. - Ensure children are appropriately placed in settings that meet individualized needs and preserve family and community connections
 - (PIP) Goal III, Strategy I, Key Activity 7, 8 and 9
- CFSP Goal B. Strategic Focus A. Objective VI. - Increase the Division's ability to support youth who need additional educational assistance
 - (PIP) Goal II, Strategy II, Key Activities 1, 2 and 3
- CFSP Goal B. Strategic Focus A. Objective VII. - Individualized Education Plans (IEPs)
 - (PIP) Goal II, Strategy III, Key Activity 1

- CFSP Goal B. Strategic Focus B. Objective III. - Train and market available youth services to supervisors and front-line staff
 - (PIP) Goal II, Strategy IV, Key Activity 1
- CFSP Goal B. Strategic Focus B. Objective IV. - Leverage regional stakeholder meetings to address service array, and monitor to ensure implemented services are effective
 - (PIP>CFSP) Goal II, Strategy I, Key Activity 1

The State received its Child and Family Services Review (CFSR 3) Data Profile based on data submissions as of 12-1-19 (AFCARS) and 12-1-19 (NCANDS). Georgia rated better than the national standard for achieving permanency for children in care 24 months or more; having fewer foster care re-entries; fewer occurrences of maltreatment in care, and fewer recurrences of maltreatment. The State's performance was not statistically better than the national performance for achieving permanency in 12 months for new entries nor those in care 12 to 23 months. This is also true of placement stability.

Figure 4 CFSR 3 Data Profile Results

Indicator	Data Period ¹	National Standard	Georgia	Statistically ² better (↑) or not (↓)
Permanency in 12 months (entries)	17A17B	42.7	33.5	↓
Permanency in 12 months (12 – 23 mos.)	19A19B	45.9	39.7	↓
Permanency in 12 months (24+ mos.)	19A19B	31.8	37.6	↑
Re-entry to Foster Care	17A17B	8.1	8.0	↑
Placement Stability	19A19B	4.44	4.66	↓
Maltreatment in Care	17AB, FY17	9.67	2.67	↑
Recurrence of Maltreatment	FY17-18	9.5	3.4	↑

Data Source: Child and Family Services Review (CFSR 3) Data Profile submissions as of 12-1-19 (AFCARS) and 12-1-19 (NCANDS).

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

2. In some instances a lower percentage than the national standard indicates a statistically better score, in some instances a higher percentage indicates a better score. The arrows indicate whether Georgia's percentage is statistically better (↑) or worse (↓) than the national standard.

The following sections describe performance in program areas and systemic factors. Unless otherwise stated, the "APSR report period" pertains to April 2019 – March 2020.

c. PREVENTION

Although there is not a CFSR Outcome area specifically dedicated to prevention, the State recognizes the Children's Bureau's call to action to implement primary prevention strategies. As noted in the Vision section of this report, Georgia heeds this call but will additionally place emphasis on all levels of prevention (primary, secondary and tertiary). The Prevention Section 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. The Section makes it a priority to ensure 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 MIECHV, which is administered through our state's Department of Public Health, benefit from the referral and screening services provided by First Steps program funded by the Prevention Section through CBCAP and TANF.

During FFY19, the Prevention and Community Support Section funded several competitive grant programs: 1) First Steps mini-grant program, 2) Second Step school-based social-emotional learning curriculum, and 3) Child Abuse and Neglect Prevention Grant Program (home visiting). The approach of these grant programs is built on several core values that result in coordinated care for a child and family that is family-focused, community-based, and proven to have the best outcomes.

One hundred percent of these grants have primary and/or secondary child abuse and neglect prevention components as part of their direct service delivery approach to serving families and the grant programs within PCS utilize evidence-based and evidence informed national programs as strategies to prevent child abuse and neglect. CBCAP funds support partially supports First Steps Georgia and the Second Step Program.

The Prevention Section has developed program standards and performance measures for all funded child abuse and neglect prevention programs within our Section. These standards require implementation of an evaluation component with measures being consistent across all programs funded. Applicants for those program models must agree to follow the standards and

reflect adherence to the standards as they describe program implementation and evaluation in their applications.

After contracts have been awarded, staff monitor both the financial and programmatic progress of the funded programs by review of the detailed reporting documents (that are produced through our on-line grants management system(s)) which are required to be submitted quarterly. At least one site visit will be completed during the first contract period prior to the program's first opportunity to apply for additional funding. Any application for continuation funding focuses on documented outcomes for participants, evidence of progress toward resource development for sustainability, satisfaction of participating families and utilization of evaluation information to strengthen the program.

It is anticipated that through a community-based continuum of sustainable programs PCS will be able to offer prevention services targeted to the general population and at-risk families. The goal of the Prevention Section's approach is to engage communities in planning, implementing and evaluating a continuum of prevention services. By engaging communities in this approach, it is anticipated that they will become self-sufficient once the grant funding is removed. In order to ensure sustainability of programs, the Prevention Section is committed to supporting infrastructure development investments in communities. This investment includes the use of CBCAP, TANF and state dollars that support training, technical assistance and evaluation efforts. See the Service Description section for more information regarding the work performed by the State's Prevention Unit.

Family First Prevention Services Update

In December of 2019, the Division published its Family First Prevention Services Act Implementation Roadmap. The document included system context and outlined a phased plan for implementing the provisions of the act relating to Title IV-E funding for prevention services and limitations on Title IV-E reimbursement for congregate care. The Division completed or made progress toward many of its Phase I (October 2019- March 2020) milestones and in the process of working towards others realized the need to adjust some anticipated timeframes. The passage of the Family First Transition Act and allocation of the one-time block grant of Transition Act funds also allowed the Division the opportunity to modify some of its implementation plans as it identified ways to best utilize the funds. At the end of the reporting period, the Division is working on updating all timeframes in the Roadmap to share new projected timeframes for implementing various provisions of the Act. The Division did not expend any Family First Transition Act funds during the reporting period.

d. SAFETY

Figure 5 QA Rolling Trend Report - Safety

Safety		Statewide Federal CFSR Review 2015 (150 cases)	Statewide As of March 2020 (150 cases)
Outcome S1: Children are, first and foremost, protected from abuse and neglect.		66%	88%
Item 1:	Timeliness of initiating investigations of reports of child maltreatment (64 of 73 cases)	66%	88%
Outcome S2: Children are safely maintained in their homes whenever possible and appropriate.		43%	29%
Item 2:	Services to family to protect children in home and prevent removal or re-entry into foster care (12 of 54 cases)	59%	22%
Item 3:	Risk assessment and safety management (45 of 150 cases)	43%	30%

Data Source: Quality Assurance

Georgia did not meet substantial conformity with regards to Safety Outcomes 1 or 2 during the APSR reporting period. The above chart depicts the most recent CFSR data with regards to safety.

For **Safety Outcome 1** (Children are first and foremost protected from abuse/neglect) and Item 1 (Timeliness of initiating report of maltreatment), the State rated at 88% for the most recent review period (October 1, 2019-March 31, 2020). There has been slight improvement to this Outcome/Item over the past year. In April 2019, the state rated at 87% substantial conformity with regards to Safety Outcome 1/Item 1, and in September 2019, the rating was at 86%.

This Item was applicable in cases reviewed when a report of child maltreatment was received and screened in for Assessment or Investigation during the period under review. Timeliness of initiating investigations and assessments occurred when face-to-face contact was made with all alleged victim children identified in the intake report and age appropriate children were interviewed within the assigned response time. The State has maintained successful performance in the area of timeliness of initiating investigations of reports of child maltreatment. There number of reports of abuse and neglect investigated by DFCS in FFY 2019 were 41,677. The regional breakdown below. Overall, review findings reflect that the State values the timely initiation of risk and safety assessments through meeting response times. This is evidenced by consistent overall positive review findings related to this outcome since the 2015 CFSR when the State rated at only 66% for Safety Outcome 1/Item 1.

We have met substantial compliance in Safety Outcome1/Item 1. We continue to monitor our work in this area and provide feedback to staff through case staffings, supervisory reviews/approvals, and CFSR Impact Reviews. This area is included in the training that the Safety Section provides throughout the state.

Figure 6 Investigations with Intakes

REGION	# of Investigations with Intakes
1	3765
2	2696
3	2608
4	3686
5	2944
6	2306
7	2106
8	1472
9	1071
10	1940
11	2775
12	2964
13	5343
14	5941
Out of State Placements	60
Statewide	41677

Data SOURCE: Georgia DFCS Data Unit and SHINES

Safety Outcome 2 - (Children are safely maintained in their homes whenever possible and appropriate) demonstrated a 29% rating as of March 31, 2020. This rating is an increase from the onset of this reporting period from 25% (April 2019).

Permanency cases reviewed rated substantially higher with regards to Safety Outcome 2 versus performance in the Family Preservation and Family Support program areas. Safety Items 2 and 3 are both included in the State's remaining PIP Items.

Item 2 (Services to prevent removal or re-entry into foster care) was most often rated as an Area Needing Improvement when the agency failed to provide services when appropriate to address identified safety issues for children and ensure their safety. In the majority of cases, appropriate safety services were either not provided or there was a delay in service provision. We have found that in some instances a family is referred for assessments but then once they are received, the recommendations are not always followed. We are also addressing the need for immediate service provision without delay. Unfortunately, there are times that a county may become familiar with certain providers and that provider may not offer the most appropriate service for the family.

Identified safety concerns were most often related to parental substance abuse, mental health issues of parents and/or children (i.e., children who were suicidal), domestic violence, physical abuse, inadequate parenting skills, and unsafe housing. In-Home programs were noted in the

six-month trend report to be problematic particularly related to Item 2 in Family Support Services and Item 3 in Family Preservation Services.

Each of these areas are being addressed through our ongoing record reviews and discussed in trainings offered throughout the state. This is also an area of focus for our staff as we prepare for Family First. We continue to work with providers to expand services to our more rural areas in an effort for all families to have the proper service provision.

The regions that were more successful in achieving Item 3 (risk and safety assessment) conducted frequent visits in the home, addressed all reported allegations, had private conversations with the family members, assessed all household members and caretakers for the children, made meaningful and relevant collateral contacts, monitored visits between the parent(s) and child in care, and addressed safety concerns brought to the agency's attention. There has been a 5% incremental gain in performance with regards to Item 3 over the past year (a current rating of 30%, compared to a rating of 25% in April 2019).

Since the Regions have implemented a "pre-review" process which entails cases being reviewed by regional and county staff prior to the formal QA review, there has been a significant reduction of cases brought to the attention of the Region/County as critical risk and safety concerns during QA reviews. From October 2018-March 2019, 32 cases were brought to the attention of regional and county staff due to unaddressed risk and safety concerns, compared to only 17 cases between April-September 2019, and only 12 cases during the most recent review cycle (October 2019-March 2020). This demonstrates that when case records are thoroughly reviewed by agency staff, field staff are generally able to recognize safety threats and take actions to address them.

Some of the more frequently identified issues negatively impacting risk and safety assessment (Item 3) included:

- Failure to review and consider CPS history
- Insufficient contacts with relevant collaterals to assess safety
- Failure to address all reported allegations with the family
- Lack of adequate safety planning
- Insufficient frequency and/or quality of case manager contacts with children and parents, including a lack of home visits
- Lack of assessment/screenings for and contacts with other household members/caregivers

- Failure to engage/assess stepparents/paramours living in the home.

Insufficient supervisory oversight was indicated by lack of quality supervisory staffings and supervisory approval for closure in cases where all concerns had not been fully addressed. Case documentation was not being routinely reviewed by Supervisors.

Some of the root causes include but are not limited to:

- Case contacts are driven by compliance and not purpose (mindset).
- Case contacts with children and parents are “friendly visits” and not focused on the on-going safety management and the on-going assessment of behavioral change through case planning (skillset).
- Case contact and documentation expectations and requirements are vague and not clearly demonstrated through concise, user-friendly templates and examples (toolset).
- Opportunities for quality control and related learning at the county and regional levels are not fully realized (systemic factor).

We have planned ongoing training for staff discussing the compliance driven practices vs. purposeful visitation, proper documentation, and assessment of safety. We just completed one of three scheduled safety summits which specifically included a portion on assessing safety and what that entails across all programmatic areas. We continue to address this through the CFSR Impact Reviews that are completed monthly. This information is included in training conducted by the Safety Section throughout the state and also when we conduct case consultations.

The State of Georgia continues to struggle with providing services to family to protect children in home and prevent removal or re-entry into foster care. In the CFSR review process it is evident that Family Support and Family Preservation are the lowest performing areas. These areas are addressed at the county, state, and regional level through staffings, Safety Summits, training, policy clarifications, reviews of records with live learning, and the implementation of the CFSP Impact Plan. A decision was made at the Division level that these areas would not all be specifically addressed under Safety in the 2020-2024 CFSP but through supervisor training, Solution Based Casework Phase 2, and staff development.

Special Investigations

In regard to special investigations, there has been a restructure there as well. Several years ago, supervisory oversight of the Special Investigations Unit was the responsibility of a unit manager under Field Operations. Since that time SIU was partnered with CICC as a result of leadership oversight but were never merged and always functioned independently although supervision was centralized. In August of 2019, the Special Investigations Unit was decentralized and moved back to regional and local oversight. To achieve this decentralization, Special Investigators were assigned to the regions in which they resided or those closest to their home

county. Their supervisory oversight changed to a structure that involved the regional directors and lead field program specialist with some connection to District SIU supervision/support. SIU supervisors remained in supervisory roles where most were moved to multi-region supervision or specialized assignments. For the Field Program Specialist (FPS)/Quality Assurance (QA) teams the following occurred 1) 3 SIU FPS/QA staff were absorbed into regional support networks as FPS, 2) 1 was transitioned into a QA specialist role within CICC. For the upper level leadership, the SIU director was promoted to social services program director for Muscogee County DFCS and the SIU unit manager was transitioned into a program director role within CICC.

The CICC's Safety Focused Intake Assessment model improved quality information gathering, assisting with the determination of maltreatment on new intakes to the field so that child safety is assessed sufficiently. With CICC increased timely notifications to counties of reports of abuse and neglect, the goal was completed. Quality Assurance reviews are completed on all cases randomly, monthly. The results and noticeable trends from these reviews are used to analyze adherence with guidelines and identify needed areas of improvement. QA data informs CQI interventions and QA data is cadenced with CICC administrators, supervisors, and the CQI team to gain commitments to improve quality information gathering and decision making.

CICC staff received SBC training as of FFY 2019. However, it is not implemented completely in CICC due to there not being specific intake practice outlined in the model and CICC staff does not work directly with families. The RPI plan focuses on safety and was designed to complement SBC.

Legislation

Significant pieces of legislation were passed that impact the work the State and Agency do around safety. The following pieces of legislation were particularly influential. These laws are additionally described in the Legislation and Policy and Service Description sections of this report.

- House Bill 472 Temporary Alternatives to Foster Care (TAFC) - Temporary alternatives to foster care means measures that a juvenile court may order in lieu of removal of or placement of a child(ren) alleged to be dependent in protective custody which will prevent or reduce the trauma or removal; allow a child to be cared for by persons with whom the child has an existing bond or attachment; or that ensure the safety of the child pending further action by the court on the dependency complaint or petition. This would be implemented when there is an identified safety threat and an out of home safety plan would be required.
- House Bill 478 Child Abuse Registry (CAR)- The initial HB which reinstituted the Child Abuse Registry (CAR) in 2016 required that at the point of a CPS substantiation, the maltreaters name was immediately placed on the registry. They were provided a notice that their name was included on the CAR and provided information on the appeal

process. The new legislation requires that all appeal opportunities be provided upfront, prior to the name of the maltreater being placed on the registry. This legislation also allows for the expungement of cases if specific criteria are met after a 3-year period.

- House Bill 478 Child Abuse Registry Child Welfare Service Manual Transmittal 2020-01 GA DFCS Policy Chapter 20- The initial HB which reinstituted the Child Abuse Registry (CAR) in 2016 required that at the point of a CPS substantiation, the maltreaters name was immediately placed on the registry. They were provided a notice that their name was included on the CAR and provided information on the appeal process. The new legislation requires that all appeal opportunities be provided upfront, prior to the name of the maltreater being placed on the registry. This legislation also allows for the expungement of cases if specific criteria are met after a 3 year3-year period.

Memorandum dated 9/25/19 Child Abuse Registry- The Department of Family and Children Services General Council, advised that prenatal abuse cases which are based on marijuana use alone shall no longer be substantiated.

- House Bill 472 Temporary Alternatives to Foster Care (TAFC)-GA DFCS Policy 5.08 - Temporary alternatives to foster care means measures that a juvenile court may order in lieu of removal of or placement of a child(ren) alleged to be dependent in protective custody which will prevent or reduce the trauma or removal; allow a child to be cared for by persons with whom the child has an existing bond or attachment; or that ensure the safety of the child pending further action by the court on the dependency complaint or petition.
- House Bill 64 - This bill requires specific information be provided to military law enforcement and/or the military family advocacy program when received by the agency.
- House Bill 530 - This bill is intended to prevent parents of guardians from withdrawing or removing a child from a public school for the purpose of taking active steps to evade detection of child abuse and neglect. This bill requires DFCS to complete an assessment with a family and determine if the family has filed an Intent to Home School with the State Department of Education.

The following Standard of Performance directives were distributed to Field Operations:

DFCS Field Operations Regional Supervisor Mentor Monthly CFSR Case Review Standard Operating Procedures (SOP) SOP Number 19-01 (replaces SOP 15-05)

This Standard Operating Procedures (SOP) is a DFCS Field Operations specific process for the governance of Field Operations regional supervisor mentor monthly CFSR case reviews. It is critical that Regional Supervisors mentors regularly review cases to increase their awareness of case practices and to enable them to take steps to increase county performance and to strengthen the mentoring relationship. This SOP will provide for a consistent, high level review

process that increases awareness of CFSR practices and related county and regional specific trends.

DFCS Field Operations Override Process for Cases Assigned from CICC

SOP Number 19-02

This Standard Operating Procedures (SOP) is a consistent, DFCS specific process that governs the role of Field Operations in the decision-making process for and ownership of intake decisions. It is critical that Field Operations is treated as a partner with intake decisions and has the ability, without approval from CICC, to override intake acceptance decisions when deemed appropriate. This SOP will provide for a consistent process that strengthens the role of Field Operations with intake acceptance decisions.

DFCS FIELD operations Abbreviated Investigation and Family Support Services Closure Process

SOP Number 10-03

This Standard Operating Procedure (SOP) is designed to provide a consistent, DFCS-specific process to govern abbreviated CPS Investigations and Family Support Services closures. It is critical that Field Operations have options and increased opportunities for professional discretion to prevent and eliminate unnecessary actions and steps during CPS Investigations and FSS cases when the facts show a clear lack of maltreatment and a low likelihood of future maltreatment.

e. PERMANENCY

Figure 7 QA Rolling Trend Report - Permanency

Permanency		Statewide Federal CFSR Review 2015 (150 cases)	Statewide As of March 2020 (150 cases)
Outcome P1: Children have permanency and stability in their living situations.		14%	13%
Item 4:	Stability of foster care placement (61 of 90 cases)	68%	68%
Item 5:	Permanency goal for child (43 of 89 cases)	42%	48%
Item 6:	Achieving reunification, guardianship, adoption, or other planned permanent living arrangement (20 of 90 cases)	27%	22%
Outcome P2: The continuity of family relationships and connections is preserved for children		32%	41%
Item 7:	Placement with siblings (58 of 65 cases)	77%	89%
Item 8:	Visiting with parents and siblings in foster care (42 of 74 cases)	45%	57%
Item 9:	Preserving connections (51 of 90 cases)	39%	57%
Item 10:	Relative placement (48 of 88 cases)	46%	55%

Item 11:	Relationship of child in care with parents (25 of 61 cases)	34%	41%
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Permanency 1- Children have stability in their living situations demonstrated a 13% rating as of March 31, 2020.

State efforts towards Item 4 (Stability of foster care placement) have remained consistent since 2015, with a rating of 68% both during the 2015 CFSR and presently. Performance related to this Item peaked in September 2019 with a rating of 73% substantial conformity at that time. Most cases rated as a strength for this Item when children experienced no placement changes during the period under review, when placement changes that did occur were planned and in the child's best interest, and when concerted efforts were made to ensure that children's current placements were stable.

Item 4 is rated as a strength for Georgia, however whenever as an area needing improvement is cited, it is generally because a placement disrupted due to the child's behavior and the agency did not provide services to either address the child's behavioral/mental health needs (consistent counseling, behavioral intervention, specialized treatment) or failed to provide supportive services to the caregivers to assist in meeting the specialized needs of the child (respite, in-home behavioral intervention).

The focus has been on minimizing the number of moves for children and when moves are warranted, how best to minimize the trauma to the child as well as increase capacity for the caregiver. Leadership has taken an aggressive move to insure we continue to meet the needs of children and our caregivers by mandating that every move receives a PAUSE call. The projected outcomes for this call are to minimize the number of stabilize placements, minimize placement moves, promote reasonable efforts to achieve permanency, and support caregivers. This process has had a positive impact on collaborative efforts with our private providers due to the supportive work to ensure all possibilities are tried prior to any move. All moves must have a PAUSE call prior to any move. This is a fluid process and adjustments are made as required to ensure this tool is utilized appropriately to meet outcomes. The challenges that are being managed are identifying placement resources for the youth with higher end needs. We are in the process of working with our private providers strategies to address placement for this population. Specifically, the agency is in the process of partnering with partner agencies to assist with placement and support for this population. Partial Hospitalization Program (PHP) with Boarding Pilot is a partnership between Amerigroup GF360, Ridgeview and the Division of Family and Children Services. PHP's include comprehensive, individualized care for adolescents 12-17 diagnosed with psychiatric, addiction, or dual diagnosis disorders. Ridgeview inpatient PHP and intensive outpatient treatment options give youth direct access to a variety of care levels based on their clinical needs. Additionally, in a collaborative effort we can help those identified as revolving in and out of inpatient/acute care and those who need a transition to supplementary care and outpatient treatment.

In addition, we are focusing on prospective caregiver training with the technical assistance from Spaulding for Children through our NTDC pilot work. This effort will aid in our ability to ensure we have caregivers who are adequately trained to be caregivers for populations of children experiencing trauma. This will be inclusive of our adoptive and relative caregivers.

The Caregivers Coaching Academy (CCA) purpose is for the caregiver to leave the 1-hour coaching session

1. Challenged, empowered, encouraged, or enlightened.
2. Also, the Caregivers Coaching Academy (CCA) is an opportunity for the agency and its vast number of professionals to learn from our caregivers as well.
3. Simply put, the Caregivers Coaching Academy's aim is to provide a monthly training opportunity for Georgia's caregivers. The aim and mission of the Caregiver Coaching Academy is always be instructive, informative, and enjoyable with an emphasis on the practical application.
- IV. The Caregiver Recruitment & Retention Unit's desire is to place our faithful caregivers in a situation where they can continue to thrive while helping other caregivers as well. The goal is with both the agency and its caregivers on board, the net gain would produce a cyclical & seamless assemble line of unlimited

For Item 5 (Permanency goal of the child) three primary elements are evaluated: 1) the timeliness of establishing permanency goals, 2) the appropriateness of permanency goals in place during the period under review, and 3) whether TPR was filed timely based on ASFA standards (15 of the most recent 22 months in care). In the majority of cases reviewed, the initial permanency goal(s) were established timely for children in care based on the federal standard (within 60 days of entry into care). Permanency goals were established timely in 74% of the cases reviewed. Permanency goals were appropriate based on the circumstances of the case in 60% of the cases reviewed. This component of Item 5 was most often negatively impacted when reunification goals remained in place long after efforts to achieve this goal had been exhausted. TPR petitions were filed timely in only 27% of the applicable cases reviewed.

The Division continues to work collaboratively with the State's Court Improvement Program (CIP) to ensure our judicial partners understand the importance of timely achieving permanency for any youth in foster care. The CIP has developed a new phase of the MD-CANI training which focuses specifically on this element of permanency. They are developing strategies for continued implementation and roll-out of this phase during the upcoming

year. In addition, the Division continues to work closely with our partners at the Attorney General's Office to ensure the Division's Special Assistant Attorneys General are ensuring proper compliance with all applicable federal and state laws.

Success related to Item 6 (Timeliness achievement of the permanency goal) is largely dependent on the agency's concerted efforts to achieve permanency within ASFA standards (12 months for reunification, 18 months for guardianship, and 24 months for adoption).

Issues most frequently identified as negatively impacting achievement of permanency included delays or failure to provide needed services to families to achieve permanency timely, failure to file for TPR timely resulting in adoption not being achieved within 24 months, having concurrent permanency plans with only one plan being worked, and insufficient contacts with parents and/or service providers to facilitate and support progress on reunification cases.

During trainings presented by the State's CIP or DFCS to judicial stakeholders the issue of concurrent permanency planning is regularly discussed. These trainings often involve juvenile court judges, parent attorneys, Guardians *Ad Litem*, and other stakeholders. As we work to educate all judicial stakeholders on the importance of achieving reasonable efforts for all permanency plans identified in the family plan, the collective knowledge of the dependency community will enhance the Division's efforts of regularly achieving this objective.

Permanency Outcome 2 (The continuity/preservation of family connections and relationships) rated at 41% during the most recent review period (as of March 31, 2020). This Outcome has shown a consistent, positive upward trend since the 2015 CFSR. All five Items associated with Permanency Outcome 2 have demonstrated significant positive gains since 2015.

Item 7 (Placement with siblings) evaluates the agency's efforts to place siblings in Foster Care together. In the majority of cases reviewed (89%) there were concerted efforts made by the agency to ensure that siblings in care were placed with each other. In 52% of applicable cases all siblings in care were placed together. For the remaining applicable cases, there were justifiable reasons why siblings could not be placed in the same home.

This item is a strength for the agency. The implementation of the sibling SOP and the agency's renewed focus on the importance of ensuring siblings placements/connections are paramount with families. Work with our provider partners around this topic is also a strength with this item. The PAUSE process will continue to be utilized in the placement stabilization for all children including siblings to ensure all avenues are explored prior to a sibling separation and placement disruption.

Item 8 (Visiting with parents and children in foster care) evaluated the frequency and quality of visitation between children and their parents, as well as siblings that are placed separately. While there has been a slight increase in performance related to this Item, the top factors

primarily continuing to negatively impact this Item are infrequent sibling visits or sibling visits occurring only during parental visits, infrequent engagement with parents to encourage them to visit, and lack of efforts to overcome barriers to visits (parent's work schedule, lack of transportation, parental incarceration). When family visits did occur, in most cases they were of good quality.

When families have the opportunity to visit, they appear to be of good quality.

Some of the root causes include but are not limited to:

- Case contacts are driven by compliance and not purpose (mindset).
- Case contacts with children and parents are "friendly visits" and not focused on the on-going safety management and the on-going assessment of behavioral change through case planning (skillset).
- Case contact and documentation expectations and requirements are vague and not clearly demonstrated through concise, user-friendly templates and examples (toolset).
- Opportunities for quality control and related learning at the county and regional levels are not fully realized (systemic factor).

We have planned ongoing training for staff discussing the compliance driven practices vs. purposeful visitation, proper documentation, and assessment of safety. We just completed one of three scheduled safety summits which specifically included a portion on assessing safety and what that entails across all programmatic areas. We continue to address this through the CFSR Impact Reviews that are completed monthly. This information is included in training conducted by the Safety Section throughout the state and when we conduct case consultations.

The safety discussions are inclusive of the permanency section as these issues permeates throughout the life of the case.

Item 9 (Preserving connections) was rated a strength in the majority of cases reviewed (57%) when there were efforts to keep children in Foster Care attached to connections important to them (most often siblings who were not in care, extended relatives, their home schools and communities). In instances where this Item rated as an area needing improvement there was either a lack of assessment to determine a child's important connections, or relevant connections that were evident for children (such as sibling, grandparents) were not maintained.

The challenges are managing the connections with siblings and identifying significant family members as part of the ongoing diligent search process. The agency has revised policy as part of the kinship continuum that provides guidance pertaining to identifying and maintaining connections for children in care. The agency plans to continue the monthly Kinship Technical Assistant calls to address concern and challenges with identifying and assessing relevant connections.

Item 10 (Relative placement) additionally rated as a strength in the majority of cases reviewed (57%). Cases rated positively when children were either placed with their relatives, or there had been an exhaustive diligent search for both maternal and paternal relatives. Most of the cases rating as an area needing improvement during the current review period were due to either a lack of identification of maternal/paternal relatives, and/or a failure to adequately assess named relatives. In many cases there were identified relatives in prior history, genograms, and CLEAR searches that had not been contacted by the agency.

This was rated as a strength for the agency. The agency has partnered with a Second Chance Inc, to provide training and technical assistance with practice and policy development for the Kinship work.

The agency's shift to increase relative foster homes will provide relative placements access to education and support services extended to traditional foster homes. This new practice shift has revealed that relatives require additional assistance and flexibility to meet foster home approval standards. The Kinship and the Caregiver Retention and Recruitment Units reviews relative placements prior to a decision not to approve a relative foster home as an on-going strategy to ensure the appropriate considerations are given to relative placements.

Item 11 (Relationship of child in care with parents) was a strength in 41% of cases during the most recent review period. In cases rated as a strength, parents were invited to attend medical, dental, and therapeutic appointments for their children, as well as school, daycare, and extracurricular activities. In cases rating as an area needing improvement, parents were not informed for these relevant appointments/activities, or of their ability to participate in them.

The Division wants to establish a parent support network for birth parents, where parents who have been through the reunification process serve as peer mentors to parents who are currently going through this process. We are in our initial planning phase and hope to have more information about this initiative soon.

The agency has enhanced the work around Partnership Parenting to assist in the work with reunification and capacity building for birth parents. The area of improvement for this item entails including the parents in relevant appointments for their children. The focus of the Partnership parenting is to work with caregivers on the importance of partnering with birth

parents. In addition, the Parent Advisory group strategy is under development to be more inclusive of specific regions and will be leveraged to assist the agency with practice improvements.

The State is supportive of the national vision for prevention and champions the notion that foster care should be a support to families, not a substitute for parents. The Division is actively involved in the planning to ensure children remain with their families and foster care is only utilized when absolutely necessary. Several practices have been established at the state, local and regional level in support of the Children's Bureau vision for achieving permanency. Regions are providing training and support to staff on utilizing the guardianship goal as options for families. This review period, there has been an increased number of adoptions and guardianships this review period. In addition, relative caregivers are encouraged to become relative foster caregivers to provide additional supports to families.

Georgia participated in the National "Adoption Call to Action" by participating in two summits in Washington DC as well as, a couple of national and regional calls to continue the discussion of addressing the nation's waiting children. In doing so, Georgia has reviewed state and national data provided by the Children's Bureau. Georgia has been a data-rich state for many years, using it to track performance, identify trends and barriers and develop solutions. Because of the extensive research the State does, most of the data shared in D.C. was not surprising. However, the definition regarding "waiting children" was new information. The Children's Bureau definition of "waiting" goes beyond Georgia's typical definition of waiting children. The Children's Bureau includes children with an adoption goal, with TPR or without TPR. Georgia's definition of a "waiting child," is one without an adoption resource. Georgia currently has approximately 350 children who fit that description. Per the Children's Bureau's definition, Georgia has 3,210 in this cohort. One of the State's faith-based partners, North Point Ministries (NPM), also attended the national meeting, as well as a court improvement representative. They participated in the discussions to address strategies and judicial and other barriers. Below are some strategies developed at the summits for improving adoption outcomes.

Issue: Judicial Barriers

Strategies:

- Explore new legal pathways to open adoption
 - In all cases where it is viable
 - In all cases where the birth father desires it
- Pre-set boundaries that enable the foster family to maintain healthy parenting boundaries
- Allow the children to WIN by losing the least while gaining the most relationally (both- and vs. either-or)

Issue: Matching kids with families without disrupting their existing relationships/community
Strategies:

- Experiment with targeting waiting children to local church partners near where they are currently living (making each child relevant to that hyper-local population).
- Partner with Promise 686 and NPM church sites as a test for this approach.

Issue: System's goals are not clearly communicated in a simple understandable way
Strategy:

- Create a SIMPLE graphic communication tool that captures the essence of helping kids win by prioritizing THEIR important relationships in how the system moves to help them reach relational/emotional permanency.

Legislation and Policy

The following legislative acts and policy adjustments had an impact on the State's ability to protect and achieve permanency for human trafficking victims.

SB158/(HB234)

Because of the passage of this Bill, when human trafficking victims are identified, DFCS now has authority to take immediate emergency custody of the victims. DFCS is now required to provide trauma informed services to human trafficking victims to help them with their recovery using certified service providers. Sets up a certification requirement for service providers through the Criminal Justice Coordinating Council (CJCC), to provide oversight and guidance for the service providers who serve these survivors.

"Soliciting" and "patronizing" another person for the purpose of sexual servitude was added to the list of activities that constitute human trafficking. Those who knowingly benefit from the trafficking of another are also now considered traffickers along with those who more actively participate in the exploitation. The penalty for trafficking children under age 18 was raised, regardless of whether the child was coerced or deceived as part of their exploitation. Child victims of trafficking can no longer be charged with prostitution. Penalties for pimping (selling) and pandering (buying) a child age 16 or 17 were increased to 10-30 years. Lastly, an antiquated charge "Pandering by Compulsion" was removed from the law.

The passing SB158 warranted internal Division revisions to appropriate DFCS policies and protocols including but not limited to:

- Modifications to the Human Trafficking Case Management Statewide Protocol
- Revisions to DFCS Policies 3.9 and 5.13
- Regional level staff person identified as a Human Trafficking specialist
- SHINES enhancements to include

- Display a new Special Circumstances call type of STEC–Human Trafficking Alleged
- Require Sexual Servitude/Human Trafficking Reporter Types when “SC STEC-Human Trafficking Alleged” call type is selected on the Intake Information page
- Require a Sexual Servitude/Human Trafficking Maltreatment Code (S8) if STEC-Human Trafficking Call Type is selected on the Intake Information page
- Display a new Short-Term Emergency Care Sexual Servitude/Human Trafficking type on the Custody Detail page
- Updates to the Maltreatment Code – S8 Sexual Servitude/Trafficking

f. WELL-BEING

Figure 8 QA Rolling Trend Report - Well-Being

Well Being		Statewide Federal CF SR Review 2015 (150 cases)	Statewide As of March 2020 (150 cases)
Outcome WB1: Families have enhanced capacity to provide for their children’s needs. (Item 12 must be a strength for the Overall Rating to be Substantially Achieved)		26%	14%
Item 12:	Needs and services of child, parents, foster parents (20 of 147 cases)	25%	14%
Item 13:	Child and family involvement in case planning (58 of 137 cases)	42%	42%
Item 14:	Caseworker visits with child (67 of 150 cases)	59%	45%
Item 15:	Caseworker visits with parent(s) (19 of 124 cases)	31%	15%
Outcome WB2: Children receive appropriate services to meet their educational needs		54%	56%
Item 16:	Educational needs of the child (57 of 101 cases)	54%	56%
Outcome WB3: Children receive adequate services to meet their physical and mental health needs		25%	27%
Item 17:	Physical health of the child (55 of 110 cases)	49%	50%
Item 18:	Mental/Behavioral health of the child (17 of 87 cases)	29%	20%

Data Source: Quality Assurance

Well-Being Outcome 1 (families have enhanced capacity to provide for their children’s needs) has remained consistent in case ratings over the past year as evidenced by a rating of 15% in

March 2019, a rating of 14% in September 2019, and a continued rating of only 14% in March 2020.

Well-Being 1 is largely impacted by a lack of frequent, quality visits and engagement with parents. Insufficient parental engagement directly impacted Items 12B, 13, and 15.

Item 12 (needs and services to the child, parents, and foster parents) most recently rated at 14%, a decrease from a rating of 18% at the onset of this review period. Item 12 was most negatively impacted by service provision to parents. Item 12B (Needs and services to parents) rated at only 11%, compared to much higher ratings of 39% for Item 12A (Needs and services to children), and 56% Item 12C (Needs and services to foster parents).

The issues most commonly impacting performance with regards to Item 12 included:

- Gaps/insufficient frequency of contact with children/parents in order to informally assess their needs
- Formal assessments completed, but never obtained/reviewed by the agency
- Recommended services not implemented timely
- All needed/recommended services not being implemented for family members/foster parents

A lack of ongoing diligent search efforts to locate absent parents also negatively impacted Item 12 on many cases. Each of these areas are being addressed through our ongoing record reviews and discussed in trainings offered throughout the state. This is also an area of focus for our staff as we prepare for Family First. We continue to work with providers to expand services to our more rural areas in an effort for all families to have the proper service provision

There has additionally been a significant decrease in performance related to Item 13 (child and family involvement in case planning) over the past year. In March 2019, this Item rated at 55%, compared to a current rating of only 42%. The agency performed the highest with regards to engaging children in the case planning process (54% of applicable cases). In these cases children were engaged in age appropriate discussions regarding family strengths and needs, general family functioning, their desire for permanency, and the effectiveness of services in place. Mothers were engaged appropriately in 46% of cases reviewed compared to father engagement being sufficient in only 36% of applicable cases. Insufficient contact with parents and children (in both frequency and quality) was most often cited as an underlying issue resulting in the failure to include parents and children in the case planning process. In many cases rated as area needing improvement, there was a lack of engagement with parents and children regarding case plan development (the family's strengths and needs) as well as a lack of discussion about progress with services being provided. In the majority of Family Preservation Services cases reviewed a formal, written family plan was never completed.

As outlined in the CFSR Impact Plan, regions continue to work towards developing new strategies targeted to improve our level of authentic engagement with both children and families in order to develop more client-driven case plans that yield success and positive outcomes. Examples of state and regional strategies include the following.

- Holding weekly cadences that center on various practice gap topics which include case plan development.
- Utilizing various live learning opportunities to promote authentic conversations between staff, children and families at summits, unit meetings, stakeholder meetings, and reunification celebrations.
- Weekly Café 212 calls are hosted bi-weekly by regional and state office staff and focus on improving practice. Families, youth, caregivers and stakeholders are often invited to share experiences and offer solutions to improving relationships and service provision.
- Region 11 is currently in the planning stages of implementing an initiative targeted specifically towards fathers. This initiative will consist of one on one training with case managers and supervisors utilizing feedback and support to help them understand the importance of building relationships with fathers and fully engaging those fathers in the case planning process.
- R1 is using CWQA pre-views and debriefs to highlight successful case planning and identify opportunities for improvement. This region recently had 13 staff shadow CWQA reviewers to further develop their capacity in this area.
- R12 is conducting case consults on Family Preservation cases open for six months which focus on case planning and engagement with families involved in this program area. This region is also in the development phase of creating a director-led reporting process to increase case plan completion and development.
- Region 5 CQI team has developed child and parent contact standards aimed at ensuring relevant topics are covered. The expectation is this will enhance engagement and purposeful conversation around case plan topics and behavior change.
- R13 hosts bi-weekly live learnings throughout region to focus on improving practice issues such as case plan development; monitors case plans for completion & quality while requiring case plans to be reviewed during all meetings with children & families; incorporates service evaluation into their newly created Permanency Staffing Guide; and consistently hosts Transition Roundtables for youth to ensure their case plan goals are being met as well.
- Practice Model Coaches are partnering with regions to improve this area by:
 - a. Working one on one with permanency case managers to develop strategies to improve work in the case plan development process.
 - b. Partnering with Field Program Specialists to provide regional trainings and live learning sessions
 - c. Facilitating Family Team Meetings to model engagement in the case planning process.

Item 14 (caseworker visits with child) spiked in performance in March 2019 with a rating of 51%. The rating dropped mid-year in September 2019, with a rating of 40%. Since that time, there has been an incremental upward trend related to this Item, with a current rating of 45% (as of March 31, 2020). Item 14 evaluates both the frequency and quality of visits with children in all program areas. The frequency of visits was sufficient in 56% of cases reviewed, and the quality was sufficient 51% of the cases. Both the frequency and quality must be adequate in order to receive a strength rating for a case. The issues which most commonly impacted performance related to Item 14 included:

- Gaps in contacts with children, particularly in Family Support Services cases between the initial response time and follow-up visits with children as well as when cases transferred from one program area to another
- Not increasing the frequency of visits with children when deemed necessary based on the case circumstances (when there were unresolved risk/safety concerns, unstable foster care placements, etc.)
- Not addressing all report allegations with children, as well as new incidents of concern that arose during the period under review
- Lack of regular contact with children in their *home settings*
- “Friendly” discussions with children that did not encompass the reason(s) for agency involvement, general family functioning, safety plan provisions, and the effectiveness of services in place

Case contact and assessment is included in the safety sections trainings and case consultations that are conducted throughout the state. This is also addressed through the CFSR Impact Reviews that are completed monthly.

Item 15 (caseworker visits with the parents) has demonstrated a decline in performance over the past year. In March 2019, this Item rated at 24%, compared to a rating of 15% in both September 2019 and presently. Item 15 evaluates both the frequency and quality of visits with parents in all program areas. Performance was higher with regards to visits with mothers, than visits with fathers. The frequency of visits with mothers was sufficient in 36% of cases, and the quality was adequate in 34% of cases. While the frequency of visits with fathers was sufficient in only 25% of cases, and the quality was adequate in 32% of cases. Both frequency and quality must be adequate (for both mothers and fathers) in order to receive a strength rating for a case. The issues most commonly impacting performance related to Item 15 included many of the same issues of concern that impacted Item 14:

- Gaps in contacts with parents particularly in Family Support Services cases between the initial response time and follow-up visits with parents as well as when cases transferred from one program area to another
- Not increasing the frequency of visits with parents when deemed necessary based on the case circumstances (when there were unresolved risk/safety concerns)
- Lack of engagement with live in paramours and stepparents
- Not addressing all report allegations with parents, as well as new incidents of concern that arose during the period under review
- Lack of regular contact with parents in their *home settings*
- Lack of discussions with parents that encompass the reason(s) for agency involvement, general family functioning, case planning, safety plan provisions, and the effectiveness of services in place
- The QA team continues to see cases in which letter and phone contact standards are approved for parents who are relevant to the case. Face to face visits with parents are required by our federal standards.

Case contact and assessment is included in the safety sections trainings and case consultations that are conducted throughout the state. This is also addressed through the CFSR Impact Reviews that are completed monthly.

Although the state, overall, has underperformed in the area of visitation, Region 14 has seen a remarkable uptick, exceeding all Kenny A. visitation outcome requirements. The following outcome measures (13-26) delineate those requirements:

- Outcome 13: Visitation (worker-child): At least 96.25% of the total minimum number of one in-placement visit per month and one additional private visit per month between case managers and children during the reporting period shall have taken place.
- Outcome 14: Visitation (parent-child): At least 85% of the children with a goal of reunification shall have had appropriate visitation with their parents to progress toward reunification.
- Outcome 15: Visitation (worker-caregiver): DFCS case managers shall visit each child's foster parent, group care setting, or other caregiver setting at least one time each month. At least 95% of the total minimum number of required monthly visits by placement case manager to caregivers during the reporting period shall have taken place.

- Outcome 16: Visitation (between siblings): Children who have one or more siblings in custody with whom they are not placed shall be provided a visit with their siblings at least one time each month, unless the visit is harmful to one or more of the siblings, the sibling is placed out of state in compliance with ICPC, or the distance between the children's placements is more than 50 miles and the child is placed with a relative. At least 90% of the total minimum number of required monthly sibling visits shall have taken place during the reporting period.
- Outcome 26: Visitation (worker-child): At least 96.25% of the total minimum number of monthly private, in-placement visits between case managers and children during the reporting period shall have taken place.

In Kenny A. report period 27, case managers continued visiting children as agreed upon 97 percent of the time and caregivers each month 96 percent of the time. Parent-child visits increased from 82.5% in period 26 to 85.8% in period 27 (P27), which met the required goal. Outcome measure 16, sibling visits increased from 77.3% in P26 to 90% in P27. Required monthly private, in-placement visits between case managers and children (outcome 26) just slightly increased to 95.23 percent from 94.4 percent in P26, just shy of the 96.25 percent requirement. In P28, which covers July 1, 2019 – December 31, 2019 the region exceeded all visitation outcome requirements.

Region 14 used a multi-layered approach. Instead of the QA team reading a month behind (reading documentation for quality and compliance,) the process was changed for them to read live time (allowing the counties to be notified if the first visit had not been completed by the 15th of the month and the second visit must be completed by the 27th of the month.

Administrators and Supervisors are required to obtain calendars via MS Outlook to ensure frontline staff are in compliance of completing visits timely. This is then followed by weekly cadences to discuss and rectify and barriers.

Both counties heavily utilize Brian Voyles daily reports to track/monitor visits daily. The Regional and County Directors review/discuss progress towards these goals every Wednesday.

In foster care, the Region has heavily incorporated the communication of safety (which at times is thought to take priority in CPS). If a visit is not completed the child is not safe. Looking at it through that lens has helped the Case Managers in understanding the importance of quality and timely visits.

Region 14 not only strives to ensure visits are made frequently, but they also take measures to ensure they are of good quality. They track the quality by utilizing an internal QA team to review records of all children in care in the region. If the foster care visit is not of quality, the specialist will send the documentation back to the case manager and supervisor with recommendations and an explanation as to why their visit did not meet the criteria. Spot checks

are done to offer “lessons learned” for those visits that did not meet criteria. The region anticipates incorporating these methods for CPS cases as well (this will be initiated once they are in a position to hire more staff). In addition to the internal QA team, other regional and state office teams assist with quality checks for targeted areas of focus (i.e. re-entry, timely adoption). A regional Kenny A. team checks for quality practices such as implementing services timely, making appropriate/timely transitional visits, and doing timely diligent searches.

Well-Being Outcome 2, Item 16 (educational needs of the child) evaluates whether, during the period under review, the agency made concerted efforts to assess children’s educational needs initially and ongoing, and whether the identified needs were appropriately addressed in case planning and case management activities. There has been a substantial, incremental increase related to this Outcome/Item over the past year. In March 2019 there was a rating of 46%, compared to an increased rating of 55% in September 2019, and a continued increase of 56% during the most recent review period (as of March 31, 2020). Permanency cases rated significantly higher than in-home services case for this Outcome/Item. In cases rated as needing improvement, the most common factor was failure to follow up on identified issues or service provision for the child including special education, speech therapy, failing grades, tutoring, behavioral issues, and attendance issues. There was also a lack of contact with school professionals and other providers to gather information directly from the source.

Over the last 5 years the Agency has increased its’ focus on improving the academic outcomes of youth in care. Through this more concentrated focus, there have been several targeted initiatives that have been implemented to prioritize education and also support documentation of education support that is provided to youth in care. Below are a list of those initiatives and activities:

- Project Graduate – focused on improving graduation rates of youth in care within Metro Atlanta. This initiative served as a model for the updated Education Service Delivery Model within the Division.
- Partnership with Community Partner (MAAC) – Through a coordinated partnership with the Multi-Agency Alliance for Children, youth in care (9th – 12th grade) receive enhanced education support services that promote academic recovery, on-time grade promotion and increased graduation rates.
- Updated SHINES System – Through the State Longitudinal Data System (SLDS), a foster flag was created in late 2018 and instituted in 2019 that automatically identifies a youth in the Georgia Department of Education data system as a youth in care. This is a major accomplishment because it will allow educators and administrators to ensure the rights entitled to youth in care are provided.

Kenny A. Consent Decree

The Kenny A. outcome measure 17 (OM17) mandates that 56% of children, 18 and older who exit care, must achieve either a high school diploma or a general education diploma (GED). OM17 is measured on an annual basis and covers those exits that occur between January – December of each year. To meet this outcome, a dedicated Kenny A. team member meets monthly with each county to seek solutions to barriers, review exits and determine whether the child achieved a high school diploma or GED. This work directly impacts the Division's ability to support youth who need additional education assistance. Additionally, Region 14 has formed two exceptional educational advocacy teams one in each county. As well, multiple other education-centric internal and external staff are involved, all of whom are dedicated to the pursuit of education excellence and attainment.

Well-Being 3 (children receive adequate services to meet their physical and mental health needs) also demonstrated noted improvement with regards to performance over the past year. In March 2018, this Outcome rated at only 15%, compared to an increased rating of 24% in September 2019, and a current rating of 27% (March 31, 2020).

Performance related to Item 17 (physical health of the child) demonstrated incremental increases in performance over the past year. In March 2019 there was a noted rating of only 35% compared to a 42% rating in September 2019, and a current rating of 50% (March 31, 2020). Data reflects that the agency assessed children's physical health needs adequately in 62% of cases, and that dental health needs were assessed sufficiently in 78% of cases. Services to address identified physical health care needs were adequate in 48% of cases, and services to address dental needs were sufficient in 59% of cases. In 47% of applicable cases there was insufficient monitoring of prescribed medications for children in Foster Care. The Health Information Portal in SHINES was utilized to evaluate health care services for children in care. Often agency staff were unaware of physical health conditions of children or of the use of prescribed medications for children in care due to lack of assessment. Most often this Item rated as an area needing improvement when there was a lack of follow-up to address identified physical and dental health care needs.

There has been an increase in training, consultation and direct support provided to our Division's field staff to ensure the medical and health needs of youth in care are met.

The Care Coordination Treatment Unit (CCTU) provided virtual training on navigating treatment for youth in care in Psychiatric Residential Treatment Facilities (PRTF). This training served as an opportunity for field and field support staff to understand the process of seeking residential mental health treatment for youth. The following topics covered were:

Training Dates

- Thursday, June 4, 2020
- Tuesday, June 9, 2020
- Thursday, June 18, 2020
- Tuesday, June 23, 2020

Topics Included: Qualifications for treatment/ meeting medical criteria, The Amerigroup Decision process, Insurance Approvals/Denials, The appeal process for a denial by the insurance company, CCTU's role in supporting field staff during the treatment process, What to expect during the treatment process, Tips for staying actively engaged in treatment planning during the youth's stay at a PRTF, Treatment time frames, Assessment bed waiver process, Discharge Planning/ Continuity of Care.

In partnership with the DHS Medical Director Dr. Priyanka Patel, WPAC cohosts virtual training opportunities to DFCS Case Managers, Supervisors and other agency staff to provide information and guidance on ensuring quality medical and behavioral supports to children and youth in care. Below are the available training dates and topics. There has been a slight increase in the number of high end staffings that are occurring so our outreach and dosage of trainings are providing more awareness and clarity of practice for this population. While we still have along journey, this has been a great collective start. We have also begun Virtual Town Halls facilitated and spearheaded by Amerigroup. The Care Coordination Team and WPAC both sit on the panels for those town halls.

[Psychotropic Medications/Medication Consent](#)

April 22, 2020

10:00 AM – 12:00 PM

***** Amerigroup 360 Virtual Town Hall *****

April 28, 2020

10:00 AM – 12:00 PM

[ADHD/Mood Disorders](#)

June 24, 2020

10:00 AM – 12:00 PM

***** Amerigroup 360 Quarter 2 Virtual Town Hall *****

Tuesday, July 28, 2020

Time: 10:00 AM – 12:00 NOON

[Psychotropic Medication Monitoring Parameters](#)

August 19, 2020

10:00 AM – 12:00 PM

[Childhood Trauma and How it Affects the Developing Brain](#)

October 21, 2020

10:00 AM – 12:00 PM

[PRTF Requirements/Autism Diagnosis](#)

December 9, 2020

10:00 AM – 12:00 PM

Item 18 (mental and behavioral health of the child) evaluates the agency's efforts to assess the mental and behavioral health needs of children, to provide services to address any issues of concern in these areas, and to monitor psychotropic medications prescribed to children in Foster Care. There has been a substantial increase in performance related to this Item over the past year. In April 2019 Item 18 rated at only 9% compared to a current rating of 20% (as of March 31, 2020). Data reveals that assessment of children's mental/behavioral health needs was sufficient in 45% of cases and that service provision to meet identified needs was appropriate in 32% of cases. Despite increased efforts in this area, the agency's monitoring of psychotropic medications for children in Foster Care in accordance with the State's policy related to this topic remains problematic. Psychotropic medications for foster children were adequately monitored in only 10% of applicable cases. Other issues of concern included a lack of referral for formal assessments (trauma assessments, psychological evaluations) when warranted and a lack of timely implementation of recommended services to address a child's identified mental and behavioral health care needs.

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The following programs have been working to improve the well-being outcomes for youth in care, addressing their educational, health and other service needs. Below are descriptions of some of the activities performed as well as work that is planned for the future.

Afterschool

In March 2019, the President's budget proposal included the elimination of the 21st Century Community Learning Centers (CCLC) initiative which funds local afterschool and summer learning programs in all 50 states and the U.S. territories. The program manager for the Afterschool Care Program sits on the State Planning Team for the Georgia Statewide Afterschool Network (GSAN) alongside the program manager for Georgia's 21st Century Community Learning Centers program and recognized that the elimination of funding for 21st CCLCs would create a massive deficiency in Georgia as well place added stress on the Afterschool Care Program funding source and funded programs. The 21st CCLC program was funded under the approved budget and continues to provide funding to programs alongside of the Afterschool Care Program.

The approved funding served 35,069 students through the end of FFY 2019 which concluded on September 30, 2019. Of these youth, 919 were in foster care. The Afterschool Care Program intends to engage social services case managers more to increase the number of youth who use out-of-school time programs throughout the State. Virtual webinars (beginning May 2020), participation in local county and regional meetings, and agency wide correspondence will be used to guarantee the level of engagement needed and to ensure county staff are abreast of participation options for youth in care.

Georgia CREW/TeenWork

The TeenWork/CREW program allows foster youth ages 16 -17 years old to gain employment skills by participating in extensive employability trainings and work experience. The program is designed to increase the number of trained and experienced youth and impact the employment trends for youth in Georgia. With the legislative passage of Connected by 21 which permits young people to remain in care up to age 21, Georgia CREW/TeenWork has been able to increase capacity to provide additional job readiness training, career preparation and summer hands-on work experience opportunities. These experiences support the self-sufficiency and independence of young adults as they transition out of care. TeenWork/CREW is the youth employment hub within the Georgia Division of Family and Children Services where participants enjoy a youth-friendly work and career preparation learning environment.

Through trainings participants develop positive relationships with a group of peers (CREWs). Working in peer groups is a concept that was newly incorporated into the program October

2019. It involves more frequent interactions and encounters with the targeted youth population. Topics covered during trainings include: Financial Literacy, Networking, Respecting Others in the Workplace, and Conflict Resolution. Higher-order thinking skills such as innovative and creative thinking, decision-making, and problem solving are taught to prepare them for future employment and meet the critical needs of employers. Youth can engage in and practice critical skills for processing information, evaluate and solve problems, perform mock interviews, discover resume styles, and how to complete an employment application. The primary goals are:

- To support self-sufficiency of Georgia's foster and opportunity youth through the development of employability skills
- To provide employability training & hands on work experience for foster and TANF eligible youth ages 16 and 17 years old
- To provide employment resource connections for Georgia's foster, opportunity, and TANF youth

Service Model

Youth learn through two techniques 1) experiential learning from real and simulated contexts, and 2) cooperative learning with and through others. The delivery of services is as follows:

- Group skill building and development (9 month)
 - Training and 8-week work experience during the summer
- Youth employment training
 - 6-month training conducted throughout the state (November – April)
 - Individual non-matriculated courses
- Employment resource referral
 - Electronic personalized referral process
 - Program operations specialist manages this service
 - ETSs and ERSs submit resource information through electronic form

Early Childhood Education

The agency increased the percent of children from ages 0 – 5 who are in an early childhood education setting from 64% to 75% by 2020, as documented in GA SHINES. DFCS exceeded its 2024 target (75%) by 7 percentage points (82%) within the first year.

To continuously improve performance, ECCU will:

- Provide training opportunities to DFCS staff and partners
- Educate external partners and community stakeholders on the early childhood services provided by the Division
- Identify early learning opportunities in Early Head Start, Head Start, Pre-K or any other quality rated childcare programs and make appropriate referrals.
- Provide training to foster parents on the early brain development, adverse childhood experiences and their impact on the growth and development on the youth in their care.
- Enhance the knowledge of case managers and their ability to make proper decisions regarding the best available early childhood setting.

On September 30, 2019, the Administration for Children and Families released an information memorandum Log No. ACF-IM-HS-19-03 providing updates to the kinship eligibility requirements for Head Start/Early Head Start programs. The memorandum explained how children with DFCS involvement would be eligible for Head Start. EECU adjusted program practice by updating protocols to support external partners. In November 2020, ECCU partnered with the DECAL Head Start Collaboration Office to develop a referral process that allows Head Start/Early Head Start programs throughout the state to identify and enroll eligible children with DFCS involvement based on their kinship status.

DECAL utilizes a Quality Rated system to determine, improve, and communicate the quality of programs that provide childcare services. The agency has now mandated (effective Jan. 2021) that all childcare programs must be Quality Rated to participate in the CAPS program. This implementation will impact children in DFCS custody and children with DFCS involvement who are receiving CAPS services. Children enrolled in non-quality rated programs will need to change placements or lose CAPS funding, resulting in delays or disruptions in childcare services. Additionally, CAPS referrals are submitted via SHINES and no safeguards currently exist in the system to prevent ineligible referrals. There are no immediate enhancements scheduled for SHINES related to this, but the unit has taken necessary steps to help limit the number of referrals to non-CAPS providers. New protocols have been developed and unit staff will assist case managers and foster parents with selecting quality rated providers.

Education

Overall, the state continues to meet the educational needs of children and youth in care within Georgia. While a considerable amount of supports and structures have been instituted to for case managers and partners who provide direct educational support, the work to increase case manager engagement and activity will continue.

The Educational Programming, Assessment and Consultation Unit plans to continue:

- Training Division field staff on the services of EPAC
- Educating external partners and community members how to utilize EPAC services
- Building and strengthening relationships with external partners and community members
- Meeting the educational needs of our youth
- Providing monthly reports to the Division's Regional Directors highlighting the services and support provided
- Ensure fiscal and programmatic support systems are incorporated and maintained within the daily execution of program services provided to contracting partners and stakeholders
- Ensure the EPAC Unit staff understand their role and responsibilities that contribute to the development and growth of EPAC services

The governor asked agencies to find efficiencies in their organizations and submit budget reduction proposals for amended FY2020 (which ends June 30) of four percent. EPAC and youth services were affected by a \$477,000 budget cut. Residual impact includes the quantity of tutors who may be hired, educational diagnostic assessments that can be completed for each youth, and staffing. EPAC Unit was unable to hire an internal quality specialist and program assistant.

To adapt to the state budget cuts, EPAC developed and implemented Tutorial Determination and Reassessment Determination forms identifying the tier of needs to ensure maximization of services while keeping in mind the budget cut. The outline job duties of the internal education quality specialist and program assistant was divided among the Unit, the district managers, education support monitors and external education quality specialist.

Health

With regards to health outcomes for youth in care, the state has increased monitoring efforts of psychotropic medications prescribed to youth in care. Because of the work in this area, the state was able to meet the related PIP requirement. Bi-monthly a Medication Monitoring Report and Significant Health Conditions Report is disseminated to each regional director. These reports are then reviewed by each county and information within the reports are updated as needed. These reports are received from the GA SHINES team and information is also received from the Georgia Health Information Network System (GHINS).

Not only have these reports provided the opportunity to ensure the health records of youth are up to date and correct, but it ensures the appropriate medications are provided to youth, where and how needed.

The Wellness Programming, Assessment and Consultation (WPAC) Unit had developed a virtual training plan to provide more virtual training opportunities to DFCS staff, providers and caregivers. In partnership with the DHS Medical Director Dr. Priyanka Patel, the WPAC Unit will host virtual training opportunities to DFCS case managers, supervisors and other agency staff to provide information and guidance on ensuring quality medical and behavioral supports to children and youth in care. Below are the training dates and topics.

Psychotropic Medications/Medication Consent

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g. SYSTEMIC FACTORS

As a result of the state's 2015 CFSR, two of the seven systemic factors were found to be in substantial conformity: quality assurance system and agency responsiveness to the community. For a state to be in substantial conformity with a systemic factor, no more than one of the items associated with the factor can be rated as an area needing improvement.

Statewide Information System (Item 19)

Information on location, demographics, legal status, and permanency goal of children in care is readily available to users statewide through SHINES and LENSES reports. Users can set parameters for each report. For instance, a user may work in Cobb County but need data for the entire region and can set "Region 13" parameters for the desired report. Examples of reports and what they provide are listed below:

- Placement List (SHINES report): Child's DOB, Placement type, name, start date
- Foster Care UDR (SHINES report): Child's demographic info, legal status, permanency goal, etc.
- Foster Care Status (LENSES report): Provides a lot of detailed information on case plans, placements, judicial reviews, etc.

The data are retrievable, in that there are available reports in LENSES and SHINES, and the Data Unit is available to provide any requested information (e.g. location, demographics, legal status, and placement goal). The data are accurate, however, the DIS and regional/ county leadership have reports to assist the counties in correcting it (AFCARS errors, PIP, SHINES and LENSES as well as other identified reports as needs are identified). Training is provided to the field when inaccuracies are identified in the data, especially the same ones over and over. The data are current, and the DIS work with the counties to train them on timeframes and work error reports to get their data updated. There are some timeliness reports that are available to the county/ regional leadership as well.

There have been enhancements to improve the reporting of child outcomes within the SACWIS system. The system has also done enhancements to case planning to improve the quality of the reporting of the child's case plan. Data are readily available to the field through both individual case review, lens reporting and BIP reports. These reports are designed to help field staff better manage caseloads and information. They include a variety of subjects across the case's lifecycle on both the administrative and case worker level.

The QA/CQI teams did not conduct an evaluation related to the statewide information system, however, the system has been used to help the State achieve CFSP objectives. For example, the SHINES Team developed job aids and communication materials to increase user knowledge of

system functionality. They implemented a solution to support the State's Kinship Care Continuum. System changes include modification to several modules (e.g. Investigation, Family Preservation, Foster Care and Resource Development). The SHINES team worked in partnership with EPAC to support improved case documentation specific to education and educational needs of children; EPAC and Georgia SHINES teams meet quarterly. Case managers now have ability to document education setting (including special programs), create education stability plans, and have access to DOE data.

SHINES has also been instrumental in strengthening the Division's partnership with the court system. There are three interfaces with the State's Court Plans Reporting System – case plan, CPS, and court orders. The Unit meets quarterly with the Court Improvement Project – Court Plan Reporting System team to address concerns/issues identified in data sharing. When requested by the courts or region/county DFCS staff, they facilitate case plan trainings; delivered in partnership with Court Improvement Project and Data Integrity Specialists Unit.

Case Review System (Items 20 – 24)

Item 25: Written Case Plan-

The CFSR reviews primarily focus on rating the quality of *engagement* with children and parents (Item 13) when evaluating case planning efforts versus the actual written case plan. Below is a summary of the most recent Item 13 trends (Source: six-month trend report (October 2019-March 2020)):

- The agency performed the highest with regards to engaging children in the case planning process (54% of applicable cases). In these cases, children were engaged in age appropriate discussions regarding family strengths and needs, general family functioning, their desire for permanency, and the effectiveness of services in place.
- Mothers were engaged appropriately in 46% of cases reviewed compared to father engagement being sufficient in only 36% of applicable cases.
- Insufficient contact with parents and children (in both frequency and quality) was most often cited as an underlying issue resulting in the failure to include parents and children in the case planning process. In many cases rated as area needing improvement, there was a lack of engagement with parents and children regarding case plan development (the family's strengths and needs), as well as a lack of discussion about progress with services being provided.
- In the majority of Family Preservation Services cases reviewed a formal, written family plan was never completed.

Each month the Data Integrity Specialists (DIS) receive a monthly AFCARS report that lists past due Case Plans and those coming due. This DIS reach out to the counties to work on the past due cases and inform the field of the cases coming due. Additionally, the DIS hold virtual Data Days to strengthen knowledge around this data element. Lastly, when an Adoption is finalized, the DIS reviews the case to ensure that this data element is accurate. If the Case Plan is not entered, the DIS reaches out to the county to get the information entered before completing their Adoption Review. This process ensures that virtually every case has updated case plan dates in SHINES as evidenced by AFCARS outcomes.

Item 26: Periodic Reviews

The QA team does not directly evaluate periodic reviews as a part of the CFSR reviews. Therefore, there is no direct qualitative data to support timeliness of these legal proceedings. However, for CFSR Item 6, we do evaluate the agency and court's concerted efforts to achieve permanency for children in the foster care system in a timely manner. Item 6 was primarily negatively impacted by the following factors *versus* court delays in the majority of cases reviewed (Source-six-month trend report October 2019-March 2020):

Issues most frequently identified as negatively impacting achievement of permanency included delays or failure to provide needed services to families to achieve permanency timely, failure to file for TPR timely resulting in adoption not being achieved within 24 months, having concurrent permanency plans with only one plan being worked, and insufficient contacts with parents and/or service providers to facilitate and support progress on reunification cases.

This item is also tracked on the DIS AFCARS monthly report that shows cases with a past due Periodic Review. The DIS ensure that wherever possible current dates are entered. This is also a data element worked during virtual Data Days with frontline staff. Also, when an Adoption is finalized, the DIS reviews the case for this data element. If the Periodic Review is not entered, the DIS reaches out to the field to get the information entered before the case is staged to PAD. AFCARS quality reports suggest that the state does an excellent job in making certain that required dates are present.

Item 27: Permanency Hearings-

The QA team does not directly evaluate permanency hearings as a part of our reviews. Therefore, there is no direct qualitative data to support timeliness of these legal proceedings. However, for CFSR Item 6, we do evaluate the agency and court's concerted efforts to achieve permanency for children in the foster care system in a timely manner. Item 6 was primarily

negatively impacted by the following factors *versus* court delays in the majority of cases reviewed (Source-six-month trend report October 2019-March 2020):

Issues most frequently identified as negatively impacting achievement of permanency included delays or failure to provide needed services to families to achieve permanency timely, failure to file for TPR timely resulting in adoption not being achieved within 24 months, having concurrent permanency plans with only one plan being worked, and insufficient contacts with parents and/or service providers to facilitate and support progress on reunification cases.

This item also shows on the DIS AFCARS monthly report that shows cases with a past due Permanency Hearings. DIS work with counties to ensure data is complete. This is also a data element worked during virtual Data Days. Also, when an Adoption is finalized, the DIS reviews the case for this data element. If the Permanency Hearing is not entered, the DIS reaches out to the field to get the information entered before the case is staged to PAD. AFCARS data quality reports suggest that the state continues to do an excellent job in recording when the hearings took place and that they are current.

Item 28: Term of Parental Rights-

The QA team evaluates timeliness of filing for TPR when rating CFSR Item 5. The following was noted with regards to the timely filing of TPR for the most recent six-month trend reporting period (October 2019-March 2020): *TPR petitions were filed timely in only 27% of the applicable cases reviewed.*

Data Quality (DQU) reviewed all cases with children placed in an Adoptive Placement. One of the data elements reviewed is TPR dates. DQU match the court orders with the legal Action in Shines. Also, DIS get a monthly PIP Report which compares legal status vs legal actions. The DIS ensures the TPR Legal Action matches with the Legal Status.

Item 29: Notice of Hearings and Reviews to Caregivers-

The QA team completes stakeholder surveys with foster parents caring for children in the review sample to determine whether they are notified of court proceedings in a timely manner. Below is a summary of the most recent survey results (February 2020-July 2020):

With regards to being notified of court proceedings in a timely manner:

- *44% of foster parents rated the agency as being “Excellent” in this area*
- *34% of foster parents rated the agency as being “Good” in this area*
- *6% of foster parents rated the agency as being “Fair” in this area*
- *16% of foster parents rated the agency as being “Poor” in this area*

Quality Assurance System (Items 25)

There have not been any areas of concern identified for the QA system. This area continues to be a strength for the Agency. The Quality Assurance (QA) Review System operates in all regions where services are provided. Each region is reviewed through the QA review process twice annually. The State has demonstrated substantial compliance with regards to how this system is utilized to evaluate performance related to CFSR Outcomes and Items. The case review system used by the QA review 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 related to federal requirements related to work with families.

Georgia operates an identifiable quality assurance 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. Georgia’s Office of Quality Management (OQM) monitors safety standards and yields evaluative bi-annual and annual reports that document conformity with standards that secure children’s safety. Monthly statewide data includes:

- The Trend Comparison Chart
- PIP Comparison Chart
- Program Comparison Charts
- Regional Comparison Charts

Each individual Region is provided with the above data following their QA reviews, and the following:

- Executive/Annual Summaries
- Stakeholder Survey Results
- Collateral Contact/Staffing/Documentation Date Report

Beginning in February 2020, the QA team did initiate a Results Based Accountability strategy aimed at evaluating and improving engagement at the County Director level through the review

process. As a result of this strategy, County Directors are surveyed at the conclusion of each review about the level of communication with them during the review process and are asked to provide feedback regarding ways that the QA team can improve their processes. The survey results are analyzed by the QA team each month. To date, County Director feedback related to the review process has been positive with no substantial recommendations for performance improvement noted.

Georgia's Continuous Quality Improvement (CQI) team assists in monitoring regional improvement measures. Georgia CQI consists of fourteen regions and the state's intake unit (CICC). All regional teams have an assigned State CQI specialist to guide the teams in the CQI process and a QA specialist to provide regional data. The teams also have at least one regional facilitator who is responsible for leading their CQI team. All but one region currently has an active CQI team during this review period. CICC also has an active CQI team. Three of the active teams are a part of the newly developed CQI Pilot, Performance Prerequisites for Improvement (PPFI). These teams have created one county-led team within their region versus a having a team which is solely regionally led.

Each team should utilize the state's CQI process which consists of 5 phases: Performance Analysis, Cause Analysis, Intervention Selection and Development, Implementation and Change Management, and Evaluation. CQI training is provided quarterly to ensure teams are trained on CQI's Performance Improvement Process.

Quality Improvement Plans (QIPs) are monitored by CQI Specialists monthly. Formal evaluation of each team's functioning is conducted by the CQI team for each six-month trend reporting period. CQI teams are evaluated based on leadership involvement, facilitators, and teaming structure. The most recent data report related to evaluation of these structures is attached (October 2019-March 2020).

All CQI teams have established QIPs which focus on the remaining CFSR PIP Items (Items 2, 3, 12, 14, and 15). Some regions have implemented strategies to target a single Item, while others have developed strategies to impact multiple Items depending on each individual region's needs. The CQI team works closely with the QA unit who conduct six-month regional reviews and who have one QA Specialist assigned to each regional CQI team.

Staff and Provider Training (Items 26 – 28)

During the most recent review period (April 1, 2019-March 31, 2020, the following information was gathered through surveys with case managers and supervisors with regards to initial and ongoing training.

Case Managers and supervisors most often cited that initial training provided to new case managers did not provide "hands on" experiences needed to adequately prepare staff for job

responsibilities. With regards to ongoing training opportunities it was often relayed that staff finding the time to attend sessions with their busy schedules/competing priorities was the greatest barrier to attending and absorbing information gained through ongoing training opportunities.

Figure 9 QA Review Survey Responses – Staff and Provider Training (Case Managers)

Case Managers:	Excellent	Good	Fair	Poor
Rate the effectiveness of initial training received and preparedness for your job responsibilities	19%	48%	27%	6%
Rate the effectiveness of ongoing training for your continued job responsibilities	32%	39%	27%	2%

Data Source: Quality Assurance

Figure 10 QA Review Survey Responses - Staff and Provider Training (Supervisors)

Supervisors:	Excellent	Good	Fair	Poor
Rate the effectiveness of initial training provided to new case managers	8%	47%	34%	12%
Rate the effectiveness of ongoing training for case managers	11%	48%	36%	6%

Data Source: Quality Assurance

The Training and Professional Development has been supportive of the goals of the 2020-2024 CFSP plan and State's desire to improve in the following areas:

- **Workforce Development:** Through assistance in development of training to support the implementation of the Employee Selection Protocol, implementation and development of the NCWWI Leadership Academy and administration of Georgia's Title IV-E Child Welfare Education program.
- **Solution Based Casework- Phase 2:** Practice Model Coaches continued to provide coaching, support, case consultations and workshops to new and veteran case managers across the state.
- **Child Safety:** Through the collaboration with the Professional Excellence Program at Georgia State University, the Safety section has partnered with the training and development staff at GSU to develop monthly safety briefings. These briefings are short, 2 to 4-minute videos and/or communications highlighting an important practice related to child safety.

- **Safety Assessments:** During this review period, several focus groups were conducted to assist in the development of an Advanced Child Protective Services course for CPS assessment staff. This course will be a hands-on, scenario-based design that would target case manager critical thinking abilities to piece together facts about a case to make decision regarding safety; Justification requirements in support of the Child Abuse Registry; Supporting assessment through documentation. The projected release date for this course will be in the fall of 2020.
- **Coaching and Mentoring -** Between the months of October 2019 and March 2020, the Training and Professional Development team deployed staff to the field to assist with case management, mentoring, coaching and over the shoulder support of case managers and supervisors in Region 8. This was to assist with managing the volume of casework assigned to that county and to assist with developing the capacity of newly hired staff. A total of 181 supervisors completed mentoring during the review period.
- A new online, virtual instructor led opioid course was launched during this period. The course is titled Opioid Use, Impact and Treatment.
- Provided assistance with marketing and tracking of Educational Academies through the DFCS LMS system.

Initial Training for Child Welfare Case Managers

The child welfare training system is functioning adequately to meet the initial training needs of newly hired child welfare staff and supervisors. Although it is difficult to distinguish the staff who have completed training prior to carrying a caseload from those who completed training while carrying one. However, the state is able to determine the timeliness of those who completed new worker training from their hire date. The requirement is to complete new worker training within 120 days of hire. Of the 524 employees who completed new worker training, 93% of them completed it within the required timeframe.

Of those staff, the time frame from date of hire to start of the classroom training is below:

15% (78) began within 30 days of hire

55% (291) began within 45 days of hire

78% (409) began within 60 days of hire

93% (486) began within 90 days of hire

Regarding ongoing training, 33% of staff met the 20-hour annual professional development requirement. Although there is no “penalty for not completing the training, the State keeps track of this data in the Learning Management System (LMS). The biggest challenge with this is organizational. Many classes get cancelled due to low or no enrollment due to the lack of balance between the work and professional development needs of staff. In other words, training is often times seen as a “nice to do” rather than a must do.

The DFCS Child Welfare Training Academy was reduced from 15-week program to a 6-week program in the first quarter of 2019. This was a tremendous support to the field in helping to move staff from hire to certification in a timelier fashion. This was important because DFCS was experiencing significant delays in the time it took to fill a case management vacancy. This was coupled with an increased focus on assigning and training staff to serve as Field Practice Coaches to assist with supporting staff through their training. Additionally, several DFCS regions have implemented their own training support programs to assist with additional mentoring, training and support of case managers. One example of such efforts is the EAGLES program in Region 14. This program provides intensive support and training to newly hired case managers while they are before, during and after completion of the FCS Child Welfare Training Academy. During this period of review, 377 staff were certified in CPS and 368 were certified in FC. DFCS also provides additional training to staff who are moving to work in specialty tracks such as adoptions and resource development.

DFCS has recently initiated focus groups to interview front line case managers and supervisors who have completed the Child Welfare Training Academy to conduct a needs assessment and gather input for curriculum redesign. 573 responses were received through survey and focus groups. The plan is to utilize this feedback to make necessary adjustments to the initial training provided to front line staff.

Supervisor Training

The Training and Professional Development Unit has successfully launched a new training for supervisors called the “DFCS Supervisor Academy.” The Supervisor Academy replaces the former supervisors training called “Putting the Pieces Together”. The new academy is an immersive practical, relevant learning experience for all new Social Services Supervisor and is an entirely new curriculum. 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. Some of this feedback is used in supporting supervisory development when they began mentoring at the conclusion of the academy.

The Supervisor Academy is 13 classroom days total. The modules are as follows:

Module 1: “A Day in the Life...” - 3 days. This Module introduces participants to the transition from case manager to supervisor and to their role as “administrative supervisor” (Kadushin). Essentials for day-to-day supervision are explored, including:

- Supervising purposeful staffings, Part 1
- Personal CM Conferences
- Supervisor Mentor Program (taught by supervisor mentors)

- Supervising Case Manager Competencies
- Introduction to SBC Supervision
- Policy Introduction and Overview (developed by Policy Section)
- The Basics of CPS and Foster Care Supervision

Module 2: “Supervisor as Team Leader”- 3 days. Supportive and educational supervision (Kadushin) are explored, including:

- Supportive Supervision and the Parallel Process
- Team Development Stages: Supervisor as Team Leader
- Creating a Circle of Safety and Trust: Supervisory “Team Building from the Inside Out”
- Managing Conflict as a Supervisor
- Understanding and Supervising Diverse Personality Types
- Developmental Coaching (“GROW” Model)
- Educational Supervision: Assessing Learning Styles of Staff
- Educational supervision: Helping Unit Members Develop Needed Knowledge and Skills
- Purposeful Unit Meetings
- Multi-Generational Supervision

Module 3: “Purposeful Program Area Supervision”- 5 days. This module is the heart of the Supervisors Academy—it is where participants will truly learn the essential knowledge and skills to purposefully supervise any program area, from INV to Adoptions. Topics include:

- Purposeful Supervision: “Invisible Children” in the System
- Purposeful Casework and Documentation
- CFSR: “The People Behind the Numbers”
- On-call Supervision
- Supervisor Mentor Panel Discussion Q&A
- Program Area Based Purposeful Supervision: Initial Safety Assessment, Investigation, Family Support Services, Family Preservation, Foster Care, Adoption/Resource Development
- Supervising Purposeful Staffings, Part 2: Staffing in Each Program Area (transfer, dispositional, monthly staffings)

Module 4: “Supervisor as Leader” - 2 days. This module examines how a supervisor is also an organizational leader within DFCS. Topics include:

- Supervising Outputs and Outcomes
- 7 Behaviors of Adaptive Leadership (NCWWI)
- Transformational and Transactional Supervision
- Personal and Positional Power
- Employee Selection Protocol (ESP)
- Bias and Leadership: The Ladder of Inference
- Supervisor as Change Agent
- Supervising for Retention

Staff Training System

The staff training system has the resources and capacity to meet ongoing training needs of staff. Traditional classroom instructor led training is available to staff on an ongoing basis. The division has also expanded the availability of online and virtual training for staff as well as the development of podcasts for learning on the go. The percentage of staff meeting the 20 hours of annual professional development is 33%. This is tracked in the Learning Management System. There is no penalty for not meeting the 20-hours of training. There are a number of classes each year that are cancelled due to low or no enrollment, but they continue to be made available to staff as an opportunity for professional development. Often, the biggest barrier to enrollment is due to competing interests of work and professional development.

The Department of Human Services also makes available several ongoing and professional development course to DFCS staff as well. To assist with knowledge of such trainings, the Training and Professional Development team has partnered with the Divisions Office of Communications to help advertise and promote ongoing courses. During this review period, the agency heavily promoted Field Practice Coach, Partnering with Dads, Legal, Family Team Meeting, Child Sexual Abuse and Exploitation, Recognizing Secondary Traumatic Stress and LGBTQ trainings. Regions and Districts have also continued the practice of quarterly case manager and supervisor summits utilizing internal and external staff to provide ongoing training opportunities to staff.

The Division utilizes both internal and external staff to provide initial training (IMPACT) to prospective foster and adoptive parents. The Train the Trainer for that training is administered by staff in the DFCS Training and Professional Development Section. The Division has recently revised the IMPACT training that incorporates additional knowledge around trauma and

support to birth parents and children and is currently assessing the best way to implement these curriculum changes.

Georgia is also participating in a pilot of a new National Training and Development Curriculum for Foster/Adoptive Parents (NTDC). The National Training and Development Curriculum for Foster/Adoptive Parents (NTDC) is a five- year cooperative agreement funded by the by the Administration on Children, Youth & Families, Children's Bureau that will develop and then evaluate a state-of-the-art training program to prepare foster and adoptive parents to effectively parent children exposed to trauma and to provide these families with ongoing skill development needed to understand and promote healthy child development.

It is the expectation that 100 percent of approved caregivers complete a pre-service training program prior to approval, thus non-kin foster homes are not approved without training. Kinship caregivers are afforded the flexibility to complete the training within 120 days of completion of all other requirements in order to allow the family time to adjust to immediate caregiving responsibilities. Policy also allows for IMPACT to be waived for kinship caregivers in which adoption is the permanency plan and the caregivers have demonstrated strength and stability during the children's placement. There are specific requirements to waive the pre-service training for this population, including a state-level waiver. Ongoing training hours are required for all caregivers. The percentage of caregivers completing the ongoing training is estimated to be about 70 percent. Since COVID, both the initial pre-service training and the ongoing training hours are conducted virtually.

The NTDC will work with six to eight sites (states, counties, tribes or territories) to pilot the training program. At the end of the grant period, states, counties, tribes, territories, and private agencies will have access to a free, comprehensive curriculum that has been thoroughly evaluated, which can be used to prepare, train, and develop foster and adoptive parents. The NTDC will be designed for families who are fostering and/or adopting children through the public child welfare system as well as those adopting through an intercountry or private domestic process.

All approved family-based caregivers have the same requirements for training, other than the flexibilities mentioned above for kin caregivers.

Residential care staff are required to complete "Foundations" training, which is modeled after the Divisions new worker training and is delivered by Office of Provider Management trainers. In addition, provider staff complete internal training with their agency, specific to the population of children served.

Service Array and Resource Development (Items 29 – 30)

Dedicated Resource Development staff in both public and private agencies administer and monitor initial and ongoing training for foster and adoptive parents. The QA/CQI teams did not use surveys to assess the Resource Development Program. However, case managers and supervisors were asked to evaluate service array in their counties/regions. During the most recent review period (April 1, 2019-March 31, 2020), the following information was gathered with regards to services available to meet the needs of families served by the agency.

Figure 11 QA Review Survey Responses - Service Array and Resource Development (Case Managers)

Case Managers:	Excellent	Good	Fair	Poor
How effective is your county in meeting the needs of the children you serve both in foster care cases and CPS cases?	22%	58%	19%	1%
Rate the availability of services to meet the needs of children and families in your county/region	19%	38%	36%	8%

Data Source: Quality Assurance

Figure 12 QA Review Survey Responses - Service Array and Resource Development (Supervisors)

Supervisors:	Excellent	Good	Fair	Poor
How effective is your county in meeting the needs of the children you serve both in foster care cases and CPS cases?	13%	67%	19%	1%
Rate the availability of services to meet the needs of children and families in your county/region	13%	42%	40%	5%

Data Source: Quality Assurance

As one of the strategies to improve service array, the State included an objective in the PIP:

Establish quarterly meetings in each region with agency staff (county and regional), pertinent stakeholders and service providers, to address service needs and availability of services to include:

- Identifying needed services
- Determining and implementing method to develop or access identified services
- Monitoring to ensure that implemented services are effective

The Children's Bureau recognized the State for having completed the first two steps (identifying services and developing a method to develop or access the services). However, the third segment – monitoring to ensure services are effective – was rolled over into the new CFSP.

Service Array

Overall, the service array in Georgia varies across the state due to availability, expertise and geography. Metro-Atlanta regions have a wide service array as it relates to their ability to link families with specific services to meet their needs. For regions located further away, the service array can be more limited especially as it relates to the availability of providers especially in remote/rural areas.

Regions throughout the state continue to engage service providers regularly and work together to create innovative partnerships to enhance the array of service provision. SoH sites are continuing to grow and develop additional provider opportunities in various regions.

Availability/accessibility statewide, including services offered in remote/rural areas

All regions have identified service providers to deliver preventive and reunification services within their areas, but for some regions the majority of these providers tend to be centralized within the most urban county of the region.

Although some areas of the state report service delivery delays due to COVID, the pandemic has assisted us in embracing a previous underutilized resource in some areas-- telehealth services. For example, in Region 5, service array and delivery in rural areas has been enhanced by the use of telehealth. Providers report enhanced cooperation and engagement in virtual services as compared to in-person services.

Some areas report lags in service due to wait lists and timely referrals. For instance, Region 1 reports sometimes there is as much as a three week wait list times for families to receive their initial intake appointment. As a result, they are spotlighting services available throughout the Region, and been purposeful in highlighting those services through Q2 cadence calls and Summits.

Due to geography, connectivity issues in some areas has presented a challenge utilizing telehealth services. For instance, Region 1 has been utilizing telehealth services to increase service initiation for prior to COVID, but had to develop creative workarounds because of internet issues in the mountains such as inviting parents to interface with providers using telehealth by providing internet services from their county offices. COVID has presented barriers to this workaround due to office closures but counties are seeking innovative ways to overcome it.

The extent to which services are individualized to meet specific needs

Regions continue to strive to ensure the individualized needs of families utilizing various strategies such as:

- Prior to submitting service referrals, case management staff collaborate directly with providers to ensure each individual client's specific needs and circumstances can be not only addressed but tailored for each person.
- County and regional leadership continue to develop frontline staff around engaging service providers by ensuring they have a clear understanding on how to create services tailored to meet the individualized needs of families—trainings, live learnings, one on one feedback.

What services, if any, are in short supply; indicate the extent (e.g. %) of time it is not available and/or the length of time one must wait for the service and the extent to which this varies depending on location.

Areas of service array that are limited or challenging across the state are identified as follows:

Placement and treatment for our older youth, specifically those who are 18 and approaching 21 with developmental disabilities. This population of young adults are growing and their transition into the community is challenging even with early communication with community partners such as DBHDD and APS.

Residential and outpatient for substance abuse/use disorders for adults and teens.

Domestic violence services

Spanish speaking providers are in short supply in some areas of the state.

Mental health service array

- Community mental health clinics are operating above capacity and according to a “all access” methodology that requires our clients to sit and wait for hours and days to receive an intake interview in many counties (DFCS clients do not get priority)
- Services for youth with cognitive deficits limited; need more CSEC specific services.
- Autism providers limited across state. The Marcus Autism Center remains the main autism resource for the state and maintains an extensive wait list for services. We also have a short supply of providers that provide residential/ outpatient substance abuse treatment to our teens.

The State does not depend solely on C3 coordinators to address service array, there are also resource development specialists in the field, and the C3 coordinators work with their CQI teams to troubleshoot concerns or unearth root causes of problematic areas that are identified in service array meetings. The CQI teams also help to develop feasible and relevant strategies to help achieve the lead and lag measures.

C3s have been hosting quarterly stakeholder meetings and doing case record reviews to help the State maintain focus on service array issues and concerns in the field. They keep a “pulse-check” on how well services are being provided and work collaboratively with stakeholders to make improvements. Over the report period they have hosted over 78 stakeholder meetings and have read over 500 case records to help further the state’s improvement in addressing needs and providing services to children, parents and foster parents.

Each coordinator reads 10 case records per month (15 records in the metro regions) to see if there is ongoing communication between the agency and providers. They also work with their local stakeholders to identify service needs and establish lead and lag measures to monitor progress, with their overarching “WIG” (wildly important goal) being able to help the state move closer to the national standard on CFSR Outcome Item 12. Some regions additionally concentrate on improving in the related Outcome Items 14 and 15. Below is a breakdown of regional activities regarding service array.

Region 1 was seeking to achieve the following within their region:

WIG (wildly important goal): Move Item 12 from 33% to 45% by May 2019

"through increased engagement with families and service providers."

LAG: Move Item 12A (needs and services to parents) from 78% to 85%

LAG: Move Item 12C (needs and services to foster parents) from 80% to 88%

The C3 coordinator used the quarterly stakeholder meetings to initiate a strategy that would assist in this effort. They settled on focusing on the quality of referrals, and the meeting attendees established the following lead measures (action steps) to track and monitor activities:

Lead : Through completing eight case reviews with follow up staffings per month throughout the Region, staff will increase their capacity to assess for the needs and services for children

Lead : Through completing eight case reviews with follow up staffings per month throughout the Region, staff will increase their capacity to assess for the needs and services for parents.

Lead : Through completing four Placement case reviews with follow up staffings per month throughout the Region, staff will increase their capacity to assess for the needs and services for Foster Parent(s).

Lead : Discussing the Services Referral Desk Reference Guide during the eight case staffings a month will improve the quality of referrals being sent to service providers.

Although the lag measure was not successfully achieved (nearly all regions across the state decreased or plateaued on Item 12), Region 1 did see an increase in the quality of referrals being received. By November 2019, the quality of referrals, had moved from 21% to 41%, which exceeded the lag goal by 1%. One of the challenges faced with the meetings was getting enough people that were representative of all eleven counties to them. In 2019, the region restructured the meetings to build on ones already being hosted within counties/clusters. In

doing this, attendance of individuals who previously had not been able to attend the meetings increased.

Region 2 was fairly successful with their original lag and lead measures. They were working to establish Care Communities and currently have about 20 of them with six additional ones being formed. They have 13 churches that have family advocacy ministries and eight churches have signed up for the CarePortal. Because the region has done well in this area, they have since added some new objectives:

- Ensure follow-up occurs after a family has accessed services
- Bring children placed outside of the region back to their home region
- Strengthen caregivers
- Increase ability of foster parents to meet specialized needs of kids
- Better understand all services being offered by other agencies.

To boost progress, the region used live learning teams and completed case record reviews. Because the reviews alone did not achieve the sought-after results, the region decided to do a second round of collateral trainings. Since then, they have seen an increase in quantity and quality of collaterals being done.

Region 3 focused on father engagement for at least two years. They had been working with the Department of Labor mobile services to help improve access to quality services, particularly for unemployed fathers. However, getting male prospects was challenging so the region adapted their leads and lags and settled on

Lead 1 – Case managers will identify cases where fatherhood engagement should be investigated

Lead 2 – Supervisors during staffing and case consultations will direct staff to appropriate referrals for services such as legitimization services

Achievement of goals is monitored by county directors who do second level reviews and report the monthly number of referrals made. Since adoption of these leads, 20 referrals were made to legitimization services. Although Region 3 did not achieve their Item 12 goal (in fact performance decreased), they achieved 40% on engagement of fathers and that was eight percentage points higher than engagement of mothers.

The Region 3 CQI team has been involved in a CQI pilot since September 2019. They are moving away from being regionally focused to be more county focused. The pilot centers around Floyd county, one of the largest counties in the Region. They are hypothesizing that county led CQI teams, will help better align the focus to the specific needs of the county and ultimately

positively impact CFSR outcomes and improve practice with families. In addition, they hope it will improve accountability by having counties take ownership of their own work.

Region 4 aimed to ensure families are receiving effective and quality services from both contracted and non-contracted providers. They use permanency staffings and a monthly survey that is administered to a random sample of social services supervisors. The results of the latest survey found that out of the 12 providers listed, 39% had initiated contact with the family within 72 hours. One hundred percent of service authorizations were completed. DFCS was provided 67% of provider notes and 67% of the notes received included documentation of the issues and observations of behavior change. Supervisors who said they had received quality notes identified these as positive attributes: notes with recommendations, behavior changes, observed concerns, progress of the family, date of the first contact with the family and assessment of the family, interaction with the children, named the issues that were being worked on, stated whether the parents had accepted the services, identified the number of visits that had taken place, included next steps and denoted whether the family had requested any other type of assistance. The areas that they said providers should work on is getting notes to the worker before the end of the month, providing more details, and refraining from cancelling visits without contacting the Agency.

Region 5 is focused on building and strengthening their relationship with service providers and community partners, particularly those who provide substance abuse assessments and treatments. They are interested in improving both Items 12 and 2. They are using case record reviews of parent/child contacts and the service array case record reviews for milestone tracking. The region initiated a parent documentation standard in June 2019 that case managers were required to use to increase their engagement and partnership with parents. A foster child “passport” had to be reviewed with the child’s caretaker during the ECEM contacts.

The discussions on cadence calls and in CQI meetings that were related to parent engagement shifted from a purely quantitative conversation to one that focused more on quality. The parent contact standard was shared with the Mentor Unit to they would use it when a CFSR Impact case review was being completed. A “green folder” system streamlined the criteria for the reviews. Having both the mentors and supervisors and mentors reviewing the cases, ensured the cases were being reviewed for two consecutive months. Supervisors were tasked with providing monthly feedback to their case managers on the use of the standard. In addition to the support they were receiving from the case reviews, case managers also had access to a newly developed diligent search notification form.

Although the region was not able to meet their goal of increasing Items 12 and 14 by 10% (Item 15 did increase by 10%), the strategies seemed to have some effect. They worked where the strategies were being used consistently, but this level of effort was not prevalent throughout the region, and there had not yet been a full year of implementation. The tracking of the measures went from August 2019 – February 2020.

Due to lack of progress with implementing previous leads/lags, **Region 6** leadership (regional director, county directors, and C3 coordinator) determined to take a new approach to addressing service array and effectiveness. They created new measures around the area they saw as the greatest need based upon their most recent CFSR QA review findings - services to parents. As a strategy they would use case staffings with providers to investigate whether the services that were in place were being effective and specific to the service need. If it were determined that the service was not effective, staff would identify why, and implement a plan to address it.

Social services supervisors were required to identify at least two cases each month that were “stagnant,” meaning there has been little to no progress in parents achieving case plan goals over a period of three to six months. The staffings held with the providers and case managers and supervisors were intended to explore the following:

- What behavioral changes need to occur?
- Are current services appropriate?
- If not, why?
- What will most likely facilitate needed changes?

The supervisor and/or case manager complete a staffing form, noting any additions/changes (i.e. additional services to address area not being met by current services, discontinuation of any services that are not effective, etc.) and complete any required referrals. An identified point of contact provides the C3 coordinator with the list of cases staffed with providers by the 5th of each month for the previous month. The C3 then follows up quarterly with each county on the status of cases staffed with providers.

Region 6 began implementation of their new strategies in July 2019, and they do not yet have enough data to determine success. However, they are optimistic because they instituted a protocol to ensure the fidelity of the process, and because the C3 first sought input and buy-in from county leadership as well as the stakeholders with whom the staffings will take place. In addition, this is being monitored very closely at the regional level to ensure the process is being followed, and they are tracking activity to adjust the process as needed.

C3 provided stakeholders with the data to show the counties that have been most consistent in their participation and the number of staffings that have occurred over the past quarter. Stakeholders reported that they felt the staffings had been beneficial; however, they are sometimes not focused on the types of cases meant to be targeted in the effort to identifying service effectiveness. One provider stated the county with whom she works most closely is using the form for every case staffed, rather than for the cases that are not making progress. It was also discussed by providers as a side note, that obtaining service authorizations that are completed correctly is a challenge and suggested staff may need some education around

completing service authorizations and costar. Since the onset of COVID-19, the submission of provider staffing forms has not been as consistent. Whether adjustments will be necessary due to the new climate, will be discussed in upcoming service array meetings.

Region 7 is in the process of developing new lead and lag measures, however they made significant process on their last area of focus: reducing the hoteling of children. In 2017 they had 27 children in hotels over the calendar year and of that an average stay was 8 days, with the longest being 89 days. The region recognized the disadvantages of children being placed outside of their educational school district or significant distances away from their original mental health counseling services. These children tended to lack structured daily activities, interaction with others, and access to supplies, clothes, and personal hygiene items.

Several strategies were put in place, beginning in 2018, including a hotel protocol with several stop gap measures to ensure that children were not being placed in hotels any longer than necessary. For children who were placed in a hotel, the region would have a weekly staffing for that child that included the child's provider(s) to get up to date information and to discuss all possible criteria for placement. Counties were encouraged to complete any overdue health checks, visitation planning, educational services, and counseling for the duration of the child's stay, to strive for a seamless provision of services.

In comparison with the rest of the state, Region 7 was second highest in hotel spending. From July 2018 – October 2018, the region had spent \$48,223. By February 2020, the region had become the 2nd lowest in the state of hotel spending for youth in foster care; a substantial reduction from 2018. Their most expensive month of hotel spending in the report period was in December. The total amount was \$39,000 and that amount was from just two counties (Richmond and Wilkes). Although the dollar amount is high in comparison to some other regions, some regions spend fewer dollars because they have fewer children in care. When you consider the total number of kids in care in Region 7, a smaller percentage of them are in hotels than some regions that spend less in hoteling expenses.

Region 8 achieved their lag early on. They successfully moved Item 12 from 13% to 30% by September 2018. However, the QA review revealed that the contributing factor to the improvement was an increase of services to children (Item 12A), from 25% to 80%. But, by March 2019, the region had dropped down to 11%. There was clearly a need to continue addressing services, most particularly services to fathers. So the region established new lead measures:

LEAD 1 - Case managers will identify cases where fatherhood engagement should be investigated. This has been evidenced by the conversation and consultation around Fatherhood engagement which has also led to non-custodial parent engagement.

LEAD 2 - Supervisors during staffing and case consultations will direct staff to make the appropriate referrals for services (i.e. legitimation services.) There have been reported 20 instances where referrals were made for legitimation services.

The milestones of achievement were tracked by second level reviews done by county directors and a monthly report of the number of referrals made. Part of the lapse in progress in the region was due to staffing issues. The region went several months with an interim regional director, high levels of turnover in the largest county, regional restructuring, and the C3 coordinator position has been vacant for over four months. The region now has a permanent regional director and the region is better able to go back to focusing on their service array goals. There have been discussions about adding legitimation features to SHINES which would assist with monitoring their progress.

Like Region 8, **Region 9** achieved their original measures early, they endeavored to increase social services case manager awareness of the need to engage fathers and the paternal side of families. And secondly, increase services to them and engage providers of those types of services. In 2018, they had success from both a data standpoint and anecdotally. They went from 50% to 100% on Item 12. As well, they had a father on a panel at a summit, had another formerly incarcerated father share his story of getting his children back and they strengthened their partnership with the Office of Child Support and Parent Court. Unfortunately, the progress withered as the region took on staffing issues in 2019. The region's rating dropped to 0% while the regional director was administering 34 counties and the C3 coordinator was simultaneously serving as a county administrator and interim county director for five counties.

Alas, the region was eventually able to fill the five county director positions and decrease the number of counties being covered by the regional director. By December, the C3 coordinator was able to refocus on service array and develop new lead/lag measures. She is working with Promise 686 to onboard churches to the CarePortal (CP) to support vulnerable children and families. They are targeting churches in the most underrepresented counties; encouraging them to get involved with Live the Promise (LTP) to support existing foster families and recruit new ones. Their goal is to add 15 to 20 churches. Being a full member of the CarePortal and LTP means the church is equipped with the tools to have a full Live The Promise Family Advocacy Ministry which would include Care Communities. The following churches have been recruited thus far.

- Toombs
 - Connection Church Vidalia - CP and LTP
 - Vidalia Presbyterian - CP
 - First Baptist Lyons - CP and LTP
 - First Baptist Vidalia - CP and LTP
 - Calvary on Aimwell – CP
- Laurens

- Connection Church Dublin - CP and LTP
- Dublin First UMC - CP (trained in LTP)
- First Baptist Dublin - CP
- Christ Chapel - CP (trained in LTP)
- Pine Forest UMC - CP
- Emanuel
 - Hawhammock Baptist - LTP (operates a resource closet)
- Tattnall/Evans
 - First Baptist Glennville - Launching an LTP ministry soon.
 - Ella Grove Baptist - Launching LTP ministry soon.
 - Claxton First UMC - Loaves and Fishes (making frozen meals for foster families)

Of the new foster families recruited by LTP churches in Georgia, almost a 1/3 of them started out by serving on a Care Community. Ninety percent of families served by a Care Community continue to foster after two years as opposed to 50% of those who have not been served. In Georgia, 1,700 children have been served by a Care Community with an economic impact of \$653,875. In Region 9, Laurens County CarePortal has served 210 children with an economic impact of \$62,844. The churches there have met 69% of the requests. The Toombs County CarePortal has served 121 children with an economic impact of \$64,747. There, 74% of the requests have been met by the churches.

Region 10 endeavors to educate staff on the information that is needed in order to make a referral for a mental health needs assessment for a child or parent. There is emphasis placed on them understanding the importance of following up on recommendations cited from completed assessments. Additionally, the region is seeking to improve the quality of services provided to children and parents by increasing communication between DFCS and service providers to support a timely initiation and continuation of services. By doing so, they anticipate achieving higher ratings on outcome items 2, 3, 12, and 18.

Quality assurance review data indicated that between September 2018 and March 2019, the region had increased from 50% to 75% in Item 2; decreased from 50% to 43% in Item 3; decreased from 33% to 29% in Item 12; and increased from 0% to 20% in Item 18. By September 2020 they are seeking to achieve the following:

- Safety Outcome 2 – 29%
- Item 2 - 65%
- Well-Being Outcome 1 – 18%
- Item 12 – 23%

By September 2020, the region would also like to have 53% of “qualifying” cases reviewed by C3 coordinator to determine ongoing communication between the agency and service provider. Of the 20 cases reviewed in November 2019, 11 were noted as having sufficient contact with parents to assess the need/progress of services. Of the cases with sufficient contact, 10 sufficiently assessed the need for services, 8 sufficiently provided services.

The C3 coordinator enlists several tactics to help facilitate progress toward measures. For example. Monthly “connection” calls are held for DFCS and provider front-line staff to discuss brief updates on lead/lag measures. The agenda is a rotation of topics and summaries of the calls are shared via email, along with notification of any available trainings related to the monthly topic.

An introduction between DFCS, provider, and family is made within 48 hours of referrals being accepted to confirm contact information is correct, discuss agreed upon service(s) needed, and agree upon the service initiation date. Monthly collateral contacts are made between DFCS and providers to discuss progress, overview of services being provided, safety concerns, and other concerns that may be affecting progress. Field program specialists use individual county review guides to assess performance.

The region hosts their service array meetings on the last Tuesday of each quarter. Fifteen days prior to the quarterly stakeholder meetings, the C3 coordinator administers a survey to invitees to help guide the meeting agenda. The number of participants and the trends and discussion points of the meetings are shared with regional leadership, however regional leadership usually participate in the meetings to discuss the progress on lead/lag measures and respond to concerns that may surface. Within two weeks of the hosted meetings, the coordinator shares the meeting summaries with the front-line staff.

Region 11 met their established lead and lag measures related to quality referrals in FFY 2019, and although they had an interim C3 coordinator up through December 2019, the frequency and quality of referrals remained high. Once a new, permanent coordinator was in place, the region planned to develop new objectives focused on recruiting resources to allow children to remain in their home communities. The new coordinator has been working to get acclimated to the process and will be developing new lead and lag measures in the near future. In the meantime, he has been hosting monthly stakeholder meetings throughout the region called Bridge 11. Bridge 11 is comprised of CPA and other community partners. They are excitedly seeking to recruit 50 foster homes throughout the region with a special focus on smaller counties. In May they will create a prevention branch and invite mental health professionals to discuss Families First Prevention Services. During the Bridge 11 meetings, they have been discussing ways to develop a specialized training for case managers. One of the partners, Called to Care, is considering hosting a recruitment workshop called Foster Parent 101.

Region 12 received a new C3 coordinator August 2019 who has been working to get new lead and lag measures established. The region hosted a series of three stakeholder meetings in January where they discussed progress from the last measures as well as ideas for new one. The region had set a goal of decreasing overdue health logs and welcomed assistance from CASA volunteers who would review medical records of the children they were assigned and provide those updates to the case managers. They additionally anticipated setting up offices in the county DFCS offices that would be accessible to the CASA volunteers. Although the region’s

work toward these goals subsided while the C3 coordinator position was vacant, the region has recently celebrated a few victories in this area. The Savannah/Chatham County CASA has relocated its office to the Chatham DFCS building in Savannah. The close proximity has helped to strengthen the region's partnership and communication with CASA. The C3 coordinator, region director, and Chatham County director attended a CASA Annual Meeting and Breakfast. The speaker for the event was Shimaine Quimbley, a youth advocate from GA EmpowerMENT who had been a presenter at the C3 retreat. She provided insight on what hope means for a child who has experienced abuse or neglect. Region 12 has shown great initiative in seeking to get more youth involvement. Anthony Stover, who is also a youth advocate from GA EmpowerMENT was also in attendance at the meeting.

Region 12 was unable to solidify their new leads and lag measures as their March meetings had to be rescheduled due to COVID-19, but stakeholders appeared to be in support of a new initiative they are calling "Push Back." The hope that the initiative will have some influence in achieving better outcomes on CFSR outcome Items 2, 3, 12, 14, and 15.

Push Back is necessary to obtain the information and/or documentation required to provide quality services. The premise is that stakeholders (internal/external) should expect to receive "push back" when there are non-quality visits documentation or assessments. The push back may be a requested change in practice or provision of contracted services. Some of the strategies proposed for moving the needle on the CFSR outcomes include:

- Timely completion of service authorizations and Complete referrals for services
- Ensure referrals Include BC, SSC, Placement Letter and Waiver form
- Improve Communication
 - Request notification on staff changes/temporary substitutions.
 - Request notification of extended Leave: FMLA/Maternity
- An expectation of quality monthly visits
- Improve security at Independent Living Programs with young adults
- Mutual information sharing:
 - Providers should communicate referral information that exceeds their capacity to other providers and/or DFCS
 - Providers should send email notification for placement openings to C3 Coordinator and the information will be shared with regional staff.
 - All stakeholders are welcomed to notify the C3 Coordinator of upcoming events and activities regarding their agencies. The information will be shared within DFCS policy and guidelines.

- Stakeholders were advised to use chain of command to communicate concerns if they are not receiving a response to telephone calls and/or email correspondence within 24 hrs.

The region has already scheduled upcoming events and activities to support their efforts toward improvement and several stakeholders have volunteered to assist with coordination:

- Region 12 Roadshow – April 20-23, 2020
- Provider Fair – April and May in conjunction with supervisor and case manager summit
- Reunification Event – Summer 2020 P.A.U.S.E Initiative – a regional pilot initiative to help stabilize placements and prevent some placement disruptions by bringing everyone to the table.
- Expansion of partnerships with faith-based community: Compassion Church will work to expand partnerships in Bulloch, Liberty, and Effingham counties.
- EPAC engagement with school personnel
- List of social workers in each county will be sent to stakeholders
- Education support monitor will address issues some CPA/CCIs have been having with unnecessary calls for behavior issues, impacting placement.

Region 13 strived to move from 0 to 35% on CFSR Item 12. In particular, they sought to ensure timely referral of services identified during CPS and placement staffings. They used the CQI team to complete sample reviews at the end of each milestone. Reports of progress were given to the regional director. Each of the three counties within the region targeted a different kind of service. Clayton County focused on law enforcement; Cobb focused on educational supports and Gwinnett began educating their stakeholders on FFPSA.

May/June 2019, the focus shifted to a reduction of children in foster care, with emphasis being placed on those in care over 18 months. They determined that one of their most significant shortcomings was a lack of follow-up with service initiation for families, so they pulled cases at 30 days for the purpose of ensuring services had been implemented timely. They established fundamental performance standards, one of which was that of seeing children with consistency. The region ranked 2nd overall in the State in overall fundamental performance but aspired to achieve 99%. In February 2020, they were at 75.2%. Strategies included ongoing discussions about the fundamentals; mentoring using the CFSP IMPACT Plan; case reviews and training. By March 2020, the region was pacing at 90.8% in Every Parent Every Month and were at 92.5% in their overall Fundamental Performance Indicators. A new C3 coordinator came on board February 2020. The State CFSP manager will be working with the region to help establish new lead and lag measures.

In early May, Region 13 C3 coordinator submitted a list with the C3 report of challenges or barriers the region was facing related to courts. Examples of the areas cited were a lag in SBC being implemented in court decisions, double work when it comes to case plans (i.e. required to complete family agreements that were not court recognized documents); pushback from courts although the family has a strong action plan; and youth entering our custody due to parents not being able to manage their mental health behaviors; insufficient communication between parents and their attorneys; SAAGS lacking confidence in case manager recommendations; length of time to file orders; diversity of court panels. These poignant observations by Region 13 and other regions were presented to program directors and the State's child welfare court partners which kicked off a series of stakeholder meetings being jointly hosted around the state by C3 coordinators and court representatives from CASA, SAAGS, DFCS General Counsel, Court Improvement Program, local county judges and others.

Region 14, like most of the other regions, established new lead and lag measures for FFY 2019 because they successfully met their FFY 2018 goals. For FFY 2019, the main lead measure was to provide effective and frequent communication with providers. They worked to close communication gaps, establish feedback loops and inform stakeholders of ongoing processes to increase transparency. Action steps were:

- Contact each provider that serves Region 14 and *personally* invite them to a stakeholder meeting
- Learn about the services they provide and the population they serve
- Disseminate a needs assessment (survey tool) to providers to get their input on how the Division can be a better partner
- Assist the counties in developing a rotation schedule for providers to attend all transfer staffings in the region
- Distribute surveys to county staff to provide feedback about providers whose services are being used
- Review communication protocols between staff and providers to ensure assessments, referrals and follow ups are completed and received timely

Other lead measures involved tracking the number of cases that transfer from Placement to Family Preservation Services and Child Protection Services to Family Preservation each month. They created reports for tracking this as well as the number of cases that are accepted into Family Preservation each month.

They additionally purposed to provide effective and frequent communication to staff to increase staff knowledge regarding:

- available providers and services

- qualifying criteria and appropriateness of case transfers
- initiation of services
- quality documentation of follow-ups with providers

The C3 coordinator hosted several stakeholder meetings (large and small) – often very creatively themed and crafty. Some meeting targeted very specific audiences like their well-attended meeting for Behavior Aid, Parent Aid and WRAP providers. Some meetings were county-specific. However, the August 2019 meeting was held with both counties (Fulton and DeKalb); joint provider/staff meeting with 235 attendees. Another regionwide meeting was held January 2020, and a provider fair was hosted in February 2020. A resource book was created and distributed at both the December and January meetings.

Only fourteen surveys were completed during the January meeting, but another survey regarding referrals and services that was administered by the Child Welfare Quality Assurance team engendered 82 stakeholder respondents. The majority of those survey participants reported that the agency provides timely and accurate referrals to providers and engages well with them on an ongoing basis (rated Good or Excellent). In 2020, CWQA interviewed 47 stakeholders and 60% of them rated the agency's effectiveness in providing appropriate services to meet the needs of families and children which they serve both through CPS and Permanency. Thirty percent rated this as good which was an increase over 2019.

The following questions were posed to the breakout groups:

- What do you feel are the greatest needs for children and families in your community?
- What measures might decrease the likelihood that a family would become involved with child p Where do you see gaps related to ensuring safety of children in the home and in out-of-home care settings?
- What measures would help increase the safety of children in these settings? Protective services?
- Where do you see barriers to permanency-whether reunification, guardianship or adoption-for children in state custody? What measures would help address these barriers and help these children achieve permanency?

Agenda topics covered lots of ground. Regional leadership, Kenny A. director and the Contracts Administration director supported and presented at many of these meetings, and several providers were on the agenda. One meeting had presentations from five providers:

- Road to Recovery

- Eastchester
- Underdue Social Services/Embracing Arms, Inc.
- Loving Helping Hands
- Social Services Institute
- Georgia Center for Child Advocacy
- Youth Villages

One of the most appreciated topics (as per the surveys) was the presentation on conditions for return by the safety manager and reunification manager. The coordinator of the meetings made a concerted effort to ensure each collaborative opportunity was meaningful and that stakeholders had an opportunity to review data and assess the region's strengths and areas needing improvement.

Stakeholder Meetings

While some C3 coordinators expressed their reservations about the stakeholder meetings having a significant enough impact on service array, there was a consensus that the meetings had several benefits overall. There was some disappointment in not being able to reach the numerical targets (i.e. doing better on Item 12), but they appreciated how effective the meetings are in bridging communication gaps between DFCS and community agencies, and how they uncover resources that are severely underutilized. Some regions have geographic struggles with the meetings because they have to host more than the required minimum to make sure they are giving their stakeholders an opportunity to participate. Some stakeholders have to attend multiple meetings because they serve families across regional lines, and some stakeholders are so spread apart that they may disengage because of the long drives. Nevertheless, the meetings have proven to be productive and have been favorably received by most stakeholders.

Case Record Reviews

The reading of case records for the purpose of determining whether there is consistent communication between providers and case managers has brought to light areas to celebrate and to work on. Over the report period, C3 coordinators have read over 500 case records. Of these cases 49% of them demonstrated ongoing communication between the service provider and the Agency. The coordinators received training on what to look for while reading a record by the QA director and where to look for information by the SHINES director.

The vast majority of communication occurred via email. However, the communication that occurred by phone tended to be more thorough and more likely to include conversations specific to the client's behavior or objective for the service. Counselors were more likely to make phone calls than agency staff, yet in most regions, the Agency was more likely to initiate the contact than the providers. However, both parties could do a better job of following up on

cases. If it needed, coordinators reached out case managers to provide them with an update. In one case, a coordinator checked with a case manager to be certain that a child's surgery did in fact get scheduled as she read from the documentation that one was to be scheduled. The case manager had in fact made sure the procedure was scheduled but appreciated the follow-up. The quality and frequency of notes from providers varied from region to region.

The regions already had a sense of how frequently the providers and case managers were communicating with each other, but the case record reviews help to be more definitive about not only the frequency, but also the quality. Also, it helps identify specific troublesome spots (information is vague or minimal) and get ideas on how to do it better. One C3 noticed that in her region where there were multiple providers, there was almost always one or two who disengaged.

The CQI and QA teams did not directly evaluate the State's performance related to adoptive and foster parent licensing, recruitment, and attention. Foster Parents engaged in the QA review process did, however, complete stakeholder surveys regarding the sufficiency of services provided to them as well as training that they have received. A summary of the Foster Parent survey results are detailed below:

Figure 13 QA Review Survey Responses - Case Record Reviews

Foster Parents	Excellent	Good	Fair	Poor
Rate the agency's effectiveness in notifying you in a timely manner of upcoming court hearings, panel reviews, etc.	29%	37%	21%	14%
How would you rate the effectiveness of the agency in allowing your input and opinions during court hearings and case panels to be heard	48%	24%	14%	14%
Rate the agency's effectiveness in providing services you have requested	38%	35%	15%	11%
Rate the initial foster parent training provided DFCS	53%	36%	75%	4%
Rate ongoing training provided for foster parents by DFCS	55%	43%	2%	0%
How would you rate your overall working relationship with DFCS	38%	45%	9%	8%

Data Source: Quality Assurance

Post Adoption Supports

The Division has established post-adoption services to assist adoptive families in meeting their needs and the needs of their adoptive child(ren). These services are designed to enhance the adoption experience and to prevent disruption or dissolution of the adoptive placement.

Services to adoptive families include:

A-Team: Provides support groups at State Universities & Colleges across Georgia for Adopted children & Teens. Also provides an Adoptive parent training seminar.

Resource Center - Provides information and referral for adoptive parents, also employs 4 Resource Advisors who assist adoptive families with locating resources.

Reunion Registry – Provides search and reunification services for adopted persons and families of adoptees.

Crisis Intervention- Provides short term in-home crisis stabilization services to adoptive families and referral services after crisis has been managed.

Bethany ADOPTS-To provide trauma-informed family therapy specific to adoptive families and adopted children who have experienced abuse, neglect, or other complex traumas.

The above Post Adopt services are available to adoptive families in Georgia on a Statewide basis, including families in the rural communities of Georgia. Vendors can serve Adoptive families in the same manner without experiencing any issue with service provision. The post adoption team, Social Services Administration Unit (SSAU), also works collaboratively with CCTU (Care Coordination Treatment Unit), DBHDD (Department of Behavioral Health and Developmental Disabilities) Budget, and others within DHS to provide consultation, placement assistance and financial resources to adoptive families of children with high-end, complex need children.

The Division continues to look for ways to support siblings being placed together and is working with the SHINES team to develop a monthly report in order to determine sibling placement. There is a Standard Operating Procedure (SOP) that involves getting leadership approval if/when siblings cannot be placed together and ongoing assessment to determine placing those siblings together when it's safe and appropriate to do so.

The Division also wants to establish a parent support network for birth parents, where parents who have been through the reunification process serve as peer mentors to parents who are currently going through this process. We are in our initial planning phase and hope to have more information about this initiative soon.

While the agency has a wide array of reunification services and supports, we continue to see a lack of services (particularly in the form of transportation) in some of our rural areas. We continue to assess this to determine how best to support our families while they work toward reunification.

Agency Responsiveness to the Community (Items 31 – 32)

There are numerous examples throughout the report of collaborative work between the Division and other federally funded agencies that serve shared populations. For example:

- The Division is planning a collaborative with the Georgia Department of Education to support youth in foster care. This collaboration strengthens the understanding of the “Every Student Succeeds Act (ESSA)”. This partnership also improves youth access to education services and supports within each community
- The Division partners with the Georgia Department of Community Health through the Amerigroup Care Coordinators in the medication management staffing to assist case managers on implementation of services for youth that have been identified as high need.

Since the conclusion of the Round 3 CFSR, the state has maintained significant and meaningful interaction with stakeholders and the community. There is no shortage of stakeholder meetings in Georgia. Each of the 14 C3 coordinators host at least one regionwide stakeholder meeting and four service array-focused meetings per year. The CFSP manager usually hosts, in partnership with the Children’s Bureau, a state-level APSR Joint Collaboration meeting each year. This report period, there were four held virtually.

Not only does the State have an immense number of partners and collaborators (see Collaborations section of this report), the work being jointly done is impactful. As constituent engagement is one of the three main pillars of work, several methods are employed to make sure this remains a priority. The State is also being mindful of who it is bringing to the table, making sure important groups are not left out. A Parent Advisory Council (PAC) has been created as well as a Youth Council. The birth parents and foster parents on the PAC are able to

advise the State on issues pertinent to them (kin parents are being recruited for the council), and Youth Council members have been asked to review policies prior to deployment.

The State's Office of Strategic Innovation and Engagement manages the State of Hope and Communities of Hope grants and coordinates Roadshows, a.k.a. Destination Hope. The grants offer opportunities for communities to identify their own unique needs, pool resources and work together to support their neighbors and local residents. The monitoring of the CFSP occurs at the local level and is generally overseen by the C3 Coordinators; however, when planning for the roadshows in each region, we include the C3 Coordinators in the planning and development of the schedule to try and meet with the regional stakeholders through the variety of meetings over the three day period of time. (please see the attached schedule of the two roadshows held so far in 2020, Region 1 and Region 12).

The state usually hosts at least four roadshows a year in various regions around the state. Roadshows are multi-day stakeholder events that often puts local county staff and stakeholders in direct proximity of Agency leadership where they are able to ask questions and get answers. Often segments of the meetings are dedicated to target audiences which helps to keep the questions focused on the interests of the attendees and affords more time to be dedicated to specific areas of concern. More information about the roadshows is described in the CFSP (Goal C. Strategic Focus A. Objective I.) Details on C3 coordinated stakeholder meetings are described in Collaborations and CFSP (Goal B. Strategic Focus B. Objective IV.) sections of this report as well as below in the Service Array and Resource Development section.

The topics vary and are audience-dependent; however, the over-arching theme of the 2020 roadshows is about developing communities that can support and nurture children and families in need- a "It takes a village to raise a child" approach. The topics are selected by the region through a facilitated conversation with OSIE. They are selected based on trends in the region and/or state. The Roadshows do not directly review/modify/or monitor the CFSP; however, each meeting can be directly related to one of the tenets of the CFSP. For example:

- Safety – A meeting will be scheduled with the school system and law enforcement
- Permanency – A meeting will be scheduled with Foster Parents, Relative Caregivers, Youth in Foster Care, Birth Parents, and CCI and CPA Providers
- Well-being – A meeting will be scheduled with non-profit, philanthropic, and faith-based organizations who often attend to the well-being needs of children as a preventative effort. A meeting will also be hosted with an OFI Community Meeting that encourages community organizations to become part of a network that assists families in applying for SNAP, TANF, and Medicaid.

The State additionally receives input from stakeholders via surveys administered by the QA review team. They query respondents on topics correlated with systemic factors such as Staff and Provider Training, Service Array and Resource Development, Agency Responsiveness to the

Community, and Foster and Adoptive Parent Licensing, Recruitment, and Retention. See survey results below.

During this review period (April 1, 2019-March 31, 2020) feedback from 670 stakeholders was gathered through QA reviews and the following ratings were generated related to the agency's partnerships and responsiveness to the community/stakeholders:

Figure 14 QA Review Survey Responses - Agency Responsiveness to the Community

General Information:	Excellent	Good	Fair	Poor
Rate DFCS staff accessibility to your organization (easy to locate, return telephone calls timely, etc.)	31%	40%	24%	5%
Rate DFCS effectiveness of partnership with my agency/organization	36%	45%	17%	3%
Rate DFCS staff effectiveness in identifying children at risk and providing emergency services or removal when placement is warranted	32%	51%	13%	4%
Rate the agency's effectiveness in providing appropriate services to meet the needs of families and children which they serve both through CPS and Permanency	27%	57%	14%	2%
Rate the agency's effectiveness in individualizing the needed services to meet specific needs for the families and children which they serve through CPS and Permanency	23%	53%	22%	2%
Rate the services provided by DFCS to ensure children are safe and protected from abuse and neglect	35%	52%	12%	2%

Foster and Adoptive Parent Licensing, Recruitment and Retention (33 – 36)

Please see a copy of the State's Foster and Adoptive Parent Diligent Recruitment Plan. The Plan has been updated to incorporate 2019 data.

Policy

The Policy and Regulations Unit staff have additionally worked to support CFSP goals and objectives. Their ongoing work is depicted below.

Workforce Development

- Engaging internal and external stakeholders to collaborate on policy research and development by soliciting feedback from staff via workgroups and surveys
- Providing in-person staff training on policies as needed, including newly developed or updated policy
- Partnering with Training and Professional Development Unit via monthly meetings to streamline process for policy and training collaboration
- Participate in the development of Georgia SHINES enhancements to support case management documentation efforts
- Coordinating with the Training and Professional Development Unit to provide web-based training on new policy releases
- Collaborating with other DFCS Units to develop policies resulting from legislative session and best practice
- Providing timely and thorough policy clarification to staff to facilitate staff improvement in understanding of policy

Practice Standards and Service Array

- Collaborating with DBHDD, opioid treatment providers, and substance use disorder treatment providers as a continuing partnership with Georgia PROUD to support the goals of the Plan of Safe Care in the PIP
- Consulting with the Department of Juvenile Justice (DJJ) and the Office of General Counsel in DFCS to develop policy related to Dual Jurisdiction youth
- Coordinating with the CHINS Collaborative to discuss the development of consistent practice for this population of youth, and working on developing a system of support for children in need of services and their families, to broaden the service array
- Serving as a regular presenter to provide policy clarifications and practice information to Juvenile Court Judges, CASAs, children's attorneys, SAAGs, parent attorneys, and service providers during Multi-Disciplinary Child Abuse and Neglect Institute (MD-CANI) meetings
- Partnering with the Support Services Unit and DFCS Contract Unit to provide accurate information in Chapter 18 and 19 of the Child Welfare Policy Manual on the array of programmatic services designed to preserve or reunify families involved with or at risk

of involvement with the child welfare system. Each program outlines the distinct types of services available to families to form a child welfare continuum of services from prevention through permanency

Community Partnerships

- Partnering with the Department of Juvenile Justice to ensure DFCS coordinates practice and procedures to serve clients impacted by both agencies. The value of community partnerships is both shared resources and improved outcomes
- Participating with the MD-CANI/Court Improvement Project to uphold the goal of having an effective competent workforce. Policy Unit staff participates in the MD-CANI meetings to share updates or explain child welfare policies to community stakeholders including judges, CASAs, attorneys, Service Providers, etc.
- Developing a new policy on Family Treatment Court (FTC) with input from participants in an FTC pilot project, representatives of the Georgia Accountability Courts, an FTC consultant and other legal and non-legal stakeholders
- Representing DFCS as a board member for the Georgia School of Addiction Studies, which provides training and educational programs on substance use prevention and treatment for human service professionals whose duties include law enforcement, prevention, intervention, treatment, child welfare, victim's services, probation, courts, education, and rehabilitation or related social services
- Serving as an active member of the CAPTA CJA Panel
- Coordinating with the Mexican Consulate, Kids in Need of Defense (KIND), and other relevant agencies in the ongoing development of policies to address the needs of immigrant children in child welfare

h. Update to the Plan for Enacting the State's Vision and Progress Made to Improve Outcomes

Georgia Child and Family Services Plan 2020-2024

D. Overview

Georgia developed a five-phase plan to develop a new 2020-2024 Child and Family Services Plan (CFSP). Following the basic cycle of the American Public Human Services Association (APHSA) CQI model: Define-Assess-Plan-Implement-Monitor (DAPIM™), phase one was the

foundation building and input gathering phase whereas the State determined at the onset that it would work collaboratively with stakeholders to develop effective strategies to strengthen the overall child welfare system. Data (the State's most recent data profile, ratings on national standards, data related to systemic capacity, case record review data and other relevant data) were shared with stakeholders at state and regional stakeholder meetings to define strengths, weaknesses and priorities to be addressed over the next five years. There was a minimum of one meeting per region (24 total) in the fall of 2018 to gather input for plan development. As part of phase two, additional input was collected from frontline staff, middle managers and leadership in conference-style meetings, CQI meetings, PACCC meetings and via one-on-one, face-to-face conversations. Phase three included a compression planning meeting with state leaders, sharing drafts of the plan with federal partners, internal stakeholders and an external task force. Simultaneously there were several rewrites and consensus building. Phase four consisted of finalizing drafts and obtaining executive approvals. Phase five commenced July 2019 as the state began preliminary implementation of strategies and execution of a communication plan to ensure agency-wide awareness, coordination and cooperation. Official kick-off of the plan was October 2019.

Initial input collected from internal and external stakeholders at the regional level was presented at the C3 retreat where it was reviewed and analyzed by C3 coordinators, CQI specialists, main program area leads and representatives from auxiliary areas of the Division like policy, training, SHINES and education and wellness support. To ponder possible plan objectives, the attendees examined the seven child and family outcomes and the seven systemic factors and looked for common themes emerging from the responses given at the stakeholder meetings to the following questions:

- What do you feel are the greatest needs for children and families in your community?
- What measures might decrease the likelihood that a family would become involved with child protective services?
- Where do you see gaps related to ensuring the safety of children in the home and in out-of-home care settings? What measures would help increase the safety of children in these settings?
- Where do you see barriers to permanency – whether reunification, guardianship or adoption – for children who are in state custody? What measures would help address these barriers and help these children achieve permanency?
- Where do you see gaps in well-being (physical health, mental health and education) of children and families in your community? What measures could improve their well-being?
- What are some systemic issues (training, policy, etc.) that need to be addressed so that the state is better able to strengthen families and keep children safe?

In one of the phase-two meetings, attendees identified patterns and trends and areas of emphasis emerging from the collected feedback. It was made clear that most favored the

continuation of targeting improvements in practice, workforce development and constituent engagement, but they were also able to identify ways in which they would like to see this done:

- Add new SHINES enhancements
- Ensure fidelity to case practice and established processes
- Focus on organizational culture (leadership, accountability, efficiency, structure, morale and environment)
- Execute strategies to build a robust workforce
- Maximize stakeholder engagement
- Improve efficiency

The CFSP planning participants also worked to pinpoint specific recommendations made by stakeholders, particularly as they relate to program areas and systemic factors. Some of those recommendations were:

- Close the gap between intervention and execution
- Leverage opportunities to use SBC to improve practice
- Leverage opportunities to use CQI to improve practice
- Ensure training opportunities
- Ensure appropriate use of resources and tools
- Address court related issues
- Increase and enhance community services
- Ensure a robust workforce
 - Address human resources issues
 - Decrease the overlapping or assignment of multiple duties
 - Reform the organizational structure
 - Increase quantity of staff
 - Ensure supervisors do not carry caseloads
- Educate staff, educators, foster parents, CCIIs and CPAs to be better educational advocates for children in foster care
- Stabilize education support workforce
- Combine education and well-being academies to increase efficiency
- Increase the quantity of the academies as well as attendance at them
- Ensure a quality recruitment and retention process to secure quality education support monitors
- Improve the State's ability to track youth who have been diagnosed with health issues and prescribed psychotropic medicine

- Ensure youth are being appropriately diagnosed
- Increase accessibility to services
- Address transportation issues
- Ensure purposeful visits
 - Make sure needs are being assessed
 - Make sure case plans are being developed
 - Make sure the correct services are in place
- Incorporate strategies to help prevent child fatalities
- Continue safe sleep initiatives
- Adopt and track Plans of Safe Care
- Prepare for the shift in the child welfare focus due to the Family First Prevention Services Act
- Acquire new tools and resources
- Promote leadership development
- Improve efficiency
 - Address overlapping roles
 - Decrease unnecessary duplication
 - Minimize competing priorities
 - Remove or reduce silos
 - Ensure manageable levels of work
 - Reduce the overabundance of priorities
 - Increase court timeliness

After the brainstorming sessions, program area leads were tasked with presenting this information to stakeholder workgroups comprised of subject matter experts and determine SMART (specific, measurable, achievable, relevant and timebound) goals and strategies that may address some of the identified priorities. Subsequently, a CFSP steering committee of all program area leads, along with assistant division directors participated in a compression meeting to finalize goals and strategies to be proposed to stakeholders at the Annual APSR Joint Collaboration (AJC) meeting. The proposed goals and objectives were shared with over 140

stakeholders. Attendees included federal partners, court representatives, health professionals, youth, educators, providers, faith-based partners and others. Prior to the meeting a group of seven former foster youth held two sessions to discuss the proposed goals and to prepare responses and commentary on what they felt should be prioritized over the next five years to see improved outcomes for youth. The preparatory sessions were led by a University of Georgia, JW Fanning Institute specialist and the Youth EmpowerMENT Policy Council coordinator. The youth eloquently shared their observations at the AJC meeting.

Stakeholders were allowed to provide feedback and input via post-meeting surveys. Forty-two attendees responded to the surveys regarding the meeting and state priorities. The high-level results were shared via email to the attendees. Thirty-two respondents said they were satisfied (22) or very satisfied (10) with the overall value of the meeting. Thirty-seven said they were satisfied (25) or very satisfied (12) with the overall meeting experience. People overwhelmingly enjoyed the youth panel (35) with their impressive professionalism and insightful and thought-provoking reflections. Similarly, there was great enthusiasm for a lively video produced by a pair of C3 coordinators that not only introduced the agency's new division director but also provided some perspective from frontline staff. Nevertheless, a number of stakeholders expressed disappointment with the level of engagement with them. The meeting was additionally deficient in that stakeholders were unable to provide meaningful suggestions and commentary on goals and strategies. They really needed more advance notice of the proposed goals so that they could ponder them prior to the meeting and they would have likely benefited from small group, guided discussions where they could ask more pointed questions. The state offered an additional opportunity for stakeholders to voice their interests and concerns via survey and invited them to a follow-up meeting. Unfortunately, the follow-up meeting had to be cancelled and therefore strategies were not adapted as a result of the APSR joint collaboration meeting.

Beginning fall 2020, Georgia is working to increase the quantity of state-level opportunities for stakeholder feedback and will use the additional meetings to continually assess the need for adaptations to the CFSP. One of the meeting topics will likely include whether to add a youth-driven objective to the CFSP. However, the CFSP leads and executive officials will need to play a more active role in these meetings to help educate participants on the purpose of the strategies; steps taken in the past and planned for the future; current challenges being faced; and resources and operational feasibility of proposed actions in order to enhance the quality of the discourse. Additionally, stakeholders need to be engaged more consistently so that they become more familiar with the staff, the partners, the work, state progress and improvement gaps. These steps will additionally help enrich feedback loops and promote two-way dialogues. The state is redesigning C3 report and program lead report templates and processes so that information shared between C3 coordinators (i.e. regional stakeholder feedback) and program leads is more substantial and helpful to the information recipients. Prioritization of engagement of internal and external stakeholders around CFSP goals needs to be elevated by leadership. Adding a new position - director of federal planning - to the strategic planning process has been

one of the ways the state has demonstrated a heightened awareness of the importance of the process.

Court representatives were at the Children's Bureau Federal State Team Planning meeting in Washington, D.C. in April 2019 when the idea of developing a temporary taskforce of external stakeholders was generated during a CFSP planning session. It was determined that it would be a group made up of external stakeholders, led by stakeholders. A group of committed stakeholders from the private sector, with abundant knowledge about the intricacies of child welfare, worked as the task force to review the draft CFSP. The eight-member team include long-standing child advocates from:

- Supreme Court of Georgia Committee on Justice for Children
- Office of the Child Advocate
- Care Solutions, Inc.
- CAPTA Panel
- Together Georgia
- Prevent Child Abuse Georgia
- Georgia Court Appointed Special Advocates
- Barton Child Law and Policy Center (Emory University)

They were given copies of CFSR outcome data reports, Georgia CFSR3 data profile, C3 coordinator reports, CFSP plan development reports and some raw data from surveys administered at the regional level. Feedback from their thorough review was presented to agency executive leadership and CFSP steering committee members for consideration. This group included the DFCS deputy division director and general counsel; DFCS assistant division deputy director of the child welfare call center and Kenny A consent decree; DFCS assistant division directors over Employee Recruitment, Well-Being and Retention, Knowledge Management, and Practice and Program Guidance; director of Quality Management and the Child and Family Services Plan Manager.

Much of what the task force recommended aligned with the vision that was already taking shape within the agency. In 2014, the agency worked with the Casey Family Program to complete an assessment of the organization. The project revealed three overarching areas that, if given significant attention, would lead to positive reforms within the agency: workforce development, practice standards and stakeholder engagement. Those pillars were used as a foundation for the state's 2015 – 2019 CFSP. As a new CFSP cycle approached, and as a new director was onboarded, the Division worked to determine the best strategies for a new horizon. However, the overwhelming majority of input collected over the months of planning continued to lead right back to those three main thrusts. Interestingly, in nearly every opportunity to provide feedback, stakeholders' concerns included needs regarding the agency's workforce such as the need to stabilize positions with fewer vacancies, increase retention,

assess the organizational structure, ensure manageable workloads and make work processes more efficient. By and large, there was overwhelming support for appraising the work culture.

February 2019, DFCS Director Rawlings distributed communication to staff confirming the belief that “the success of this organization depends on our creating and maintaining a strong, healthy, capable workforce.” He points to three specific hypotheses that may need to be assessed and addressed:

- A complicated structure is preventing frontline staff from getting the support, information, and direction they need to effectively keep children safe and make good judgment calls regarding family needs
- Individual caseloads are limiting innovation and teamwork
- Outcomes are below expectations due to a lack of frontline staff empowerment

Georgia DFCS will have an opportunity to test these hypotheses as well as others as it was selected to participate in a four-year long Workforce Excellence project; one of only seven agencies nationwide to be chosen. The project will be guided by the National Child Welfare Workforce Institute (NCWWI) to strengthen key components of the State’s child welfare workforce. Key components to be studied include organizational culture, work conditions, staff selection and retention, practice supports, community engagement, racial equity, workload, professional development, supervision and leadership. The first phase of the project kicked off in June 2019, and as part of a Comprehensive Organizational Health Assessment (COHA), a confidential online survey was administered in July.

The State’s upcoming five-year plan not only includes objectives related to the Workforce Excellence project, it includes key activities to address practice areas that have persisted as a challenge such as timely and quality safety assessments. There are goals and objectives related to the other overarching pillar, stakeholder engagement. Steps to strengthen partnerships are anticipated to improve agency/court relations; remove court barriers and increase the availability, effectiveness and array of services. Plans for a robust parent advisory committee will bolster foster parent leadership. State-led roadshows and C3-coordinated stakeholder meetings will help expand partnerships with philanthropic, civic and faith-based organizations. The frequent and continuous engagement may assist the state in ensuring effective primary prevention services in the community, ensuring that they are easily accessible and culturally responsive.

While primary prevention strategies may result in a reduction of children coming into care, Georgia supports the view that we “will always need a system that can provide a temporary safe-haven for a limited number of children and youth” (ACYF-CB-PI-19-02 Issuance Date: February 26, 2019). The Agency will continue to build up its kinship program to increase the number of kin families that become fully approved foster parents. The number of families serviced by the program will be tracked and an evaluation assessment will be done to determine efficacy.

Some objectives in the plan are continuations from work that began during the State's PIP, either because the work should naturally be an ongoing activity (i.e. there is some evidence that the action will produce positive outcomes); the implementation of the activity is not yet finished; or the results of the activity have not yet been realized. Although the State successfully completed the trainings on Solution Based Casework, it is moving to the next phase of implementation which is anticipated to improve practice and drive better outcomes. A review of the 2015-2019 Final Report helped summarize past efforts and results and consider what the State could build upon and include in the 2020-2024 plan.

The CFSP has been updated as of March 31, 2020. See the full plan below.

E. GOAL A: A competent, satisfied, effective and ever-developing workforce

a. STRATEGIC FOCUS: Workforce Development

NOTE: "PIP>CFSP" means the objective was originally in the State's Program Improvement Plan and is now being included in this plan.

GOAL A: A competent, satisfied, effective and ever-developing workforce

STRATEGIC FOCUS: Workforce Development

MEASURES OF PROGRESS

(as of March 31)

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024

Measure(s) to be added during phase two of the NCWWI Workforce Excellence Project (see benchmarks)

OBJECTIVE

Participate in a four and a half year "Workforce Excellence" project- with the National Child Welfare Workforce Institute (sponsored by the Children's Bureau). Project period is May 2019-October 2024

The Division has been historically successful in the development of workforce development strategies and processes. However, a significant gap often exists between development and effective implementation/application, thus significantly deterring from their intended impact. While perhaps reasonable to attribute this gap to historical constraints (turnover, reactive and fear-based culture resulting from unhealthy responses to critical incidences, high caseloads, etc.), this attribution, reasonable or not, does nothing in the way of closing the gap. And the fact of the matter is that if this gap is not closed, the Division will not achieve desired outcomes associated with workforce satisfaction and retention (as evidenced by annualized turnover data) nor will it significantly improve performance outcomes associated with safety, permanency and well-being (as evidenced by quality assurance review data). This objective was selected because it will address a broad array of factors that positively contribute to workforce development and, more importantly (as attributed above), the effective implementation of such strategies for the purpose of achieving the Division's goal of a highly satisfied and skilled workforce.

By leveraging NCWWI's Workforce Development Framework (WDF) and Leadership Model, the following workforce outcomes are expected:

1. Establishment of "just" organizational culture that promotes workforce well-being, job satisfaction and psychological safety
2. Robust community engagement
3. Inclusivity and racial equity

4. An effective recruitment and selection process
5. Expanded education and professional development opportunity
6. Quality supervision afforded to front line case managers
7. Strengthened leadership, particularly as it relates to establishing organizational health
8. Manageable workloads
9. Increased practice support capacity
10. Improved work conditions and benefits

ACTION STEP

Complete Comprehensive Organizational Health Assessment (COHA). The COHA, a requirement of the project, is an approach to gathering both qualitative and quantitative data to assess the organizational health of our child welfare agency. It involves three main components: an on-line survey administered to all child welfare staff, focus groups conducted with child welfare staff and stakeholders and contextual assessment through review of key documents, reports and agency data. NCWWI has successfully conducted the COHA in many jurisdictions across the country. Findings will serve to identify workforce strengths and areas that warrant strategic development intervention.

UPDATE

The Comprehensive Organizational Health Assessment (COHA) has been completed. It involved data collection from staff at all levels of the Division through survey (2,198 respondents/67% response rate) and through 28 focus groups and individual interviews of Division staff and external stakeholders. Findings from the assessment, along with other data, are currently being used in the Planning Phase of the project to inform selection and development of strategies to strengthen the Division's workforce.

ACTION STEP

Select student cohorts for first year (four to six students will be selected each year). These students will participate in specialized courses (more closely related to child protection than traditional IV-E education programs) and field placement innovations.

UPDATE

The University of Georgia and Georgia State University successfully recruited and selected their student cohorts. Each cohort, comprised of current DFCS employees, began Master of Social Work courses (on-line and in-class) this past fall semester and are currently in the process of completing spring semester (now fully on-line as a result of COVID-19). Albany State University is in the process of recruiting and selecting their cohort, slated to start their MSW program in the fall. Georgia State University selected nine students. The University of Georgia selected seven (however one dropped off due to hardship).

ACTION STEP

Adopt and implement workforce strategies (as informed by the COHA).

UPDATE

This action has not yet been initiated (slated to be during the latter part of the project's Planning Phase). Based on findings from the COHA, a determination was made by the project's 'Implementation Team' to focus strategy development around "workload" and "workforce condition" domains of NCWWI's "Workforce Development Framework". This is not considered a new project goal or focus but rather a component of the project (strategy selection and implementation) that will serve to achieve the goal of a competent, satisfied, effective and ever-developing workforce (as stated in plan). Subsequent APSR's will include updates on each strategy, including associated measures and impact.

ACTION STEP

Develop a train-the-trainer course for the Leadership Academy. The Leadership Academy will be embedded as an ongoing training opportunity for supervisors, managers and administrators and will complement the State's Supervisor Academy.

UPDATE

Development of curriculum for the Academy was completed in June. Criteria for selection of students for the first Academy and actual selection of 22 students (from State Office and Field Operations) was also completed in June. Leadership coaches will be selected and fully trained by September 2020. Each coach will serve one or two Academy students. Academy instruction will be co-led by a Professional Development and Training Unit trainer and a Leadership Academy coach.

BENCHMARKS

BENCHMARK

Complete Phase 1: Exploration (April 2019-October 2019)

- Identify implementation team
- Plan and conduct COHA
- COHA findings will be shared upon completion and will serve in the adoption of workforce development strategies
- Convene in-person cross-site meetings for project leads, agency directors and university deans
- Selection of year one student cohort
- Complete train-the-trainers for Leadership Academy
- Introduce Workforce Development Framework

UPDATE

The Exploration Phase of the project was completed on schedule. An Implementation Team, comprised of Division staff at all levels, University Partners and consultants from NCWWI was established and in-person meetings occurred on a monthly basis. A Team Charter was

established to guide expectations and work. A Comprehensive Organizational Health Assessment (described earlier in this update) was completed and findings have been shared broadly with internal and external stakeholders. Three workgroups were established by the Implementation Team to include 1) Communication Planning, 2) Leadership Academy Development and 3) Action Team Development. Student cohorts were selected by the University of Georgia and Georgia State University and are now approaching completion of the spring semester. Albany State University was not joined to the project in time to select a cohort but is currently in the process of doing so for the upcoming fall semester. NCWWI's Workforce Development Framework has been introduced widely. This work is completed.

BENCHMARK

Complete Phase 2: Planning (October 2019--October 2020)

- Identify workforce development strategies and associated outcome measures
- University and agency partners support student field placements and curriculum enhancements
- Establish action teams
- Develop CQI and evaluation plan

UPDATE

The Planning Phase of the project commenced October 2019 and continues to date. Careful consideration of data resulting from the Exploration Phase occurred by the Implementation Team to identify strategic focus areas from which three recently established 'Action Teams' will rely upon to inform development of specific workload and work condition improvement strategies (slated to occur through October 2020). This phase is on track to be completed by the October 2020 due date.

BENCHMARK

Complete Phase 3: Implementation (October 2020-May 2021)

- Selection of second student cohort
- Begin delivering Leadership Academy
- Action teams meet regularly
- Utilization of Rapid Cycle Assessment and other CQI strategies to support implementation

UPDATE

Not slated to begin until October 2020

FEEDBACK LOOPS, TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

Families, partners and staff (all levels) will be included in feedback loops that will serve to inform progress related to NCCWI's WDF. NCCWI is anticipated to provide remote and on-site technical support through the duration of the project. Other technical assistance, if any, will be dependent upon workforce development strategies adopted. Note: In response to COVID-

19, all meetings and trainings associated with this project are being held virtually and Action Teams will be taking impact into account when establishing workforce development strategies, particularly those related to work conditions and benefits.

Technical assistance related to 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 was provided by the National Child Welfare Workforce Institute and The Butler Institute for Families. Technical assistance from these entities will continue through the life of the project. Feedback loops will be established in accordance with the specific workforce strategies developed by each action team.

IMPLEMENTATION SUPPORTS

CFSR and turnover data along with previously completed worker satisfaction surveys were utilized during the Exploration Phase of the project. Together with findings from the COHA, this information continues to inform activities associated with the Planning Phase of the project. Later in the Planning Phase, training for Leadership Academy coaches and trainers as well as orientation for Action Team members will be provided by NCWII. Provision of data to support implementation of each Action Team's strategies (inclusive of establishing baselines and performance measures) will be provided by the Division's Data Unit. The project's Implementation Team will provide Action Teams with necessary implementation supports during the development and implementation of strategies.

F. GOAL B: Effective practice resulting in positive outcomes for families

a. Strategic Focus A: Practice Standards

GOAL B: Effective practice resulting in positive outcomes for families

STRATEGIC FOCUS A: Practice Standards

Objectives:

~~I. Execute Solution-Based Casework Implementation – Phase Two~~

Revision: Execute Practice Model Development - Phase Two

II. Address performance gaps related to the assessment of safety

III. Strengthen the Kinship Continuum Program										
IV. Implement Connected By 21 to provide supports to young adults age 18 - 21										
V. Ensure children are appropriately placed in settings that meet individualized needs and preserve family and community connections										
VI. Increase the Division's ability to support youth who need additional educational assistance										
VII. Individualized Education Plans (IEPs)										
MEASURES OF PROGRESS										
(As of March 31,2020)										
Safety Outcome 1: Children are, first and foremost, protected from abuse and neglect. Objective I										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
89%	90%	88%	92%		93%		94%		95%	
Safety Outcome 2: Children are safely maintained in their homes whenever possible and appropriate. Objective I, II										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
27%	29%	29%	33%		36%		38%		40%	
Permanency Outcome 1: Children have permanency and stability in their living situations Objective I										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
16%	17%	13%	18%		19%		20%		20%	
Permanency Outcome 2: The continuity of family relationships and connections is preserved for children. Objective I										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024

43%	44%	41%	46%		48%		49%		50%	
Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs. Objective I, IV										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
15%	18%	14%	20%		22%		24%		26%	
Well-Being Outcome 2: Children receive appropriate services to meet their educational needs. Objective I, IV, VI, VII										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
46%	49%	56%	52%		55%		58%		60%	
Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs. Objective IV										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
15%	18%	27%	20%		22%		24%		25%	
Timely case transfers between Investigations and Family Preservation Objective II										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
	35%	68%	45%		55%		65%		75%	
Percent of kin families who are approved as foster parents Objective III										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
0.5%	8%	3.39%	16%		22%		28%		34%	
Permanency 1 – Item 5: Permanency goal for the child Objective V										

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
47%	50%	48%	54%		58%		62%		65%	
Permanency 1 – Item 6: Achieving reunification, guardianship, adoption, or other planned permanent living arrangement Objective V										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
27%	30%	22%	35%		40%		45%		50%	
Well-Being Outcome 1: Item 12 Needs and services of child, parents, and foster parents Objective V										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
18%	23%	14%	28%		33%		38%		40%	
Data Source: Georgia Quality Assurance CFSR All Zones/All Regions October 2019 – March 2020 Rolling Trend Report										
OBJECTIVE I. Execute Solution Based Casework Implementation – Phase Two										
Revision: Execute Practice Model Development - Phase Two										
<p>Solution Based Casework (SBC) is a family-centered practice framework which can be utilized from assessment through case closure by organizing complex issues and multiple partners into workable family and individual plans and objectives. SBC provides front-line staff with a consistent basis for decision making and clear expectations and values for their interactions with families, children, communities and providers.</p> <p>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, but most prominently with safety, permanency and well-being. During Phase 1 implementation, Georgia concentrated primarily on introducing SBC skill building through three stages: training stage, case consultation stage and certification stage.</p> <p>Phase 1 of Solution Based Casework was implemented statewide and consisted of a series of tasks--training, case consultations and the certification process. One barrier/challenge has been understanding that SBC implementation is not achieved by accomplishing a series of</p>										

activities (training, case consultations, and certification), but instead by building a true practice model which embodies the true tenets of SBC. By continuing our work to develop “Practice Standards” within the context of a Comprehensive Practice Model, these SBC tenets can be woven into every component of our work with families.

During an evaluation of Georgia’s progress towards SBC implementation, Dr. Dana Christensen, SBC model creator, recommended the state convene a committee “to re-build consensus, identify targets for change, establish an order of priority for that change to occur, and then establish sub-teams to be responsible for developing and managing component parts.” Therefore, to increase Georgia’s success in continued implementation of SBC over the next five years, a statewide practice model steering committee will be convened to assess, evaluate, identify and develop strategies needed to include, but not limited to the following:

- Post certification focus on competency building
- Heightened accountability related to utilization through annual performance plans
- Provider utilization and partnership through contracted deliverables

To accomplish the goal of utilizing effective practice to create positive change for families through the continued implementation of SBC, the Division recognizes this objective can best be achieved through incorporating Phase 2 objectives into the framework of implementing Georgia’s Comprehensive Practice Model to ensure consistency and alignment. The Comprehensive Practice Model is inclusive of SBC as well as Trauma Response, Safety Focus, Quality Caregiving and the Guiding Principles of the Division. As a part of the agency’s efforts to develop practice standards, and in consideration of new leadership throughout the Division, recent efforts to develop and introduce a practice model, and confusion as to how SBC fits within the context of a comprehensive practice model, the “Practice Standards” development phase has been designed to begin with an effort to reintroduce the need for and value of a practice model and reestablish objectives accordingly. The development phase will involve intentional collection on historical and existing work relevant to the framing of a comprehensive practice model and close scrutiny to detect points of consistency and alignment. The Division will leverage and utilize SBC practices acquired in phase 1 to ensure SBC phase 2 tenets continue to be highlighted and incorporated into the development of the Division’s Comprehensive Practice Model. Therefore, to ensure alignment with SBC tenets and all components of the Comprehensive Practice Model, a Practice Model Steering Committee, comprised of both internal and external stakeholders, will identify, evaluate and prioritize activities for phase 2.

Action Steps (Key Activities) to Achieve the Objective

1. Action Step

Georgia will convene a Practice Model Steering Committee to identify, evaluate and prioritize activities needed for Phase 2 SBC implementation. The selection process will utilize a teaming structure inclusive of internal and external stakeholders with representation across various systems serving families in Georgia including parent representation. The Practice Model Steering Committee will develop sub-committees to address, develop and manage Phase 2 implementation activities prioritized by the committee. Youth representation will be an excellent addition to the committee. Recommendations from the Independent Living Unit will be solicited to identify youth ages 18-21 interested in participating on the committee.

Update

A plan for the development and implementation of Georgia's Practice Model was completed and submitted on December 11, 2019. As part of this plan, internal and external steering committees were created with clear timelines for both phases. The committees are comprised of county, regional, district and state internal stakeholders from various roles of leadership along with external stakeholders such as CASA, Office of Child Advocate, Court Improvement Program and various providers. The Practice Model Steering Committee met for the first time in-person on January 21, 2020 and again on February 18, 2020. Due to the challenge of the state's Covid-19 response and the need to shift attention to the continuity of daily operations, the March 17, 2020, meeting was postponed. Because the Practice Model remains a high priority, the Division moved forward the following month by hosting a virtual committee meeting on April 21, 2020. During this meeting, the committee focused on proposed outcomes and identifying outcome measures. To achieve this end, committee members discussed the different data elements routinely used to assess their own performance as well as the overall performance of the agency. The committee will continue to meet virtually until it is safe to resume face to face meetings.

2. Action Step

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

Update

On October 9, 2019, the Practice Model Team drafted the first practice model document with draft revisions finalized on October 11, 2019. This first draft was shared during a Kenny A meeting on October 18, 2019 and a second document was drafted to include theory of change by Division Director Tom Rawlings on October 27, 2019. The Practice Model development and implementation plan was completed on December 11, 2019. The steering committees identified in this plan have convened and the Division is currently developing a Practice Standards Guide to communicate the Division's practice standards, inclusive of Solution Based Casework, Guiding Principles, Trauma Response, Safety Focus and Quality Caregiving.

The Division's Practice Model Coaches continue to provide county, regional and district assistance related to all tenets of the Comprehensive Practice Model including Solution Based

Casework phase 2 activities. Examples of supports offered include initial safety assessment and safety planning, facilitation and modeling for family teams meetings, and conducting simulation classes for new hires during new worker training. Simulation classes offer an opportunity for practice model coaches to enhance new workers' interviewing skills which is an integral part of SBC tenants. This work is ongoing.

3. Action Step

The Division will also explore designing the next level training needed for supervisors in order to further their application of SBC tenants and ability to develop those within their staff.

Update

The Division will continue to explore and assess the need for designing the next level training needed for supervisors in order to further their application of SBC tenants and ability to develop those within their staff. The Practice Model Coaches continue to provide one on one support to supervisors to further their ability to develop their staff. Regional Field Program Specialists also provide support through consultations and during regional supervisor meetings. This work is ongoing.

Benchmarks

The State seeks to achieve the following targets and benchmarks:

Federal Fiscal Year	Safety Outcome 1	Safety Outcome 2	Permanency Outcome 1	Permanency Outcome 2	Well-Being Outcome 1	Well-Being Outcome 2
2020	90%	29%	17%	44%	18%	49%
2021	92%	33%	18%	46%	20%	52%
2022	93%	36%	19%	48%	22%	55%
2023	94%	38%	20%	49%	24%	58%
2024	95%	40%	20%	50%	26%	60%

See report section Update on Assessment of Performance for analysis on the State's performance of these outcome measures.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

Practice model coaches continue to be responsible for providing technical assistance and evaluation to counties, regions and districts regarding implementation of phase 2 SBC tenants. In collaboration with local leadership, regional assigned practice model coaches develop trainings and provide support as needed.

Currently the state has 13 Practice Model Coaches and two Unit Managers to meet the needs of our staff statewide. The Practice Model Coaches work in collaboration with regional and county staff to target and implement training opportunities which further adoption of SBC

tenets. Regional Field Program Specialists reinforce and support the work of the Practice Model Coaches.

The Practice Model Coaches also play an integral part in laying the foundation for Solution Based Casework for new case managers through their direct participation in operating simulation classes.

IMPLEMENTATION SUPPORTS

In addition to the supports provided by regional practice model coaches, implementation supports will be developed and implemented by the Practice Model steering committees. Once developed, the Practice Standards Guide will additionally reinforce implementation and help further incorporate the use of SBC and Comprehensive Practice Model tenants.

FEEDBACK LOOPS

Feedback loops are essential to ensuring information related to Solution Based Casework and the Comprehensive Practice Model is being shared with internal and external stakeholders and creating an opportunity for their feedback to be shared back with the Division. Examples of feedback loops include but are not limited to the Practice Model steering committees, C3 coordinators, field program specialists, road shows with Division Director Rawlings, Dynamic Reviews, Fidelity Reviews, and the CFSR mentoring process.

OBJECTIVE II. Address performance gaps related to the assessment of safety

Georgia recognizes that it is critical for regional supervisor mentors to regularly review cases to increase their awareness of case practices and to enable them to take steps to increase county performance and to strengthen the mentoring relationship. This objective and activities will provide for a consistent, high level review process that increases awareness of CFSR practices and related county and regional specific trends.

The Division has implemented this objective to achieve success related to quality assessments of risk and safety, service provision to meet the needs of families, and quality visits with children and parents that are sufficient to assess safety, permanency and well-being.

Through this objective Georgia will develop a specific process for the governance of Field Operations regional supervisor mentor monthly CFSR case reviews. It is critical that regional supervisor mentors regularly review cases to increase their awareness of case practices and to enable them to take steps to increase county performance and to strengthen the mentoring relationship. This objective will provide for a consistent, high level review process that increases awareness of CFSR practices and related county and regional specific trends. This objective and activities will directly target case managers to strengthen their capacities and will also target supervisors to strengthen their capacities to support the development of their staff around the struggles with successful service provision to protect children in the

home and to prevent removal or re-entry, risk and safety assessment management, needs and services of children, parents, and meaningful casework contacts with children and parents.

Action Steps (Key Activities) to Achieve the Objective

1. Action Step

By May 2020, conduct an internal review of the practice and identified gaps in CPS Investigations, Family Support services, and Family Preservation services to determine if there is a need for a more structured, clearer safety assessment and/or decision-making protocol in all stages of service. A review of data from case reviews will be conducted to establish the root cause of gaps. A focus group will be involved with reviewing the outcomes of data and practice that includes front line staff. Additional strategies will be developed to address the results of the data/case review information received. This work is completed.

Update

The Division completed internal reviews of the process and has implemented a CFSR Impact plan to address identified gaps. Additional strategies continue to be considered for addressing results of data received.

In implementing activities, Georgia had to adjust some reporting methods for the activities. In January reports of record reviews were modified and mentor reports tracked through Survey Monkey for a more consistent and concise process. The CFSR Impact Plan has been successfully implemented throughout the State.

The CFSR Impact Plan work group was comprised of regional Field Program Specialists, County Directors, and representatives from State Office. The CFSR Impact Plan work group identified the following process gaps:

- Case workers are focused on alleged vs what is seen
- Assessment ongoing/lack of assessment
- Diminished or lack of and/or lack of critical thinking underutilized
- Compliance driven
- Lack of policy knowledge
- Case managers/supervisors are unable to answer the question of “WHY” are we are engaged.

Recommendations for improvement for case managers capacity:

- Case Planning *including* purpose of the case plan
- Documentation
- Visits/engagement
- Managing family/process

Recommendations for improvement for Supervisors capacity:

- Reading documentation prior to staffing's, transfers and closures
- Directives to create case movement
- Consultation frequency

From these recommendations, the work group revised the review questions to target these areas as well as create an opportunity to provide more mentoring and coaching with supervisors.

2. Action Step

~~By July 2020~~ November 2020. the Division will conduct extended focus groups that include the review of data/outcomes and recommendations from previous assessments. The Division will make the necessary adjustments, establishing goals toward the overarching practice framework to provide a unifying vision and practice among the work force at all levels that will improve outcomes including timely and accurate assessments of risk and safety throughout the life of a case.

Update

Partly due to COVID-19, focus groups have not been established at this time. The State is utilizing the CFSR Impact Plan to assist with unifying vision and practice. The timeframe to get this done is being changed to November 2020. With the sudden onset of Covid-19, the Division implemented procedures to continue daily operations with the technology of Microsoft Teams and other virtual platforms to aid in our ability to serve both external and internal stakeholders. A CFSR Impact Plan work group was convened to review the plan's strategies and activities to address gaps. This work group has continued its work virtually and revised the CFSR Supervisor Case Review and Mentoring process to target continued gaps in practice. The revised targeted review process was implemented effective August 1, 2020 and focuses on improving supervisory capacity for improving case staffings, transfers and closures; creating case movement and increased consultative opportunities with case managers.

3. Action Step

~~By August 2020~~ January 2021 the Division will have completed all focus groups, reviews of data/ and outcomes, established goals and implemented necessary practice change to ensure that staff have the training and proper tools for the completion of comprehensive and accurate assessments. This will include initial and ongoing assessment of risk and safety at all levels and program areas.

Update

Due to COVID-19, this deadline will be extended to January 2021 as this is a work in progress. With the onset of COVID19 the Division had to establish virtual tools for staff to use as everyone was also

adjusting to VPN delays and family dynamics both with our constituents and employees. The Division implemented procedures with the technology of Microsoft Teams and other virtual platforms to aid in our ability to serve both external and internal stakeholders. We are moving forward with this work.

4. Action Step

By ~~August 2020~~ January 2021 the Division will update policy clarifying the guidance and best practice along with the procedures.

Update

Due to COVID-19 the deadline will be extended to January 2021 as this is a work in progress at this time. With the onset of COVID19 the Division had to establish virtual tools for staff to use as everyone was also adjusting to VPN delays and family dynamics both with our constituents and employees. The Division implemented procedures with the technology of Microsoft Teams and other virtual platforms to aid in our ability to serve both external and internal stakeholders. We have been able to create virtual trainings and are moving forward with this work.

5. Action Step

The case review tool of CPS cases will be enhanced to assess the quality and decision-making process of casework practice with an anticipated completion date of August 2020.

Update

The Division has revised the CPS review process through the CFSR Impact Plan. This new review system is enhanced to assess the quality of the decision process of case work. Monthly regional leaders are required to review cases, enter the information, and have staffings to go over the findings and create written plans for development and follow up on them. The plan is designed to be a fluid document developed collaboratively between the mentor and supervisor identifying strengths, areas for growth, targeted activities to address gaps through an action plan. These plans are developed quarterly and referred to throughout the mentoring assignment. This review process allows for a solid feedback loop, a continuous flow of information.

With the sudden onset of Covid-19, the Division quickly implemented procedures to continue daily operations with the technology of Microsoft Teams and other virtual platforms to aid in our ability to serve both external and internal stakeholders. Prior to COVID, a CFSR Impact Plan workgroup was convened to review the plan's strategies and activities to address gaps. This workgroup continued its work virtually and revised the CFSR Supervisor Case Review and Mentoring process to target continued gaps in practice. The revised targeted review process was implemented effective August 1, 2020 and focuses on improving supervisory capacity for improving case staffings, transfers and closures; creating case movement and increased consultative opportunities with case managers.

Approximately 250 mentors are assigned to review two cases per month as part of the supervisory mentoring process which potentially results in approximately 500 cases per

month. In addition, the review process allows for supervisors to complete self-reviews which increases the number of cases reviewed. Mentoring and coaching efforts will continue virtually until it is safe to resume face to face interactions. This work is ongoing.

6. Action Step

By ~~June~~ October 2020, revise the process for the High Priority Review Team (HPRT) and complete reviews on cases that data show are at a higher risk of serious recidivism. Conduct real-time case reads relatively early in a case using a structured case reading tool to identify critical safety issues, communicating, and address concerns. By ~~July~~ November 2020, revision of the HPRT real-time case reads will be fully implemented statewide. In fiscal year 2021, HPRT will continue to provide real-time feedback on safety issues, including assessment of safety using a structured investigations case reading guide.

Update

The Division is actively working on the revision of the High Priority Review Team case review process, and has created a review to capture recidivism. Due to COVID-19 the date for completion has been extended. The work to receive case information early is an ongoing process. Work on this practice is in progress so that a real time case review can be completed prior to case closure.

The cases are pulled weekly by the data unit using the criteria established for high risk cases (Note: the criteria is in the CFSP). Case numbers vary each week per region this week 8/17/20, **42** cases were identified. For the month of August, **132** cases have been identified.

The High Priority Team (HPSR) members conduct all of the reviews. If an immediate safety issue is identified the HPSR will contact the county case manager, supervisor and administration and schedule a staffing within **24-48** hours of issue being identified, the staffing is geared towards discussing the concerns and strategizing on what steps are needed to ensure safety. The HPSR and the county staff establish a follow up from the staffing to ensure that safety has been achieved.

With the onset of COVID19 the Division had to establish virtual tools for staff to use as everyone was also adjusting to VPN delays and family dynamics both with our constituents and employees. Once these were established the HPSR team have been capable of working virtually without any issues. Note unlike the cases across the state, the number of HP cases received have not been impacted by COVID this is likely because the target ages are 5 and under for this team and most of the children involved are not school aged children.

7. Action Step

By May 2020, complete an internal review of the practice and identified gaps in the transfer of cases between Investigations and Family Preservation recognizing that this is a critical decision-making point and requires a seamless continuation of safety intervention for positive outcomes for families.

Update

The Division has completed an internal review of practice related to transfer of cases. This is being addressed through the CFSR Impact Plan and also at regional levels.

Prior to COVID, a CFSR Impact Plan workgroup was convened to review the CFSR Impact Plan strategies and activities developed to address practice gaps. This workgroup continued its work virtually and revised the CFSR Supervisor Case Review and Mentoring process to target those gaps. The revised targeted review process focuses on building supervisory capacity to improve case staffings, transfers and closures; creating case movement and increased consultative opportunities with case managers. Specifically, the workgroup recognized improving supervisor capacity to review case documentation prior to case transfers will improve overall outcomes.

In addition, the CFSR Supervisory Case Review and Mentoring Process provides an opportunity to mentor and coach supervisors around the case transfer process. This work is ongoing.

8. Action Step

By July October 2020, revise the current practice, tool, and guidance developing a seamless continuation of safety intervention between Investigation's initial assessment and the onset of Family Preservation Services

Update

Due to COVID-19 the deadline will be extended to October 2020 as this is a work in progress. With the onset of COVID19 the Division had to establish virtual tools for staff to use as everyone was also adjusting to VPN delays and family dynamics both with our constituents and employees.

The Division implemented procedures with the technology of Microsoft Teams and other virtual platforms to aid in our ability to serve both external and internal stakeholders. We have been able to create virtual trainings and are conducting virtual case consults.

9. Action Step

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

Update

The CFSR Impact Plan has been implemented statewide and information is being tracked monthly. The reporting process was adjusted In February to address identified gaps in the reporting method. Information can now be entered into Survey Monkey in a way that it can be more easily tracked and reviewed. This newly revised review process is showing positive results with enhanced consistency in reporting. Since implementation there have been improvements in several regions including 9, 7, and 12. However, due to COVID-19 the deadline will be extended to January 2021 as the Division

continues work in this area. Mentoring and coaching efforts will continue virtually until it is safe to resume face to face interactions.

10. Action Step

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

Update

The Division is still working to complete this as adjustments are being made in response to information received in the CFSR Impact Plan reviews. The Division will make the necessary adjustments, establishing goals toward the overarching practice framework to provide a unifying vision and practice among the work force at all levels that will improve outcomes including timely and accurate assessments of risk and safety throughout the life of a case.

Prior to COVID, a CFSR Impact Plan workgroup was convened to review the CFSR Impact Plan strategies and activities developed to address practice gaps. This workgroup continued its work virtually and revised the CFSR Supervisor Case Review and Mentoring process to target those gaps. Ongoing training continues to be provided on good practice and policy. Safety Briefs - short trainings – have been distributed to front line staff monthly. Due to COVID-19 the deadline for this action step has been extended to September 2020 as the Division continues work in this area.

Through the CFSP Impact Plan, cases are reviewed, and the findings are reviewed with front line staff in an effort to develop an understanding of what is good practice and as a learning tool for both mistakes and work that was conducted well. The mentoring component of this process allows an opportunity to not only assess the supervisor's understanding on how to properly assess safety and risk, but to also garner insight through various mentoring activities such as live observations of staffings, consultations, and reviewing a case together to compare assessment of safety and risk. The mentor then utilizes this information to develop the supervisor's ability in this area through the development of targeted action steps.

Benchmarks

The CFSR Outcomes for Safety 2 will be used as measures for the overall goals, moving from 27% to 40% by March 2024.

The state will complete timely case transfers between Investigations and Family Preservation and strive to meet the following targets:

35% by March 2020

45% by March 2021

55% by March 2022

65% by March 2023
75% by March 2024
85% by March 2025

Update

Georgia has made progress in the area of case transfer staffings. According to a state Lenses report, 68% of ongoing cases had a staffing April 2019 through March 2020. Work continues on development of a reporting system to capture specific information regarding transfer staffings between Investigations and Family Preservation. This is part of a pilot being done in conjunction with Family First. The goals of the pilot include:

Primary

Design FFPSA compliant case practice and service monitoring procedures that result in:

- Timely referrals and initiation of services
- Quality prevention plans for children and families and required ongoing monitoring of safety
- Appropriate tracking of services for case planning, reporting purposes and fidelity monitoring
- Use results of pilot for statewide policy and CCWIS system changes

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

Training has been provided throughout the state in various ways including formal statewide training, individual county trainings, regional trainings and various summits, web training, and then training videos sent via email to staff.

IMPLEMENTATION SUPPORTS

Currently, the Division provides required initial training to all new workers and ongoing training is accessible. The Division is developing an ongoing process of mandatory refresher training and evaluation to ensure staff competency in all areas of practice.

Monthly staffings between the supervisor and case manager afford the supervisor an opportunity to determine whether the case manager has an understanding of how to properly assess safety and risk and subsequently carry out the necessary tasks of working with individual families and continuously assessing their progress and needs. County directors ensure that their staff receive the necessary training to develop skills and knowledge needed for proper assessments of risk, safety, and needs of families.

Through the CFSP Impact Plan, cases are reviewed, and the findings are reviewed with front line staff to develop an understanding of what is good practice and as a learning tool for both mistakes and work that was conducted well. The mentoring component of this process allows an opportunity to not only assess the supervisor's understanding on how to properly assess safety and risk, but to also garner insight through various mentoring activities such as live observations of staffings, consultations, and reviewing a case together to compare assessment of safety and risk. The mentor then utilizes this information to develop the supervisor's ability in this area through the development of targeted action steps.

County leadership shadow workers on a random basis to see if the work in the field is on target and to ensure the accuracy of what is documented in the case record. This also allows for observation of the case manager to gauge their understanding and ability to assess risk and safety. After each observation, the case manager is to be provided with direct feedback. Through the CFSP Impact Plan, cases are reviewed, and the findings are reviewed with front line staff in an effort to develop an understanding of what is good practice and as a learning tool for both mistakes and work that was conducted well.

The training SimLab was initially a pilot scheduled through October 2019. Additional funding has been identified that will support the lab for ongoing training,

FEEDBACK LOOPS

To ensure achievement of desired outcomes, quarterly mentoring reports and leadership summaries are a part of the feedback process throughout the implementation of the case review and mentoring project. Quarterly mentoring reports, mentors and mentees capture the top three case review trends identified in the quarter as well as activities, resources, trainings and observations used throughout the quarter to impact those trends. By working directly to professionally develop supervisors, supervisors in turn then work to professionally develop case managers within their oversight. These reports are also shared and debriefed with county leadership. In turn, county/regional leadership utilize these reports to develop quarterly leadership summaries that capture the top trends across the county/region and identify key activities to implement over the next quarter to directly impact those trends. Such examples include, but are not limited to, Lunch and Learn trainings for staff, trend related Café 212 calls, and unit meetings for live learning.

COLLABORATION

The Division has worked with numerous stakeholders throughout this past year including the legal and judicial partners, medical community partners, Family Connections, and CAPTA Panels. Stakeholder input is sought, and involvement in the assessment of agency strengths and areas needing improvement is also encouraged. Stakeholder interviews are conducted as a routine part of the quality assurance case review process and their input is included in the Quality Assurance (QA) trend reports. QA review results and trends are routinely shared with stakeholders in collaborative meetings such as the CAPTA citizen review panel steering committee meetings with leadership, annual stakeholder joint planning collaboration meetings, regional road shows and town hall meetings with regional and/or state leadership, and continuous quality improvement meetings (regional and state-level). The Division has been working with DBHDD, OCA, and DPH regarding Plans of Safe Care and ways to enhance practices.

The Division has regular meetings with partners including-OCA, CIP, DBHDD, DPH, Department of Education, and CASA to discuss barriers and resolution. Additional meetings are held with providers monthly including MAAC and members of Together Georgia and additional providers from around the state.

The Division has attended Court Improvement Project meetings and the Annual Juvenile Court Judges Conference to talk with Judges about their concerns and provide clarification regarding agency policy and practice. The Division has worked with OCA receiving feedback regarding appropriate removals of children. The agencies continue to work in a joint effort with Pre-removal Staffings that include OCA staff, regional staff, and masters level employees to staff cases prior to the removal of a child from their home for foster care.

The Division is represented on the Maternal Substance Abuse Workgroup as part of the State of Georgia State Opioid Plan. External stakeholders are involved with the safety and permanency sections on a regular and ongoing basis through formal and informal contact. They attend workgroups, strategic and development meetings as well as participate in activities and the review process.

Through the work with CII they have provided feedback on direct case involvement bringing both concerns and successes to the agency along with recommendations. They have participated in joint staffings with our General Counsel, Judicial, SAAG, and agency staff to address barriers DBHDD, DOE, and DPH have provided feedback from direct involvement with agency staff and families that we serve.

The Division maintains strong relationships with Georgia's three CAPTA panels, their individual members and the organizations they represent. Co-chairs from each CAPTA panel serve on a joint steering committee that meets several times a year to promote inter-panel collaboration, coordination of panel activities, and joint planning with DFCS. CAPTA panel members have been instrumental in the development of the CFSR PIP, serving on the state's policy advisory committee and the statewide CQI group and participating in development of the state's new CAPTA plan. The CAPTA Panels review CFSR and other performance data. They provide written recommendations based on the strengths and areas needing improvement. The CAPTA panels assist with the development of agency goals and objectives for improvement.

Georgia CASA members are active participants in state-level collaborative meetings and roadshows, and have frequently participated in the development of agency goals and strategies for plans.

Throughout the past year, the Division has conducted roadshows where State leadership routinely seeks feedback from frontline staff, private providers, local agencies, educators, judicial and legislative personnel and other meeting attendees. During those meetings and annual regional stakeholder meetings, state and regional leaders cover safety issues and make presentations to help local stakeholders understand their role in the overall child welfare system – CFSP and PIP goals and the strategies that have been adopted are described. Data is presented to demonstrate how the region compares to the state overall, and then stakeholders are given an opportunity to discuss the goals and objectives and make suggestions regarding interventions or practices that can be employed to improve areas of priority.

During annual regional stakeholder meetings, state and regional leaders provided information to stakeholders allowing for them to assess the agency strengths and areas needing improvement. A statewide meeting was held virtually with internal and external stakeholders reviewing the areas needing improvement and strengths. The Safety Section Stakeholders were provided with potential goals for the CFSP and asked to provide feedback on the selected goals. The Safety Section provided information on the work that has been on going and plans for the upcoming year.

As part of the Agency's work with communities, the Agency continues to work with Douglas County Juvenile Court, regarding the grant for maternal substance abuse/exposed infants/Plans of Safe Care. This partnership has also included, Well Star Hospital, DPH, DBHDD, DOE, and the CII. We have developed practices and reviewing potential enhancements to policy and practice. This work will extend over a five-year period. The work and practice of this project will potentially impact the practice state-wide. Regular meetings will continue over the next two years with verbal and written feedback being provided to the Agency.

The Division has ongoing communication with CII and participate in their conferences. CII is a part of Agency projects, plans, and PIP activities. They have been an active participant in the development of the state plan for the Division. They provide recommendations and follow up with county/regional/state office staff and executive leadership. They also participate with CAPTA Panels and strategic planning for the Agency. They continue to work with us in addressing barriers with the courts and legal processes allowing for more timely actions with the courts. We have initiated work that will remain ongoing by meeting with individual judicial circuits where barriers have been identified. We have had successful outcomes with prior meetings that included our General Council, CII, SAAG, safety director, regional and county staff. Feedback is provided on a regular basis through ongoing communication.

OBJECTIVE III. Strengthen the Kinship Continuum Program

When safety cannot be assured in the home, the Agency must provide a temporary out-of-home placement for children. The Division seeks to ensure that this transition is seamless and will reduce trauma to the child. Kinship care refers to a temporary or permanent arrangement in which a relative or any non-relative adult who has a long-standing relationship or bond with the child and/or family has taken over the full-time, substitute care of a child whose parents/caretakers are unable or unwilling to do so. Kinship care includes relationships established through an informal arrangement, legal custody, guardianship order, a relative foster care placement or kinship adoption.

The Division launched a kinship continuum pilot in July 2018. Feedback from frontline staff, kinship navigators and kin caregivers helped pinpoint key challenges such as the need for

timely financial support, confusion in navigating the system and working with families who cannot meet all foster home standards. As a result, there was increased monitoring of the voluntary kinship arrangement and an extension of the CPS time period. The new time parameter of 120 days to have a kinship foster home approved appeared to have an influence on the ability to increase the number of foster homes.

After testing of a new timely referral process, adjustments were made to help kin caregivers navigate the system more easily. Changes were made to the full disclosure statement and other forms and monitoring tools, ensuring appropriate information is captured and deadlines are met. Programs and processes were adjusted and further structured to overcome identified challenges.

A reunification manager was hired in September 2018 to address the lack of timeliness to permanency and to help develop strategies to address permanency challenges. The Division's focus on reunification as the primary goal for families is a renewed one with emphasis on concurrent planning and assessing all possibilities for permanency for the child.

Statewide implementation of the Kinship Continuum will have a positive impact on the timeliness of relative care assessments and secure a smooth transition from a voluntary kinship placement (non-DFCS custody child residing with relative) to a kinship placement (custody with DFCS, child remains in the home of relative). The Continuum will be fully executed statewide by the end of September 2019.

Part of the intent of the comprehensive Kinship Care Continuum is to serve children, kin and parents at all levels of system involvement and provide a seamless treatment and services process for parent, child, and kinship caregiver. By providing comprehensive services to kin Georgia will ultimately strengthen entire communities.

Research and outcomes in states with stronger kinship programs demonstrate that full foster parent approval provides kin with a much stronger support network. Strengthening the state's kinship care practice will likely lead to the following positive outcomes:

- Increased community and agency support for kin
- Streamlined kinship system statewide
- Successfully develop an evidenced based kinship navigator program

Action Steps (Key Activities) to Achieve the Objective

Action Step 1- Completed

The state will consistently track the number of families serviced by the Kinship Navigator Program and increase the number of kin families that are fully approved foster parents. As cases are referred to the kinship staff, they will be assuring that all necessary initial safety requirements were completed. Any missing items noted will be followed up on by kinship staff until completed. As kin caregivers move into the process of becoming fully approved foster parents additional staff in the regional resource development teams will again review the cases for safety requirements.

<p>Update</p> <p>SHINES deployed system enhancements to provide kinship staff with automatic notifications of relative and fictive kin placements. Improved SHINES data also allows kinship staff to monitor the outcomes of voluntary kinship arrangements and identify the kinship placement resources for ongoing support.</p>
<p>Action Step 2- Completed</p> <p>SHINES enhancements set to occur in 2019 and 2020 will automatically track safety requirement completion for all kin caregiver cases.</p>
<p>Update</p> <p>The agency completed SHINES Voluntary Kinship and Kinship Foster Care enhancements to align with the new practice changes in November 2019. The new system changes provide county supervisors and administrators with the ability to track the core kinship requirements and timeliness of services via kinship dashboard.</p>
<p>Action Step 3- Ongoing</p> <p>Georgia will develop policies and practices and provide technical support to field staff by December 2020. The Kinship Continuum will be in effect statewide at the end of October 2019. State and region level kinship staff will assess the effectiveness of each region's implementation of the Continuum. They will provide ongoing technical assistance in 2020 to include data analysis, identification of trends and barriers, additional regional training, on-site support to regions to overcome barriers and additional education for community partners. The policies and practice will be specifically designed to address the needs of kin. Several components of the Kinship Continuum address improved timeliness of services to kin caregivers. Pre-removal staffings will identify the potential needs of kin caregivers prior to children being placed in the home. The Continuum requires a referral to kinship staff within 48 hours of placement so that navigators can reach out to caregivers, begin assessing their needs and secure services. A team staffing is required within 45 days of a voluntary kinship placement, at which time caregiver feedback regarding the timeliness and effectiveness of services will be assessed. Kin caregivers for children in the custody of the Division will move directly into the foster home approval process at placement of children, where multiple opportunities for service delivery will occur throughout the assessment and approval. As the State increases its evidence-based prevention services it is anticipated that kin caregivers will be a primary recipient of front-end services toward preventing removals to foster care. In working with the Annie E. Casey Foundation and Second Chance Inc., Georgia recognized the need for this approach as opposed to serving kin through the traditional case work practices.</p>
<p>Update</p> <p>Georgia completed statewide implementation in October 2019, training a total of 1760 field staff on new kinship practice changes. In preparation for the statewide rollout of Georgia's Kinship Continuum state leaders conducted a regional readiness assessment in April 2019. The assessment required local leaders to engage local stakeholders such as judicial partners, CASA, and school officials regarding</p>

kinship placements, and to host kinship awareness activities for staff and other community partners. Regional events such as Region 14 kinship panel discussion with caregivers and service providers, and localized kinship paraphernalia in Region 12 demonstrated to stakeholders the Division's goal to support kinship placements. The state also collaborated with A Second Chance Inc, a nationally recognized organization in the field of kinship care, to provide 30 training sessions for frontline staff and service providers focused on kinship values. Additionally, kinship state leaders provided training at the 2019 statewide CASA training and Georgia Court Improvement Initiative. Both staff and court stakeholders have requested additional joint training opportunities to strengthen local practices related to kinship. Georgia anticipates finalizing kinship policy changes in November 2020, as state leaders continue to provide ongoing regional trainings and on-site support to field staff.

Action Step 4-Ongoing

Georgia will additionally conduct an evaluation assessment of Georgia's Kinship Navigator Program to pinpoint strengths, weakness, or necessary program improvements. Not only will this provide an opportunity to maximize the successful component of the current program while creating greater resources for families, it may also help to increase IV-E funding support. The state is set to receive the evaluation assessment in October 2019. Results of the assessment will be shared widely with kinship staff, field staff, kin caregivers, service providers and executive leadership. In late 2019 through early 2020 the Division will create an action plan for implementing the recommendations of the evaluation assessment. The final plan will also be shared widely as noted above. It is anticipated that implementation of the action plan will occur throughout 2020 and potentially into 2021, depending on the scope of the recommendations which are accepted by the State for implementation.

Update

The agency received the kinship navigator program assessment in October 2019. The assessment reviewed the program's impact on caregivers and children and changes in the system that may influence service delivery and/or relationships between the Kinship Navigator Program and community, regional, and state agencies. In September 2020, the Agency will receive a full evaluation program to include an in-depth review of the program's design, participant demographics, and the types of supports and services offered to families. Outcome evaluation will also examine the extent to which the program has an impact on caregivers and local and state partners and will include a comparison group design.

As part of the Georgia Kinship Navigator program an evaluation plan has been developed to capture the program's impact on caregivers and children and changes in the system that may influence service delivery and/or relationships between the Kinship Navigator Program and community, regional, and state agencies. The Agency's review in October 2019 of early implementation was a starting point for developing the state's navigator model. Between October 2017 and April 2019, there were 1,038 kinship navigator cases. The majority of cases reported were within DFCS regions 8, 10, 11, and 12 (90.5%). Among these four regions, region 11 had the greatest number of cases (490), accounting for almost half of all cases reported (47.2%). Of those records with referral information, more than half of program families were referred by DFCS (57%), while the remaining were community referrals (43%).

Proportionately, few families had a child with an informal placement (0.2%) or a previous case with DFCS (3.7%), while 41.6% currently had an open DFCS case.

Of those program families with a current DFCS case, most were relative foster case (72%), followed by CPS (33.8%) and family preservation (29%).

Almost three-quarters of program families had finance-related service needs (73%) (Figure 1). The next two most prevalent service needs among program families were legal (36%) and mental health (27%).

In September 2020, the Agency will receive a full evaluation program implementation including tracking referrals, participant demographics, and the types of supports and services offered to families. Outcome evaluation will also examine the extent to which the program has an impact on caregivers and local and state partners and will include a comparison group design.

Based on the initial navigator program findings - 57% of the program's referrals were kin caregivers caring for children as a result of DFCS involvement - the Agency anticipated increased utilization of navigator services due to the Division's targeted engagement of kinship caregivers in CPS and Foster Care services. The program provides the following services:

- Education to caregivers about resources and supports within their local community.
- Assistance to caregivers with applying and accessing federal and state benefits
- Act as a liaison to key local agencies and community organizations.
- Provide supportive listening to Kinship Caregivers
- Engage kinship families in their service area, identifying those not involved in support group networks and/or in need of additional services. Special attention is focused on serving relatives from isolated and ethnic communities

In preparation for the statewide rollout of Georgia's Kinship Continuum each regional office completed a kinship readiness assessment in April 2019. The assessment required regional and county leadership to engage local stakeholders such as judicial partners, CASA, and school officials regarding kinship placements, and to host kinship awareness activities for staff and other community partners. Regional events such as Region 14 kinship panel discussion with caregivers and service providers, and localized kinship paraphernalia in Region 12 demonstrated to stakeholders the Division's goal to support kinship placements. The state also collaborated with A Second Chance Inc, a nationally recognized organization in the field of kinship care, to provide 30 training sessions for frontline staff and service providers focused on kinship values. Additionally, kinship state office leaders provided kinship training at the 2019 statewide CASA training and Georgia Court Improvement Initiative. Both staff and court stakeholders have requested additional joint training opportunities to strengthen local practices related to kinship.

Georgia accomplished statewide implementation in October 2019, training a total of 1760 field staff on new kinship policies and practice changes. The Agency deployed SHINES

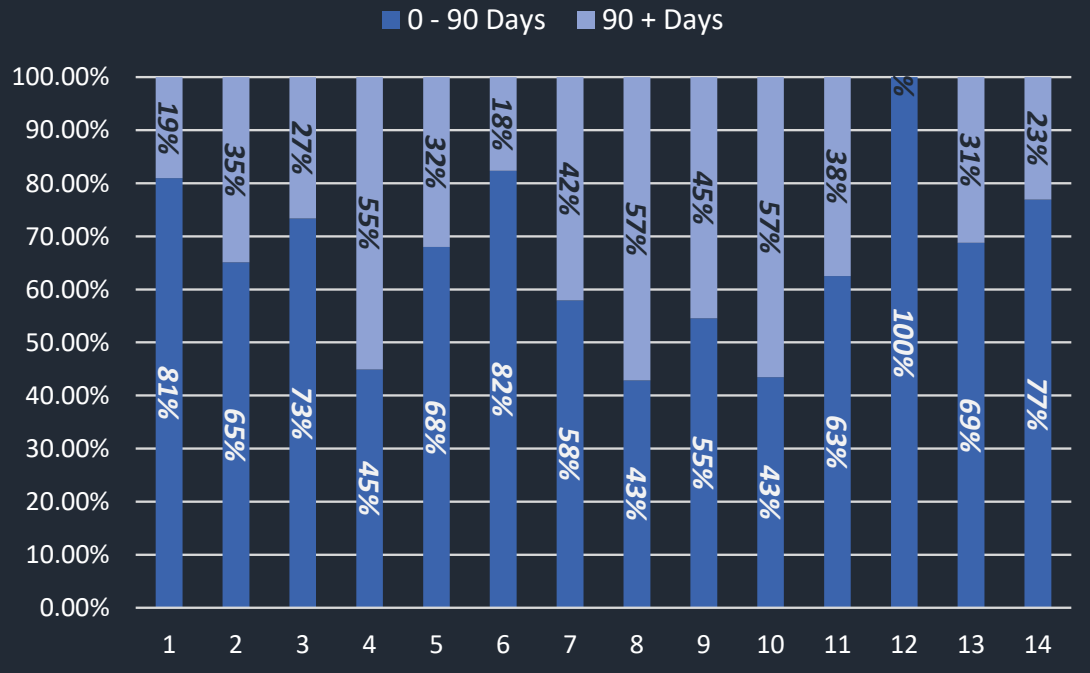
Voluntary Kinship and Kinship Foster Care enhancements to align with the new practice changes in November 2019. The new system changes provide county supervisors and administrators with the ability to track the core kinship requirements and timeliness of services via kinship dashboard. Improved SHINES data also allows kinship staff to monitor the outcomes of voluntary kinship arrangements and identify the kinship placement resources for ongoing support.

Charts below feature measures being tracked to determine how well the State is doing to increase kinship placements. The first chart indicates the number of the children who were in a voluntary placement on March 25, 2020, the length of time they had been in that arrangement, and whether or not that arrangement exceeded 90 days. The second chart provides the number of eventual placement outcomes for 197 children from as of March 4, 2020, the types of caregivers for placed children. The state's implementation of voluntary kinship strategies resulted in improved oversight of out-home safety plans during CPS services. Field staff are required to seek appropriate legal action when safety issues are not addressed within 90 days. Region 12 assigned a field program specialist to monitor this and voluntary kinship arrangements and as a result none of their voluntary kinship arrangements exceeded the 90-day time frame.

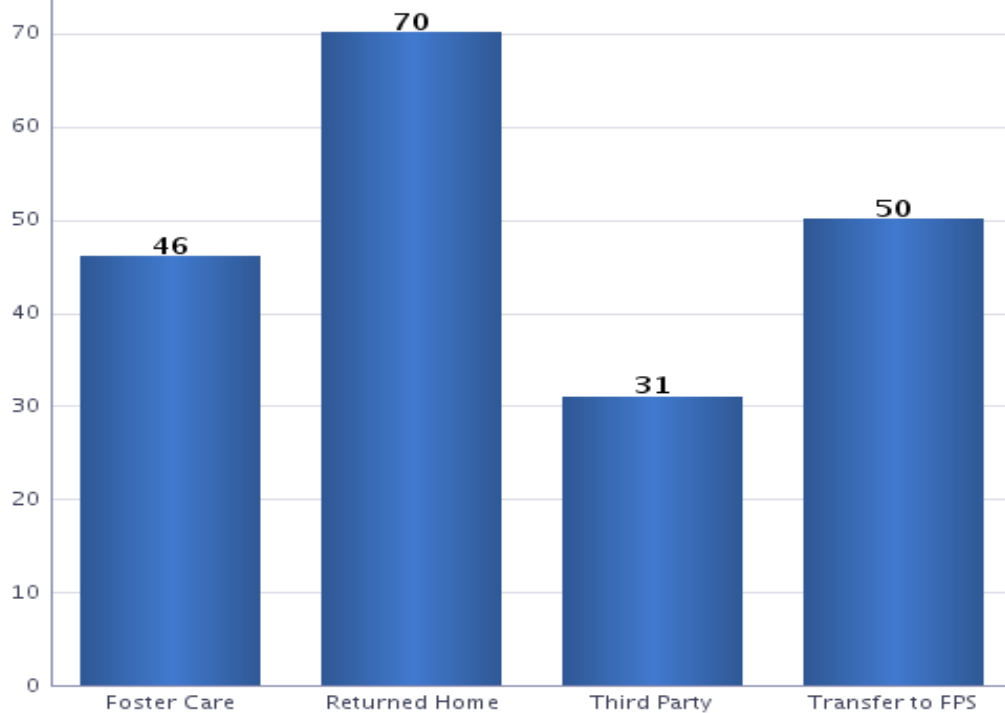
The second practice indicator tracked in the continuum is the outcome of voluntary kinship arrangements. Staff are required to document the case outcome prior to ending the out-of-home safety plan. The division identified six possible case outcomes for a voluntary kinship arrangement; as of February 2020, there were 70 of 197 children who were able to safely return to their primary caretaker. This possibly demonstrates appropriate use of out of home safety plans. Also note, 46 children entered foster care with an identified kinship placement resource.

The third indicator tracked is the percentage of children in foster care who are placed with a relative and/or fictive kin. The kinship continuum practice guidance promotes early identification of kinship caregivers and a streamlined assessment process for immediate placements. The fourth practice indicator of success is an increase of kinship foster homes. This is tracked by measuring the total number of foster homes coded as kinship partnership homes or relative foster homes. The data is an indication as to whether the State's efforts have led to an increase in relative and fictive kin placements (rather than non-relative placements). The state's goal is to ensure kinship placements receive training and additional resources available to caregivers through the foster home approval process. On March 31, 2020 there were 2,038 homes boarding foster children under the age of 18, of these, 70 were coded as Kinship Partnership Parent Homes or Relative Foster Homes. Therefore, 3.39% of relative homes had been approved as foster homes.

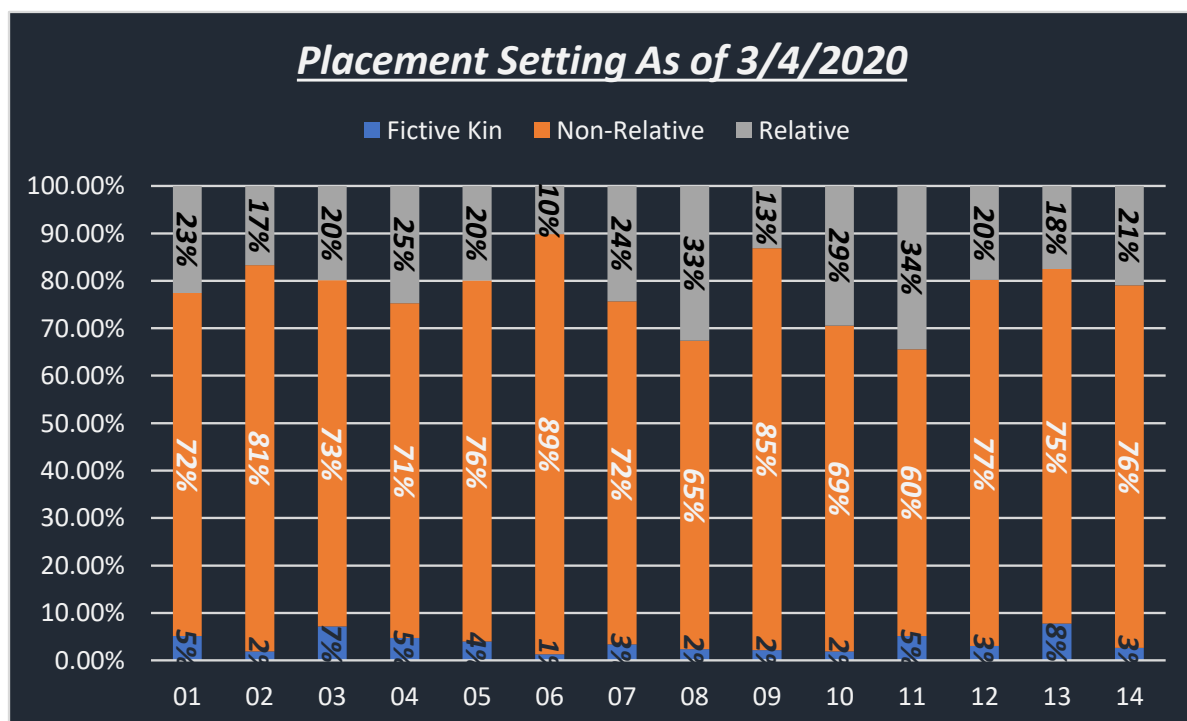
Open Voluntary Kinship Arrangements as of 3/25/2020



Data Source: Kinship Navigator



Data Source: Kinship Navigator



Data Source: Kinship Navigator

Georgia held its first Kinship Caregiver Summit in September 2019 with over 200 adults and 125 children. Kinship caregivers participated in a day of workshop specific to kinship

dynamics while the children enjoyed various fun activities. Caregivers overwhelmingly reported the self-care workshop and advocacy for kids as beneficial to their unique caregiving roles.

The Division filled nine kinship positions in order to sustain and improve kinship outcomes as state office leaders continue to host monthly conference calls to review monthly data, discuss practice trends and effective regional strategies. The agency eliminated three kinship positions due to recent statewide budget cuts. The reduction in positions expanded the coverage area for existing staff and prevented implementation of a kinship ombudsman. The kinship program has incorporated additional methods for communicating with caregivers in order to address anticipated gaps and service delays

The Agency intends to modify new worker to training to align with the kinship continuum in order to ensure practice consistency throughout the state. Georgia will disseminate final kinship policy changes in April 2020 providing specific guidance for kinship placement across all program areas and streamlining the Agency's relative care payment process.

Benchmarks

Increase the number of kin families who are approved as foster parents from 0.5% to 34% by March 2024

The state will strive to meet the following targets:

8% by March 2020

16% by March 2021

22% by March 2022

28% by March 2023

34% by March 2024

On March 31, 2020 there were 2,038 homes boarding foster children under the age of 18. Of these, 70 were kinship partnership parent homes or relative foster homes, giving 3.39% of relative homes that have been approved as foster homes. For this calculation, the denominator is the number of homes coded in SHINES as Relative Paid, Relative Unpaid, Relative Foster Home, Other Person, Non-Custodial Parent, Kinship-Relative, Kinship-Fictive Kin, Kinship Partnership Parent Home, or Relative. The numerator is the number of homes coded as Relative Foster Home or Kinship Partnership Parent Home.

While this may appear to be a modest increase, from 2014 to 2020 the state never increased more than .83%.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

The Permanency section provides ongoing technical assistance and OTSS to counties and regions regarding kinship placements. Please refer to the Program Support and Training

sections of this report for more detailed information regarding the specific types of assistance and training provided.

IMPLEMENTATION SUPPORTS

Supports for the implementation of the Kinship Continuum includes monthly technical assistance calls, modified new worker training, and regional activities to review local outcome data, practice trends and effective strategies.

FEEDBACK LOOPS

The permanency section has several workgroups established that incorporates internal as well as external partners. A majority of all practice shifts involves the feedback from our partners. This feedback is traditionally provided by C3 reports, survey feedback, set monthly meetings and roadshows.

COLLABORATION

The Kinship program will also host a webinar series for kinship families in collaboration with caregivers, judicial partners, and community stakeholders. These combined strategies will support consistent kinship implementation across DFCS program areas and increase kinship outcomes.

Figure 15 Voluntary Kinship Charts 1, 2 & 3 (see above)

OBJECTIVE IV. Implement Connected by 21 to provide supports to young adults age 18 - 21

Successful implementation of Connected By 21 will inevitably result in an expanded and strengthened range of existing services and will allow the State to reach additional youth in need of services. In July 2018, Georgia passed House Bill 972 (Connected By 21), a law that gives youth the option to receive extended foster care services until age 21, three years longer than the prior cutoff age of 18. Through Connected By 21, the Division will launch the Connections Unit in July 2020. In addition to the order to receive services through the Connections Unit, young adults, ages 18–21, must sign a Voluntary Placement Agreement (VPA) for services to be rendered. Additional participation requirements will be publicized later in a formal communication launch.

Youth will have access to supports in the following areas:

- Housing
- Employment
- Health
- Education

They will have the opportunity to receive stipends (the stipend amounts have not yet been finalized). The official DFCS policy is being updated to include new and updated extended youth service policy. (Section: DFCS Policy 21.1 – 21.12)

Communication about the Connections Unit will start during Celebration of Excellence 2019 (a formal celebration of graduates) and will continue throughout the year. There will be District Youth Listening Sessions to obtain feedback from youth on the services they need after age 18 and how best the Division can serve them through partnerships in the community beginning June 2019. The Division will continue to support young adults in becoming more confident, productive individuals in society and will commit to helping them achieve lifelong success.

Through the connections program, the Division will inspire youth to:

- Prepare for their future through educational and employment training opportunities
- Find and secure consistent and safe housing
- Build permanent connections with caring adults, including relatives, mentors and community members
- Acquire vital life skills through training and leadership opportunities to live independently

Data is used to support decisions focused on youth age 18 and over if they still receive services, are in college/post-secondary opportunities, and if they have children and where they live. Research has shown that if foster youth are safe, connected, educated and healthy when they exit foster care, they are more likely to transition into a more successful young adulthood.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

1. Create implementation plan – this is a new unit and will create new work and new staff positions for the Division. There must be a written, documented plan in place to guide the timeline of implementation and launch activities.

Update: The implementation plan was completed July 2018. The Division will not have the human resource capital to execute the development of the Connections Program Unit as originally designed. Due to this decision, a new programmatic structure and implementation plan will have to be developed that will allow the Division to execute on the legislation.

In July 2018, Georgia passed House Bill 972, a law that gives young adults the option to receive Extended Foster Care (EFC) services from age 18 through their 21st birthday. While DFCS currently provides Extended Youth Support Services for this population of young adults, the passage of this law enables federal title IV-E funding for services in the future. Implementation of all provisions for Extended Foster Care will occur over time, however the provisions below for eligibility and judicial review became effective July 1, 2020. Due to the delay in implementing CB21 as outlined within the previous implementation, we will continue to

ensure young people are served up until age 21 within the current provisions provided through the Independent Living Program. The major difference between the original implementation plan and the current implementation is the creation of the fully staffed Unit.

Eligibility for Extended Foster Care

1. Determine eligibility based on the following criteria:
 - a. The young adult was in foster care for at least six months³ prior to reaching the age of 18, and remained in care until his/her 18th birthday without achieving legal permanency by reunification, adoption or guardianship;
 - b. The young adult executes a Voluntary Placement Agreement and:
 - i. Acknowledges the voluntary nature of the program and indicates a commitment to proactively collaborate in transition planning and preparation.
 - ii. Agrees to continue receiving foster care assistance between the age of 18 to their 21st birthday and:
 1. Make ongoing progress completing identified goals in the case plan/ Written Transitional Living Plan (WTLP) which include education, employment, and other skills needed for independence; and
 2. Work towards completion of a transition plan to support their successful transition to adulthood.
 - c. The young adult is a legal resident of Georgia, a citizen or permanent legal resident of the United States or has obtained a legal immigration status such as Special Immigrant Juvenile Status (SIJS).
 - d. The young adult meets one of the following eligibility criteria:
 - i. Completing a secondary education or program leading to an equivalent credential (e.g. high school or GED);
 - ii. Enrolled in an institution which provides postsecondary or vocational education;
 - iii. Participating in a program or activity designed to promote or remove barriers to employment;
 - iv. Employed for at least 120 hours per month;
 - v. Employed for 80 hours per month, provided that he or she is also engaged in one of the activities described in i-iii above or can only work 80 hours per month due to a medical condition; or
 - vi. Incapable of doing any of the activities described in i-iv above due to a medical condition, which incapability is supported by regularly updated information in the case plan of the young adult.
2. Have the young adult execute the Voluntary Placement Agreement.
3. Engage the young adult and their support system to develop the case plan/Written Transition Living Plan outlining the plan for transition to independent living or another planned permanent adult living.

4. Submit a written report to the juvenile court, attend the initial review hearing, and review the court order.
5. Determine continued eligibility every 12 months following the young adult signing of the VPA-EFC.

Judicial Review for Extended Foster Care

1. In conjunction with the Special Assistant Attorney General (SAAG), written report will be filed with the court .
2. Attend the initial review hearing held by the juvenile court.
3. Review the court order to determine if it includes findings of whether EFC is in the best interest of the young adult.
4. Document the court hearing in Georgia SHINES.
5. Attend the review hearing held no later than 12 months after the young adult is considered to have entered foster care to determine whether:
 - a. The services and supports provided by DFCS under the VPA-EFC are developmentally appropriate;
 - b. DFCS has made reasonable efforts to finalize the transition plan to another planned permanent adult living arrangement (APPLA) or independent living; and
 - c. The young adult is making progress toward achieving independence.

The following policies shall continue to be used to support young adults in EFC:

- Written Transition Living Plan
- Transition from Foster Care
- Youth Rights and Responsibilities
- Medical Insurance for Youth 18 Years and Older and the Georgia Advance Directive for Health Care
- Post Foster Care Resources

2. District Youth Listening Sessions – There will be three District Youth Listening Sessions to receive information from young people in care on what they need to thrive and the current gaps in services to them.

Update: Due to the historical success of this initiative, the Youth Townhall structure was utilized to host three policy listening sessions to garner youth input for the development of the Connections Extension of Foster Care program policies. The Division coordinated this effort with MAAC and the University of Georgia's J.W. Fanning Institute. There were three (3) policy listening sessions held during the summer of 2019, one in each of the Division's Child Welfare Districts. A total of 118 youth attended the events statewide. The listening sessions afforded youth currently in the foster care system to provide feedback on the primary components of the extended foster care program, such as program eligibility, participation requirements, housing, and supports. The Division therefore utilized the overall youth feedback to inform the prospective policies for the Connections Extensions of Foster Program. The Division marketed the listening sessions through the coordinated efforts of its internal Office of Communications and MAAC. The effort was also broadcasted to placement

resource providers by eblast via the GA+ Score provider listserv, and directly to foster parent and kinship caregivers via the Foster Georgia caregiver listserv.

3. Focus Area Workgroups – There will be four workgroups to help build out what services will look like for youth. The workgroups will be in the focus areas of housing, education, health and employment.

Update: Due to changes in the implementation of CB21 we have delayed convening the workgroups. Our anticipated month/year of starting the workgroups is January 2021.

Benchmarks

Connections Unit Launch Date: July 2020

Workgroup Meeting Commence: July 2019

Begin On-boarding new staff: October 2019

The determination of anticipated outcomes, data indicators and a tracking system are in development. These elements will commence May 2020 in partnership with the DFCS Data Unit, SHINES and the Well-Being data and systems manager.

Measures of Progress will be:

Well-Being Outcome 1: Families have enhanced capacity to provide for their children's needs. (15% to 26%)

Well-Being Outcome 2: Children receive appropriate services to meet their educational needs. (46% to 60%)

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs. (15% to 25%)

The Division will not have the human resource capital to execute the development of the Connections Program Unit as originally designed. Due to this decision, a new programmatic structure and implementation plan will have to be developed that will allow the Division to execute on the legislation

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

The GARYSE Chafee Program provided the following training opportunities and Technical Assistance to county and regional staff, and placement providers:

1. NYTD Training: The GARYSE Program's Regional Independent Living Specialists provide bi-annual training to county staff on the National Youth in Transition Database reporting requirements, and to provide technical assistance to case managers to support NYTD data entry.

2. Training for CASA Representatives – in August 2019, the Chafee Director provided an overview of Chafee supports, and areas for advocacy at the 2019 annual statewide CASA Conference. The training included an overview of youth transition plan development, transitional living placement options, skill enhancement learning opportunities, and post-foster care supports provided to youth. Emphasis was placed on topic areas wherein court-

appointed advocates could advocate for increase service access and provision in their respective areas.

3. Training for Independent Living Placement Providers – the Division provided training to Independent Living scattered site placement providers and Life Coaches. Life Coaches are employed by ILP placement providers and act as human service professionals for youth placed in their programs. The training provides an overview of the RBWO minimum standards, Chafee services and supports, education supports and advocacy

4. County and Regional Training and Technical Assistance: The GARYSE Chafee Independent Living Program Technical Assistance (TA) is focused assistance provided to the internal and external stakeholders and partners to achieve a mutually agreed upon goal. For the GARYSE Chafee Program, the Regional Independent Living Specialist (ILS) provides such TA throughout their assigned service areas. This TA is done with the support of the Chafee Program Supervisor. The GARYSE ILS also conducts quarterly trainings with staff to outline the supports provided to youth, and the post-secondary supports and resources also available to them.

5. Regional Leadership Technical Assistance: The GARYSE Chafee Leadership Team has provided technical assistance and support to regional and county directors to support efforts provided to ILP eligible youth in care. Such assistance ranged from in person staffings to support the assessment of service needs, navigation of service availability and execute service connection. Staffings were also held at request for plan review and development for youth with high level needs, those experiencing frequent placement disruptions, and those suffering from significant mental and physical disabilities.

IMPLEMENTATION SUPPORTS

The Division will not have the human resource capital to execute the development of the Connections Program Unit as originally designed. Due to this decision, a new programmatic structure and implementation plan will have to be developed that will allow the Division to execute on the legislation.

The following policies shall continue to be used to support young adults in EFC:

- Written Transition Living Plan
- Transition from Foster Care
- Youth Rights and Responsibilities
- Medical Insurance for Youth 18 Years and Older and the Georgia Advance Directive for Health Care
- Post Foster Care Resources

FEEDBACK LOOPS

Through the four listening sessions provided to youth we were able to obtain information on the areas of support youth feel they need extended services to support a healthy transition in

their life. The information received from the listening sessions continue to inform policy created and activities provided to engage young people.

At this time, we do not have any additional information from feedback loops for CB21 implementation. Once we begin the work groups we will execute in engaging additional stakeholders and families/youth to continue to build out CB21.

OBJECTIVE V. Ensure children are appropriately placed in settings that meet individualized needs and preserve family and community connections (PIP>CFSP) Goal III, Strategy I, Key Activity 7, 8 and 9

In February 2019, the Division relaunched the use of permanency roundtables. A roundtable is an intervention designed to facilitate the permanency planning process by identifying realistic solutions to permanency obstacles for youth. Georgia relaunched this practice due to the significant success the state had using this process in the past to help children achieve permanency timely. The roundtables will be used to develop a pathway to permanency for children who have reached 13 months in care and do not have an actionable permanency path. This objective further aligns with the permanency section of the CFSR and APSR reports. Child welfare stakeholders have stated that there is a concern that permanency strategies are limited in their emphasis on termination of parental rights rather than consideration of the broader spectrum of permanency goals.

The state anticipates additional residual benefits of roundtables will be an increase in timely permanency, reduction in the rates of children re-entering care, reduction in the number of children in care and a reduction in the number of children who remain in care for more than 24 months.

PIP > CFSP (original wording of PIP activities below)

Key Activity 7 - The State CQI team will analyze permanency case consultation outcome data to determine the future scope of a permanency roundtable process focusing on those cases involving children without any actionable permanency plan. The team will generate a written strategy including parameters for identifying cases in need of full permanency roundtables rather than permanency case consultations.

Key Activity 8

A minimum of two (2) consultation staff per region will be trained in the full permanency roundtable model.

Key Activity 9

Full permanency roundtables including follow up as specified in the permanency roundtable model will occur for cases where the children have reached the 13th month in care and there

is no clear permanency path identified. Cases will be identified by the supervisor or permanency FPS. Permanency case consultations will continue for cases not in need of a full permanency roundtable.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

Key Activity 8

A minimum of two (2) consultation staff per region will be trained in the full permanency roundtable model.

Update:

This strategy has been successfully addressed. Many of the regions trained more than the required number of staff to properly plan for attrition and continuity of the work.

Status: Complete

Key Activity 9

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

Update:

Key Activity 9

The regions have been facilitating roundtables, as needed. All regions have an identified process or have opted out of conducting roundtables in lieu of a different process. We have had some challenges with our ability to pull data on the timeliness and compliance with the roundtables process. The data we have been able to receive does align with the work reported by regional staff. Approximately 147 roundtables have been completed and from those completed, 49 children had exits (33%). Because of other processes in the regions, we cannot say with certainty that the roundtables were the catalyst for these exits. The strength in this process is the intentional focus on the most challenging population of children. Some regions have opted out of the roundtable process due to leveraging other process i.e. additional staffings, cold case staffing.

We have had some challenges with our ability to pull data on the timeliness and compliance with the roundtables process. The data we have been able to receive does align with the work reported by regional staff. From July 2019 – June 2020, approximately 147 roundtables have been completed and from those completed, 49 children had exits (33%). Because of other processes in the regions, we cannot say with certainty that the roundtables were the catalyst for these exits. The strength in this process is the intentional focus on the most challenging population of children. Some regions have

opted out of the roundtable process due to leveraging other process i.e. additional staffings, cold case staffing.

Some regions are bright spots in their management of this roundtable process, and they are highlighted below:

Region 1 schedules all needed roundtables while conducting the case consultation. If a roundtable is recommended, it is set at a minimum of 30 days out so the staff will have time to complete any action items from the consultation. There are not many roundtables conducted in R1 because the consultations are serving as the primary tool to address the population of children who would be referred for a roundtable. A highlighted strength for R1 is the permanency FPS reviews the staffings and consultations for follow up and connects with staff regarding any outstanding action items to prevent another meeting. Challenges to this process are the need for partners and constituents to actively participate in the consultations. Having everyone at the table has proven to add significant value to recommendations and movement of cases towards permanency. The region is making a concerted effort to ensure this gap is closed.

In Region 3, there is a requirement for additional oversight for all cases receiving a consult and/or roundtable. There is a quarterly follow up to all cases remaining in care until permanency is achieved. The permanency FPS is responsible for the follow-up. The highlights of this process are the additional oversight, the neutral decision-making, and out of the box thinking.

Region 6 Permanency FPS takes lead on ensuring required children receive the case consultation, which could lead to the permanency roundtable. Region 6 provides written expectations to the staff responsible for managing the child's case completed by the Supervisor/CM/Unit. Cases requiring follow up, not on track for permanency, with several action steps, the permanency FPS will arrange a call 2-3 months following the consult to address barriers to completing the action steps. As indicated with the other regions, there is a low number of cases requiring a Permanency Roundtable. The roundtables held were consistent of the children with high end needs, both medical and behavioral. The roundtable process has not been very beneficial with moving children to exits, but it has been beneficial with highlighting and providing additional supports to the counties and caregivers in the region.

As part of the permanency continuum, strengths in this process is the 12-month case consultations providing an avenue to "check-in" on cases that have been in foster care for 12 months, in order to ensure that they are on track to gain permanency. This process has assisted the Region with adhering to ASFA timeframes as well as policy guidelines for TPR; ultimately finalizing adoptions within 24 months. Since starting the 12-month consults, the region has seen a great deal of progress with the Counties working on establishing permanency even before 12th month. Many times, now, the Counties have already submitted TPR packet/guardianship petitions, or they have begun transitional visits for children to return home. The process has provided the support the supervisors with case direction and next steps, especially those who are newer to supervision and those who supervise a large number of cases.

Region 7 case consultations can include the Supervisor, case manager, Regional Adoption Coordinator, Wellness specialist (WPAC), Education specialist (EPAC), Independent Living specialist, Kinship coordinator, Early Education specialist, and the Field Program Specialist. Due to all the parties involved in the case consultation, roundtables are not recommended unless there are major concerns that warrant a higher level of expertise. The consultations are completed by the permanency FPS inclusive of the follow-up.

The process has been going well. The staff can get important questions answered, gain more knowledge on resources, and brainstorm on different ways to reach permanency effectively and safely for the children. An opportunity for growth continues to be the follow-up and ensuring that the SAAG and CASAs are involved in the discussion.

Region 13 does not complete Permanency Roundtables. Instead, the region is completing Permanency Case Consultations (PCC) and utilizing other practices to move the cases along to permanency. Perm FPS and SSA are required to follow up on the action steps until permanency is achieved according to the following:

HTL- Half Their Life Project (SBARS are completed on children in FC for half/all their lives/over 24 months/under 10 years old) The cases are tracked and monitored utilizing a shared spreadsheet. The SSA is responsible for ensuring the follow up and updating the SBAR 2x per month. Cases are color coded according to the identified permanency status. (green- ready to move to permanency in 30-90 days, yellow – 3 – 6 months to permanency and red – over 6 months to permanency. Cases identified with barriers pertaining to legal, state office, or SAAG will be looped up to an upper leadership level to be addressed.

There are many strengths identified in the revised process in the region. The region and county leadership are involved and support case decisions. The tracking and monitoring tools are assessable to leadership and there is accountability by all involved to ensure cases are moving towards timely permanency. The action plan follow up is visible on the shared spreadsheet and the follow up is consistent as indicated in the plan.

As indicated above, many regions have adjusted the consultation process to incorporate many different tools to work a child towards timely permanency. The roundtable process is part of this continuum and is utilized as needed by the regions.

Status: Complete

Benchmarks

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

The desired targets for March 2024 are:

Item 5: from 47% to 65%

The state will strive to meet the following targets:

- 50% by March 2020
- 54% by March 2021
- 58% by March 2022
- 62% by March 2023
- 65% by March 2024

Item 6: from 27% to 50%

The state will strive to meet the following targets:

- 30% by March 2020
- 35% by March 2021
- 40% by March 2022
- 45% by March 2023
- 50% by March 2024

Item 12: from 18% to 40%

The state will strive to meet the following targets:

- 23% by March 2020
- 28% by March 2021
- 33% by March 2022
- 38% by March 2023
- 40% by March 2024

As of March 31, 2020, the State achieved the following percentages on items 5, 6 and 12.

Permanency 1, Item 5 – 48%

Permanency 1, Item 6 – 22%

Well-Being 1, Item 12 – 14%

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

The Permanency section provides ongoing technical assistance and OTSS to counties and regions regarding kinship placements. Please refer to the Program Support and Training sections of this report for more detailed information regarding the specific types of assistance and training provided.

IMPLEMENTATION SUPPORTS

Permanency utilized the expertise of the Master Practitioners remaining with the state for the creation of the roundtable training. Collaboration with the Data unit on case identification and outcome tracking. Georgia Court Improvement partnered with the agency on practice shifts recommended improvements and cross-training. Ongoing discussions with permanency FPS on the process and practice enhancements needed. The C3 Coordinators have been integral to the execution of strategies to address barriers.

There are no additional supports needed at this time. The regions continue to collaborate with local constituents to develop strategies to address barriers identified during the consultation and roundtable process.

FEEDBACK LOOPS

The Permanency section has several workgroups established that incorporates internal as well as external partners. A majority of all practice shifts involves the feedback from our partners. This feedback is traditionally provided by C3 reports, survey feedback, set monthly meetings and roadshows.

OBJECTIVE VI. Increase the Division's ability to support youth who need additional educational assistance

(PIP>CFSP) Goal II, Strategy II, Key Activities 1, 2 and 3

This objective was rolled over to the CFSP from the PIP.

The Educational Programming, Assessment and Consultation (EPAC) team will conduct quarterly Education Academies that provide information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local educational processes, and advocacy. Additionally, Education Academies will provide information and best practices for case managers and supervisors as they engage with the local school system and academic centers for youth on their caseload.

This education, targeted to case managers, will expand their ability to effectively support youth with their educational needs. It also allows the state to reach more youth than those who would be assisted by education support monitors (ESM) alone.

The state will increase stakeholder and case manager awareness of services provided by EPAC and improve advocacy for the youth in educational settings. By improving case manager awareness, it enables collaborative efforts to improve graduation rates, grade promotions, retention and support to youth who require additional and efficient supportive services.

In September 2018, the SHINES system was enhanced with updated education detail pages for the Educational Stability Plan (ESP) for youth entering and in foster care to be created electronically. This enhancement also removed the need for youth to be referred to EPAC through a manual referral system. The ESM provides educational academies specific to the counties' needs such as SHINES enhancement, completion of educational stability plan, school discipline and EPAC overview. As of April 2020, the EPAC team conducted 152 education academies. EPAC increased its training to field staff, and through these training enhancements EPAC expanded the subject matter provided during training and implemented different methods of training.

PIP>CFSP (original wording of PIP activities below)

Key Activity 1

EPAC will implement one web-based Education Academy each quarter designed to support and enhance case manager, supervisor, and other direct service child welfare staff's

understanding of educational support to youth in foster care. The regional and/or county will be identified in part by the following criteria:

- Large number of children/youths in foster care enrolled in the school district.
- High percentage of suspensions/expulsions of children and youth in foster care.
- Judicial partners support and prioritize educational outcomes.
- School districts with a high or low graduation rates of foster youth.
- Low rates of EPAC Referral.

Key Activity 2

EPAC will implement two onsite Education Academies per quarter designed to support and enhance the case manager, supervisor, and other direct service child welfare staff's understanding of educational support to youth in foster care.

Key Activity 3

EPAC will implement three annual onsite Education Academies specifically for foster parents and caregivers to provide additional guidance, clarification and best practices in supporting the academic needs of youth in their care.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

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

Update

EPAC sought to increase the Division's case manager's and supervisor's ability and knowledge in supporting youth on their caseload who need education support. During this reporting period, EPAC increased training to field staff and various other critical partners. EPAC held 152 Education Academies, training approximately, 1,928 Division staff, external stakeholders, Child-Caring Institutions and foster parents covering EPAC and its Importance, Special Education laws, School Disciplinary and Tribunals, Completion of Education Stability Plan and How to Advocate for your Foster Youth. Several of the trainings were listed in the Division's Learning Management System thus allowing for field staff to get training credit. This work is ongoing.

In-person trainings will be hosted along with online virtual training through the WebEx training platform. The curriculum will educate stakeholders and case managers on EPAC's purpose and services provided and keep case managers abreast of the latest educational trends and information. The trainings will equip case managers with the knowledge to effectively advocate for the educational needs of the youth served.

Update: In addition to these trainings, EPAC had the opportunity to present at Department of Education Federal Programs Conference, Georgia Conference on Children and Families, Adoptive & Foster Parent Association of Georgia Conference educating external stakeholders,

members of child-caring Institutions and school systems, and foster parents on how to utilize EPAC services. This work is ongoing.

Benchmarks

All state office academies are to be completed by July 30, 2019 and at least one academy is scheduled every other month across the state. More academies may be incorporated for counties by education support monitors depending on county needs.

Successful implementation of this strategy will be measured by the completion of all scheduled academies, as outlined in the education academy action plan.

By March 2020, the education team will provide at least two (2) statewide academies and twenty-five (25) county-level Education Academies to enhance state and local staff's knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; provide at least two (2) statewide academies and twenty-five (25) county-level Education Academies to enhance state and local staff's knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth; provide at least two (2) Education Academies to enhance child-caring institutions, private agencies and foster parents' knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; and provide at least two (2) Education Academies to enhance child-caring institutions, private agencies and foster parents' knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth.

By March 2021, the education team will provide at least three (3) statewide academies and thirty-five (35) county-level Education Academies and two (2) online webinars to enhance state and local staff's knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; provide at least three (3) statewide academies and thirty-five (35) county-level Education Academies and two (2) online webinars to enhance state and local staff's knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth; provide at least five (5) Education Academies to enhance child-caring institutions, private agencies and foster parents' knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; and provide at least five (5) Education Academies to enhance child-caring institutions, private agencies and foster parents' knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth.

By March 2022, the education team will provide at least three (3) statewide academies and fifty (50) county-level Education Academies and two (2) online webinars to enhance state and local staff's knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; provide at least three (3) statewide

academies and thirty-five (35) county-level Education Academies and two (2) online webinars to enhance state and local staff's knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth; provide at least seven (7) Education Academies and one (1) online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; and provide at least seven (7) Education Academies and one (1) online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth.

By March 2023, the Education team will provide at least four (4) statewide academies and fifty (50) county-level Education Academies and two (2) online webinars to enhance state and local staff's knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; provide at least four (4) statewide academies and thirty-five (35) county-level Education Academies and two (2) online webinars to enhance state and local staff's knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth; provide at least seven (7) Education Academies and one (1) online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs; and provide at least seven (7) Education Academies and one (1) online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth.

By March 2024, provide:

- At least four statewide academies and 50 county-level Education Academies and two online webinars to enhance state and local staff's knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs
- At least four statewide academies and 35 county-level Education Academies and two online webinars to enhance state and local staff's knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth
- At least seven Education Academies and one online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of EPAC services to improve communication, collaboration and advocacy regarding foster youths' educational needs
- At least seven Education Academies and one online webinar to enhance child-caring institutions, private agencies and foster parents' knowledge of special education laws and school discipline to ensure appropriate services are in place for foster youth

Participation of case managers in online Education Academies milestones for strategy completion:

25% by 2020

30% by 2021

35% by 2022

45% by 2023

50% by 2024

Benchmark measures for progress is moving from 46% to 60% by 2024 in Well-Being 2.

EPAC has met and surpassed the benchmarks identified. This increase in hosting Education Academies is largely in part due to the EPAC team being fully staffed. Each ESM now only covers one region versus previous years, an ESM covering between two and three regions. The ESM can provide more support and training to their respective regions. Each ESM is required to provide at least one training a month to a county office within their region.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

EPAC had the goal to increase the Division's case manager's and supervisor's ability and knowledge in supporting youth on their caseload who need education support. During this reporting period, EPAC increased training to field staff and various other critical partners. EPAC held 152 Education Academies, training approximately, 1,928 Division staff, external stakeholders, Child-Caring Institutions and foster parents covering EPAC and Its importance, Special Education laws, School Disciplinary and Tribunals, Completion of Education Stability Plan and How to Advocate for your Foster Youth. Several of the trainings were listed in the Division's Learning Management System thus allowing for field staff to get training credit.

In addition to these trainings, EPAC had the opportunity to present at Department of Education Federal Programs Conference, Georgia Conference on Children and Families, Adoptive & Foster Parent Association of Georgia Conference educating external stakeholders, Child-Caring Institutions, school systems and foster parents on How to Utilize EPAC Services.

These Education Academies and presentations provided information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local educational processes, and advocacy. Additionally, the Academies provided information and best practices for case managers and supervisors as they engage with the local school system and academic centers for youth on their caseload.

The Unit is currently working to create end of the year surveys to provide to county staff, external partners and community agencies to determine the effectiveness of the trainings. However, the verbal requests of the field staff, foster parents and/or external stakeholders, guided the direction or topic of the trainings.

IMPLEMENTATION SUPPORTS

The EPAC Unit utilized the Data Integrity Specialists' Data Days to conduct some of the trainings. In addition, several of the trainings were listed in the Division's Learning Management System thus allowing for field staff to get training credit.

FEEDBACK LOOPS

The Unit is currently working to create end of the year surveys to provide to county staff, external partners and community agencies to determine the effectiveness of the trainings.

However, the verbal requests of the field staff, foster parents and/or external stakeholders, guided the direction or topic of the trainings.

Additionally, the 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

COLLABORATION

- **Georgia Court Appointed Special Advocates (CASA)** - a nonprofit organization dedicated to improving the lives of children in foster care throughout the state. By advocating for children who have experienced abuse or neglect, our volunteers amplify each child's voice and help change a child's story. In collaboration with EPAC, GA CASA provides trainings to CASA volunteers covering topics such as Special Education law, student discipline best practices, enrollment, mental health advocacy and an overview of EPAC services.
- **Georgia Appleseed** – a nonprofit agency which provide advocacy, pro-bono legal representation and training to assist foster youth who are facing expulsion from school. In collaboration with Georgia Appleseed, EPAC, provides trainings to Division staff, Child-Caring Institutions, and foster parents covering topics such as Special Education law, student discipline best practices, enrollment, mental health advocacy, and equity issues. In addition, Georgia Appleseed provides free legal consultation to Case Managers and Education Support Monitors to help prepare for legal advocacy of a foster youth facing school expulsion.
- **Multi Agency for Children (MAAC)** – To increase the Division's reach and services to youth who need more focused and streamlined education and enrichment support services in our mostly highly populated area of the state, the Division has partnered with the Multi-Agency Alliance for Children (MAAC) who now serves as the lead education agency for Fulton and Dekalb Counties. As the lead Education MAAC provides education support services to school age youth who are in grades 7 – 12. These services include:
 - Provide tutorial services (when those services are not available or have been exhausted in the LEAs for children and youth in foster care) using certified teachers
 - Process, track and monitor extracurricular and enrichment services for youth ages
 - Conduct educational assessments
 - Create Education Action Plans
 - Recruiting and assigning parent surrogates
 - Create service provision and support plans for youth who:
 - Have been identified as special needs
 - Have Individualized Education Plans
 - Have 504 Plans
 - Are in GNETS or at-risk of being placed in GNETS programs
 - Are talented and gifted

OBJECTIVE VII. Individualized Education Plans (IEPs)

(PIP>CFSP) Goal II, Strategy III, Key Activity 1

Students in foster care often experience frequent and unplanned school changes. The changes can cause delays in enrollment and transfers of school records and can have a huge negative impact on the academic success of children in foster care. Youth in foster care have a greater risk of poor educational outcomes as compared to the youth not in foster care. Ensuring foster youth with IEPs are provided adequate accommodations and the IEPs are current can aid in the successful matriculation of the youth.

PIP>CFSP (original wording of the PIP)

Monitor the Individualized Education Plans (IEP) for children/youth who have been referred to EPAC and ensure the IEPs are current and are monitored through a coordinated team that includes the EPAC education specialists (contractors), DFCS case manager, ESM, appropriate school system personnel and other key student support team members.

Key Activity 1

EPAC education specialists (contractors) will conduct quarterly sample reviews of IEPs for youth who have been referred to EPAC and have IEPs to ensure the IEP is current/up-to-date and reflects the actual supports and services needed.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

When warranted foster youth will have current and accurate IEPs. Reviews will be conducted for youth, ages 5 -17, who have an identified IEP (as noted in GA SHINES). They will receive accommodations needed for their educational setting. Education support monitors will pull random IEPs from their respective regions. Reviews will occur on a monthly basis and 5% of the cases will be reviewed each month. Cases will be identified based on SHINES data retrieval.

Update

- The EPAC Unit reviewed approximately 491 IEPs. Of the 491, one hundred eighty-eight had current IEPs and accommodations were appropriate. The remaining 303 recommendations, the EPAC Unit followed their protocol in making the recommendations and ensuring the appropriate actions were taken. This increase in the IEP reviews and recommendations are largely in part to the EPAC team being fully staffed. Each ESM now only covers one region versus previous years, an ESM

covering between two and three regions. The ESM can provide more support and training to their respective regions. Each ESM is required to complete at least five (5) IEP reviews a month. ESM will conduct a search of SHINES External Documents to locate IEP

- If IEP has not been uploaded, ESM will make notation on the IEP Audit Form (Attachment 1) and mark the audit “unsatisfactory” due to the absence of IEP in SHINES. Form will be sent to CM and SSS via email with a request to upload the IEP within 30 days.
- If IEP is expired, ESM will make notation on the IEP Audit Form (Attachment 1) and mark the audit “unsatisfactory” due to the expiration of IEP in SHINES. Form will be sent to CM and SSS via email with a request to upload the IEP within 30 days.
- If IEP is upload and has not expired, the ESM will assign an ES to review.
- ES will review all assigned IEPs in accordance with the IEP Audit Form (Attachment 1)
- ES will document findings and make recommendations based on their certification and experience.
- The ES will review the IEP for the following:
 - a. IEP is current (having been updated in last 364 days)
 - c. IEP is signed by Foster Parent or School Surrogate
 - d. School has assigned a surrogate
 - e. Accommodations are appropriate in relation to eligibility
 - f. Goals are appropriate in terms of level of challenge
 - g. Follow up evaluations have been conducted every 3 years

Once the document is reviewed, the ESM will send copy of completed IEP Review letter and form to case manager. This work is ongoing.

The IEPs will be provided to the certified teachers (education specialist contractors) for review for compliance. A template will be used to review the IEP and will be submitted to the education support monitor once the review is completed with the recommendations. The ESMs will then submit the recommendations to the case managers asking that the recommendations be completed within 10 days. If the recommendations have not been completed, the district managers will contact the county directors to ensure the appropriate actions have been taken.

Update: Communicating with staff regarding IEP Review Recommendations:

1. If the IEP has not been uploaded, has expired or accommodations are not appropriate, ESM’s will send two notifications to the Case manager, one immediately, the second within thirty (30) business days to by Case Manager and Supervisor.
2. If ESM receives no response from Case manager regarding the IEP within thirty (30) business days, notify District Manager.
3. At thirty (30) business days the District Manager will send notification to the Supervisor and County Director.

Top Findings:

- IEP Reviews not uploaded
- IEPs Expired

Since May 2020, EPAC has completed approximately 156 IEP reviews with 56 recommendations. The team followed up on recommendations, however, due to COVID-19 and virtual learning many recommendations were not able to be completed. Beginning September 1, 2020, each ESM are required to complete 10 IEP reviews a month. This work is ongoing.

Benchmarks

The State reported that it would seek to achieve the following benchmarks:

Progress will be measured by Well-Being Outcome 2: Children receive appropriate services to meet their educational needs. The State goal is to move from 46% to 60% by March 2024. EPAC unit will conduct at least fifteen (15) Education Academies, on special education to enhance the state and local staff, child caring institutions (CCIs), private agencies and foster parents' knowledge on special education and individualized education plans (IEPs), ensuring the appropriate services foster youths need to meet their educational needs by March 2024. By March 2020, three hundred IEPs reviewed, if applicable, recommendations provided to case managers and/or supervisors, and at least, 50% of the recommendations will have been implemented to ensure 49% of the youth are receiving the appropriate services to meet their educational needs.

By March 2021, five hundred IEPs reviewed, if applicable, recommendations provided to case managers and/or supervisors, and at least, 50% of the recommendations will have been implemented to ensure 52% of the youth are receiving the appropriate services to meet their educational needs.

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

By March 2023, seven hundred IEPs reviewed, if applicable, recommendations provided to case managers and/or supervisors, and at least, 70% of the recommendations will have been implemented to ensure 58% of the youth are receiving the appropriate services to meet their educational needs.

By March 2024, eight hundred IEPs will be reviewed, if applicable, recommendations provided to case managers and/or supervisors, and at least, 80% of the recommendations will have been implemented to ensure 60% of the youth are receiving the appropriate services to meet their educational needs.

Targets for percentage of youth receiving the appropriate services to meet their educational needs:

49% - 2020

52% - 2021

55% - 2022

58% - 2023

60% - 2024

By March 2020, 491 IEPs were reviewed with 188 meeting the current date and satisfactory requirements. The remaining 303, recommendations were provided to case managers and/or supervisors. This increase in the IEP reviews and recommendations are largely in part to the EPAC team being fully staffed. Each ESM now only covers one region versus previous years, an ESM covering between two and three regions. The ESM can provide more support and training to their respective regions. Each ESM is required to complete at least five (5) IEP reviews a month.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

Education Support Monitors support case managers with IEP meetings and understanding the IEP recommendations and/or accommodations. Education Support Monitor's train the case managers on Special Population (i.e. IEP, SST) through the Educational Academies. EPAC held 152 Education Academies, training approximately, 1,928 Division staff, external stakeholders, child-caring institutions and foster parents covering EPAC and its Importance, Special Education laws, School Disciplinary and Tribunals, Completion of Education Stability Plan and How to Advocate for your Foster Youth. Several of the trainings were listed in the Division's Learning Management System thus allowing for field staff to get training credit.

In addition to these trainings, EPAC had the opportunity to present at Department of Education Federal Programs Conference, Georgia Conference on Children and Families, Adoptive & Foster Parent Association of Georgia Conference educating external stakeholders, Child-Caring Institutions, school systems and foster parents on How to Utilize EPAC Services.

These Education Academies and presentations provided information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local educational processes, and advocacy. Additionally, the Academies provided information and best practices for case managers and supervisors as they engage with the local school system and academic centers for youth on their caseload.

In addition, the EPAC Unit utilized GADOE's State Longitude Data System to identify any IEPs of foster youth, reviewed them and uploaded those into the Division's SHINES data system.

The Unit is currently working to create end of the year surveys to provide to county staff, external partners and community agencies to determine the effectiveness of the trainings. However, the EPAC Unit has been providing monthly reports to the Regional Directors outlining the services provided.

IMPLEMENTATION SUPPORTS

Education Support Monitors support case managers with IEP meetings and understanding the IEP recommendations and/or accommodations. Education Support Monitor's train the case managers on Special Population (i.e. IEP, SST) through the Educational Academies. EPAC held 152 Education Academies, training approximately, 1,928 Division staff, external stakeholders, Child-Caring Institutions and foster parents covering EPAC and Its importance, Special Education laws, School Disciplinary and Tribunals, Completion of Education Stability Plan and How to Advocate for your Foster Youth. Several of the trainings were listed in the Division's Learning Management System thus allowing for field staff to get training credit. The EPAC Unit utilized GADOE's State Longitude Data System to identify any IEPs of foster youth, reviewed them and uploaded those into the Division's SHINES data system.

FEEDBACK LOOPS

Education support monitors will pull random IEPs from their respective Regions. The IEPs will be provided to the certified teachers (education specialist contractors) for review for compliance. A template is used to review the IEP and submitted to the education support monitor once the review is completed with the recommendations. The ESMs then submit the recommendations to the case managers asking them to complete the recommendations within ten (10) days. If they have not completed the recommendations, the district managers contact the county directors to ensure the appropriate actions have been completed.

The Unit is currently working to create end of the year surveys to provide to county staff, external partners and community agencies to determine the effectiveness of the trainings. However, the verbal requests of the field staff, foster parents and/or external stakeholders, guided the direction or topic of the trainings. Additionally, the 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

COLLABORATION

Georgia Department of Education - Keeping in line with the reauthorized Every Student Succeeds Act (ESSA), GADOE and the EPAC Unit coordinate efforts to ensure the educational stability of students in the custody of the Division. The Division and GADOE exchange information through the Statewide Longitude Data System (SLDS), allowing each agency access to relevant and pertinent information to aid in the academic support of the foster youth. GADOE has identified foster care points of contact at the state and local level to ensure the educational stability of foster youth. The school systems' foster care points of contact 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.

b. Strategic Focus B: Service Array

GOAL B: Effective practice resulting in positive outcomes for families

STRATEGIC FOCUS B: Service Array

Objectives:

I. Maintain a Parent Advisory Council to enhance primary and secondary community-based prevention and to increase parent leadership and engagement within the Division

II. Target 0 to 5 early childhood education opportunities

III. Train and market available youth services to supervisors and frontline staff

IV. Leverage regional stakeholder meetings to address service array, and monitor to ensure implemented services are effective

MEASURES OF PROGRESS

(As of March 31,2020)

Percent of Parent Advisory Council members who attend all trainings and meetings each year¹

Objective I

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
0%	35%	96%	45%		55%		65%		75%	

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

Objective II, III

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
46%	49%	56%	52%		55%		58%		60%	

Percent of children ages 0 – 5 who are in an early childhood education setting³

Objective II

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Target 2021	Target 2021	Target 2021	Target 2021	Target 2021	Target 2021	Target 2021
64%	67%	82%	69%		71%		73%		75%	

Well-Being Outcome 3: Children receive adequate services to meet their physical and mental health needs ⁴ Objective III										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
15%	18%	27%	20%		22%		24%		25%	
Well-Being Outcome 1: Item 12 ⁵ Objective IV										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
18%	23%	15%	28%		33%		38%		40%	
Respondent Rating = Excellent or Good Agency effectiveness in providing appropriate services to meet the needs of families and children which they serve through both CPS and Permanency ⁶ Objective IV										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
84%	86%	84%	87%		88%		89%		90%	
Respondent Rating = Excellent or Good Services provided by DFCS to ensure children are safe and protected from abuse and neglect ⁷ Objective IV										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
91%	92%	87%	93%		94%		95%		95%	
Percent of cases that demonstrate ongoing communication between the agency and the service provider ⁸ Objective IV										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
50%	53%	49%	56%		59%		62%		65%	

1 - Data Source: Georgia Prevention Unit
 2, 4 and 5 - Data Source: Georgia Quality Assurance CFSR All Zones/All Regions October 2019 – March 2020 Rolling Trend Report
 3 - Data Source: Georgia Well-Being Unit
 6 and 7 - Data Source: Georgia Quality Assurance case record review interviews – respondents include case managers, supervisors, community partners, foster parents, service providers, court personnel, attorneys, and school personnel.
 8 - Data Source: C3 coordinator quarterly case record reviews

OBJECTIVE I

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

The State will expand and strengthen the range of existing primary and secondary services by gathering input and guidance from the Parent Advisory Council on types of services that are most helpful to families in the community, and by providing necessary support and resources. Services funded by the Prevention Section will be more responsive to the needs of families in communities.

The members of the Parent Advisory Council include birth parents and foster parents. The Prevention Section is still recruiting for kin caregivers for the Parent Advisory Council. Some birth parents have been involved with the Agency, while the majority of them have not. The birth parents who have not been involved with the Agency have accessed prevention services in the community, such as a family resource center or a parenting support group. The Prevention Section has structured the Parent Advisory Council to be comprised of members with diverse backgrounds so they will be able to provide their varying viewpoints of the types of community-based prevention and family support services needed to support families in their communities, both prior to and in conjunction with any involvement with the Agency.

There will be at least one Parent Advisory Council for the state. The goal was to have one parent advisory council member from each region, for a total of 14 Parent Advisory Council members. The Council currently has nine council members and the Prevention Section is currently recruiting for parents to represent Regions 2, 5, 6, 7, 8 and 9.

The Parent Advisory Council will be available to participate in the review of data, assessment of strengths and needs and the selection of goals in future CFSP. Additionally, the Parent Advisory Council will be available to participate in the ongoing implementation of goals and monitoring of progress of the 2020-2024 CFSP through the subsequent APSRs.

The Division will foster parent leadership development. Parent Advisory Council members will advocate on behalf of parents and other caregivers to promote improvements to the child welfare system, particularly about prevention services. The partnership between the Parent

Advisory Council and the Division will model the value of partnerships between parents and staff.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

- The Prevention Section will provide information to the Parent Advisory Council on different evidence-based primary and secondary prevention programs.

Anticipated due date: September 30, 2021; Status: On schedule

- The Parent Advisory Council will recommend to the Prevention Section which services are most helpful to families in their communities.

Anticipated due date: September 30, 2022; Status: On schedule

- Parent Advisory Council members will participate in the proposal review teams for Prevention Section funding opportunities.

Anticipated due date: September 30, 2023; Status: Complete and Ongoing

- The Parent Advisory Council will develop projects and activities to work on with the Division.

Anticipated due date: September 30, 2020; Status: Ongoing

- Training on parent advocacy, engagement, and leadership will be provided to parents.

Anticipated due date: September 30, 2020; Status: Ongoing

- The Parent Advisory Council will have full membership (14 members).

Anticipated due date: September 30, 2024; Status: On schedule

Update

Key accomplishments include the formation of the Council; nine meetings of the Council to date; the Council developed a Mission, Vision and Goals; Council members have presented on a panel of a statewide conference, Council members have represented Georgia on national committees (Birth Parent National Network and the Birth and Foster Parent Partnership); Council members have served on Division leadership committees, Council members have participated in grant review processes, Council members have participated in child abuse prevention campaign development, and Council members have participated in the Agency's APSR meetings.

Challenges include recruiting parent representation on the Council from all fourteen regions, although we continue to recruit. Another challenge has been recruiting dads and kin caregivers. Currently we have all mothers, no fathers; one foster parent, two birth parents with prior involvement in the child welfare system and six birth parents with no prior involvement with the child welfare system but who have accessed prevention services in the community.

The Prevention and Community Support Section continues to recruit parents to achieve full membership in the Parent Advisory Council. We specifically mention that we are seeking fathers and kin caregivers when we recruit for the Council in meetings with and presentations for our DFCS colleagues, community-based organizations and statewide partners. The Section specifically makes recruitment efforts to the Department of Human Services' Kinship Care Work Group, the Division's Kinship Navigators, and the Department of Human Services' Fatherhood Initiative. The Section will continue to seek out opportunities to identify fathers and kin caregivers through our partnerships with community-based organizations in our prevention network.

Benchmarks

BENCHMARKS

- Beginning in FFY 2020, and each year thereafter, the Parent Advisory Council will receive relevant trainings on parent advocacy, engagement, and leadership
- By the end of FFY 2020, the Parent Advisory Council will choose projects and activities to work on with the Division.
- By the end of FFY 2021 the Prevention Section will provide information to the Parent Advisory Council on different evidence-based primary and secondary prevention programs.
- By then end of FFY 2022 the Parent Advisory Council will begin recommending services that are most helpful to families in their communities to the Prevention Section.
- By the end of FFY 2022, the Prevention Section will develop a statement of need for a new evidence- based primary or secondary prevention service as recommended by the Parent Advisory Council.
- By the end on FFY 2023, there will be at least one Parent Advisory Council member on the review team for primary and secondary prevention services proposals.

- By the end of FFY 2024, the Parent Advisory Council will have full membership comprised of 14 members.

The measure of progress will be:

- 75% of Parent Advisory Council members will attend all trainings and meetings by FFY 2024.

The state will strive to meet the following targets:

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

The state met both FFY 2020 benchmarks, ensuring that the Parent Advisory Council received relevant trainings and selected projects to pursue. Ninety-six percent of the council members attended all trainings and meetings during the APSR report period, and additionally participated in the State's APSR Joint Collaboration virtual meetings in April 2020.

The GA PAC received two trainings during their two in-person meetings in 2019.

Also, through their goals, they identified the projects in which they wanted to focus on this fiscal year. We anticipate meeting all identified yearly benchmarks for the Parent Advisory Council.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

The Prevention Section received technical assistance from the Alliance of Children's Trust Funds with the Parent Advisory Council. The Alliance assisted with the formation of the Council and the ongoing training and development of the Council. They provide consultation on meeting agendas and activities.

IMPLEMENTATION SUPPORTS

The main implementation support is the technical assistance provided by the National Alliance of Children's Trust Funds. The Prevention Section also has a dedicated staff member who serves as the liaison for the GA PAC. The parents know they can reach out to that staff member with any questions, concerns or when they need assistance or information. We would not have been successful with creating and maintaining the GA PAC without these two implementation supports.

FEEDBACK LOOPS

To date, the Prevention Section has obtained feedback through evaluations developed by the Alliance. 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 present the data from the evaluations. Additionally, the Prevention Section plans to have one meeting session a year dedicated to receiving feedback from the GA PAC on how they think things are going, successes, challenges and areas needing improvement.

COLLABORATION

The key partner in the formation of the GA PAC has been the Alliance. They assisted the Prevention Section with the creation of the GA PAC and continues to stay involved to assist us in providing relevant training to the GA PAC and to provide feedback and guidance.

OBJECTIVE II Target 0-5 early childhood education opportunity

Research in the neurosciences has established that approximately 80% of brain development takes place by the time a child is five years old, with the first three years seeing the maximum growth. Care and education in these early years give children a head start on skill development, school readiness, and future educational success. Children in this age group are particularly vulnerable to the negative effects of foster care placement. Due to the increasing foster care population of children in this age group in Georgia and the vast evolution of the early childhood landscape, it is essential to have a structure in place within the Division that supports the early learning and development of these children. Ensuring children in care ages 0-5 have access to early childhood education opportunities will expand and strengthen the range of existing services.

- Increase the number of children (ages 0 -5) who are enrolled in: Early Head Start, Head Start, Pre-K or any other quality rated childcare funding program.
- Enhance the knowledge of case managers and their ability to make proper decisions regarding the best available early childhood setting.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

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

Ongoing/Due Date: September 2020, December 2020, March 2021, June 2021

Update

Early Childhood Collaboration Unit (ECCU) exceeded the training goal by offering training to internal staff and external partners more than 3 times per quarter.

The participation rate was not tracked for the previously conducted trainings. The rate of participation will be assessed at all trainings in future reporting periods. The next Early Childhood Collaboration Unit training is scheduled for September 15, 2020. The rate of participation will be calculated and reported.

2. Create and disseminate an Early Childhood Toolkit to case managers and other appropriate DFCS staff who support the needs of children in foster care, ages 0 – 5.
Behind/New Due Date: September 2020

~~The Early Childhood Toolkit is set for distribution in June 2020 in accordance with the initial timeline.~~ The Early Childhood Toolkit is a resource guide for case managers and caregivers to help support the early learning and development of children in foster care under the age of five. The information in the document is designed to increase the knowledge of users related to early brain development, early intervention services, child care, education, and early childhood best practices. The toolkit will assist case managers in identifying the most appropriate early education setting and provide guidance on various internal and external referral protocols. Access to county specific early childhood data and resources via the toolkit will aide case managers in the case planning process ensure the needs of young children and their families are met.

3. An Early Childhood collaboration workgroup will convene once per quarter. Invited participants will include:
 - DFCS Staff (state office and field)
 - State Agency Partners
 - Non-profit Organizations
 - Foster Parents
 - Other community partners such as GEERS, Voices for Children, DECAL, and Bright from the Start may be invited at varying junctures to participate as well.Ongoing/Due Date: September 2020, December 2020, March 2021, June 2021

Update: An internal workgroup inclusive of section staff, unit staff, social services supervisor, social service case manager, and external partners convened once during the reporting period to inform program development. A more expansive workgroup to include the identified participants in the action steps will meet during the next reporting period.

Benchmarks

The State reported that it would seek to achieve the following benchmarks:
Early childhood education trainings will be conducted in every region at least three times by June 2023. Early childhood toolkits will be completed and disseminated by June 2020. Increase the percent of children from ages 0 – 5 who are in an early childhood education setting from 64% to 75% by 2024, as documented in GA SHINES.

Settings Include:

- Early Head Start
- Head Start
- Pre-K
- Childcare
- Other childcare settings

Well-Being Outcome 2: Children receive appropriate services to meet their educational needs; going from 46% to 60% by March 2024:

49% - March 2020

52% - March 2021

55% - March 2022

58% - March 2023

60% - March 2024

The state met all of its benchmarks for the reporting period. ECCU exceeded the training goal by offering training to internal staff and external partners more than three times per quarter. The Early Childhood Toolkit is in the final stages of development and set for distribution in June 2020 in accordance with the initial timeline.

The State hoped to increase the percent of children 0 to 5 who are in an early childhood education setting to 75% by 2024. Moving from 64% to 82%, Georgia exceeded this target by 7 percentage points within the first year of the CFSP cycle.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

- ECCU jointly with the CAPS leadership, conducted webinars and an onsite training to field staff. The webinars/trainings were held statewide, and staff were briefed on CAPS policies and procedures.
- ECCU presented to the GA Head Start Executive Board on strengthening DFCS/Head Start collaboration.
- In conjunction with EPAC, ECCU provided training to DFCS staff at Education Academies on early brain development and early education services.
- Training and technical assistance was provided to foster and adoptive parents during the annual AFPAG conference and during monthly foster parent meetings.
- Training provided to external partners such as DECAL, Head Start/Early Head Start, and Quality Rated childcare providers included trauma informed care and best practices for caring for young children in foster care.

IMPLEMENTATION SUPPORTS

ECCU utilized technological supports heavily during the reporting period. Several trainings took place virtually during the COVID-19 pandemic. An increase in participation was noted. Future training offerings may be virtual as well. Additionally, updates to SHINES has supported our efforts in ensuring CAPS referrals are sent to DECAL accurately.

FEEDBACK LOOPS

ECCU ensured that internal and external partners and stakeholders were engaged and involved to offer updates and share data quarterly. During these information exchanges,

feedback was received from internal and external partners and stakeholders. On-going progress was managed through virtual documents, partnership reports, conference calls, monthly program meetings and monthly management meetings. These meetings were conducted with DFCS leadership and field staff, DECAL, and Head Start partners. Before implementing new work that affected our internal and external partners, they were engaged to get their input and feedback on how the changes may affect them.

An Early Childhood survey is in development to solicit feedback from DFCS staff, external partners and foster parents to determine the effectiveness of services offered by the Division for children under the age of five.

COLLABORATION

Stakeholders and partners include the Department of Early Care and Learning, CAPS, the Georgia Head Start Collaboration Office, the GA Head Start Association, and the Adoptive and Foster Parent Association of Georgia. Engagement with these partners promote positive permanency outcomes through stabilizing childcare services for children in foster care. Stabilization of these services help to avoid placement disruptions.

The Early Childhood Collaboration Unit director meets with these partners several times a month to evaluate the effectiveness of services provided and make any necessary changes to practice and guidance. The number of children eligible for services as well as the number of children enrolled in various early childhood education programs are exchanged between agencies. Stakeholders and partners have provided valuable insight related to service provisions in various meetings and workgroups. This information is used to manage unit priorities and devise strategies to better support early childhood program goals.

OBJECTIVE III. Train and market available youth services to supervisors and front-line staff (PIP>CFSP) Goal II, Strategy IV, Key Activity 1

The original wording of the item (Goal II, Strategy IV, Key Activity 1) that was rolled over from the PIP into the APSR is:

The Wellness Programming, Assessment, and Consultation (WPAC) team will implement four quarterly, web-based academies annually that will be designed to support and enhance case manager, supervisor, and other direct service child welfare staff's understanding of appropriate and timely health screening.

Note: The state will be sponsoring a wellness series in lieu of WPAC academies, therefore this PIP item has been adjusted accordingly.

This PIP item has been adjusted so that the state will now sponsor a wellness series in lieu of WPAC academies. The Well-Being Services Section will partner with the following organizations to implement trainings across the state:

Multi-Agency Alliance for Children

- ILP Life Skills Workshops (for ILP youth and young adults)
- Financial Literacy Workshops (for ILP youth and young adults)

GUIDE Inc.

- Youth Development Workshop (for youth service providers)
- Youth STEAM Exhibition (for youth)

Amerigroup

- Health Oversight Training (for DFCS case managers and supervisors)

Training will be implemented for DFCS Staff to ensure quality services are provided to youth and community populations to be served. The aim is to improve the knowledge of case managers and supervisors when making best interest placement and education decisions for youth.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

Evaluations will be incorporated into trainings and workshops. Well-being has a dedicated data and systems manager who analyzes the data and uses it to inform section leadership on the effectiveness of the trainings and the impact of those trainings.

Update: Update

The Well-Being Services Section - WPAC Program has incorporated more training and increased its training capacity as the need for highly trained direct service staff becomes critically important as we meet the health needs of youth in care. Over the last several years the mental, physical and behavioral needs of our youth in care have become a greater priority due to the immediate impact on placement stability, long-term health outcomes and long-term life outcomes. WPAC partners with the Georgia Department of Community Health, DHS Medical Director Priyanka Patel and Amerigroup 360 to provide training opportunities to case managers and other stakeholders who ensure the health and behavioral health care of youth in foster care.

In partnership with DHS Medical Director Dr. Priyanka Patel, the Wellness Programming, Assessment and Consultation (WPAC) Unit will be hosting virtual training opportunities to DFCS case managers, supervisors and other agency staff to provide information and guidance on ensuring quality medical and behavioral supports to children and youth in care. Below are the available training dates and topics.

Additionally, Amerigroup 360 will be hosting a quarterly virtual town hall series. The first town hall was held on Tuesday, April 28, 2020 at 10:00 AM. Future town halls have been planned with the next one being in July 2020.

Psychotropic Medications/Medication Consent
April 22, 2020

Amerigroup 360 Virtual Town Hall
April 28, 2020
Registration for Town Hall: [click here to register](#)

ADHD/Mood Disorders
June 24, 2020

Psychotropic Medication Monitoring Parameters
August 19, 2020

Childhood Trauma and How it Affects the Developing Brain
October 21, 2020

PRTF Requirements/Autism Diagnosis
December 9, 2020

Overall Support

The Well-Being Services Section will create a well-being toolkit for children, youth and young adults. This toolkit will be specifically for case managers and those who work within Georgia's child welfare system. The creation of the toolkit will begin in August 2019 and will be finalized for production by July 2020.

Update: This work is Behind Schedule.

We have not begun development of the Well-Being Toolkit. In May 2019 there was an internal workgroup created and convened to commence long-term planning and development of the toolkit. Due to organizational changes and re-prioritizing of Agency initiatives, the planning and development of the toolkit was put on hold. The tool-kit planning will begin in late Fall of 2020 (November).

The Well-Being Toolkit will serve as a quick information and resource guide that will be comprised of the important actions and milestones for each age range of young people served. For many of our Case Managers, there may be a delay in initiating certain types of services because service provision is often outlined within our Agency policy. The toolkit will highlight those key supports and services that must be provided to our youth (based on their needs) and will ensure that milestone activities and actions documented within Georgia SHINES are completed.

Medical Support

WPAC has finalized a Medicaid navigation guide for youth that are preparing to exit care or that are currently former foster youth. The Medicaid guide provides guidance to youth on how to maintain their Medicaid eligibility to prevent any lapse in coverage. A staff guide has been developed as well for DFCS staff to provide guidance on how to ensure youth maintain

their Medicaid eligibility. These guides will be distributed at various events to community partners, staff, youth, and service providers that work with this population.
Update: The Medicaid Navigation Guide has been completed. The guide was distributed to RevMax and DFCS staff and uploaded to the GA RYSE website for youth to have access. WPAC distributes the guide to youth during the transitional roundtables.

WPAC will implement quarterly web-based academies (series) annually that will be designed to support and enhance case manager, supervisor, and other direct service child welfare staff in understanding of appropriate and timely health screenings. (beginning November 2019).
Update: WPAC continues to collaborate with EPAC for quarterly face-to-face trainings with staff. This Unit also provides training in the counties and regions regarding the timeliness of initial assessments for youth in care. Additionally, WPAC facilitated a face-to-face summit in October 2019. It will coordinate a series of trainings with the medical director beginning April 2020 to address mental/behavioral health needs for youth in care.

Benchmarks

The state will partner with providers and stakeholders for joint training experiences.
Timetable for completion: Over the next two years programs will be working with current partners to enhance training experience by putting training modules on the Learning Management System (LMS). Facilitation of trainings on LMS will commence January 2020.

Benchmark measures for progress is increasing Well-Being Outcome 1 from 15% to:
18% by 2020
20% by 2021
22% by 2022
24% by 2023
25% by 2024

A virtual training plan has been developed that will ensure more virtual training opportunities to DFCS staff, providers and caregivers. In partnership with DHS Medical Director Dr. Priyanka Patel, the Wellness Programming, Assessment and Consultation (WPAC) Unit will be hosting virtual training opportunities to DFCS case managers, supervisors and other agency staff to provide information and guidance on ensuring quality medical and behavioral supports to children and youth in care. Below are the training dates and topics. The WPAC Unit will also be co-hosting quarterly virtual town halls in partnership with Amerigroup.

The state sought to increase in Well-Being Outcome 3 - children receive adequate services to meet their physical and mental health needs - from 15% in 2019 to 18% by March 2020. Not only did the state surpass this goal, it actually achieved the percent that the State was striving to reach by 2024 (25%). This puts the State back to the percentage it was during the state's Child and Family Services Review in 2015.

The percentages for items 17 and 18 are still a little less than where they were in 2015. Item 17 - physical health of the child was at 49% in 2015 and is now at 48%. Item 18 - mental/behavioral health of the child - was at 29% in 2015 and now stands at 20%. Although the percentages are still a little lower than 2015, the trainings may be one of the reasons the State has been experiencing a slightly upward trajectory over recent months.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

Case consultation and medication management staffing for youth on 4 or more psychotropic medications with DHS medical director - case consultation allow staff (CM, SSS, SSA, county and regional directors, etc.) to request various types of consultation with Dr. Patel which include review of psychotropic medications, peer to peer reviews with treating physician, consultation regarding medical procedures, mental health treatment planning, and adding new psychotropic medications to a child's regimen. The consultation was successfully implemented; however, this resource is limited due to Dr. Patel only being available three days a week. Additionally, staff was under utilizing the consultation so the medication management staffings were implemented and these are initiated and coordinated by the WPAC Unit.

IMPLEMENTATION SUPPORTS

No supports needed at this time

The physician consultations and the medication management staffings have been fully implemented.

FEEDBACK LOOPS

WPAC will develop a survey to send out quarterly to obtain feedback from DFCS staff that participate in the physician consultations and medication management. Presently WPAC facilitate the Quarterly Executive Healthcare Leadership Review Committee Meeting. The leadership from Department Community Health, Amerigroup, Care Coordination Team and DFCS participate in this meeting. We discuss the physician consultations and medication management staffings in this meeting. Feedback was provided by leadership. Based on the feedback from the discussion we implemented the medication management staffing (initially we only had physician consultations) Dr. Patel is providing consults on cases that are not being requested via physician consultation. Additionally, the DFCS Care Coordinators (CCTU) along with Amerigroup Care Coordinators are included in the medication management staffing to begin assisting the case manager on implementation of services for youth that have been identified as high need during the staffing (This was implemented as a result of the feedback provided during the quarterly meeting).

COLLABORATION

WPAC works in collaboration with Department of Community Health (DCH), Amerigroup, Department of Public Health (DPH) and Children 1st. WPAC collaboration with DCH/Amerigroup has been proven to be a great partnership. Some examples of the ongoing collaboration includes the Fulton County Court Clinic that is mainly utilized by Fulton County DFCS to provide medical/dental/trauma assessments to youth in the custody of Fulton County, (however the clinic is also open to all youth enrolled with Amerigroup) and the

Mobile Assessment Unit (MAU) that is provided every other week to Dekalb DFCS so that medical/dental/trauma assessments can be arranged for youth in the custody of Dekalb DFCS. These two ongoing efforts have helped (Region 14) to decrease the number of overdue initial and ongoing medical/dental/trauma assessments. This is a continued collaboration from the previous year. This collaboration has proven to be impactful due to the consistency of this collaboration. In April 2018 Region 14 had a total 420 overdue health checks and in April 2019, Region 14 had a total of 213 overdue health checks.

WPAC continues to collaborate with DPH/Children to identify barriers in the field around referrals submissions and reporting results. WPAC meets with DPH on a quarterly basis to address these barriers. DFCS and DPH are currently reviewing the current MOU to see if provision can be made that will help elevate some of the barriers staff are having with Children's 1st referrals.

WPAC collaborated with DCH and RevMax to develop a Medicaid Navigation Guide. That will be shared with staff in Social Services, Office of Financial Independence, and youth exiting and/or have exited foster care.

These collaborations are impactful in ensuring that that each child in care received adequate medical and mental health services. The constant communication helps with identifying barriers, provide support, and develop future collaborative work.

2. WPAC and DCH/Amerigroup meets monthly face to face and bi-weekly via conference call to discuss ongoing barriers around services provided to each region, communication between Amerigroup and DFCS, coordination of services, areas of improvement, and positive outcomes because of the collaboration. WPAC meets quarterly face to face with DPH to share data, discuss barriers, and opportunities to improve practice. WPAC coordinates trainings with Amerigroup and DPH in various regions as needed.

3. Amerigroup provides data after each MAU event and Fulton County court clinic and/or any scheduled clinic day. The data retrieved provides information on all youth that were scheduled for appointments, type appointments scheduled, how many youths attended the scheduled appointments, and how many youth's appointments from cancelled. Fulton and Dekalb have ongoing events unlike other regions. This information is provided back to each county to address any barriers around scheduling, services, and trends in show rates to the appointments. Each month WPAC provides a trends report note program strengths, areas of improvement, additional resources, strategies on how WPAC can provide support, and charts that show the regions overdue health check status totals at the end of each month in comparison to the previous two months. This report is provided to each region.

Amerigroup also provides data regarding all of the youth in care that are on psychotropic medications which is used in the psychotropic medications report that is provided to staff.

DPH provides data on the number of referrals received at Children 1st within the quarter (separated by county, age, sex), additional referrals that were made to other resources, percentage of referrals that were declined and why, and percentage of reason for deactivations of services. This data provides WPAC and DPH an idea of which areas have higher number of with children under the age of 5, which resources are being referred out, types of services being provided, and if referrals are being submitted.

4. WPAC and DCH/Amerigroup joint efforts in facilitating MAU, Fulton County Court Clinic, and other clinical opportunities to provide medical/dental/and trauma assessments with youth in care, has highlighted the need for better planning in each region around scheduling, tracking, monitoring, and follow up when addressing the medical and mental health needs of youth in care. Identified barriers to addressing the overdue mental/dental/trauma assessments are discussed throughout the multiple meetings WPAC and DCH/Amerigroup engage in throughout the month. The barriers are supported by the data collected at these events and in GA Shines. When these barriers in practice are identified DCH/Amerigroup offer support by facilitating the clinic days, WPAC assist the regions in getting organized for these clinic days, Amerigroup and WPAC provider training and over the shoulder support to these regions. Unfortunately, high turnover in staff contribute to the increase in overdue mental/dental/trauma assessments as well as other competing priorities in the counties/regions. WPAC and Amerigroup have limited number of staff available to provide support, so the ability to provide more one on one support to a region that may be lacking staff is not feasible. However, the data that DCH/Amerigroup collects (as well as SHINES data) are very helpful in identifying trends and monitoring progress toward ensuring youth receive timely mental/dental/trauma assessments. There have been some improvements with these efforts. For example, in April 2018, Region 14 had a total 420 overdue health checks and in April 2019, it had a total of 213.

Additionally, the data collected by DPH regarding referrals made to DPH/Children 1st assisted in overall monitoring of Children 1st referrals for children under the age of 5 in care. This type of feedback provides guidance around training and is needed to help improve practice around timely referrals. One of the ongoing barriers to timely referrals throughout the state are delayed court orders that state the child is in custody of DFCS. DPH and WPAC work jointly to address timely court orders and are planning to engage juvenile courts in the future to emphasize the importance of timely court orders.

OBJECTIVE IV. Leverage regional stakeholder meetings to address service array, and monitor to ensure implemented services are effective (PIP>CFSP) Goal II, Strategy I, Key Activity 1

C3 coordinators will host quarterly meetings in each region with pertinent stakeholders to address service needs and the availability of services. These meetings will be used, in part, to have a two-way dialogue about the efficacy of services provided in the regions. When the state completed CFSR Round 3 in 2015, Item 12 - Needs and services of child, parents, and foster parents - was rated at 25% strength. Well-Being Outcome 3 - Children receive adequate services to meet their physical and mental health needs - was rated as 25% substantially achieved. Both items 29 (Array of Services) and 30 (Individualizing Services) were also identified as areas needing improvement.

In response, the state included goals and interventions in its PIP to help address deficiencies. In the statewide assessment, Georgia provided information indicating a need for basic services (food, shelter, clothing, income), service support (transportation, childcare, education), mental/emotional/behavioral health services, and substance abuse services. During interviews, stakeholders confirmed gaps in services across the state, including supervised visitation, post-permanency services, psychological evaluations, sexual trauma services, services for Latino families (long waitlists), specialized services for special needs children, autism services, and LGBTQ services. Stakeholders also expressed concerns about long waiting lists and the quality of some of the services.

Information provided in the statewide assessment and interviews with stakeholders described significant concerns about the inability to individualize services based on the quality of Comprehensive Child and Family Assessments, insurance coverage issues with Amerigroup, lack of translation services, the inability to tailor services to meet the cultural needs of the diverse population, and the inconsistent engagement of community providers across the state.

PIP Goal II, Strategy 1, Key Activity 1 required states to establish quarterly meetings in each region with pertinent stakeholders to address service needs and the availability of services. Using the principles of the FranklinCovey Four Disciplines of Execution (4DX), C3 coordinators ensured the regional meetings were focused on matters that help to address the availability, quality and accessibility of services to children, parents/caregivers and/or foster parents. In adherence to those principles, the regions developed measures to track regional progress.

Regions will continue to host stakeholder meetings and use 4DX and CQI processes to help determine root causes for service gaps, establish strategies and measures to make improvements, and enable the state to better meet the assessment and individualized needs of children, youth and families through an enhanced and broadened array of services.

Over the course of the period that C3 coordinators conducted stakeholder meetings focused on service array, the state's Item 12 rating moved from 13% up to 33%. The rating never fell back to 13%, nor dropped below 18%. See the table in the Assessment of Performance section of the CFSP report (Systemic Factor: Service Array) for more details

regarding the impact the meetings had on the regions in terms of improving CFSR outcomes, enhancing partnerships and collaboratives, and improving practice.

FFY 2019 results included an increase in quality of referrals and the quality and frequency of collaterals; recruitment of churches and faith-based entities to care communities and partners to the Care Portal (increasing services to foster parents); development of new protocols for working with providers and speeding up the assessment process; creation of feedback loops; development of a desk reference guide; provision of mobile employment services to unemployed fathers and other improvements with regard to engaging fathers; improvement of the quality of staffings around service provision; reduction in overdue health logs; moving children who have a goal of reunification and a willing relative to permanency among other benefits.

Stakeholder meetings hosted during the report period resulted, in part, in an increase in CarePortal partners; enhanced quality of service referrals; quality of contacts with fathers; new regional stakeholder meetings focused on court barriers; strengthened relationships with Amerigroup, law enforcement, educators and substance abuse providers; improved provider notes (more behavior specific assessments and documentation); and an increase in youth engagement.

PIP > CFSP (original wording of PIP)

Key Activity 1

Establish quarterly meetings in each Region with Agency Staff (County and Regional), pertinent stakeholders and service providers, to address service needs and availability of services to include: identifying needed services, determining and implementing method to develop or access identified services, monitoring to ensure that implemented services are effective.

Action Steps (Key Activities) to Achieve the Objective

1.

Region	Standard Annual and Quarterly Service Array Meeting Dates (# of attendees)*	Additional Meetings (i.e. specialized target audience, topic specific, subcommittee, Roadshow, partner hosted collaborative, etc.)
1	5-3-19 (70) 9-25-19 (70) 11-8-19 (75)	6-4-19 Mobile Learning Lab 6-14-20 SNAP pre-registration 7-17-19 Student field trip: Governor's Mansion, State Capitol (30 youth) 7-26-19 – System of Care (21) 9-25-19 – System of Care 10-25-19 – System of Care

		1-16 -20 FFPSA 1-31-20 System of Care	
2	6-25-19 (70) 10-24-19 (65)	8/21-8/23/19 – Roadshow 9-27-19 - Prevention	
3	4-9-19 (20) 10-22-19 (28) 1-28-20 Also hosted a 6-meeting series May 2019	2-7-20 CSEC facility tour (Receiving Hope Center)(12) 2-11-20 – Peach Pass (24) Also hosted a roadshow, a system of care and a collaborative partner meeting	
4	6-27-19 7-27-19 9-24-19 (127) 3-31-20 (virtual meeting)		
5	5-14-19 9-23-19 3-4-20 (26)		
6	4-24-19 (12) 4-26-19 (9) 9-26-19 (17) 12-16-19 (5) 1-21-20 (33)	9-26-19 (9 participants) CPA focus	
7	1-14-19 1-19-20 (68) 3-3-20 (rescheduled to April due to the pandemic)	2-4-19 Road 2 Home (24)	
8	8-6-19 (42) 10-28-19 (23)	8-29-19 Faith based and non-profit	
9	6-25-19 (12) 10-7-19 (35) 1-24-20 (70)	10/7-10/9/19 Roadshow 4/24/19 – Promise 686 training 4/25/20 Promise686 advocate clinic 5/28/20 Promise686 informational session	
10	10-1-19 (90) 11-5-19 (24) 3-31-20 (rescheduled to April 28 due to pandemic)	4/30 – 5/1/19 Roadshow	
11	6-24-19 (40) 10-24-19 (35)	10-7-19 Referrals 9-30-19 Dept. of Labor	

	3-26-20 (rescheduled due to pandemic)	
12	9-26-19 (73) 1-28-20 (13) 1-29-20 (21) 1-12-20 (12)	5-22-19
13	9-26-19 (10) 10-9-19 (125) 3-25-20 (rescheduled due to pandemic)	6/24 – 6/26 Roadshow (165) 9-20-19 – SAAGS 8-27-19 – Service Providers 3-11-20 – Law Enforcement
14	4-25-19 (65) 1-28-20 (57)	6/14/19 – Reunification (40) 7/11/19 – Law Enforcement (28) 8/20/19 – Provider Fair (235)
<p>*If there isn't a number in parenthesis, the exact number of attendees was unable to be determined.</p>		
<p>Action Step 1</p> <p>Ongoing, a stakeholder meeting will be hosted in each region, each quarter. The meeting agenda will include a focus on the effectiveness of one or more of the following services that:</p> <ul style="list-style-type: none"> a. Assess the strengths and needs of children and families and determine other service needs b. Address the needs of families in addition to individual children in order to create a safe home environment c. Enable children to remain safely with their parents when reasonable; .Help children in foster and adoptive placements achieve permanency d. Are individualized to meet the unique needs of children and families served by the agency <p>Timeline: At least one meeting will be hosted per region, per quarter, ongoing, up through March 31, 2024</p>		
<p>Update Status – On track and ongoing</p>		

According to monthly C3 coordinator reports, the following stakeholder meetings were held in the regions during the report period. This is not an all-inclusive list of all types of meetings. Instead, this list only captures those that were service array focused and/or hosted or facilitated by a C3 coordinator. There were 45 standard meetings hosted (i.e. included the required agenda items, reviewed leads/lags and focused primarily on service array). Three meetings are excluded from the total because they had to be rescheduled from March to April 2020, due to the pandemic. Those meetings will be included in the data in the 2022 APSR. Even with the onset of COVID-19, the State hosted 78 service array-focused meetings. Quarterly meetings have continued to occur, using a virtual format, and the second wave of annual meetings will be held virtually September and October 2020.

Of the standard meetings, there were well over 1,400 attendees. The headcount of the supplemental meetings is less clear, but there were at least 350 attendees to those. Some people attended multiple meetings so there is some duplication in the number, but the quantity far exceeds last year's total of over 800. Although the State did not achieve the 55-meeting benchmark with regard to the standard annual and quarterly meetings, the intention for hosting the meetings was satisfactorily met. The secondary meetings were often a deeper dive for the regions where they further assessed their lead and lag measures or dealt with specific concerns that arose out of the main stakeholder meeting. See the Assessment of Performance section of this report to get more details regarding the issues discussed and the results of the dialogues.

Action Step 2

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

Timeline: Regions will have active lead and lag measures established by March 31, 2021. They will host consistent and productive quarterly meetings focused on addressing and achieving these established measures.

Update

Status – In progress; on schedule

Approximately 75 percent of the regions currently have leads and lags (see Service Array segment of the Assessment of Progress section for a description of those measures). However, because there are several new C3 coordinators and some regions have old and/or already achieved measures, the CFSP manager is providing one-on-one trainings with the coordinators to assist them in adopting new measures or enhancing the ones they have. The new set of established measures will be reported in the 2022 APSR report.

Action Step 3

Quarterly, C3 coordinators will submit reports regarding the outcomes of the meetings and service improvement objectives.

Timeline: March 31, 2024

C3 Coordinators will submit the results of their case record reviews quarterly up through March 31, 2024 or until the target measure threshold has been met: 65% of reviewed cases demonstrate ongoing communication between the service provider and case manager.

Update

Status – On track

Every region except for two (Regions 3 and 8) were able to complete all required case record reviews for the full duration of the report year. The C3 coordinator position was vacant for regions 3 and 8. The position for Region 3 was filled May 2020.

Forty-nine percent of case records were in compliance.

Benchmarks

BENCHMARKS

The state hosted 89 stakeholder meetings in 15 months (January 2018 – March 2019), 71 of them were held in 2018. The quantity of meetings may decrease over the next five years due to a decrease in funding, therefore, the state intends to host at least one per region, per quarter; 55 or more a year, statewide.

- FFY 2019 – 55+
- FFY 2020 – ~~55+~~ 50+
- FFY 2021 – 55+
- FFY 2022 – 55+
- FFY 2023 – 55+

Measure 1 - The overarching measure of progress will be improvement in CFSR Outcome 12.

Each region will work to improve their percentage rating in Item 12. The baseline will be determined by each region's rating from the quality assurance case review findings in March of each year.

The state will seek to improve the state overall rating on CFSR Outcome WB 12: Needs and services of child, parents, and foster parents from 18% to 40% by March 2024.

Measure 2 – The state will review ratings based on stakeholder responses to surveys administered by the state's quality assurance review team. The survey questions are rated as excellent, good, fair or poor (based on a "rolling" six months). The state will seek to improve the survey response rating on the following questions:

a. Agency effectiveness in providing appropriate services to meet the needs of families and children which they serve through both CPS and Permanency.

The goal is to move from 84% of respondents rating the agency as good or excellent to 90% by March 2024

b. Services provided by DFCS to ensure children are safe and protected from abuse and neglect

The goal is to move from 85% of respondents rating the agency as good or excellent to 90% by March 2024

Measure 3 – Random sample case record reviews will be done each quarter. Metro regions will sample 15 applicable records and non-metro regions will sample 10. Reviewers will seek to determine if there has been ongoing communication between the Division and the service provider for the duration of the services (throughout a three-month review period). Baseline: 50% of cases read demonstrated ongoing communication between the Division and the service provider (68 out of 136 cases read)

March 2024 Target: 65%

The data source for measures 1 and 2 will be the Georgia Quality Assurance CFSR Case Record Reviews. The data source for measure 3 will be Georgia SHINES case documentation.

Benchmark: 55 or more service array stakeholder meetings per year

There were 45 service array stakeholder meetings that met the CFSP definition (hosted by a C3 coordinator and addresses service array, lead and lag measures and CFSR outcomes), but there were 78 service array-focused meetings in total.

Measure 1. CFSR Outcome Item 12

Baseline: 18%

2020 Target: 23%

2020 Actual: 15%

Measure 2. Survey Responses

The following results are ratings based on stakeholder responses to surveys administered by the state's quality assurance review team.

Agency effectiveness in providing appropriate services to meet the needs of families and children which they serve through both CPS and Permanency:

Baseline: 84%

2019 Target: 86%

2019 Actual: 84%

Services provided by DFCS to ensure children are safe and protected from abuse and neglect

Baseline: 91%

2020 Target: 92%

2020 Actual: 87%

Measure 3. Case Record Reviews

Percent of cases that demonstrate ongoing communication between the agency and the service provider

Baseline: 50%

2020 Target: 53%

2020 Actual: 49%

Regional Breakdown

Region	Percent	Region	Percent	Region	Percent
R1	50%	R6	40%	R11	30%
R2	30%	R7	40%	R12	100%
R3*	N/A	R8	N/A*	R13	80%
R4	30%	R9	80%	R14	17%
R5	70%	R10	20%	AVG	49%

*The C3 coordinator position was vacant for regions 3 and 8. The Region 3 position was filled May 2020.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

C3 coordinators received technical assistance from the CFSP manager via virtual meetings on MS Teamworks every other Wednesday. The CFSP manager uses these meetings to keep coordinators abreast of new legislation, federal instructions and guidance and information memoranda.

Coordinators were provided a two-day training at the Back to the Future-themed C3 Retreat. This year's training included trainings on case record reviews by the QA manager, navigating the state's CCWIS system by the SHINES director, and team building exercises. Youth leaders from the MAAC made a presentation on available youth services and led a dialogue around ways the State can better incorporate the youth voice. The meeting also included a presentation from the CFSP manager regarding the new national vision on prevention.

C3 Coordinator of the Year awards were presented to two veterans (Regions 2 and 14) and a rookie (Region 1).

IMPLEMENTATION SUPPORTS

In order for C3 coordinators to succeed at their CFSP objective, they need the support of their regional leadership and executive program directors. They host their meetings at varying venues around the community including EMC offices, DFCS offices, law enforcement agencies, community and recreation centers, churches, labor departments, courthouses, Community of Hope sites, public safety building and other venues.

In addition to the need for site locations, the coordinators have to provide supplies for the meetings including meals, print material, folders, name tags, posters, pens, decorations, and sound and visual equipment.

FEEDBACK LOOPS

In addition to the bi-weekly meetings, the CFSP manager provides a report template to the C3 coordinators monthly to request needed feedback. Once the reports are submitted, they are distributed to all of the program area leads. Program leads are encouraged to use this tool for collection of any additional information of interest. These reports include questions related to all of the CFSP goals and objectives such as court barriers, case consultations, education academies, safety assessment, SBC, etc.

C3s also work closely with their internal stakeholders in the regions. They send out information to staff to keep them abreast of updates via email alerts, presentations at meetings and summits, and regional newsletters.

COLLABORATION

Collaboration is extensive and ongoing. C3 coordinator partnership with stakeholders is described at length above and in the Assessment of Performance section of this APSR. In addition to the meetings hosted by C3s, they often attend or co-facilitate meetings by agency partners.

G. GOAL C: An engaged and diverse community that serves to promote partnership and holistically support families

a. STRATEGIC FOCUS: Community partnerships, family engagement, inclusion and equity

GOAL C: An engaged and diverse community that serves to promote partnership and holistically support families

STRATEGIC FOCUS: Community partnerships, family engagement, inclusion and equity

Objectives:

I. Leverage and invest in communities to provide adequate and effective service capacity statewide

II. Strengthen the Division's partnership with the court system

MEASURES OF PROGRESS

(As of March 31,2020)

Number of State of Hope Sites¹
Objective I

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
54	64	130	84		114		154		204	
Number of Civic and Philanthropic Partnerships ² Objective I										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
5	10	6	15		20		25		30	
Percent of the total population of Georgia residents included in the penetration rate for MDCANI training jurisdictions ³ Objective II										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
Part 1 50%	55%	58%	60%		65%		70%		75%	
Part 2 15%	20%	21%	25%		35%		45%		55%	
Percent of the 159 counties with regular activity of the Court Process Reporting System Objective II ⁴										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
50%	55%	98%	60%		65%		70%		75%	
Number of cold case fellows recruited Objective II ⁵										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
8	10		12		14		16		18	
Permanency Outcome 1: Children have permanency and stability in their living situations Objective II ⁶										

BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
16%	17%	13%	18%		19%		20%		20%	
<p>Permanency Outcome 2: The continuity of family relationships and connections is preserved for children. Objective II⁷</p>										
BASE -LINE 2019	Target 2020	Actual 2020	Target 2021	Actual 2021	Target 2022	Actual 2022	Target 2023	Actual 2023	Target 2024	Actual 2024
43%	44%	41%	46%		48%		49%		50%	
<p>The state anticipates the objectives identified below will have a positive impact on the following systemic areas as well:</p> <p>Systemic Factor Item 29: Service Array (CFSR Round 3 Area Needing Improvement)</p> <p>Systemic Factor Item 30: Resource Development (CFSR Round 3 Area Needing Improvement)</p> <p>Systemic Factor Item 31: Ongoing Consultation (CFSR Round 3 rated as a Strength)</p> <p>Systemic Factor Item 32: Coordination of Services (CFSR Round 3 rated as a Strength)</p>										
<p>1. Data Source Office of Strategy, Innovation and Engagement</p> <p>2. Data Source Office of Strategy, Innovation and Engagement</p> <p>3. Data Source: MDCANI training</p> <p>4. and 5. Data Source: Office of General Counsel</p> <p>6. and 7. Data Source: Georgia Quality Assurance CFSR All Zones/All Regions October 2019 – March 2020 Rolling Trend Report</p>										
<p>OBJECTIVE I. Leverage and invest in communities to provide adequate and effective service capacity statewide</p>										
<p>According to Georgia’s Round 3 CFSR findings, Item 12 (Needs and services of child, parents, and foster parents) was found to be an area needing improvement.</p> <p>Partnerships with philanthropic, civic and faith-based organizations will support the expansion and strengthening of the range of existing services, the development of new service types, and will reach additional children in need of services. The rationale for this activity is that the child welfare system needs a variety of partners in order to meet the complex needs of families and communities. This requires both traditional and non-traditional partners across multiple sectors.</p>										

Philanthropic, civic and faith-based partnerships provide opportunities for expanded connections, new collaborations and innovative initiatives. Engagement with these sectors also allow for the child welfare system to have expanded reach and influence. Partnerships with philanthropic and civic organizations can also support innovative solutions that may not be covered through the traditional sources of state and federal funding. Partnerships with faith-based organizations allow for local community actors to have a greater awareness of the needs of vulnerable children and families within their communities, as well as entry points to act in meeting identified needs. Faith-based partners also provide opportunities for broader recruitment of foster and adoptive parents and increased efforts to retain them. Additionally, engagement with a diverse array of faith-based organizations may also contribute to an enhanced ability of the child welfare system to have more culturally responsive service delivery.

The DFCS regional roadshows (also known as *Destination Hope events*) allow for consistent and ongoing engagement with multiple stakeholder groups in each region of the state. These events focus on locally led engagement of traditional and new stakeholders -- as well as community groups -- for the purposes of identifying and addressing specific issues impacting the safety and permanency of children, and the overall well-being of families.

Prior to the roadshow events taking place, the Office of Strategy, Innovation and Engagement (OSIE) team works with the regional and county DFCS leadership to assess the current status of their community relationships to identify gaps, areas of strength, as well as where there are needs for improvements. Results of these assessments are used to develop and inform the meetings that take place during the roadshow within a specific region. Often the information from these assessments is gleaned from feedback provided to the C3 Coordinators at local stakeholder meetings.

During roadshow events Division staff and leadership receive a good amount of feedback from the various stakeholder groups that attend each meeting. The feedback received is compiled, reviewed and then individuals are assigned to complete specific follow-up activities. The goal is to follow up on each action item presented by a stakeholder. Any additional or general feedback received is compiled and shared locally after the roadshow.

In addition to the feedback received during the roadshow events, the OSIE team also solicits feedback on the process for planning and implementing these events. The goal is to continually evolve the roadshows each round, (one complete round throughout the state takes a few fiscal years), so that regional and county DFCS staff, stakeholders and local communities attend the meetings because they add value to what is already happening on the local level and are not duplicative or have little impact. Regular feedback on the process is received from state and local DFCS staff, community stakeholders and other relevant groups.

While this action is still in development, the plan is to eventually evaluate the outcomes that result from the roadshow events -- particularly the key connections made and partnerships that are developed in support of addressing community needs, barriers and gaps across the state.

The State of Hope (SOH) is an initiative -- launched in May 2017 -- which seeks to activate nonprofits, philanthropies, government, businesses and other community members 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. Since the official launch, there has

been a yearly application and selection process which allows for new SOH sites to become a part of the Hope Ecosystem. The Hope Ecosystem is a network for all SOH sites to connect with each other, obtain technical assistance, build capacity and collaborate to create family-centered support systems. Each year, there are specific SOH sites which are provided funding to support project implementation. Additional activities include Division engagement with an Advisory Council made up of over 30 partners across multiple agencies and disciplines, as well as engagement with a core implementation team (also made up of partner agencies) that guides the ongoing design and implementation of the initiative.

The following are outcomes that are expected as a result of consistently building partnerships and engaging diverse stakeholder groups:

- Increased multidisciplinary, cross-sector and interagency relationships at the state and local level
- Increased and improved engagement with local communities
- Increased involvement of national, state and local actors within the child welfare system
- Increased number and quality of local services and supports
- Increased awareness among community members of the needs of vulnerable children and families
- Increased number of foster and adoptive resources and supports
- Expanded foster care recruitment and retention efforts
- An improved and sustainable process for routine engagement with system partners, community stakeholders, families (kin and foster) and youth in foster care
- Increased and improved engagement with staff
- An improved perception of the child welfare system
- Increased engagement with culturally specific communities **(Newly added)**

Action Steps (Key Activities) to Achieve the Objective

Action Step

1. Establish State of Hope Sites

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

Update

The primary key accomplishment for this fiscal year is that the number of State of Hope (SOH) project sites increased by approximately 60% from the first application round in 2018 - which yielded 53 sites - to the second round in 2019 which resulted in 130 sites across the state. In

March 2020, the third application round successfully launched however, due to the COVID-19 pandemic, the application deadline was extended to May 1st. There is an acknowledgement that there may be a reduction in applicants (due to the pandemic) which may yield a lower number of SOH sites that are added to the Ecosystem in the coming months. This has been the main challenge for the State of Hope program as the team is exploring how the program will need to be adjusted moving forward.

In October 2019, the first statewide convening of the full Ecosystem was held. The day-long event included experiential learning sessions and networking opportunities for SOH sites. There was representation from each of the 14 DFCS regions and the state Advisory Council. Another key accomplishment for the program is that the third application round allowed for rounds one and two funded SOH sites to apply for continuation funding, as well as allowed non-funded sites within the Ecosystem to apply for funding again. Over the past two application cycles the team has been able to leverage multiple streams of state and federal funding to support the work of sites in communities across the state. Additionally, several non-funded sites within the Ecosystem have been able to secure funding from sources outside of DFCS due to their involvement with the SOH.

The 2020 State of Hope Sites were released in August 2020, and 17 new sites were selected from 144 applications to receive technical and financial support. More than 100 additional sites have been invited to join or remain as part of the State of Hope ecosystem. The Division had originally planned to release the site selection in July; however, with budget cuts to the primary source of funding, the amount of funding available to award to sites was not confirmed until August 15th. While the Division was slightly delayed in announcing the site selection, all activities are on schedule as of August 2020.

Action Step

2. Establish Division Civic and Philanthropic Partnerships

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

Update

The OSIE continues to work diligently to establish relationships with philanthropic and civic organizations that help to enhance the Division's efforts and impact. During the first half of the fiscal year there was continued engagement with Kids in Need of Defense (KIND) regarding DFCS policy when working with immigrant or refugee children. There was also continued work related to the Gwinnett Outreach Initiative – a targeted project focused on

increasing service access for Latino families in Gwinnett County and building trust with the Gwinnett DFCS office. This work included several planning sessions for the initiative which was recently renamed the Gwinnett Centro de Apoyo Familiar Esperanza (C.A.F.E.). Additionally, representatives from the DFCS State Office participated in the Interfaith Children's Movement's annual Prayer Breakfast held in October 2019. This annual event highlights and raises awareness about child welfare issues and how the interfaith community can be involved. Additionally, DFCS leadership met several times with leadership from the United Way of Greater Atlanta to discuss opportunities for partnership related to housing and connecting vulnerable families to the United Way 211 system through the DFCS Centralized Intake Call Center (CICC). There were also ongoing partnership meetings with Casey Family Programs, the Woodruff Foundation and the Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD) to name a few. Finally, there were at least 17 local stakeholder events held in regions across the state. These events included stakeholder meetings, provider meetings and community coalitions.

Action Step

3. Host Destination Hope Events

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

These events focus on locally-led engagement of traditional and new community stakeholders for the purposes of identifying and addressing specific issues impacting the safety and permanency of children, and the overall well-being of families. Each roadshow lasts between three to four days and typically occur in April, June, August and October. While the number of roadshows will likely not increase each year, the events are designed to evolve and be tailored to the needs of each region as identified by local regional and county Division leadership (in partnership with their local stakeholders). While this action is still in development, the plan is to evaluate the outcomes that result from the roadshow events – particularly the key connections made and partnerships that are developed in support of addressing community needs, barriers and gaps across the state. As part of the roadshow lineup, each region hosts a Youth Town Hall Meeting to connect youth in foster care with local community leaders, organizations (such as CCI's, judges, legislators, etc.) and state office leadership to review the top issues voiced by youth and develop strategies for improving those conditions.

The first roadshow of the fiscal year took place in Region 9 in October 2019. Most of the meetings occurred in Dublin (Laurens County). The next round of roadshows was originally slated to begin in April 2020. During the first half of the fiscal year there were several planning activities which took place related to the 2020 DFCS roadshows. The tentative

schedule included having a roadshow in Region 12 in April 2020, Region 14 in June 2020, Region 1 in August 2020 and Region 8 in October 2020. There were several planning calls with regional DFCS leadership in January and February, and a conference call in March with leadership from Region 12 (this was supposed to be an in-person planning meeting but was cancelled due to the COVID-19 pandemic and statewide). Due to the COVID-19 pandemic, the roadshow schedule is in the process of being modified and may tentatively begin this summer. This is subject to change based on what continues to happen in the state related to COVID-19. The team is also exploring alternative ways that the roadshow could be held in the future (i.e. virtual convenings, limited attendance, etc.) given the current state and federal public health guidelines.

A significant key accomplishment is the overall increase in the number of attendees at all roadshow events, particularly the convenings for civic and community leaders. Each event had more than 100 attendees from the community. Additional accomplishments include adding meetings exclusively with and for birth parents and relative caregivers (this is in addition to the meeting for foster parents which continued). There were also special convenings held for CCIs and CPAs to receive updated information and answers about the implementation of FFPSA. The team also experienced increased engagement of both regional and county DFCS staff and stakeholders due to the continual evolvement of the roadshow format and process. The feedback garnered from both DFCS staff and external stakeholders was very positive.

Benchmarks

Federal Fiscal Year	Number of State of Hope Sites		Number of Partnerships		Number of regional roadshows*
2020	64		10		4
2021	84		15		4
2022	114		20		4
2023	154		25		4
2024	204		30		4

*This is a benchmark measure capturing the number of Destination Hope roadshows hosted within the federal fiscal year.

The benchmark for the number of State of Hope sites in FFY 2020 was set at 64. This was not only achieved but exceeded. The number of sites as of March 31, 2020 is 130. This success is mainly attributed to a significant increase in the number of entities applying to be a part of the State of Hope Ecosystem. This has resulted in Georgia being ahead of schedule for meeting the benchmark. There is also the possibility that less sites will be added to the Ecosystem after the third application round due the application round occurring during the

COVID-19 pandemic. An assessment will need to be conducted by the team to determine if this benchmark will need to be adjusted for the remaining years.

The benchmark for the number of partnerships in 2020 is set at 10. Currently, the state is on target to meet that benchmark as there are a total of six partnerships as of March 31, 2020. The DFCS team continues to work with both internal and external stakeholders to build partnerships that will lead to increased service access and array for children, youth and families.

As of March 31, 2020, a total of one roadshow has been conducted (Region 9 in October 2019). The roadshow scheduled for April 2020 was postponed due to the COVID-19 pandemic. This will impact the remainder of the roadshows for the fiscal year. No rescheduled dates have been set and the team is currently planning for what the roadshows may need to look like in accordance with state and federal public health guidelines. While the C3 coordinators have held at least 17 regional stakeholder meetings before March 31, 2020, these meetings have not occurred after March 13th due to the pandemic.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

Technical assistance and training provided to regional and county DFCS staff:

- Regional roadshow support
- Building and sustaining local partnerships
- Brainstorming additional ways for engagement with local communities beyond the roadshow events
- This is the technical assistance and training provided to the SOH Ecosystem:
- October 2019 convening
- Guidance to individual SOH sites regarding project implementation
- This is the technical assistance and training which the team received in support of the action steps
- Support from Casey Family Programs for roadshow events
- Partnership with Together Georgia (provider association) for the provider meetings held during the roadshow
- Technical assistance on how to evaluate the roadshow and its impact on state priorities and goals
- Technical assistance on how to evaluate the SOH Ecosystem and its impact on state priorities and goals

IMPLEMENTATION SUPPORTS

Implementation supports that were available and utilized during the first half of the fiscal year:

- Regional Roadshows:
 - Donation of space in local communities for roadshow meetings and events
 - Funding provided by Casey Family Programs for specific roadshow events
- State of Hope:
 - The continued partnership with the SOH core team (made up of several organizations including Georgia State University and Georgia Family Connection Partnership)
 - The partnership with the Community Foundation for Greater Atlanta to manage the grants provided to funded SOH sites
 - The continued partnership with IDEO for technical assistance and capacity-building

These are the supports that will be needed for continued implementation and achievement:

- Increased use of technology (Microsoft Teams, etc.) for convenings and meetings related to the roadshows and SOH Ecosystem activities
- The continued partnership with the SOH core team (made up of several organizations including Georgia State University and Georgia Family Connection Partnership)
- •The partnership with the Community Foundation for Greater Atlanta to manage the grants provided to funded SOH sites

FEEDBACK LOOPS

Part of the ongoing feedback loop for this objective will be regular communication and engagement with Division leadership about the needs and priorities of the organization, as well as the needs within local communities. This regular communication will help the Office of Strategy, Innovation and Engagement (OSIE) team remain cognizant of changing priorities and able to intentionally seek out partnerships that will meet identified needs.

The OSIE team will annually review the plan -- that will be developed to engage philanthropic and civic groups – to determine if impact is being made and desired outcomes are being achieved. The plan will be adjusted as needed and appropriate. Additionally, the C3 reports will continue to be collected and reviewed on a monthly basis for local stakeholder feedback; surveys will be conducted with the SOH Ecosystem to measure engagement and impact; and feedback will continue to be solicited regarding the regional roadshows (mainly the process, outcomes and impact).

COLLABORATION

State of Hope:

The OSIE team works in partnership with numerous internal and external partners, including the organizations that participate on the SOH core team – the Office of Family Independence, Prevention and Community Support Unit, Community Foundation for Greater Atlanta,

Georgia State University's Professional Excellence Program/Child Welfare Training Collaborative, and the Georgia Family Connection Partnership. The Core Team collaborates to ensure implementation and execution of goals and objectives, assessment of progress and adherence to program guidelines and development of improvement strategies.

Regional Roadshows:

The team continues to collaborate with numerous internal and external partners for the roadshows, including regional and county DFCS leadership, local stakeholder groups, providers and faith-based organizations.

Civic and philanthropic partnerships:

The OSIE continues to work with numerous philanthropic and civic organizations to establish relationships that help to enhance the Division's efforts and impact.

OBJECTIVE II. Strengthening the Division's partnership with the court system

In Georgia, like many other states, families are surrounded with a myriad of resources charged with ensuring the safety and well-being of children. In the context of child welfare, this security net is often most evident at the time a family has judicial involvement. A dependency proceeding is often the most outward symbol of a child welfare system working for the protection and well-being of children and families.

In order to be successful in all dependency proceedings, the difficult work is often done well before a family enters a courtroom in order to ensure the system is ever mindful of the challenging nature of supporting families as they experience situations surrounding abuse and neglect. To strengthen the child welfare system regarding judicial stakeholder collaboration, all involved must work intentionally before such involvement in order to ensure the utilization of best practices. This key activity is aimed at accomplishing the goal of a robust child-welfare system and will strengthen the system to ensure those families who are involved are adequately and appropriately protected.

Previously the Division faced multiple court system barriers. These included: delay in filing of petitions, delay in scheduling court hearings, court date continuances, communication between the Division and SAAGs. The Division has worked hard to overcome these barriers through an ongoing partnership with CIP. The Division will continue to provide CIP with identified court barriers and court concerns. CIP has committed to their continued work the agency in addressing barriers and a willingness to have individual meetings with SAAGs, DFCS staff, General Counsel, and juvenile court judges as needed. The division director has initiated calls with juvenile court judges in an effort to open the lines of communication and provide needed information to the judges.

In addition to CIP partnership, General Counsel is working with CASA and OCA to observe and address concerns with courts and practice.

There are currently several projects where Georgia's child welfare system collaborates, and there are more opportunities that can occur. These concerted efforts will expand and strengthen the range of existing services, develop a new type of service, and reach additional children in need.

The continued implementation of strengthening partnerships with the court system and all stakeholders involved in the judicial process will lead to numerous benefits for Georgia's child welfare system. The continued efforts to incorporate dependency best practices increases the likeliness of timely permanency for any child who has an open dependency proceeding. The strengthening of partnerships also lends itself to ensuring all interventions are done appropriately, effectively, and efficiently. Lastly, this objective will aid the child welfare system to ensure that the involvement of child-welfare professionals with a family heightens the family's engagement in the process, treats all participants equally, and promotes inclusivity.

Specific outcomes from the implementation of this activity are:

- Increased utilization of best practices in all dependency proceedings
- Development of a robust collaborative child welfare system tasked with the protection of children and achieving timely permanency
- Effective and appropriate parent and child representation at all stages of dependency proceedings
- The growth of opportunities for child welfare system participants to assist in the further development, strengthening of partnerships, and compliance with all federal and state laws regarding families involved with the judicial system
- Leveraging the newly available IV-E funding for parent and child representation through collaboration with Georgia DFCS, the Administrative Office of Courts, and the Office of the Child Advocate

Various available actions steps will be improved, and new steps will be implemented in order to achieve the identified goal. Through the strengthening of current opportunities and the implementation of additional programs each of the identified outcomes will be achieved.

The actions steps are:

- Full implementation of the Multidisciplinary Child Abuse and Neglect Institutes (MDCANI). These multiday training institutions are supported in part by the Division of Family and Children Services and the Georgia Administrative Office of Courts. The multiagency faculty teaching these institutes provide in-depth trainings to court stakeholders including DFCS staff, agency attorneys, parent and child attorneys, guardian ad litem, court appointed special advocates, judges and their judicial staff, and several other constituencies. The first phase of MDCANI's focused on an in-depth analysis and implementation of best practices from the time a child entered foster care until the initial judicial review hearing. Due to the success of this program, MDCANI is in the planning stages of implementing the second phase of this institute. The second phase will focus on the life of a dependency case from the judicial review hearing until achieving permanency.

This program was selected due to the success it received from the inception and its success in helping to educate the child-welfare system on minimum requirements and best practices.

The method used to determine the success of this program will focus primarily on self-evaluations completed following each training and the number of jurisdictions that participated in this training along with the correlating populations those jurisdictions serve.

- Continued utilization of and increased utilization of Cold Case Project reviews. The Cold Case Project began in 2009. The goal of the project is to achieve permanency for each child in foster care by identifying and removing barriers for permanency. The Project reviews cases of children who have been in foster care for an extended period and are predicted, by a computer model, to be most at risk of aging out of foster care without attaining permanency. Additionally, other well-being measures are tackled and accomplished for these children. The Cold Case Project is administered by the Supreme Court of Georgia's Committee on Justice for Children in partnership with DFCS and the Office of Child Advocate. Cold Case Fellows are attorneys representing a mix of agency, parent and child attorneys, and guardians ad litem.

In a recent report it was indicated that for children with Cold Case reviews, in 25% of the cases the youth achieved permanency within one year's time from the beginning of the Cold Case involvement. One area youth achieved significant success in is the attainment of adoption.

This program was selected due to its impact on the reduction of time in care and achieving permanency for youth who have been in care for extended periods of time. During a recent stakeholders meeting regarding the Cold Case Project an evaluation of the Project's effectiveness occurred along with discussions regarding further implementation to assist a wider array of youth.

Continued implementation of the Court Process Reporting System (CPRS). CPRS is a secure, web-based system that provides child-specific case plan information to juvenile court stakeholders. CPRS interfaces with SHINES, Georgia DFCS' child welfare data system, and downloads updated case plan data on a nightly basis. CPRS is administered by the Supreme Court of Georgia's Committee on Justice for Children (J4C) in collaboration with Georgia DFCS. In 2014, J4C entered into an agreement with the Department of Juvenile Justice to also download DJJ data. In 2015, J4C fully integrated this data for stakeholder access, and continued to download educational data pursuant to an agreement with the Georgia Department of Education.

Key users of the program include all dependency stakeholders including attorneys, CASAs, guardian ad litem, and juvenile courts. DFCS, in collaboration with J4C, is continuing to encourage more jurisdictions to use CPRS, and is also identifying additional ways for the CPRS to be used if a jurisdiction has not fully adopted the program.

This program was selected due to the importance of ensuring all judicial stakeholders have the most up to date relevant information regarding a child's dependency proceeding. Because of the ability of the CPRS system to communicate with the SHINES system this program aids all stakeholders in knowing the current status of the child and the dependency proceeding, allowing all participants a heightened level of engagement.

NEW ACTIVITY AND ACTION STEP

Initial exploration of the viability of claiming title IV-E funding to support the quality legal representation of candidates for title IV-E foster care, title IV-E eligible children in foster care, and the child's parents to prepare for and participate in dependency proceedings

This activity was chosen because, notwithstanding clear policy and statutory directives, the practice of children's representation throughout the state remains inconsistent, and the quality of both parent and child representation varies due to lack of financial and institutional supports. Encouraged by the January 2019 change to federal policy allowing states to claim title IV-E administrative costs for legal representation, Division leadership and court and university-system partners have been in conversation about strategies to strengthen existing practice by creating a legal representation workforce model and tools to support consistent quality. These conversations are not benefitted by comprehensive research or systematic planning.

Action Steps (Key Activities) to Achieve the Objective

Action Steps

- Full implementation of the second phase of the Multidisciplinary Child Abuse and Neglect Institute
Update: For the last year, MD-CANI has continued to have success for further development and implementation. The second phase of the MD-CANI institute was fully developed and rollout began. Several jurisdictions hosted phase two training and based on those jurisdictions, 21 percent of the of the State's population would be represented by the jurisdictions that were trained. In addition, phase one continues to be taught throughout Georgia. When combined, these two phases provide a wealth of knowledge to stakeholders throughout the state regarding best practices for handling dependency proceedings.
Status - This work is ongoing.
- Continued utilization of Cold Case Project reviews
Update: For the last year, the cold case project remaining consistent regarding the number of fellows participating in this program. The Office of the Child Advocate continues to take the lead regarding this program and looks to continue to meet future goals for increased utilization. At this time, no expected changes are being considered. Approximately 250 cases statewide have cold case reviews each year. After the initial staffing there is a follow-up staffing to ensure each action step is properly completed and to further conduct an evaluation of any appropriate next steps to work towards achieving permanency for the child.
Status - This work is ongoing.
- Continued implementation of the Court Process Reporting System

Update: This was an excellent year for the full implementation of the Court Process Reporting System. Increased collaboration between the Division, the Attorney General's Office, the Administrative Office of the Courts, and the Court Improvement Program led to a significant increase in the utilization of this resource. The agencies will continue to strengthen the utilization while also working to increase the amount of individual county utilization.

Status - This work is ongoing.

Utilization of IV-E Funds for Parent and Child Attorney Representation

Update: This is a newly added objective. Below are additional strategies and steps for full implementation.

Benchmarks

A. Full implementation of the second phase of the Multidisciplinary Child Abuse and Neglect Institute

- The next Court Improvement Project (CIP) meeting is being held in August 2019. During this meeting, the initial rollout will occur and the MDCANI team will receive feedback and alter the final agenda as deemed appropriate. Following the CIP meeting, the MDCANI agenda will be finalized. Once the agenda has been finalized, J4C will then begin to schedule MDCANI trainings in jurisdictions.
- 2019 – Finalization and roll out of the newest phase of MDCANI which includes implementation of judicial reviews to permanency training.
- 2020 – Full rollout of MDCANI to jurisdictions with newest phase and continued implementation of first phase. Also, during this time period the MDCANI team will develop and include stand-alone modules such as placement stability training.
- 2021 - 2024 – Continuing to offer phase one and two and further development of stand-alone modules.

MD-CANI: The agency reached this year's benchmark and will likely remain on schedule for the upcoming year.

The State is tracking the total population of Georgia residents included in the penetration rate for MDCANI training jurisdictions. It is tracking targets for both the initial phase of trainings and the new one.

The target for phase one for 2020 is 55%. The state achieved 58%

The target for phase two for 2020 is 20%. The state achieved 21%

B. Continued Utilization of Cold Case Project Reviews

- Transition from Administrative Office of the Courts to the Office of Child Advocate in 2020. This task requires legislative changes which are expected to occur in 2020.
- Continue to compare data sources with DFCS, J4C and AOC, to ensure a robust algorithm in order to ensure fidelity of data. The benchmark standard is to compare data sources to ensure accuracy of reports of federal and state data.
- Recruit additional Cold Case Fellows. In 2019, there are approximately eight fellows.

<ul style="list-style-type: none"> • Ensure continuity of program structure and leadership. • Measure of Progress: The project has a goal of recruiting 15 to 20 fellows for optimal program functionality.
<ul style="list-style-type: none"> ○ Cold Case Project: Due to the Covid-19 crisis, this program is continuing to be evaluated. At this time, the State expects to achieve the long-term target, but further budgetary considerations and evaluation will occur. Overall there was a slight delay in the continuation of cold case staffings towards the beginning of the pandemic. The project has now moved to completely virtual and does not anticipate any further delays.
<p>C. Continued Implementation of the Court Process Reporting System Prior to August 2018, CPRS was receiving regular activity from 80 of the State’s 159 counties. Since implementation of policy change in fall of 2018, an increase of activity has occurred. Successful implementation of this strategy includes:</p> <ul style="list-style-type: none"> • Identification of current order availability percentages and increased order availability for jurisdictions throughout Georgia. • Aids in the further compliance with court orders due to access and availability. • Measure of Progress: Within five years the system’s goal is activity in 75% percent of all Georgia jurisdictions. <p>Move from 50% (80 counties) to 75% (119 counties).</p> <p>In addition, there will be ongoing CASA involvement regarding the organization’s ability to draft and upload CASA reports. Additional Measures of Progress: Permanency 1 and 2; and reduce the length of time in care in comparison to children who have not received CCP involvement.</p>
<p>Court Process Reporting System: The state has been successful in seeing regular activity by 98% of the 159 counties. The state is currently at 13% for Permanency Outcome 1 and at 41% for Permanency Outcome 2.</p>
<p>D. Utilization of IV-E Funds for Parent and Child Attorney Representation (newly added)</p> <p>Fall 2020: Georgia will establish a multi-sector leadership group including Division leadership, CIP, Georgia CASA, OCA, and University partners to develop a plan for collection and synthesis of information on the variety of local approaches to parent and child representation adopted in Georgia, national models of legal representation offices, other state strategies for leveraging the title IV-E funding opportunity, ethical and professional rules, training standards, best practice guidance, and legal requirements relevant to competent, quality legal representation for children.</p> <p>Spring/Winter 2020: Children’s Justice Act Task Force will conduct a stakeholder survey to assess stakeholder perspective on what constitutes “quality representation” and gather</p>

information on representation practices across local jurisdictions as part of the panel's required three-year assessment.

2020-2021: University partners will conduct research and prepare a report setting forth a research foundation and recommendations for the sequence of steps, range of activities, and system design that would enable the state to take best advantage of the momentum and resources available to promote quality legal representation for children. In addition, a tool for evaluating the quality of representation during court observations of individual cases will be developed in collaboration with practitioners and system leaders.

The anticipated timeframe for complete achievement of this benchmark is 2024. By that time, Georgia DFCS and its partners will have developed an MOU with local jurisdictions that allows for claiming of title IV-E funding to support legal representation of parents and children consistent with a model approach that ensures quality of practice.

TRAINING, TECHNICAL ASSISTANCE AND EVALUATION

- **MD-CANI:** This objective substantially incorporates training to counties, juvenile courts, SAAGs, and other judicial stakeholders. To achieve this objective, the Division closely collaborates with the state's Court Improvement Program, judicial partners, and the state's Office of the Child Advocate for technical assistance and capacity building. Continual evaluation of the program occurs by participants during each presentation.
- **Cold Case Project:** No changes from prior report.
- **Court Process Reporting System:** The state agency collaborates with the Administrative Office of the Courts and the Attorney General's Office for continual training and technical assistance regarding the continued implementation of CPRS. All these agencies work closely with various judicial partners to train and assist for the continued implementation of this resource.
- **Parent and Child Attorney Representation:** None to report.

IMPLEMENTATION SUPPORTS

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

FEEDBACK LOOPS

- **MD-CANI:** The state obtained feedback from the previously identified partners through continual communication and partnership. Our external partners are key

leaders in this project and those partners are the agencies with the primary knowledge and information to determine the success of this program.

- Cold Case Project: This program is administered in close collaboration with the Office of the Child Advocate. With regular involvement, collaboration and staffings, OCA provides the Division will feedback regarding this programs successes.
- Court Process Reporting System: All data regarding CPRS is housed by the Administrative Office of the Courts. As a result, regular communication occurs regarding the usage and continued implementation of CPRS. This information, through regular reports and meeting, is reported to DFCS and the Attorney General's Office.
- Parent and Child Attorney Representation: The program manager will consult with the leadership team to continuously monitor and track progress. Involved in the monitoring and tracking, our ongoing partners of the program will include DFCS, the Administrative Office of the Courts (CIP), the Office of the Child Advocate, and the Emory University's Barton Child Law and Policy Center.

COLLABORATION

See Collaborations With Courts in the Collaborations Section of this report.

H. Program Support

a. Training and Technical Assistance Provided

Prevention

The Prevention Section provided the following training through an online portal for all DFCS employees to support professional and workforce development:

- Mandated Reporting in Georgia (2 hrs/.2 CEUs per course; Bright from the Start Approved)

This is a mandated reporting course specific to Georgia laws and agencies, including information on commercial sexual exploitation and covers all aspects of mandated reporter responsibilities. The course will be continuously updated to include the most current laws and policies.

- Child Abuse and Neglect: Mandated Reporting Requirements for Employees, Volunteers, and Contractors of Georgia Public Schools (1 hr/.1 CEUs per course)

This course is a mandated reporting course written specifically for individuals employed, contracted, or volunteering with local education agencies (like public school teachers, principals, coaches, bus drivers, school volunteers, cafeteria workers, etc.) in frequent contact with children.

- **Mandated Reporting Requirements: A Track for Georgia Medical Professionals (1 hr/.1 CEUs per course)**

This course was written specifically for medical professionals (like doctors and nurses) in frequent contact with children.

- **Safe Sleep for Georgia Babies (1 hr/.1 CEUs per course; Bright from the Start Approved)**

This course supports the safe sleep campaign led by The First Lady of Georgia, Sandra Deal, as co-chair of the Georgia Children's Cabinet, to educate parents, grandparents, childcare providers and others in the community about safe sleep practices for infants.

- **Brain Development: Amazing Brains, Amazing Babies (6 hr/.6 CEUs per course; Bright from the Start Approved and NASW)**

This intermediate level 6-hour course contains four modules that cover the basics of brain anatomy, function and development, and that discuss the impact of experiences on the developing brain. Each part includes embedded video examples and comprehensive checkpoints to assess students' knowledge as they progress through the course.

Quarterly Offerings

- **STEM Activities in the Classroom (1 hr/.1 CEUs per course)**

This new development course will explore the concept of STEM (science, technology, engineering, and math) and provide activity ideas for the early childhood classroom as well as the home environment.

- **Ethical Practice in the World of Social Media and Internet Communication (1 hr/.1 CEUs per course)**

This course explores the impact of social media and internet communication on information gathering, sharing, and the building of connections within the context of ethical guidelines and principles. The code of ethics remains the template for ethical decision-making even as professionals increase their use of internet tools and programs.

- **Understanding Child Development: Maslow's Theory of Human Needs (1 hr/.1 CEUs per course; Bright from the Start Approved)**

This course will explain one model of healthy development, called Maslow's theory of human needs. Participants will learn about the basic needs of all human beings, the growth needs that depend on the basic needs, and how Maslow's model affects the way we care for children.

- **Appreciating and Celebrating Diversity (2 hrs/.2 CEUs per course; Bright from the Start Approved)**

This revised course explores how culture impacts young children and provides strategies to celebrate diversity. This course also focuses on the importance of working with diverse families including the LGBTQ community.

- The Art of Communication Part 1: Listening to Children (1 hr/.1 CEUs per course; Bright from the Start Approved)

This course contains information and ideas about learning to listen to children in different ways to help children feel valued and understood. This course explores active listening, therapeutic listening, and holistic listening.

- Engaging Parents with Mental Health Issues (1 hr/.1 CEUs per course)

This course explores the attitudes, practices and strategies necessary for both the helping professional and agencies they represent in engaging parents with Mental Health Issues (MHI). The course will explain the need for and challenges with engagement strategies with these parents experiencing MHI and will help you to apply solutions to real-life scenarios.

- Supporting Children with Incarcerated Parents (1 hr/.1 CEUs per course)

This new development course is applicable to all professionals working with children and will explore the unique challenges children face when a parent is incarcerated. This course will explore strategies for supporting children and engaging their caregivers.

- Conducting Purposeful Visits Package (6 hrs/.2 CEUs per course)

This package contains three individual, two-hour modules to help case managers understand and value the practice of conducting regular and purposeful case manager visits to ensure the safety, permanency and well-being of children who are in out-of-home care. The individual modules focus on visits with toddlers and preschoolers, elementary age children, and adolescents.

- The Effects of Toxic Stress in Young Children (1 hr/.1 CEUs per course)

This new development course will review the effects of toxic stress on children and the importance of experiences, both positive and negative, on children's development. This course will explore how a trauma-informed approach can be used when working with children in all settings.

- Social and Emotional Development of Preschoolers (1 hr/.1 CEUs per course; Bright from the Start Approved)

This course explores the major social and emotional developmental accomplishments of preschoolers, ages 3-5, as they develop a skill set that makes up their social and emotional growth and learn about themselves and their world as they take on new roles outside of their home and families.

- Modifications for Working with Children with Autism (1 hr/.1 CEUs per course)

This new development course will review common strategies and modifications that support children with Autism. This course is appropriate for professionals in all settings working with children with Autism.

- Understanding Child Development: Attachment Theory (1 hrs/.1 CEUs per course; Bright from the Start Approved)

This course will help participants understand one model of healthy development, called attachment theory. Participants will learn about attachments and bonding, the impact they have on children's development, and how attachment theory affects the way we care for children.

Permanency

The permanency section has provided ongoing TA and OTSS to counties and regions. The Permanency Section will provide OTSS support to the regions, as needed, and has completed training for the regions on roundtables. Provided roundtable technical assistance to Regions. The team staffed difficult cases with the DFCS field staff and provided guidance in the identified areas of need. The goal is to develop an on-going schedule for the same level of support to other regions as the team discovers the need.

Caregiver Recruitment and Retention Unit (CRRU)

Inquiry Response Case Managers continue to be the front line for prospective caregivers. The Inquiry Response Case Managers provide weekly web-based Information Sessions to prospective caregivers.

CRRU uses its website www.fostergeorgia.com to provide information on the onboarding process to the general public. The website chat feature has increased the Division's interaction with prospective and current caregivers.

The division has adopted the SAFE home study model and has successfully trained all regions and private providers on the utilization of this model. The Division provided the initial training at no cost to the providers. There is also ongoing support provided by the Consortium for Children to DFCS and provider agencies.

Care Coordination Treatment Unit (CCTU)

Provided focused training to DFCS field staff and private providers across the state. The four training topics presented were as follows. 1. Understanding CCTU: Assists DFCS field operations with identifying appropriate placements for high-end, complex youth. Upon completion, participants were able to better understand the foundational objectives and key responsibilities

of CCTU and develop new strategies for work with this difficult population of youth. 2. Waivers and Program Designations: Participants were able to understand the differences between RBWO Program Designation Memorandums and waivers. They became familiar with approval designees and the submission process. 3. MWO Matters: This training allowed participants to identify challenges with MWO placements and strategize ways to overcome many of the barriers. Participants became familiar with associated behaviors, solutions for maintaining placement, and crisis stabilization. 4. Placement Matters: Educated DFCS field staff on how to locate placement for children entering foster care and making placement moves. Participants learned how to seek support, and who the key players are at each level of the process related to difficult to place youth.

Kinship

The state also collaborated with A Second Chance Inc, a nationally recognized organization in the field of kinship care, to provide 30 training sessions for frontline staff and service providers focused on kinship values. Additionally, kinship state office leaders provided kinship training at the 2019 statewide CASA training and Georgia Court Improvement Initiative. Both staff and court stakeholders have requested additional joint training opportunities to strengthen local practices related to kinship.

Georgia held its first Kinship Caregiver Summit in September 2019 with over 200 adults and 125 children. Kinship caregivers participated in a day of workshop specific to kinship dynamics while the children enjoyed various fun activities. Caregivers overwhelmingly reported the self-care workshop and advocacy for kids as beneficial to their unique caregiving roles.

Interstate Compact on the Placement of Children

Georgia ICPC provided OTSS training under this period of review to field staff in regions 1 and 12, Adoption Seminar at the State Bar, and ICPC liaisons assigned to connect the state office and field staff. The outcome of the trainings conducted include relationship building, clear understanding of expectations of all parties involved, and state office staff hearing firsthand what our constituents need. During these trainings understanding of ICPC's processes was the biggest gap. In an effort to minimize in the upcoming period Georgia ICPC will continue to offer OTSS trainings to field staff, judicial system, and private providers.

Office of Provider Management Unit (OPM)

Initial Provider Staff Training within DFCS the Office of Provider Management (OPM) is responsible for facilitating, managing and tracking in-service and ongoing training for certain RBWO staff. OPM will provide CPA and CCI staff in the roles of case support worker (CSW), case support supervisor (CSS) and human services professionals (HSP) a 160-hour new hire training experience beginning October 2012 that consists of classroom instruction, e-learning, field practice and competency evaluations.

RBWO: Foundations is the course title for the 160-hour RBWO new hire training. It was adapted from the DFCS New Worker Training guidelines specifically to support the development of knowledge and skills of RBWO staff who serve in case support and supervisory positions within their RBWO agencies. Foundations addresses child welfare career preparatory areas that build general knowledge regarding child welfare practices and policy in DFCS, RBWO standards and working in partnership with DFCS case managers. The overall objective of Foundations is to provide RBWO staff (CSS, CSW, HSP) with information to help them be successful in their RBWO roles which includes working within the DFCS practice model, understanding DFCS policies, RBWO standards and working in partnership with DFCS case managers to accomplish positive outcomes for children and families.

The complete Foundations course consists of three weeks of e-learning / field practice experience and one week of classroom instruction for a total of four weeks of instruction. The e-learning / field practice component includes DFCS policy, RBWO minimum standards, confidentiality, performance-based contracts goals and other pertinent topics. Topics are presented as webinars, self-study and other assignments which are conducted at the RBWO agency or in the local community. The classroom instruction component is comprised of topics such as the history of child welfare services, applicable federal and state laws, DFCS values and culture, family-centered practice, trauma-informed child welfare practices, child maltreatment, IMPACT overview, RBWO Individual Service Plan and Discharge Plan, the DFCS Case Plan and working in partnership. Classes will be offered at central locations statewide and on a regular basis.

The classroom component of Foundations culminates with a knowledge-based competency test based on the materials covered during the five-day classroom experience. The test, which consists of objective questions (multiple choice, true-false, etc.), must be passed with a score of at least 80% in order to earn credit for the classroom component. The online component of Foundations does not have a knowledge-based test. However, there are required module completion verification activities.

The Office of Provider Management offers RBWO providers with additional training opportunities on the following topics:

- **RBWO Foundations: Director's Overview-** This course is an overview of the RBWO: Foundations curriculum and includes information on transfer of learning and ideas on staff professional development. It will provide RBWO leadership with an understanding of the time commitments involved in completing Foundations and ways to support their staff's completion of the learning blocks. This one-day course will be offered to RBWO directors and training coordinators.
- **Understanding OPM-** This training will provide an overview of OPM and the monitoring review and risk management processes. It will be offered to HSP, CSW, CSS, and Direct Care Staff. The foundational objective of OPM is to ensure that children placed in RBWO agencies

are safe from abuse and neglect. OPM employs various data, on-site, records review, and collateral report mechanisms to monitor provider's adherence to RBWO Minimum Standards and contractual obligations to ultimately be reasonably assured of the safety and well-being of children placed.

- **ECEM/EPEM-** An ECEM visit is a comprehensive visit that focuses on all aspects of the child and placement including safety, permanency, and well-being. An EPEM is contact with the child's birth parents, guardian, or other permanency person in order to support the DFCS case plan. This training focuses on quality ECEM and EPEM documentation and reporting requirements within GA SHINES. It is intended for HSP, CSW, and CSS staff.
- **Individualized Service Plan (ISPs)** - The provider must carefully and immediately assess the needs of all children placed and develop an ISP within seven days of admission. The seven-day ISP is an extension of the admissions assessment whereby immediate safety, health, and placement adjustment needs are considered and a plan developed to address immediate placement needs. During this training, agency staff will learn how to create strength-based ISPs. It is intended for HSP, CSW, and CSS staff.
- **Ansell Casey Life Skills Assessment and the ISP-** The Ansell Casey Life Skills Assessment (ACLSA) assists RBWO staff in determining student's independent living skills. All RBWO providers who serve youth ages 14 years and up must incorporate independent living skills into their services. The Individualized Skill Plan is based upon the ACLSA and is a supportive component to the DFCS WTLP. Participants will gain a better understanding of how the ACLSA works and how to incorporate it. This training is intended for HSP, CSW, CSS, and Direct Care staff.
- **Significant Event/Purposeful Reporting-** Significant events are categorized as serious events relating to the care or protection of children. This training is designed to assist agency staff with identifying reportable incidents and proper GA+SCORE documentation. This course is intended for HSP, CSW, CSS, and Direct Care staff.
- **Navigating GA+SCORE-** GA+SCORE, developed by Care Solutions for OPM, is the online tracking and reporting system that OPM and RBWO providers use to report and manage daily tasks such as tracking pertinent provider, foster home, and child information, all in support of OPMs RBWO Minimum Standards. This training will familiarize participants with the GA+SCORE system. It is intended for HSP, CSW, CSS, and Direct Care staff.
- **Waivers and Program Designations-** Participants will understand the differences of RBWO program designation memorandums vs. RBWO waivers, become familiar with approval designees, and understand the application process upon completion of the training. This training is intended for directors, and staff members in the roles of CSS, CSW, and HSP.
- **Introduction to Working with Victims of Commercial Sexual Exploitation-** This training provides the participant with an introduction to working with CSEC victims. The presentation will dispel

commonly held beliefs and stereotypes that promote CSEC. It will unpack the notion of “choice” in reference to children’s involvement in the commercial sex industry. Participants will also brainstorm opportunities for intervention with CSEC victims, and review guidelines for appropriate and effective engagement. This course will be offered to directors, HSP, CSW, CSS, and Direct Care staff.

- Life Coach- Specialty RBWO programs providing Independent Living and/or Transitional Living Programs, or Maternity and Parenting Support Programs are required to have life coaches who have attended a certification course. Life Coach Certification is a one-day training facilitated in partnership with the State Independent Living Program and the Office of Provider Management. Certification includes a review of state ILP policies, programs and applicable RBWO Standards

- Policy Violations- This training provides the participant with how to write Policy Violation Assessments (PVAs). The presentation will dispel commonly held beliefs and myths that providers may have. It will unpack the safety aspect and how the participants will be able to write the violation from a safety point of view. Participants will also have opportunities to write a sample report and receive feedback. This course will be offered to directors, HSP, CSW, CSS, and Direct Care staff.

Reasonable and Prudent Parenting Training. This two-hour workshop supports the dissemination of information on the federal and state law requiring implementation of the reasonable and prudent parenting standards and youth rights. It introduces participants to the supporting child welfare policy, key definitions, implementation expectations and resources to gain a more in-depth understanding of the topics. DFCS provided two different curricula to target different populations:

- Curriculum #1: Normalcy for Children and Youth in Foster Care: RPPS and YRR (For Staff and Caregivers)

Description: It is a 90-minute workshop that supports the dissemination of information on the federal and state law requiring implementation of the reasonable and prudent parenting standards and youth rights. It introduces participants to the supporting child welfare policy, key definitions, implementation expectations and resources to gain a more in-depth understanding of the topics. Foster parents and caregivers are required to take this training prior to practicing the reasonable and prudent parenting standards.

Audience: This workshop is appropriate for DFCS and private providers’ staff, foster caregivers and stakeholders. Training Modes: This workshop is suitable for web-based learning as well as classroom facilitation.

- Curriculum # 2: Know Your Rights and Responsibilities 101 (For Youth)

Description: It is a one-hour workshop that supports the implementation federal and state law requiring implementation of the reasonable and prudent parenting standards and youth rights.

It introduces youth participants to the supporting child welfare policy, key definitions, implementation expectations and resources to gain a more in-depth understanding of the topics. Youth are also provided a general presentation of their Youth Rights and Responsibilities and sign an acknowledgement forms that they have been informed/educated on their Youth Rights and Responsibilities.

Audience: This workshop is appropriate for youth in foster care ages 14 and older.

Training Modes: This workshop is designed for classroom learning but may be adapted for web-based

Other Supportive Training:

In partnership with the DFCS Office of Provider Management, GARYSE will host coaches training for caregivers statewide to provide insight on the following key areas: NYTD outcomes, independent living skills, and roles and responsibilities of caregivers' participation during ILP workshops.

The Office of Provider Management and Amerigroup started providing RBWO providers with an overview of benefits and detailed coverage for youth in foster care. On April 1, 2019, In conjunction with Amerigroup, the office of Provider Management provided RBWO providers with a total of 14 web-based trainings which were provided monthly on various topics such as Attention Deficit Hyper Disorder, DSM-5 diagnosis, Trauma in the Brain, Youth in Foster Care, Psychotropic Medications, Asthma, Trauma Informed Care, and Substance Disorder.

Adoptions

Ties That Bind: The Ties That Bind is focused on the lifelong aspects of adoption; this annual training seminar celebrates, promotes and explores issues related to adoption. This weekend event provides information on some of the most important issues and concerns in adoption today. The primary focus of this training seminar is on supporting and strengthening adoptive families. Through this event, adoptive parents and foster to adopt parents with children currently placed for adoption are provided an excellent opportunity to increase their knowledge base and skills regarding adoption issues, services for adoptive families and the parenting of adopted children. More than 30 workshops are offered for more than 300 adoptive families and children.

More than 30 workshops are offered for more than 300 adoptive families and children.

Figure 16 Adoptions Workshops

Site Name	Total Teens Served	Families Served	Additional Contacts Made
Rome, GA	35	27	10
Atlanta, GA	47	33	15

Morrow, GA	24	14	5
Carrollton, GA Newnan, GA	11	6	5
Athens, GA Lawrenceville, GA	34	12	8
Augusta, GA	23	12	6
Macon, GA Milledgeville, GA Warner Robins, GA	20	14	7
Columbus, GA	11	8	4
Thomasville, GA Moultrie, GA Valdosta, GA	24	19	10
Savannah, GA	8	4	10
Program Administration	0	0	10
Ties That Bind Adoptive Family & Youth Training Seminar	262	106	22
TOTAL TO DATE THIS CONTRACT PERIOD	499	255	112

Georgia Mentor - Crisis Intervention: Provides in-home crisis intervention services to families with a potential for disruption or dissolution of an adoptive placement. A statewide team of skilled individuals works with families to assess and connect them to needed resources all to stabilize the adoptive placement. For this reporting period, Georgia Mentor Crisis Intervention program served 77 adoptive families across the state of Georgia with in-home crisis intervention.

Policy

The Policy and Regulations Unit provided training and technical support by:

- Providing monthly training on policy updates to Field Program Specialists who serve as liaison between regional staff and local county staff. Educating the FPS' on policy provides the field with greater resources to appropriately execute their work and comply with standards of practice included in CFSP goals. Training of this group is ongoing and will continue for the foreseeable future.
- Delivering presentations and in-person training on new policy releases or changes in policies, participating in webinars, developing policy spotlights released via email to the field, and meeting with military leadership at the Georgia bases to improve notifications of DFCS involvement for active duty military personnel.
- Providing timely and thorough policy clarification to staff to facilitate staff improvement in understanding of policy. Policy clarification often includes collaboration with other DFCS units (e.g. Program and Practice Guidance, Georgia SHINES, Fiscal Services, or Office of General Counsel) to ensure the guidance provided is thorough and complete.
- Facilitated a presentation to DFCS staff and opioid treatment providers at the Opioid Treatment Providers Annual Conference in November 2019.
- Facilitated a workshop at The Summit, a Statewide Child Abuse and Neglect Conference, in December 2019, on the Intersection of Law, Policy, and Practice.
- Presenting at the SAAG Conference on policy related to legislative changes.
- Collaborating with the Training and Professional Development Unit at monthly meetings to support curriculum and training development needs.
- Participating in SHINES enhancements (JAR, JAD, etc.) to support efforts to improve documentation of case management activities.

Safety

Case consults are held during the transition between program areas and ongoing as needed to identify the safety concerns at the Family and Individual Level in Family Preservation cases. Case consultations prevent case outcome drift by keeping case managers focused on safety.

Over 1,500 frontline staff represented at every level across the state were trained via a 3-day training on voluntary kinship. This training also included external stake holders such as our judicial partners and service providers within the local communities across the state. The implementation and training were found to be very successful. During this training frontline staff received review and training on some of the fundamentals of child safety (*present danger, impending danger, protective capacities, child vulnerabilities, threats of serious harm and out of home safety planning management*). To further reinforce and refresh this newly implemented practice, technical assistance and practice guidance around voluntary kinship are currently

being provided for all frontline staff each month via conference calls, Microsoft Teams, Skype platform and quarterly statewide safety FPS meetings. Due to the successful enhancements in GA SHINES the practice of voluntary kinship is now being captured in the CCWIS system that will capture qualitative and quantitative outcomes regarding this body of work.

In an effort to better serve and provide guidance along with technical assistance to frontline staff and external stakeholders, intentional efforts were made to be active and presently involved across the state with Pre-staffing's, the Court Improvement Initiative, and the Multi-Disciplinary Child abuse and Neglect Institute.

The first of twelve practice videos (2 – 3 minutes in length) was released to frontline staff November 2019. The videos are intended to enhance case manager assessment, decision making, engagement and overall practice skills. The videos are a collaboration between Georgia's Division of Family and Children Services and Georgia State University Professional Excellence Instructional Design Team.

Promoting Safe and Stable Families

The PSSF Contractors Meeting, regional meetings (including PSSF providers and local DFCS staff), CQI meetings, regional leadership meetings, county leadership/community partner meetings.

Each year Promoting Safe and Stable Families of Georgia conducts a bidders meeting with all agencies throughout the state wishing to provide services to children and families through PSSF funding. The purpose of this bidders meeting is to provide technical assistance to agencies regarding the PSSF Statement of Need. The following topics were covered during the bidders meeting:

- PSSF Proposal Review
- PSSF Award Decisions
- DHS/PSSF Contract Requirements
- DHS/PSSF Contract Execution
- Preparing & Submitting a Proposal
- Service Models
- Proposal Requirements
- Proposal Documentation
- Proposal Submission

Kenny A. Consent Decree

The Kenny A. Unit provided the following technical assistance to Region 14:

- Developed and implemented the Kenny A. Scorecard to track and monitor progress of Kenny A. outcome measures
 - Enhanced focus on permanency outcome measures and re-entry
- Developed, implemented, and trained Region 14 point of contacts on the proper use of and how to accurately document entries within the Weekly Office Stay Tool
 - Tool tracks all youth that spend time in a DFCS office between the hours of 8:00 P.M. and 8:00 A.M.
- Reconciled and validated all listed case workers and supervisors on the weekly caseload report
 - Calculated and validated the number of cases over cap with notation of those case workers with Investigations
- Provided mid-monthly and monthly reports to Region 14 for assistance with monitoring and staying in compliance with Kenny A. outcome measures
 - Outcome Measure 10 - Sibling Placement
 - Outcome Measure 9 - Documenting Compelling Reasons
- Ensured the application of the correct data collection methodology for each outcome measure
- Conducted quality assurance checks of data in SHINES for accuracy per each outcome measure, with a special focus on the point-in-time measures
- Assisted with identification of procedural and systemic issues resulting from inaccurate data entry and brainstorm potential solutions
 - Collaborated with the State Office Data Team to calculate 6-month and yearly performances for all outcomes
- Conducted county director training regarding the Kenny A. requirements
- Participated in regional practice workgroups
- Provided several Maltreatment in Care and Mandated Reporter trainings for Region 14
- Served on Region 14 interview panels as requested
- Facilitated monthly Kenny A. meetings to discuss progress and identify strategies to overcome barriers with outcome measures and infrastructure standard compliance

- Kenny A. team member met monthly with Region 14's Adoption Units to identify and mitigate adoption barriers

Continuous Quality Improvement (CQI)

- The state CQI team created a CQI pilot, Performance Prerequisites for Improvement. The purpose of this pilot is to move GA toward developing county CQI teams in conjunction with the current regional CQI teams. The pilot focuses on Performance Capacity, Performance Management, and Performance Improvement.
- The state CQI team developed a CQI website where staff can find state CQI/QA contacts, regional CQI contacts, CQI/QA forms, CQI/QA trainings, CQI minutes, CQI meeting schedules, the Performance Improvement Process, specific resources for regional strategies, PPFI updates, and etc.
- Quarterly CQI Performance Improvement trainings are provided.

Quality Assurance (QA)

New employee/mentoring staff development activities for QA team members include, but are not limited to:

- Reviewing/rating same case as mentor
- Observing all case specific interviews by mentor
- Completing case guide and compare with mentor
- Mentor providing complete 2nd level review of documentation and provide feedback
- Observation case debriefings, county exits and regional exits of other reviewers
- Participation in writing the written summary reports

New employees receive regular evaluation feedback from the Unit Manager. The Unit Manager ensures all activities on the developed new employee checklist are completed. At the end of this process, the unit manager, mentor and QA specialist work together to develop a plan for growth and skill development.

The training curriculum utilized to enhance team members' capacity to understand how to evaluate outcomes centers on several key topic areas:

- QA Roles and Responsibilities
- Review Guide Instructions, Quality Documentation and Justification of Case Ratings
- Interviewing Techniques, Review and Discussion

- Communication with State, Regional and County Staff
- Practice standards for Quality Assurance (consistency/accuracy)
- Data Analysis
- Quality Assurance Review Team Procedures Manual

QA/CQI

- State QA/CQI team meetings were developed to enhance collaboration between these two teams, develop leadership skills, and to discuss and develop strategies around opportunities for improvement.
- PACCC meetings were used to educate and reinforce staff about QA findings and how to improve. This allowed for education around the PIP items. Most importantly, QA educated staff on the need of developing skills around ongoing assessment of the family and children.

CAPTA

The state liaison officer (SLO)/safety services director and federal plans manager have worked closely with the field and stakeholders to improve practice related to Plans of Safe Care (POSC). The SLO and federal plans manager presented at statewide field program specialist meetings, provided Plan of Safe Care champions training and reviews, conducted regional Safety Summits including information about POSC for frontline staff. Both the SLO and federal plans manager made themselves available for training and stakeholder meetings in regions and have attended case manager summits, stakeholder meetings and assisted in the facilitation of meetings between Women's Treatment Recovery Services (WTRS) for specific regions.

There is a standard POSC training available to field program specialists who have been trained by the SLO and federal plans manager. Both provide frequent technical assistance to the field on a case by case basis regarding POSC. The SLO and federal plans manager presented about Plans of Safe Care at the Georgia Conference on Children and Families. The SLO participated on a panel presentation about POSC and the Douglas County QIC-CCCT grant.

Office of Strategy, Innovation and Engagement (OSIE)

- Technical assistance and training provided to regional and county DFCS staff:
- Regional roadshow support
- Building and sustaining local partnerships
- Brainstorming additional ways for engagement with local communities beyond the roadshow events

Technical assistance and training provided to the State of Hope (SOH) Ecosystem:

- October 2019 convening
- Guidance to individual SOH sites regarding project implementation

CPS Intake Communication Center (CICC)

- Present and Impending Danger Training provided to all of CICC staff
- RPI and RPI refresher training provided to all CICC staff
- New Review Guide Training provided to all levels of CICC leadership
- Virtual Computer Organization Training provided to all CICC staff
- CICC IT Program Director provided Verint Training to all seven CICC leadership staff
- CICC leadership provides Mandated Reporter Training to external partners (LE, Hospitals, Schools, etc.) upon their request
- CICC staff partnered with Prevent Child Abuse Georgia to create a webinar “Protecting Children of Amidst Crisis: A Mandated Reporter’s Role” which educates mandated reporters on how to continue their duties as mandated reporters during the pandemic crisis

Training and Professional Development

The Training and Professional Development Section has provided technical support in facilitating webinars and video development. A few examples include:

- The development of a video highlighting practice impacts of Georgia State Senate Bill 167 led by state office leadership. This video received great feedback from the field as it provided a clearer and more practical understanding of the law and how it impacted the work of staff in the field.
- The Development of a e-learning for staff on legislative changes to the Child Protective Services Information System. This was beneficial in providing not only communication, but also practical knowledge of how the changes impact staff case practice
- Technical assistance has been provided to the State ADA Coordinator to assist in the response to existing federal consent agreements.

Court Collaboration

MD-CANI: This objective substantially incorporates training to counties, juvenile courts, SAAGs, and other judicial stakeholders. To achieve this objective, the Division closely collaborates with the state's Court Improvement Program, judicial partners, and the state's Office of the Child Advocate for technical assistance and capacity building. Continual evaluation of the program occurs by participants during each presentation.

Court Process Reporting System: The state agency collaborates with the Administrative Office of the Courts and the Attorney General's Office for continual training and technical assistance regarding the continued implementation of CPRS. All these agencies work closely with various judicial partners to train and assist for the continued implementation of this resource.

FFPSA

The Family First Program Director and Program Manager gave numerous presentations to internal and external stakeholders including at Regional C3 meetings, supervisor summits, and conferences. The presentations included basic information about the Family First Prevention Services Act, updates on Georgia's plans for implementation and how the child welfare system in the state will be impacted by the Act. The goal of the presentations is always to ensure that consistent information is being shared so that all stakeholders have the same understanding and expectations.

Kenny A. Team (Region 14)

- Developed and implemented the Kenny A. Scorecard to track and monitor progress of Kenny A. Outcome Measures
- Enhanced focus on Permanency Outcome Measures and Re-entry
- Developed, implemented, and trained Region 14 Point of Contacts on the proper use of and how to accurately document entries within the Weekly Office Stay Tool
- Tool tracks all youth that spend time in a DFCS office between the hours of 8:00 P.M. and 8:00 A.M.
- Reconciles and Validates all listed Case workers and Supervisors on the weekly caseload report
- Calculates and validates the number of Cases over cap with notation of those case workers with Investigations
- Provides Mid-monthly and Monthly reports to Region 14 for assistance with monitoring and staying in compliance with Kenny A. Outcome Measures

- Outcome Measure 10 - Sibling Placement
- Outcome Measure 9 - Documenting Compelling Reasons
- Ensures the application of the correct data collection methodology for each outcome measure
- Conducts quality assurance checks of data in SHINES for accuracy per each outcome measure, with a special focus on the point-in-time measures
- Assists with identification of procedural and systemic issues resulting from inaccurate data entry and brainstorm potential solutions
- Collaborates with the State Office Data Team to calculate 6-month and yearly performances for all outcomes
- Conducts County Director Training regarding the Kenny A. Requirements
- Participates in regional practice workgroups
- Provides several Maltreatment in Care and Mandated Reporter Trainings for Region 14
- Serves on Region 14 Interview Panels as requested
- Facilitates Monthly Kenny A. Meetings to discuss progress and identify strategies to overcome barriers with Outcome Measures and Infrastructure Standard Compliance
- Kenny A. team member meets monthly with Region 14's Adoption Units to identify and mitigate adoption barriers

Well-Being – Educational Programming, Assessment and Consulting (EPAC)

EPAC had the goal to increase the Division's Case Manager's and Supervisor's ability and knowledge in supporting youth on their caseload who need education support. During this reporting period, EPAC increased training to field staff and various other critical partners. EPAC held 152 Education Academies, training approximately, 1,928 Division staff, external stakeholders, Child-Caring Institutions and foster parents covering EPAC and Its Importance, Special Education laws, School Disciplinary and Tribunals, Completion of Education Stability Plan and How to Advocate for your Foster Youth. Several of the trainings were listed in the Division's Learning Management System thus allowing for field staff to get training credit.

In addition to these trainings, EPAC had the opportunity to present at Department of Education Federal Programs Conference, Georgia Conference on Children and Families, Adoptive & Foster Parent Association of Georgia Conference educating external stakeholders, Child-Caring Institutions, school systems and foster parents on How to Utilize EPAC Services.

These Education Academies and presentations provided information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local educational processes, and advocacy. Additionally, the Academies provided information and best practices for case managers and supervisors as they engage with the local school system and academic centers for youth on their caseload.

The Unit is currently working to create end of the year surveys to provide to county staff, external partners and community agencies to determine the effectiveness of the trainings. However, the verbal requests of the field staff, foster parents and/or external stakeholders, guided the direction or topic of the trainings.

EPAC anticipates providing the following program support and technical assistance in the upcoming year:

Lead Education Agency Partnership to increase the Division's reach and services to youth who need more focused and streamlined education and enrichment support services in our mostly highly populated area of the state, the Division has partnered with the Multi-Agency Alliance for Children (MAAC) who now serves as the Lead Education Agency for Fulton and Dekalb Counties.

Georgia Appleseed to provide trainings to Division staff, Child-Caring Institutions, and foster parents covering topics such as Special Education law, student discipline best practices, enrollment, mental health advocacy, and equity issues. In addition, Georgia Appleseed provides free legal consultation to Case Managers and Education Support Monitors to help prepare for legal advocacy of a foster youth facing school expulsion.

Georgia Education Climate Coalition (GECC) – an auxiliary group of Georgia Appleseed that focuses on school climate issues (school discipline, equitable access to services, mental health awareness and training, legislation that impacts school climate and student access. EPAC's participation in the coalition ensures the voices of Georgia's foster youth are heard. In addition, the Coalition disseminates pertinent educational legislation information that is shared with Division's staff and external stakeholders.

Georgia Regional Educational Service Agency (RESA) – a Georgia Department of Education (GADOE) partner whose focus is to improve the effectiveness of educational programming across the state. As with GECC, EPAC's participation in the coalition ensures the voices of Georgia's foster youth are heard.

State Advisory Panel for Special Education (SAP) – this panel advises GADOE on provisions of special education and related services for students with disabilities. State-wide member organizations (DJJ, DFCS/EPAC, Parent-to-Parent, Higher Education partners, etc.) are present to ensure that recommendations for policy changes are from a group that represents all parts of the state of Georgia.

Together Georgia – is an alliance of children and family service providers. In collaboration with Together GA, EPAC shares information regarding educational rights, policies and practices effecting Georgia’s foster youth. Additionally, EPAC provides consultation to the providers covering student-specific educational concerns.

Georgia Court Appointed Special Advocates (CASA) - a nonprofit organization dedicated to improving the lives of children in foster care throughout the state. By advocating for children who have experienced abuse or neglect, our volunteers amplify each child's voice and help change a child's story. In collaboration with EPAC, GA CASA provides trainings to CASA volunteers covering topics such as Special Education law, student discipline best practices, enrollment, mental health advocacy and an overview of EPAC services.

Georgia Department of Education - Keeping in line with the reauthorized Every Student Succeeds Act (ESSA), GADOE and the EPAC Unit coordinate efforts to ensure the educational stability of students in the custody of the Division. The Division and GADOE exchange information through the Statewide Longitudinal Data System (SLDS), allowing each agency access to relevant and pertinent information to aid in the academic support of the foster youth. GADOE has identified Foster Care Points of Contact at the State and Local level to ensure the educational stability of foster youth. The school systems’ Foster Care Points of Contact 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.

Well-Being – Early Education

Trainings were provided to DFCS staff and partners on the following topics:

- Brain Development
- Trauma Informed Care
- The Importance of Early Education in Foster Care
- EECU Unit Overview
- Navigating Childcare Services
- CAPS Referral for Foster Care and CPS

All of the trainings provided insight to participants on the need for early intervention and enrollment in early education programs for children in foster care. This awareness help increase the number of participants enrolled in those types of programs. A continuation of the previously provided trainings as well as a special training track geared towards pregnant and parenting youth in foster care is planned for the upcoming year.

Well-Being – Wellness Programming, Assessment and Consulting (WPAC)

Case consultation and medication management staffing for youth on four or more psychotropic medications with DHS medical director - case consultation allow staff (CM, SSS, SSA, county and regional directors. etc.) to request various types of consultation with Dr. Patel which include review of psychotropic medications, peer to peer reviews with treating physician, consultation regarding medical procedures, mental health treatment planning, and adding new psychotropic medications to a child's regimen. The consultation was successfully implemented; however, this resource is limited due to Dr. Patel only being available 3 days a week. Additionally, staff were underutilizing the consultation so the medication management staffings were implemented and these are initiated and coordinated by the WPAC Unit.

Well-Being Template (Afterschool and TeenWork)

Trainings were provided to caseworkers and adult supporters on the positive attainments of the youth served by the program. Caseworkers and adult supporters provide support for programming taught to youth like thinking skills such as innovative and creative thinking, decision-making and problem solving that prepare youth for future employment. Additional topics covered in trainings include critical skills for processing information, how to evaluate and solve problems, perform mock interviews, discover resume styles, and how to complete an employment application. A hands-on experience component solidifies the concepts in youth.

Georgia CREW/TeenWork continues to conduct a series of support activities that educate field staff, providers, and youth about changes in the program. Staff facilitated information sessions with county and regional directors in order to answer any questions about the new program and how it would benefit youth and support caseworkers in their regions. In addition, the unit has met with DFCS staff in various settings to answer any questions about the application process and youth eligibility. The unit has also met with group home directors, and appropriate staff to assist them with the application and payroll packet completion. The unit has met with youth in various group homes and in DFCS custody in order to provide an orientation to the new GA CREW program. The orientation session has allowed youth to ask questions and to better understand the differences between GA CREW and the GA TeenWork Internship Program. The unit continues to have a committee with employers who are interested in giving DFCS youth opportunities to work at their place of business. Employers who have participated with our program for several years have been invited to be members of a board of employers that shares their ideas and suggestions in order to improve the quality of the program. This summer session will be provided through a Zoom platform. Many employers have agreed to speak and train youth on various dates this summer. There are many youths, and providers, who will need technical assistance and guidance in setting up zoom accounts and using the technology.

SHINES

The Georgia SHINES team facilitate webinar sessions post major system enhancements. During this reporting period, the team has facilitated webinars to support the following initiatives:

- Department of Education interface
- S.A.F.E.
- Kinship Care Continuum

In addition to the webinar sessions, the Georgia SHINES team has developed job aids to increase users understanding of system changes and how those changes impact their work. The team has also assisted with providing system overview upon requested. During this reporting period, the team has facilitated the following:

- System overviews for child support staff
- LENSES dashboards overviews on Kinship
- Walk-through of system enhancements with Education and Professional Development Unit
- System overviews with Support Services Unit

b. Training and Technical Assistance Received

Prevention

The Prevention Section received technical assistance from the Alliance of Children's Trust Funds with the Parent Advisory Council. The Alliance assisted with the formation of the Council and the ongoing training and development of the Council. They provide consultation on meeting agendas and activities.

Georgia has participated in the National "Adoption Call to Action" by attending two summits in Washington DC as well as a couple of national and regional calls to continue the discussion of addressing the nation's waiting children

Safety

The State of Georgia was provided the opportunity to participate in survey/review of practice regarding our work around prenatally exposed children. This involved individual interviews with front line staff, stakeholders, providers, caregivers, and senior leadership. A review of over 200 records was also included in the process. At the conclusion, the division was provided with a detailed written report that was very useful and assisted in the process of developing next steps for our Plan of Safe Care work as well as showing gaps in identifying and working with older children who were prenatally exposed.

Workforce Development

Technical assistance related to 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 was provided by the National Child Welfare Workforce Institute and The Butler Institute for Families. Technical assistance from these entities will continue through the life of the project.

Promoting Safe and Stable Families

PSSF Grants Supervisor attended the PSSF annual meeting in Washington, D.C.

CAPTA

The Children's Bureau, in partnership with the Centers for Disease Control and Prevention, engaged James Bell Associates and ICF to conduct a study on prenatal alcohol and other drug exposures in child welfare populations. The State of Georgia agreed to participate in this multi-site descriptive study that explored the knowledge, procedures, and attitudes about identification, documentation, and treatment of children with prenatal substance exposures (PSE) and Fetal Alcohol Spectrum Disorders (FASDs).

The study included on-sight interviews including case managers, supervisors, providers, and caregivers along with a review of 212 cases. GA was provided with written findings from interviews and surveys of local staff conducted in four local agencies across this state along with considerations for the state regarding the potential implications of the findings and select suggested resources.

The Douglas County Juvenile Court is the recipient of a QIC-CCCT grant to improve systemic responses to substance affected infants. Practice and Program Guidance (PPG) and Douglas County DFCS have been closely involved in the development of goals and action plans for the grant and have participated in site visits and calls from the Technical Assistance (TA) team. The Douglas County demonstration site has been very successful in engaging all parties, including birthing hospitals, public health, treatment providers and early intervention services to create a system of care for pregnant women using substances and increase the likelihood of intervention prior to birth.

Office of Strategy, Innovation and Engagement (OSIE)

Technical assistance and training that the OSIE team received:

- Support from Casey Family Programs for roadshow events
- Partnership with Together Georgia (provider association) for the provider meetings held during the roadshow
- Technical assistance from IDEO for continued implementation of SOH

- Technical assistance on how to evaluate the roadshow and its impact on state priorities and goals
- Technical assistance on how to evaluate the SOH Ecosystem and its impact on state priorities and goals

CPS Intake Communication Center (CICC)

- DFCS-DHS vendor NexxPhase-Verint provided Workforce Management and Workforce Optimization training for all CICC program directors, administrators, quality assurance specialists, business support analyst, and select supervisors during this fiscal year. This robust training provided by NexxPhase-Verint information technology specialists and trainers covered information technology, database management, workforce management, workforce optimization, and system administration techniques and systems to optimize and streamline processes, manage and monitor work activities, create and review performance metrics, forecast and schedule, and covered a host of other computer information system topics. The Information Technology program director attended an advance level of training related to system administration, database management, and system and cyber-security. The vendor also embedded eLearning training modules in the current system for all employees. This training allows the employee to access computer system training 24 hours a day to ensure all are abreast on system functionality.

- CQI provided training for all of the new CQI members.
- Human Trafficking program coordinator provided training in regard to CSEC.
- The safety director provided training and guidance around Plan of Safe Care reports and prenatal exposure.
- The Education and Training Section provided CICC staff with multiple trainings over the past year including but not limited to: CICC Essentials for New Workers, Reasonable Suspicion, Civil Rights, ADA, LEP/SI, Customer Service and Communication, Workplace Violence, Workplace Harassment, Standards of Conduct, Safety Awareness and Fall Prevention, Defensive Driving, Information Security Awareness, Employee Selection Protocol, and MEPA-IEPA.

Training and Professional Development

The Training and Professional Development Section received technical assistance and support from:

- Georgia State University Professional Excellence Program: The GSU PE program aided the DFCS Training unit by assisting with facilitating Focus Groups, Evaluation of Training Courses, and the use of technology in delivering blended learning to staff.

- Athens Technical College- Institute for Online Training and Instructional Systems: Has provided technical assistance support through the development and maintenance of the Division's Learning Management System (LMS). During this review period, the LMS system was upgraded to improve reporting, tracking, capacity and overall functionality. During this period IOTIS staff provided training, online support and communication to staff as to the changes to the system. They have also trained DFCS training staff as to how to utilize the system to track and input courses, attendance and utilize other reporting functions.
- ACCENTURE- Provided technical assistance and support in the use of the AVE nueS Virtual Reality Training system. During the review period approximately 200 child welfare staff completed the AVE nueS Virtual Reality Training. Staff from the training unit also assisted in a joint presentation on the use of Virtual Reality training in child welfare at the National Staff Development Training Association Conference in Long Beach, California in October 2019.
- National Child Welfare Workforce Institute (NCWWI)- Staff from the NCWWI has provided technical assistance throughout the development and planned implementation of the NCWWI Leadership Academy. The Leadership Academy is scheduled to launch in September 2020. There have been monthly workgroup meetings to establish Leadership Development Coaches, Trainers and Curriculum.

FFPSA

The Family First program director, program manager and other Division team members as appropriate, participate in the Casey Family Programs Family First Learning Collaborative, a biweekly call where states and national technical assistance groups present information and participate in discussions about Family First implementation. As a result of participation in this group, the program director stays in regular communication with peers in several other states to share updates and get feedback on challenges and ideas.

Well-Being – Educational Programming, Assessment and Consulting (EPAC)

Lead Education Agency Partnership - To increase the Division's reach and services to youth who need more focused and streamlined education and enrichment support services in our mostly highly populated area of the state, the Division has partnered with the Multi-Agency Alliance for Children (MAAC) who now serves as the Lead Education Agency for Fulton and Dekalb Counties. As the lead Education MAAC provides education support services to school age youth who are in grades 9 – 12. These services include:

- Provide tutorial services (when those services are not available or have been exhausted in the LEAs for children and youth in foster care) using certified teachers
- Process, track and monitor extracurricular and enrichment services for youth ages

- Conduct educational assessments
- Create Education Action Plans
- Create service provision and support plans for youth who:
 - Have been identified as special needs
 - Have Individualized Education Plans
 - Have 504 Plans
 - Are in GNETS or at-risk of being placed in GNETS programs
 - Are talented and gifted

Grad Nation

With funding and support from America's Promise Alliance, DFCS implemented Project Graduate 2.0 with the long-term goal of developing strategies that will enable the Division to sustain and replicate this work statewide.

Objective 1: Leverage the support of state and local education partners to provide more seamless coordinated services that will improve the academic outcomes of Georgia's foster children and youth.

Objective II: Strengthen the system's ability to efficiently address and respond to the concrete educational needs and goals of foster youth

Objective III: Build the internal capacity of DFCS staff and its partners to analyze and use educational data for programmatic decision making and targeted interventions including:

- Increased stability of placement
- Executed data sharing agreements with Local Education Agencies (LEA) in Fulton and DeKalb counties and increased representation at roundtables that are focused on educational goals for youth in care.
- Increased likelihood that foster youth in Georgia feel supported in ways that advance healthy development and well-being and reduce the impact of negative life experiences.
- Increased number of partners who develop and implement practices and policies that affect foster youth and their educational goals
- Increased number of DFCS county staff who develop and implement practices and policies that positively affect foster youth and their educational goals
- Increased graduation rates of foster youth

Well-Being – Early Education

During the reporting period, ECCU managers and director received leadership and development training. The skills obtained through the sessions have been used to create a better working dynamic and ensure support is provided to all unit members. Unit staff received training on brain development, trauma in young children, and case planning. These trainings increased the workers skillset and knowledge related to foster care and the early learning field.

Well-Being - Afterschool and TeenWork

The Train-the-Trainer certification facilitated by Youth Thrive provided best practice methods and a knowledge base surrounding healthy adolescent development. It created an opportunity for program staff to receive research-based information that supported the implementation of new methods of practice in youth serving programs. The Trauma Informed Care training conducted by Chris 180 helped Georgia CREW/TeenWork look at how it communicated with youth. The biggest change was to consider the possible trauma our teens face when building Job Readiness Trainings for our youth participants, as well as to give them greater latitude for bad days while providing the teens with expectations to come to work ready to give it their all. Noting all of the different reasons that teens may need to take a day off, including a self-care day, assisted many of our youth in opening up to their ETS' about struggles that impacted their ability to work, since they knew they'd have a listening ear, and that our focus would always be to solve immediate issues in order to get the participant back to work as efficiently as possible while maintaining positive relationships with the employers, guardians and most importantly the youth themselves.

c. SHINES

The Georgia SHINES team participate in webinars offered by ACF that are specific to child welfare information systems. These sessions aid with increasing state's understanding of CCWIS requirements, facilitate relationship building/collaboration, and opportunity to gather information about trends/technology solutions. Monthly, the Georgia SHINES Director meets with ACF analyst to provide project updates and obtain technical assistance when needed.

The following are notable Georgia SHINES accomplishments during this reporting period:

- Established new interface with Department of Education (April 2019)
- Enhanced Resource Development module to support S.A.F.E. implementation (August 2019)
- Enhanced several modules to support the State's Kinship Care Continuum (November 2019)
- Improved existing CPS Alerts functionality – Phase II (December 2019)
- Improved case documentation of Expectant and Parenting Youth (December 2019)

- Improved identification of Discharge Caregiver when children exit foster care (December 2019)
- Implemented system changes to support Legislative Mandates – HB 472/HB 530 (March 2020)

In addition to notable system enhancements, the State has transitioned application maintenance and operational activities from vendor to state Office of Information Technology. This was effective January 1, 2020.

As mentioned previously, Georgia SHINES has implemented system changes to support HB 472 (Temporary Alternative to Foster Care) and HB 530 (Children Withdrawn from Public Schools Without a Declaration of Intent to Homeschool). Additional system changes are expected to be implemented during the next state fiscal year, which include:

- HB 64 – Military Notification
- HB 478 – Child Abuse Registry
- SB 158 – Anti Human Trafficking
- SB 167 – Diligent Search

During this reporting period, Georgia SHINES has implemented system changes to support the state's new Kinship Continuum practice model – intended to improve practice specifically to engaging relatives and non-relatives for the purpose of improving outcomes for children in foster care. Additionally, the Kinship Continuum improves support services to families, including financial assistance and removing barriers that inhibit families caring for relative children who are in foster care.

The State is participating in a Family Treatment Court project and has established a Memorandum of Understanding (MOU) for the Family Treatment Court (FTC) Standards of the Council of Accountability Courts. As part of this initiative, the Georgia SHINES team has been engaged to assess the impact to case documentation/system changes. The team has completed a thorough gap analysis and has submitted it to the application team to determine level of effort.

Every project the Georgia SHINES team initiates, the team engages state office and field staff (end users) to determine what changes are necessary to meet the business needs. In instances where system changes will impact interface partners and provider community (placement and delivered services), input is solicited. This includes engagement in most aspects of system development life cycle – gap analysis, requirements/design, and end-user testing.

Most recently, the team facilitated several focus group sessions, which included providers (delivered services) and DFCS staff. The purpose of the focus groups is to engage participants in conversation regarding service authorizations – what works, what does not work, and if

something could change, what? Feedback received was used to develop a gap analysis and identify high-level business requirements for service authorization functionality in Georgia SHINES and expanding provider portal to support automation of service authorization.

The SHINES Unit has assisted the state in achieving the following CFSP goals/objectives over the last year:

Strengthen Kinship Continuum:

- Georgia SHINES implemented solution to support the State's Kinship Care Continuum
- System changes include modification to several modules (e.g. Investigation, Family Preservation, Foster Care and Resource Development)

Support children who need additional education assistance:

- Work in partnership with EPAC to support improved case documentation specific to education and educational needs of children; EPAC and Georgia SHINES teams meet quarterly
- Case managers have ability to document education setting (including special programs), create Education Stability Plans, and have access to DOE data
- Developed job aids and communication materials to increase user knowledge of system functionality

Strengthen the Division's partnership with the court system:

- There are three interfaces with the State's Court Plans Reporting System – Case Plan, CPS, Court Orders
- Meet quarterly with the Court Improvement Project – Court Plan Reporting System team to address concerns/issues identified in data sharing
- When requested by the courts or region/county DFCS staff, facilitate case plan trainings; delivered in partnership with Court Improvement Project and Data Integrity Specialists Unit.

Statewide, SHINES serve the following populations:

- DFCS staff (Child Welfare and Office of Family Independence)
- Department of Education (notification of children in/out of care, access to education data)
- Administration Office of the Courts (Court Plan Reporting System – Case Plan, Court Orders, CPS interfaces)

- Division of Child Support Services (Child Support referral)
- Department of Early Care and Learning (Childcare and Parent Services referral)
- Georgia Department of Public Health (Women Infant and Children referral)

d. Research, Evaluation, Management Information Systems

Well-Being – Early Education

All of the unit's work is data driven. Data analysis of childcare services utilization within DFCS allows the unit to target specific regions and counties. Resource mapping highlights the availability of services and helps determine what type of early education or childcare services may be needed in an area. CAPS data helps with the tracking of CAPS scholarships due for redetermination, preventing disruptions, childcare services and foster care placements.

Well-Being Template (Afterschool and TeenWork)

CREW used SHINES to identify and validate youth who have applied to the employment program. This system stores youth information and allows employment specialists to identify where youth are placed, along with other factors that can affect placement into the program (education requirement, placement county and placement type). CREW also utilized an OIT built data storage of application data. This application data allows for employment specialists to determine which youth are eligible for programming and provide a feedback loop to case managers for application receipt. This application storage system also allows for Employment Specialists to start collecting applicant information to track trainings attended. CREW is a partner in the Collective Impact Forum, which is an online community that provides peer network, discussion spaces, resources and news for practitioners that use data to learn and strengthen their work in collaboration with others, ultimately contributing to achieving greater impact in communities. The Collective Impact Forum unfolds over four stages: governance and infrastructure, strategic planning, community engagement and evaluation and improvement. Being a part of this forum along with United Way of Greater Atlanta has allowed CREW to launch work groups, develop a blueprint for programming, engage the community more broadly, and establish shared measures across the social sector.

e. Quality Management

Georgia has two Child Welfare Quality Assurance units within the Office of Quality Management, the CWQA unit and the CWCQI unit. These units provide QA and CQI services statewide to field operations. The two units work together to support statewide quality improvement processes in Georgia's Child Welfare daily practice.

The Program Director provides direct oversight of both the QA and CQI teams. Each individual team is led by a Unit Manager. The QA team is comprised of seven QA Specialists, and receives

technical support from the Quality Management Data Unit as needed. A description of the case review process utilized to collect statewide data is summarized below. The QA team utilizes a review approach that directly mirrors the federal (CFSR) review process.

The QA unit conducts Quality Case Reviews (QCRs) for the purpose of evaluating the quality of services provided to children and families. The goal is to improve overall safety, permanency and well-being outcomes for families by improving the quality of case work provided by county and regional staff.

For the purpose of conducting ongoing QA reviews, rolling samples are generated monthly from data in Georgia SHINES, the Statewide Automated Child Welfare Information System (SACWIS), and a random number generator in Microsoft Excel. Samples are generated from the State's Data Unit and provided to the QA team each month. The official review schedule for the State is divided into "zones", with each zone being inclusive of two to three regions. One zone is reviewed each month, with each Region being represented once per every six-month review period. The geographical zone creation saves time and resources by reducing travel for reviewers and by limiting the interruption to any region to a single month. The final sample for each six-month review period includes 90 Foster Care cases and 60 in-home cases. When broken down monthly, 15 Foster Care cases, 5 Family Preservation Services cases, and 5 Family Support Services cases comprise each "zone" sample. Three hundred cases are reviewed annually according to Georgia's case review sampling plan.

In addition to case record reviews, interviews are conducted with participants (family members, stakeholders, etc.) related to each case reviewed. The following individuals are required to be interviewed as a part of the case review process unless they are unavailable or completely unwilling to participate:

- The child(ren) - school age
- The child's parents
- The child's foster parents, pre-adoptive parents or other caregivers
- The family's case manager (if the case manager is no longer with the agency the supervisor, who was responsible for overseeing the case and case manager, may be interviewed)
- Service providers working with the family

While QA interviews at a minimum are required to include agency staff members, and at least one family member, this minimum interview requirement has been far exceeded for the majority of cases reviewed.

Through the QA review process cases are evaluated based on 18 CFSR Items within seven outcomes related to Safety, Permanency, and Well-being. Information gathered from case

reviews and interviews is compiled and analyzed to formulate CFSR case ratings. The QA team utilizes the federal On-line Monitoring System (OMS) to capture all case reviews and associated data. Data is calculated by OMS and pulled through the “Reports” section of OMS by QA team members each month following reviews. Achievement is based on the national standard of 95% substantially achieved in each of the seven performance outcomes and 90% in each of the 18 performance item indicators. The outcomes can be stratified across various populations including age, permanency plan, and geographic area, using the CWQA database.

At the conclusion of each monthly review, case review data is analyzed and disseminated in the following manner:

- Each month the Unit Manager compiles data representative of the State’s overall performance and sends to the Director of Quality Management, who in turn shares review outcomes with Regional, District, and State Office leadership. Data related to overall state performance is captured and disseminated each month utilizing a Rolling Trend Chart, which portrays the state’s current performance for the most recent six-month “rolling” review period in comparison to performance during the 2015 CFSR, a PIP Comparison Chart which details the State’s current performance with regards to PIP Items broken down by program area, and a “Regional Achievement Summary” which offers a comparison of each region’s most recent performance with regards to CFSR Outcomes and Items.
- Exit conferences are held with regional leadership to provide an overview of review findings following each review prior to results being communicated with field staff.
- Each region is provided with a trend chart as well as a comprehensive summary detailing their most recent review findings. Regional summaries place focus on practices contributing to case ratings.
- Individual case review guides are shared with county staff to include the case managers and supervisors responsible for the cases with an opportunity granted for county staff to have dialogue about case findings if requested and/or warranted.
- QA and CQI specialist partner with regions to verbally share review findings through Performance Improvement Collaboration (PIC) meetings, as well as through presentations at regional CQI meetings. PICs serve as a collaborative effort between Quality Management and Regions that uses the CQI process to enhance practice via data informed strategies with input from staff at all levels and external stakeholder involvement. Formal PICS are conducted in each region a minimum of annually.
- Individual case debriefs are conducted with county and regional staff in incidences where safety concerns and/or serious case practice deficiencies are identified in an effort to provide feedback regarding case practice and facilitate a continuous learning

process or whenever additionally requested by regional or county staff. CQI team members are also invited to participate in case debriefings.

- After each bi-annual review, a detailed trend report is generated to summarize review findings including case specific findings, systemic factor findings, and stakeholder findings, including an analysis of these findings. Comparisons to the state's previous review results as well as the federal compliance standards are included.
- Monthly statewide data, regional summaries, and bi-annual trend reports are shared with agency decision-makers to include section directors, and district, regional and county staff. Information from these reports is included in presentations at statewide meetings, regional meetings, section meetings, workshops and with external stakeholders as requested. The trend report is utilized by DFCS Leadership to promote statewide program improvements, new initiatives, evaluate training needs, and drive change in practice. Agency decision makers, courts and other stakeholders are provided data and are able to complete their own analyses. Stakeholders are additionally invited and encouraged to attend PICs, as well as regional stakeholder meetings held statewide where regional specific data is shared.

The QA team continuously seeks the input of field staff with regards to ensuring that the review process is efficient and effective for staff at all levels. Field staff and stakeholders are not directly involved in the QA process. Based on the feedback of field staff at all levels the QA team has made the following adjustments to the review process:

- Review guides are now directly sent to county level staff (in addition to regional and district leadership) in response to concerns brought to the team's attention regarding data not being filtered adequately to front-line staff.
- Regional PIC (Performance Improvement Collaboration) meetings have moved from being conducted bi-annually to annually to ensure that data findings and analysis are a true representation of the region's progress over the full one-year review period.
- Regional summaries have been modified to include an executive summary after each region's first review of the year, followed by a comprehensive annual summary after each region's final review annually. This ensures a comprehensive reflection of work representative of each region during the full yearlong review period.
- Adjustments were not able to be made to the actual QA review process as the State was mandated to adhere to the federally approved sampling plan and case review process for the duration of the PIP.

The federal review guide, the Onsite Review Instrument (OSRI), is utilized to rate each case reviewed. Three hundred cases were rated utilizing the OSRI between April 1, 2019 and March

31, 2020. This included 180 Foster Care cases, 60 Family Support Services cases, and 60 Family Preservation Services cases.

The QA process utilized in Georgia directly models the CFSR review process. All current QA reviewers have been trained on the CFSR standards as well as the review process. Four of the current QA team members are agile (contracted) staff with the Children's Bureau and have participated directly in CFSR reviews in other states. Because Georgia has utilized a case review process which mirrors the federal review process since 2016, this process has demonstrated sustainability. Throughout this review period, our federal partners have completed secondary oversight on at least three cases reviewed by the QA team each month to ensure fidelity to the CFSR review process with no concerns identified by the Children's Bureau regarding processes/procedures.

f. Continuous Quality Improvement (CQI)

The state CQI unit consists of 5 CQI Specialists and one unit manager. The team serves 14 regional CQI teams and a CICC team. Regional CQI teams use various methods of data collection, including feedback loops, record reviews, surveys, focus groups, interviews, etc. In addition, up until June the CQI team used "PACCC" (PIP, APSR, CFSP, CFSR, CQI) meetings as a means for information exchange between the state office and the regions. Regional CQI teams communicate with county CQI representatives who in turn provide updates on CQI progress to their local teams. At times, stakeholders are members of the CQI team. There were two external stakeholders who regularly participated in the PACCC meetings.

Regional CQI teams use data provided by QA reviews, and occasionally review case records to determine if their strategy is working. In that case, a review guide is developed based on the impact the strategy should have on practice.

CQI uses CFSR results to help guide teams in the area they need to improve. Based on this information, root causes are determined, and strategies developed to improve practice. In addition, based on the ongoing barriers of regional CQI teams, a CQI pilot was implemented to assist in developing county CQI teams so that they could work on their own practice to address areas needing improvement.

g. C3 Coordination

Many C3 coordinators serve dual roles in that they are also CQI team leads or facilitators in their region. The cross-section of duties is practical in that C3 coordinators often take the suggestions and recommendations they receive from stakeholder meetings to the CQI meetings to assess the feasibility of the ideas and/or to brainstorm strategies to address identified deficiencies or needs. The CQI meetings are often suitable environments for discovering root causes and refining regional service array lead and lag measures.

While there are managers who are separately responsible for the CFSP, CFSR and CQI work, the three units work closely together to ensure there is symmetry in how agency priorities are

adopted and how the strategic planning work flows throughout the service continuum. There is a dedicated, full-time C3 coordinator in each region that ensures this symmetry is as intrinsic at the field level as it is at the state level. This concept, branded as the C3 Connection, provides a foundation of stability, focus and effective communication, and kindles courses of action that support plan objectives.

The CFSP manager provides a report template to C3 coordinators each month that they use to capture written updates on their respective region's progress and send back to the CFSP manager, who then compiles and forwards the reports to state office program area leads. The reports contain information on how the region is implementing CFSP strategies, attending to challenges or trends, and using innovative practices to achieve positive outcomes. The coordinators are the CFSP leads for leveraging quarterly stakeholder meetings to help the State get better at service provision and for monitoring the effectiveness of those services. As part of their responsibility, they work with stakeholders to establish strategic measures (leads and lags) and objectives and conduct case record reviews looking for indicators of quality communication between the providers and the agency. Many of the coordinators also serve as the Communities of Hope grant review lead for their region.

At the regional level, C3 coordinators help to monitor progress and work to ensure staff understand the role they play in assuring the state meets plan objectives, national standards, and ultimately the best outcomes for children and families. They gather state and federal updates and gain technical assistance from bi-weekly virtual meetings facilitated by the CFSP manager. As well, they are informed of regional progress on CFSR outcomes by the results of the Quality Assurance reviews. C3s encourage and educate their constituents by making them aware of trainings and other available supports. They share information at social services summits, via email blasts, newsletters, video clips, visual displays, stakeholder meetings, and webinars. Some coordinators even teach some of the trainings themselves.

In addition to the Microsoft Teams meetings every other week, C3s get an annual training at a two-day C3 retreat facilitated by the CFSP manager. The last retreat was held January 2020 and training included presentations on case record reviews by the QA manager and the CCWIS system by the SHINES director. A presentation on youth engagement was led by youth leaders from the MAAC and a presentation on the nation vision on prevention by the CFSP manager. Awards were presented to C3 coordinators of the year.

Currently, there are six staff who have been a C3 for more than two years. One has been a C3 for a 1.5 years. Two will have been a C3 for a year in August 2020. Two have been on board for less than three months. Two slots are vacant. The vacancies and changes are due mostly to promotions (to county director, lead FPS, and IV-E Master of Social Work program). The Region 8 coordinator left the Agency February 2020. The CFSP manager began reporting to a new federal planning director effective May 2020.

I. Service Descriptions

a. Stephanie Tubbs Jones Child Welfare Services Program (title IV-B, subpart 1)

CPS Intake Communication Center (CICC)

Populations and Geographic Areas Served

CICC takes calls, webforms, emails, and faxed CPS reports for the entire State of Georgia. Once the information is gathered, assessed, and staffed between case manager, supervisor, and/or administrator, the CPS report is assigned to any of the 159 Georgia counties via SHINES. CICC receives telephone calls from all over Georgia and the United States. Georgia has consistently been a State that families have migrated to and has been in the top ten of most migrated to and fastest growing States for the past five years. CPS data has shown an increase as population increased. CICC serves the family and children of Georgia, internal and external customers that include but not limited to field staff, law enforcement, hospitals, mental health, foster parents, mandated reporters, and non-mandated reporters who want to report child abuse or neglect.

CICC services all 159 counties as well as mandated and non-mandated reporters from other states related to child abuse or neglect. The Unit assigns reports of abuse/neglect to all of the Georgia counties that are broken down into 15 DFCS Regions.

Estimated Number Served

The number of intakes has decreased this year, from March to on-going. The number of intakes for April in 2019 was 13,396. The number of intakes during April of 2020 were 6,859. This is due to the Pandemic where shelter in place orders and school closure orders has reduced numbers of mandated reporting. Over the past year, CICC has received 85,897 calls (last data date was March 31, 2020). Data shows that this has been a decrease in the annual amount of reports received. Due to the Corona Virus (Covid-19) Pandemic, sheltering in place orders were directed by the Governor. This resulted in all brick and mortar schools closing and home schooling was mandated. School personnel have been the highest reporting source over the past 5 years. School personnel have not been able to see the students or come to the students home to see signs of abuse and students were not able to disclose abuse to their teachers and school social workers as normal, therefore, CPS reporting from school systems have declined since February 2020. CICC has served 670,595 individuals and families. Over the past five years the amount served was 912,377. Predictive data suggest CPS reporting will align with sheltering in place directives and practices for the month of February, March, April, May, & June 2020. This declination has a direct correlation with the 2020 Pandemic. CICC will still reach a million-call milestone in 2020.

Services Provided

Information gathering and CPS case assignments to the counties are the primary services provided by CICC. CICC also receives over 1,000 Information and Referral calls per month. Callers are provided contact and address information for food pantries, homeless shelters, and other community services when they ask about community resources in their area. Presently on the CPS Hotline Interactive Voice Response (IVR), callers can select “Option 6”. Pressing this option connects the callers with additional services provided by the Prevent Child Abuse Organization. Parenting services and a host of other community services are provided. CICC implemented changes to the Interactive Voice Response (IVR) system to include Zip Code Routing. Callers that do not want or need to make a report of child abuse/neglect can call the CPS Hotline and press option “3”. The caller can then follow the prompts and enter the zip code of the county they would like to communicate with. This IVR option is used when the caller wants to speak directly to a DFCS county office representative or case manager about a previously reported CPS case or ask general questions. This new option initiative has decreased CPS call volume and transferred over 1000 calls to the county per month. Feedback gathered from internal/external partners assisted with the justification for this technology.

All services listed above are ongoing and the State of Georgia actively engages the community for feedback, suggestions, and recommendations for additional services or future services. The original IVR consist of six options. Option “1” is delegated for emergency professionals (Law Enforcement, Emergency Responders, Juvenile Courts, and Hospitals) but additions were made to “option 1” to assist Foster Parents during inclement weather situations (hurricanes, tornadoes, etc.). The Foster Parents can call the hotline and press option 1 and provide information about their emergency plan to move towards safer and pre-determined locations within the State. Information provided by the Foster Parent includes demographic information, household information, present location, and emergency shelter destination or location. CICC will obtain this information for tracking and accountability purposes and also provide the Foster Parent with shelter or other emergency updates. Foster Parents can also press “Option 1” 24 hours a day if they have made unsuccessful attempts to reach their assigned case manager or county representative. CICC will obtain relevant information and assist the Foster Parent with contacting their case manager. This initiative was implemented to ensure the Foster Parents have constant contact with DFCS and the agency is available to assist them at all times.

Another addition to Option 1 on the IVR this fiscal year was implemented to assist DFCS county case managers with obtaining CPS history checks before and during the decision-making process of safety resourcing and placement. When the field case manager assesses, staffs, and determines a child is unsafe in their present home environment and safety resources are necessary, the case manager can call the CPS Hotline and press “Option1”, provide information, and receive CPS history on the safety resource. The field case manager and their management team will make the determination for the safety resource decision. This initiative is directed by new policy and guidelines and the decision to place a child is determined by the county.

Changes are made based on the needs of the agency and feedback from the public as mentioned above. Future additions, changes, and upgrades will be deployed if the budget permits. The IT Project Manager maintains a running list of future projects and continuously researches emerging technology that would benefit the agency. CICC will continue to explore ways to stream-line IVR processes and assist all internal/external stakeholders with updates and additions to the IVR and Information Technology systems based on needs of the agency.

Prevention and Community Support (PCS)

Populations and Geographic Areas Served

The Prevention Section provides primary and secondary prevention services to children and families across the state of Georgia.

Estimated Number Served

During FFY19, the Prevention Section served 4,675 families and 12,997 parents and children through CBCAP. The Prevention Section served an additional 29,401 families and 40,505 parents and children through state and TANF child abuse prevention funds. The strengths of these services are that it is upstream prevention; support and services are provided to children and families to help strengthen with the intention to divert any future risk of child maltreatment. The major gap is there is not enough funding to serve more children and families throughout the state. Prevention is a cost savings, if preventative services are provided, it potentially saves money from services that are provided later if a family comes into contact with the child welfare system.

Services Provided

The Prevention Section provides primary and secondary prevention services to children and families across the state of Georgia through contracts with community-based organizations and initiatives. This is done through three competitive grant programs – First Steps, Second Step and Home Visiting. There are also three additional programs funded to provide direct services. These services are funded every year and are listed and described briefly below. These services will continue to be funded each year as long as the budget supports it.

Evidence-based Home Visiting

Through a competitive application process, PCS awards contracts to community-based organizations to provide evidence-based home visiting models of Parents as Teachers (PAT) or Healthy Families (HFG). PAT and HFG serve expectant parents or parents of children birth to five.

First Steps Georgia

Through a competitive application process, PCS awards contracts to community-based organizations to provide a thorough screening, appropriate resources, and linkage/referral to

expectant parents, newborn parents, or parents of children birth to five. The screening reviews the parent's needs in many areas including medical insurance coverage, primary care provider, substance use, domestic violence, financial and housing needs, etc.

Second Step

Through a competitive application process, PCS awards contracts to school systems or after-school programs to provide the Committee for Children's Second Step social emotional learning curriculum. The curriculum is delivered through the classroom to elementary and/or middle school students. Awarded contracts are required to also use the Child Protection Unit and the Bullying Prevention Unit in elementary schools in order to be granted funding. Contracts provide reimbursement for the purchase of the curriculum's student and teacher materials for their requested schools.

Project Healthy Grandparents

Through a contract with Georgia State University, PCS provides partial funding to support the case management and home visiting support to the grandparents raising grandchildren program housed within Georgia State University.

Parent to Parent of Georgia (P2P)

Through a contract with P2P, PCS provides partial funding to support the development of parent leaders for parents with children of special needs. Parent leaders then provide training and support group meetings and events to other parents of children with special needs.

ChildKind

Through a contract with ChildKind, PCS provides partial funding to Prevention and Support services for children with medical complexity and their families. Nursing and social work services are funded with this contract.

Reach Out and Read of Georgia

Through a contract with Reach Out and Read of Georgia, PCS provides partial funding to support the provision of age-appropriate books to children served in pediatric offices throughout the state and to the state's military bases. Pediatricians delivering the books also discuss the importance of early literacy with the parents in the well-child visits.

Mental Health America of Georgia

Through a contract with Mental Health America of Georgia, PCS provides partial funding to support the provision of age-appropriate social-emotional learning puppet shows to children in elementary schools or after-school programs throughout the state. The puppet shows include topics such as safety, bullying prevention, kindness and inclusivity.

Safety

Populations and Geographic Areas Served

Population and geographic areas served is provided on the attached CFS-101 form.

Estimated Number Served

The estimated number of individuals and families served is provided on the attached CFS-101 form.

Services Provided

High Priority Review Team

The High Priority Review Team provided the following services during the past year:

- Intimate Partner Violence Assessments/Counseling
- Substance Abuse Assessments/Counseling
- Babies Can't Wait Assessments
- Parenting Fitness Assessments
- Parenting Classes
- Psychological Assessments
- Parent Aide Services
- Mental Health Counseling
- Child Care Services
- Plans of Safe Care
- Safe Sleep Awareness Services

All services are designed to strengthen the family, address mitigating needs for example, parenting, substance abuse, prenatal substance abuse, mental health needs, medical needs, domestic violence services and or child safe sleep services. These services when used appropriately can reduce risks to children where there is significant harm of maltreatment and allow for these children to remain safely in their homes.

No changes were made to any of the program or goals during this reporting period nor are any anticipated changes or additions anticipated. The program design is fluid to match the changes that we endure as a state regarding investigation, intakes and family support cases.

Family Support Services (FSS)

FSS provides services for families identified through proper assessments and family engagement. FSS services include but are not limited to parent Aide Services, Prevention of Unnecessary Placement Services, Homestead Services, Wrap-Around Services, Promoting Safe and Stable Families Services, and individual community services. Family-centered practice concepts have been incorporated into the current family support practice statewide, recognizing that families are the experts on their own family and that family engagement in planning and service selection is crucial.

Family Support Services include a full assessment of safety; linkages to formal and informal supports, including referrals for services may be made if the use of supports and/or services would strengthen the family unit. FSS assessments begin with contacting the caregiver to explain the purpose of FSS and to schedule a time to meet with them and their children, respecting the family's schedule but meeting CPS response timeframes. Home visits are required, and face-to-face contact must be made with all household members. Upon the initial visit with the alleged victim child, the case manager assesses for present danger: any immediate, significant and clearly observable family condition occurring *at that time* which is endangering or threatening to endanger a child. Any present danger will be addressed immediately, prior to the case manager leaving the home, by use of an in-home safety plan or an out-of-home safety plan.

An addition to FSS during the report period includes the release of the first of twelve practice videos (2- 3 minutes in length) to frontline staff November 2019. The videos are intended to enhance case manager assessment, decision making, engagement and overall practice skills. The videos are a collaboration between Georgia's Division of Family and Children Services and Georgia State University Professional Excellence Instructional Design Team.

FSS continues to find a larger availability of support services (counseling, medical and nonprofits) in the metro regions compared to the north and south regions. Families in the north and south regions of the state are often required to travel to the metro Atlanta area to receive specialized medical care for their children. The travel time is sometimes a 4 to 6-hour roundtrip which impacts childcare availability, work and school attendance.

Investigations

Case consults are held during the transition between program areas as needed to identify the safety concerns. Case consultations prevent case outcome drift by keeping case managers focused on safety. The department has found case consultations enhance case manager critical thinking.

Financial Assistance (PUP Funds: Prevention of Unnecessary Placement) was utilized to formally assess the needs of parents, caregivers and children to ensure the correct needs of families were addressed. PUP funds are frequently utilized to provide financial assistance to working families normally not in need of supplemental support.

Referrals were made to private, faith based, nonprofit, grant and Medicaid funded services to keep families intact and provide ongoing support services such as rental and utility assistance, food assistance, medical assistance, parenting services, after school care, job fair and career development.

Pre-removal staffings with state, county, and regional staff including SAAGs and OCA have been implemented to support the county staff in the safety assessment prior to the removal of a child from a home.

An addition to the program included the first of twelve practice videos (2 – 3 minutes in length) that was released to frontline staff November 2019. The videos are intended to enhance case manager assessment, decision making, engagement and overall practice skills. The videos are a collaboration between Georgia's Division of Family and Children Services and Georgia State University Professional Excellence Instructional Design Team.

An anticipated change relates to SOP Number 10-03. This Standard Operating Procedure (SOP) is designed to provide a consistent, DFCS-specific process to govern abbreviated CPS Investigations and Family Support Services closures. This allows for Field Operations have options and increased opportunities for professional discretion to prevent and eliminate unnecessary actions and steps during CPS Investigations and FSS cases when the facts show a clear lack of maltreatment and a low likelihood of future maltreatment.

Family Preservation Services (FPS)

Family Team Meetings (FTM) were coordinated and facilitated by the department to promote family inclusion in the case planning process. The desired outcome of the FTM is consensus between the family and department which leads to a partnership for change. Further, a family plan is developed that clearly states how behavioral change and safety will be restored/and or achieved. Additional services encompass counseling services to include individual, family, substance abuse, mental health, domestic violence and anger management offered to families. The intended goal is to prevent unnecessary removal and provide families with the tools needed to flourish and provide ongoing safety for their families.

Case consults are held during the transition between program areas and ongoing as needed to identify the safety concerns at the family and individual level in Family Preservation cases. Case consultations prevent case outcome drift by keeping case managers focused on safety. The department has found case consultations enhance case manager critical thinking.

Financial Assistance (PUP Funds: Prevention of Unnecessary Placement) is used to formally assess the needs of parents, caregivers and children to ensure the correct needs of families were addressed. PUP funds are frequently utilized to provide financial assistance to working families normally not in need of supplemental support.

Referrals are made to private, faith based, nonprofit, grant and Medicaid funded services to keep families intact and provide ongoing support services i.e. rental and utility assistance, food assistance, medical assistance, parenting services, after school care, job fair and career development.

An addition to the program is a set of twelve practice videos (2 – 3 minutes in length) that were released to frontline staff November 2019. The videos are intended to enhance case manager assessment, decision making, engagement and overall practice skills. The videos are a collaboration between Georgia's Division of Family and Children Services and Georgia State University Professional Excellence instructional design team. Also, in preparation for Georgia's rollout of the Family First Prevention Services Act selected county Family Preservation Units will participate in focus groups and a pilot focusing on Family Plan/Prevention Plan development.

The department anticipates changes as Georgia moves toward implementation of the Family First Prevention Services Act where States will receive IV-E reimbursement for specified preventative services (parenting, mental health and substance abuse) that are provided to families receiving Family Preservation Services through the Family First Prevention Services Act when rolled out. Like FSS, there continues to be larger availability of FPS services (counseling, medical and nonprofits) in the metro regions as compared to the north and south regions.

Child Abuse Registry

The Child Abuse Registry (CAR) Team monitors the information provided to the CAR system for accuracy and appropriateness. The team ensures that the agency follows a specific mandate in state law requiring the agency to maintain a child abuse registry and keep the agency in compliance with related provisions in federal law. They provide CAR information as approved by the law. They ensure that the CAR information is updated and tracked as necessary.

The CAR team provides technical assistance to the field in reference to the requirements which must be met through Georgia law and child welfare policies. CAR also assist county staff when they are failing to adhere to the policies. In addition, CAR provides technical assistance to the field, addressing their needs, issues or concerns.

The initial HB which reinstituted the Child Abuse Registry (CAR) in 2016 required that at the point of a CPS substantiation, the maltreaters name was immediately placed on the registry. They were provided a notice that their name was included on the CAR and provided information on the appeal process. New legislation requires that all appeal opportunities be provided upfront, prior to the name of the maltreater being placed on the registry. This legislation also allows for the expungement of cases if specific criteria are met after a 3-year period.

Changes for the Child Abuse Registry (CAR) have included new system changes, new policy, revised notification statements, and additional screening and/or tracking system to include an opportunity for expungement.

Permanency

Populations and Geographic Areas Served

Population and geographic areas served is provided on the attached CFS-101 form.

Estimated Number Served

The estimated number of individuals and families served is provided on the attached CFS-101 form.

Services Provided

Foster Care and Permanency

When safety cannot be assured in the home, the agency must provide a temporary out of home placement for children. Foster care services are provided to children 0 – 21+. The Division seeks to ensure that the transition into care is seamless and reduces trauma to the child. The Division offered a variety of supports to family and children contingent upon their individual needs. Services included comprehensive assessments, behavior aide supports, placements in treatment facilities as needed, therapy both individual and family and aftercare supports. These services are generally offered throughout the state but there are some areas where services are not as prevalent as the more metropolitan areas. The lack or reduced resources consist of mental health and placement options for children.

The Division has implemented the kinship continuum that will assist with placing a child with a family member when possible. Emphasis is on approving kin caregivers as fully approved foster caregivers. The kinship program provides the following services:

- Education to caregivers about resources and supports within their local community
- Assistance to caregivers who are applying and accessing federal and state benefits
- Act as a liaison to key local agencies and community organizations
- Provide supportive listening to kinship caregivers

Engage kinship families in their service area, identifying those not involved in support group networks and/or in need of additional services. Special attention is focused on serving relatives from isolated and ethnic communities.

The Division completed its first reunification celebrations June 2019. All 14 regions participated and there was a shared partnership between the agency and birth families celebrated. These collaborative celebrations included the community, internal and external partners.

Caregiver Recruitment and Retention

The Caregiver Recruitment and Retention Unit (CRRU) is primarily responsible for recruiting, assessing and approving caregivers throughout the State. The target population consists of DFCS kinship caregivers over the age of 18 and traditional DFCS foster and adoptive parents over the age of 21. CRRU works closely with regional staff on achieving recruitment and retention goals set forth in the Diligent Recruitment Plan and the Division's Strategic Plan. CRRU has successfully implemented several strategies to improve communication with internal and external partners. The Caregiver Navigators continue to mentor prospective and new caregivers throughout their foster parenting experience. Inquiry Response case managers continue to be the front line for prospective caregivers. They provide weekly web-based information sessions to prospective caregivers. CRRU uses its website www.fostergeorgia.com to provide information on the onboarding process to the general public. The website chat feature has increased the Division's interaction with prospective and current caregivers. CRRU works in partnership with kinship on ensuring kin caregivers are assessed and approved as foster caregivers within policy timeframes.

Interstate Compact on the Placement of Children

The Interstate Compact on the Placement of Children (ICPC) governs the process for placing children across state lines to ensure children receive the same protection and services that would be provided if they remained in their home state. ICPC applies when a placement for a child is identified in another state and pertains to adoptions, licensed or approved foster homes, parents and relatives when the parent or relative does not have legal authority to place the child, and group homes/residential placements.

The Georgia ICPC Unit processes all incoming and outgoing ICPC requests for Georgia. On March 14, 2017, the Georgia ICPC Unit went live on the National Electronic Interstate Compact Enterprise (NEICE), a national electronic database for ICPC cases which facilitates quicker processing of ICPC requests. Participating in this cloud-based electronic system allows the exchange of data and documents necessary to place children across state lines, with a shortened timeframe for placement, reduced costs associated with mailing and copying documents, and an improved method of tracking ICPC requests.

Adoptions

The purpose of the statewide Adoption Services program is to assure the safe, timely, and appropriate placement of foster children who cannot return to their families, and to place them in permanent adoptive homes. Adoption Assistance services are provided to adopted children who meet specific Title IV-E criteria, and to children in DFCS custody who have special needs. Post-adoption services are available for adopted children and adoptive families, including some services to children who have been adopted internationally. DFCS Adoption Services program is invested in providing families who adopt Georgia children with adequate supports to ensure successful adoptions. Recognizing that children deserve safe, loving, and nurturing relationships with permanent families, DFCS and its partners work to provide a continuum of available,

accessible, and effective services that enable and support the placement of children in adoptive families.

Georgia provides a continuum of adoption-related services, including:

- General recruitment of foster and adoptive parents
- Child-specific recruitment services for waiting children as mandated by federal law
- Matching services for waiting children and families
- Child preparation services
- Adoption placement supervision
- Monthly maintenance assistance to help meet the special needs of the adopted child
- Legal services assistance to pay for attorney fees, court costs, and other one-time expenses directly related to the legal adoption of a child with special needs
- Medicaid, which is available to any child eligible for Adoption Assistance benefits
- State-funded post-finalization reunion registry services

Additionally, there are adoption promotion and post-adoption support services funded by Title IV-B, Subpart 2, which cover a wide range of services, to include development of adoptive families, recruitment events for children without adoptive resources, placement, supervision, support for adoptive placements, teen support groups, crisis intervention services, a resource center for adoptive parents, training, and an annual statewide training/retreat for adoptive families and staff.

The Georgia Center for Resources and Support (GACRS) is a statewide project developed in 2001. GACRS is a comprehensive resource center funded by the Georgia Division of Family and Children Services and presented by Families First, Inc. The purpose of GACRS is to provide a centralized resource for adoptive and foster parents to help them locate the resources and supportive services they need to be successful in meeting the needs of their adopted and/or foster children/families.

GACRS is parent driven and offers a variety of post-adoption services as well as four resource advisors for every region. GACRS utilizes resource advisors to assist adoptive and foster families in locating resources in their area that may best meet the needs of their child/family, provide training, outreach, and consultation with adoptive and foster families throughout the state. The resource advisor is also aware of other programs and services that are not related to adoption such as the kinship navigator services, the Parent Mentor program, and other resources available to assist families who are experiencing challenges post placement.

GACRS is a non-profit center offering professional services free of charge to all adoptive and foster families living in Georgia. Adoptive and foster parents can access services by contacting the statewide toll-free telephone number: 1-866-APARENT or by utilizing the website (www.gacrs.org). In addition, adoptive families who reside in Georgia can utilize these services regardless of the origin of their adoption. No referral is required.

The following services are provided to adoptive and foster families: Statewide training on adoption and foster care issues; guidance on the local development of support groups for foster and adoptive parents; development and maintenance of a lending library on books and publications related to adoption and foster care issues; a web site that provides interactive opportunities for adoptive and foster families; current information on resources and training events, including Virtual Training Certificate opportunities and a comprehensive listing of searchable resources; developed a forever family Facebook group (The Adoptive Family Journey) that is a site for all *adoptive* families living in Georgia to connect, share, and learn from others about their journey as an adoptive family and to encourage discussions concerning parenting an adopted child or children. In addition, GACRS Center's staff (8) are also available to families, birth parents, grandparents, kinship and adopted persons to answer questions that he or she might have regarding foster or adoption issues. GACRS Center Staff will also refer these parents to community resources.

Georgia Mentor - Crisis Intervention provides in-home crisis intervention services to families with a potential for disruption or dissolution of an adoptive placement. A statewide team of skilled individuals works with families to assess and connect them to needed resources all to stabilize the adoptive placement. For this reporting period, Georgia Mentor Crisis Intervention program served 77 adoptive families across the state of Georgia with in-home crisis intervention.

Care Coordination Treatment Unit (CCTU)

The Care Coordination Treatment Unit (CCTU) empowers the Division, its youth, families, and partners through education and collaboration; ensuring a holistic and systematic approach to address the behavioral, emotional, medical, and therapeutic needs of Georgia's youth. The four primary responsibilities of CCTU is to support the ongoing goals of the Division revolving around the pillars of:

- Training and curriculum development
- Coordination and engaging state level partners and community resources
- Data tracking and analysis of children/youth identified as high-end based on specific criteria
- Consultation and technical assistance to our field staff and provider networks
- The CCTU is encompassed of two distinct state level specialists

Behavioral Support Specialist – Placement Guidance

Seven Behavioral Support Specialists assigned by DFCS district provide oversight and consultation on behavioral management issues for children. They provide high level guidance to DFCS field staff on the identification of appropriate placement resources for children categorized as high-end with complex needs. In addition, they support and provide oversight to RBWO providers to ensure that children are benefitting from therapeutic interventions and moving towards less restrictive placements.

Therapeutic Support Specialist – Placement Stability

Fourteen licensed Therapeutic Support Specialists regionally assigned by DFCS with the ability to engage the field in intensive practice guidance and consultation on cases that require a meticulous level of insight to navigate the complexities within our state systems, policies, and regulations. Responsible for immediate and on-going assessment of medical necessity, treatment, and discharge planning of inpatient admissions to psychiatric residential treatment facilities, crisis stabilization units, and other acute inpatient behavioral or physical health facilities.

CCTU Areas of Focus:

- RBWO Program Designation children/youth: MWO-SMFWO
- Placement Intervention/Guidance, Placement Stability/Community Based Services Consultation, and System(s) Navigation
- Severe Medically Fragile
- Substance Abuse & Human Trafficking Program Coordination, training and services consultation
- Residential Treatment & Acute inpatient/outpatient Hospitalizations
- Physical Health Hospitals
- Emerging/Dependent Adults with Intellectual/Developmental Deficits, Severe Mental Health, and Behavioral Health needs
- Out of state cases for treatment purposes, placement disruptions, and prevention cases
- Tracking and Monitoring of Non-Contracted RBWO Providers/placements
- Tracking and Monitoring of CCTU specialized contracts

Office of Provider Management Unit (OPM)

OPM serves out-of-home care providers for children in state custody. OPM is charged with the contracting, administration and oversight of programs that provide Room, Board and Watchful

Oversight (RBWO) services to children in foster care approved for placement in child caring institutions (CCIs) and child placing agencies (CPAs) and their associated foster homes statewide. OPM also assists DFCS case managers in locating suitable placements for children and youth in care within the network of RBWO providers. OPM monitors private out-of-home care providers, assists with placement matching of high-end children and youth, and addresses risk and safety issues within private provider settings.

Well-Being

Populations and Geographic Areas Served

Population and geographic areas served is provided on the attached CFS-101 form.

Estimated Number Served

The estimated number of individuals and families served is provided on the attached CFS-101 form.

Services Provided

Early Childhood Collaboration

The Early Childhood Collaboration Unit (ECCU) provided the following services over the last five years:

- Child and Parent Services (CAPS) Interagency Support- Support best practices related to CAPS referrals, case changes, and renewals. The unit provides guidance to and is the Division's internal point of contact for all DFCS foster care and CPS case managers and the external point of contact for all escalated cases.
- Early Childhood Education Programing- Identification of the most appropriate early childhood education setting (Head Start/Early Head Start, Pre-K, Quality Rated Childcare) for children in foster care and work external partners to ensure seamless and timely enrollment in accordance with DFCS policy.
- Training and Technical Assistance- Early education and procedural trainings to internal and external stakeholders to include foster parents, local education agencies, CASAs, state agencies, DFCS staff, and other community partners.
- Educational Plans Management (Individualized Education Plan/Individualized Family Service Plan)
- The provision of additional resources and support for children identified as needing special education services by the local education agency or Babies Can't Wait is a primary function of the unit. Healthy brain development for children in this special

population is directly correlated to high quality early care, education, and special services.

ECCU has begun providing services to parenting youth in care. The unit connects youth with available services, primarily childcare services.

The unit has received positive feedback from internal and external partners related to the supports provided in obtaining and maintaining quality childcare services. A gap in service is support to expectant and parenting youth in foster care. Securing childcare for this group has been a barrier as reported by youth in several focus groups and interviews. Childcare and other services for this unique population has been a focus for the unit.

Educational Programming, Assessment and Consultation (EPAC)

The Educational Programming, Assessment and Consultation Unit (Education Unit) provides comprehensive academic support and services focusing on improving educational stability and the academic achievement of children and youth (ages 5 to 17) in the custody of the Division of Family and Children Services throughout the state of Georgia.

Over the last calendar year, EPAC has served approximately 3,536 youths. The services included: tutoring, educational diagnostic assessments, enrollment advocacy, discipline (tribunal) supports, IEP reviews and recommendation and case consultations.

The EPAC Unit is now fully staffed. The unit is now comprised of a team of three (3) District Managers, fourteen (14) Education Support Monitors (ESM), one (1) Operations Analyst and one (1) External Quality Education Specialists who provide education consultation to the Divisions' staff, internal and external stakeholders, and community partners to promote educational stability.

Each ESM now only covers one region versus in previous years, an ESM covering between two and three regions. The ESM can provide more support and training to their respective regions. Because the Unit is now fully staffed, we have been able to meet and surpass our CFSR results, increase our case consultations, build and strengthen our community partnerships and increase the ability to meet the educational needs of Georgia's foster youth.

TeenWork

Georgia CREW/TeenWork serves youth in foster care and TANF eligible youth ages 16 and 17 years old. Youth employment trainings (YET's) are offered to youth as young as 14 years old, and the content of the training sessions is beneficial to Opportunity Youth (OY) ages 16 to 24. Expansion of the program and population served now includes the TANF eligible youth in this service period, however, the core population remains youth in foster care.

Georgia CREW/TeenWork covers Regions 1 thru 14 that are spread throughout Georgia. During the of summer 2019 hands on work experience the program served 192 youth by placing them in worksites throughout Georgia. TeenWork partnered with 88 employers who provided 150 different worksites for youth to gain hard skills experience. A new initiative was introduced in the employer relation service model. Active and new employers were gathered to form a Table Talk Roundtable Discussion group with the purpose of giving input around issues, challenges, and best practices for preparing youth for the on-the-job experience. One meeting has taken place with ongoing meetings scheduled on a quarterly basis. Members of the group also offer their expertise in facilitating youth training sessions which is a new concept to the program. Service provided statewide to regions 1 thru 14 consist of:

- Youth Orientations (25)
- Youth Informational Sessions (17)
- Youth Employment Trainings (50)
- CREW launch activities (30)
- Employer Recruitment, Engagement, and orientation activities (25)

The Georgia CREW/TeenWork has expanded the opportunities for youth by implementing creative and innovative strategies and approaches that move youth in foster care and other disadvantaged youth towards independence and a thriving adult life. Across Georgia, youth and organizations that support the mission of CREW/TeenWork are being energized by their success in helping this population of youth train for jobs and eventually enter the economic mainstream in a thriving way.

Wellness Programming, Assessment and Consultation (WPAC)

The WPAC Unit, through its regionally assigned wellness specialists, partner with county leadership and direct service child welfare staff to provide practice support, consultation, tracking and quality monitoring of the “light” to moderate physical and behavioral health needs of children and youth in foster care and family preservation. Specific functions of intensive support and monitoring include:

- Training, consultation, assessment and programmatic recommendations
- Data tracking, trend analysis, and performance monitoring
- Strategic coordination with community partners Amerigroup, Department of Community Health (DCH), Department of Public Health

WPAC provides monitoring of psychotropic medications and significant health conditions of children/ youth in care. Additionally, WPAC and EPAC provide formal statewide trainings. WPAC participated in the Adoptive Foster Parent and Guardian (AFPAG) conferences. When

invited, WPAC participates in CM/ Supervisor Summits and new worker training. WPAC participates and sometimes facilitates Health Data Day with the local data integrity specialists. WPAC shares communication with the field regarding training offered by Amerigroup. WPAC coordinates training with other partners such as DPH/Children's 1st and Rev Max. WPAC provides specific training in areas around wellbeing per the request of the county if needed. WPAC coordinates case consultation and medication management staffing with the DHS Medical Director. WPAC completes case reviews on medication management staffing along with follow up. WAPC is responsible for the escalated medication consent protocol.

The psychotropic medication monitoring report for the psychotropic medications will be changed for FFY 2021. The report will focus on DFCS staff verifying the current psychotropic medication while ensuring the medication consents are obtained for each medication and uploaded into GA Shines. Based on the feedback received through discussion and engagement with our external partners, executive leadership, direction of DHS medical director, and feedback from staff, it was decided that breaking down the previous report and focusing on specific components of the report would help DFCS improve in the oversight of psychotropic medication.

As mentioned previously, the psychotropic medication report will be changed to focus only on the medication consent component of the report. Through the distribution of this report for the past year and feedback provided from the field and external partners, it was decided to change the report as mentioned above to address the issues of psychotropic medication monitoring which begins with medication consent.

b. Services for Children Adopted from Other Countries

Georgia DFCS has supported families of children who have been adopted from other countries by providing non-recurring adoption assistance payments for children eligible for the program. Non-recurring adoption assistance is a one-time payment to reimburse legal fees associated with the finalization of the adoption of a child from another country and pre-placement costs, such as travel, lodging, and food during pre-placement visitation. The adoptive family may apply for the non-recurring adoption assistance at the local DFCS office in their county of residence prior to adoption finalization. The agency has provided information and training on this assistance to international adoption agencies. Families who are adopting children from other countries are also eligible for post-adoption services through the Georgia Center for Resources and Support. The Center, through a contract with DFCS, assists families in locating needed resources, developing support groups, finding books and adoption related publications related to adoption issues, and by providing a "buddy family" who has adopted or fosters a child with similar special needs. Current information about community resources and interactive training opportunities are provided on the Center's website. Regional Resource Advisors are also available throughout the state to assist adoptive families by providing advice, support, and training. Families adopting from other countries can also access the Crisis Intervention Team, which provides services to adoptive families in need of professional help to

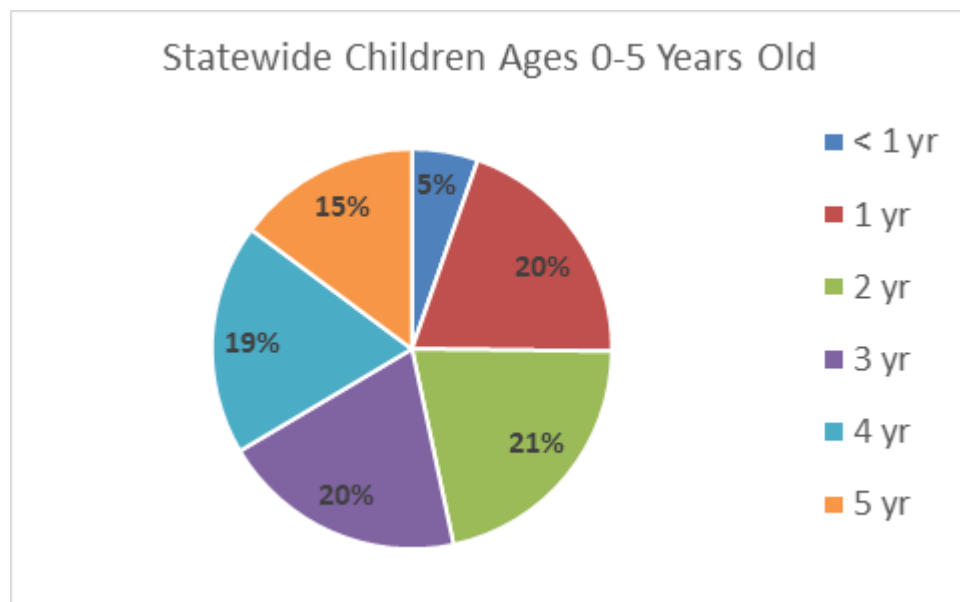
improve overall family functioning, preserve the family unit, and provide links to community resources. The team assists adoptive families of special needs children who have been placed into adoptive homes.

c. Services for Children Under the Age of Five

Georgia recognizes that expediting permanency for children ages 0-5 has a positive impact on their overall well-being. Therefore, focus for improving outcomes continues to be addressed. In FFY 2019 a committee consisting of members from the Education and Training Unit, Policy Unit, Georgia SHINES, Well-Being-0-5 Unit and Practice and Program Guidance, Adoption, Reunification and Caregiver Recruitment and Retention Units met to discuss monitoring and improving outcomes for this population. Topics of discussion included, existing legal barriers, untimely filing of TPR, current special needs definition for the purpose of adoption and the agency not moving forward with full implementation of concurrent planning.

As of February 2020, 39.2% of children in care were 5 and under and 60.8% of children in care were 6 and over. According to SHINES data the length of time to exit for the 0-5 population is steadily less than that of the 6-18 population. Children ages 0-5 have consistently exited to reunification, guardianship and adoptions in less time than children in the 6-18 population. As the data below reflects, the percentage of children ages 1-4 are within 1% of each other and 15% of children ages 0-5 are 5 years of age and only 5% are less than 1 year of age. The second chart below shows that 53% of children in care have a reunification permanency plan and that 32% have an adoption permanency plan and most have been in care for 2 years.

Figure 17 Children Ages 0 to 5 (statewide)



Data Source: SHINES March 2020

Figure 18 Permanency Plans

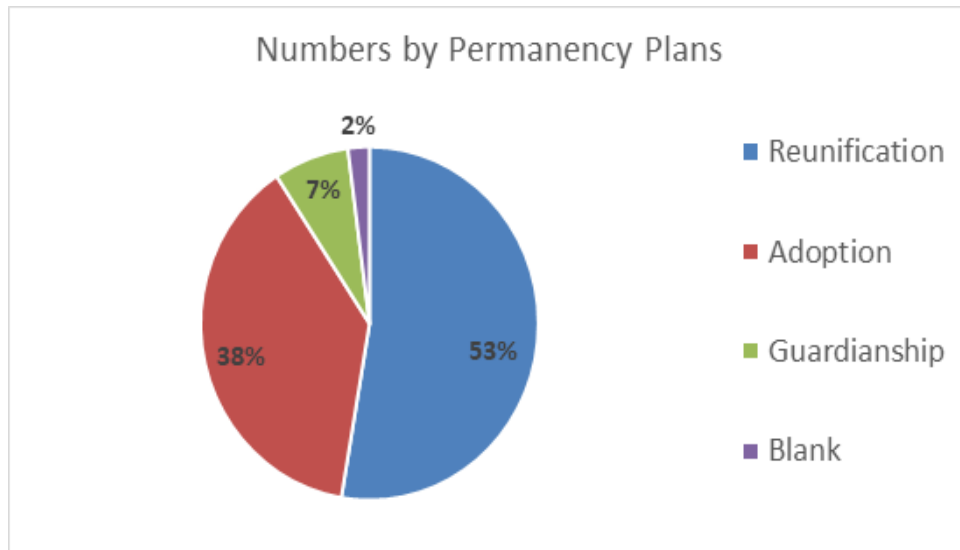
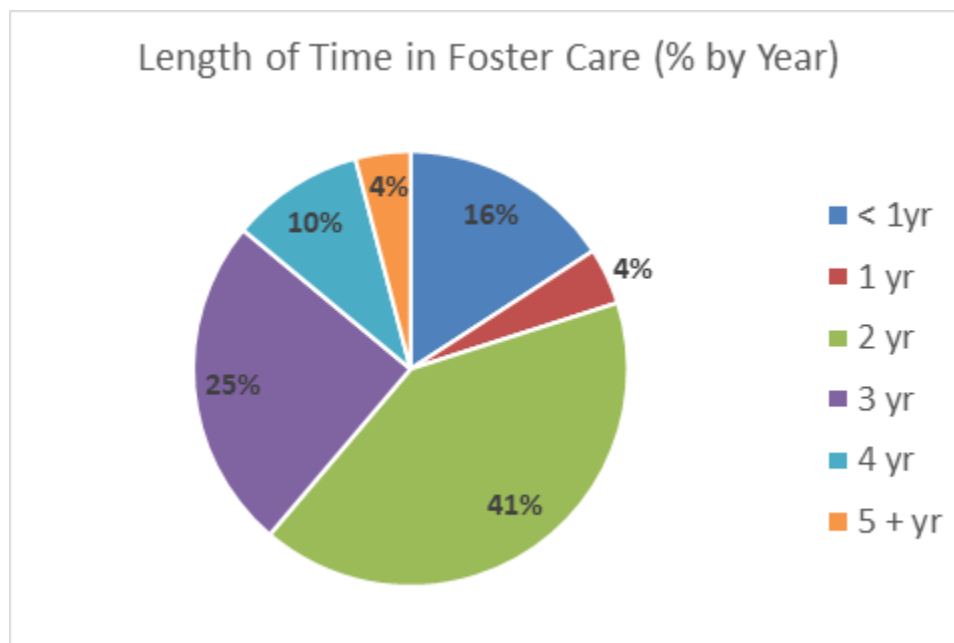


Figure 19 Length of Time in Foster Care



Data Source: SHINES March 2020

In FFY 2020, Regional Adoption Café 24s were used as the forum to share and gather information regarding permanency for the 0-5 population and the urgency for the achievement of permanency. During these discussion strategies for addressing the urgency took place. Reference guides developed for staff to guide conversations with birth parents and foster parents during Every Child Every Month (ECEM) and Every Parent Every Month (EPEM) visits continue to be distributed. Additionally, a workgroup has been established that will look to

streamlining the work completed by the reunification, wellbeing and adoption sections to develop additional strategies on ensuring the needs of this population are met timely.

In CPS cases, children under the age of four are required to be referred to Babies Can't Wait program. DFCS in the State of GA works closely with our partners at Department of Public Health to see that the proper assessments and referrals are completed properly for children. For all exposed infants, a Plan of Safe Care is completed even where there is not a specific allegation of maltreatment.

The Permanency section is working with the Well-Being section to enhance guidance and practice for the regions. Some proposed strategies for working with this population include:

- Recognizing that well-being outcomes impact permanency
- Ensuring that foster parents are complying with early education requirements
- Concurrent planning when appropriate
- Understanding the SB167 and the urgency of placing children with relatives and siblings soon
- Education of staff and foster parents on the importance of the plans
- More consideration of initial placement types - try to prevent a placement that will disrupt reunification or placement with relatives
- Regional directors accurately assessing and categorizing foster and adoptive families.
- Communication between regional director and placement staff regarding permanency plan
- Accessing services outside of Babies Can't Wait
- Earlier accessing of services

A workgroup has been established that will look to streamline work completed by the reunification, wellbeing and adoption sections to develop additional strategies on ensuring the needs of this population are met timely.

The Prevention and Community Support Section (PCS) provides programs such as First Steps Georgia and Home Visiting to address the developmental needs of all vulnerable children under five years of age.

First Steps Georgia

This program provides educational materials to parents pertaining to the healthy development of babies at or shortly after the time of birth. The mission of First Steps is to provide universal support services for all expectant parents and children birth to five and their families. First

Steps services include providing families with a localized community resource guide, referrals to relevant resources and age-appropriate information in at least the following categories:

- Maternal Health
- Newborn/Child Health
- Home and Child Safety
- Community and Family Safety
- School Readiness
- Family Economic Self-sufficiency

Home Visiting

Evidence-Based Home Visiting (EBHV) programs are an effective early-intervention strategy to improve the health and well-being of children and parents. Home visiting is a strengths-based, family-centered support strategy that gives pregnant women and at-risk families with children from birth until kindergarten entry the resources and skills they need to raise children who are physically, socially, and emotionally healthy and ready to learn. Specific goals of home visiting are to (1) increase healthy pregnancies; (2) improve parenting confidence and competence; (3) improve child health, development and readiness; and (4) increase family connectedness to community and social support. EBHV are proven to improve outcomes in several domains including (1) maternal and child health, (2) positive parenting practices, (3) child development and school readiness, (4) reductions in child maltreatment, (5) family economic self-sufficiency and (7) linkages and referrals to community resources and supports.

The Early Childhood Collaboration Unit provides comprehensive monitoring, consultation, support, and advocacy for children with DFCS involvement who qualify for early childhood educational programming and/or childcare. With an emphasis on building and fostering relationships that support educational stability at an early age, the unit works collaboratively with DFCS state and county offices, other state agencies, and external partners.

The Early Childhood Collaboration Unit (ECCU) provides the following:

- Child and Parent Services (CAPS) Interagency Support
 - ECCU acts as high-level liaison to help support best practices related to CAPS referrals, case changes, and renewals. The unit provides guidance to and is the Division's internal point of contact for all DFCS foster care and CPS case managers and the external point of contact for all escalated cases.

- Educational Plans Management (Individualized Education Plan/Individualized Family Service Plan)
 - The provision of additional resources and support for children identified as needing special education services by the local education agency or Babies Can't Wait is a primary function of the unit. Healthy brain development for children in this special population is directly correlated to high quality early care, education, and special services
- Early Childhood Education Programing
 - ECCU helps DFCS staff identify the most appropriate early childhood education setting (Head Start/Early Head Start, Pre-K, Quality Rated Childcare) for children in foster care and work external partners to ensure seamless and timely enrollment in accordance with DFCS policy
- Training and Technical Assistance
 - ECCU provides early education and procedural trainings to internal and external stakeholders to include foster parents, local education agencies, CASAs, state agencies, DFCS staff, and other community partners

The Wellness, Programming, Assessment and Consultation (WPAC) program collaborates with Department of Public Health's Children 1st to facilitate the initial developmental assessment for youth under the age of 5 years old that enter foster care. WPAC collaborates with Children 1st to identify barriers in the field around referrals submissions and the initiation of services. WPAC and Children 1st work together to provide training to both DFCS and Children 1st staff. When these services are initiated timely, then the developmental needs of the child can be addressed immediately and follow the child wherever he/she goes if they continue to qualify for services.

d. MaryLee Allen Promoting Safe and Stable Families (PSSF) (title IV-B, subpart 2)

Funding Overview

The Family Support Services component of the PSSF program is considered a critical form of funding for community-based prevention efforts, however, 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 services providers wishing to obtain PSSF funding must meet the following criteria:

Eligibility: state, county or city governments; other public entities, including institutions of higher education; non-profits having a 501(c)(3) status with the IRS.

Non-profit applicants must be registered and in active compliance status for 2019 with the Georgia Secretary of State's Office. Faith-based and community organizations that meet eligibility requirements are eligible to receive awards. Individuals, sole proprietors, foreign entities and for-profit organizations are not eligible to compete for, or receive, awards made under this announcement.

The purpose of the Funding Opportunity Announcement (FOA) is to solicit proposals for services to improve the safety, permanency and wellbeing of children, youth and their families through coordinated, community-based service delivery. These services are designed to build service capacity between state, 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.

None of the percentages for funding allocations for the four service categories fell below 20 percent. The grant allotment was divided into the following proportions:

- Family Support: 24%
- Family Preservation: 23%
- Time-limited Reunification: 24%
- Adoption Promotion: 23%

See the attached CFS-101 form for amount allocated to planning and service coordination and the geographic areas where the services will be available.

Family Preservation

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 so that families at risk or in crisis can be preserved and children safely maintained in their homes when families receive intensive support and therapeutic services to improve family functioning and stability, as an alternative to placement in out of home care. Examples include case management, counseling, life skills, behavior management, and services designed to increase parenting skills.

Population Served:

PSSF Family Preservation services are provided to families to prevent removal of children from their homes, stabilize placement and/ or to prevent re-entry into foster care. This includes:

- Families who have or have had a substantiated investigation and/or a Family Preservation case to prevent repeat maltreatment and help these families maintain children in their homes safely
- Relative caregivers who are caring for children when their parents are unable to do so to support the safety, permanency and well-being of these children
- Foster parents and/or children in foster care to stabilize the placement and prevent disruption
- Families for whom reunification is the goal, to prepare for and sustain reunification
- Families whose children have returned home from foster care to prevent repeat maltreatment and sustain permanency.
- Children from families who have or have had a substantiated investigation and/or a Family Preservation case or are returning from foster care to improve educational outcomes

Family Preservation Services will be available throughout the State of Georgia. It is estimated that 3420 families and 6010 children will be served in FFY2020 amounting to approximately 23% of the total PSSF budget. The rationale for 23% is based on annual community needs assessments and departmental priorities.

Services Provided:

Placement Prevention

Short-term services and supports to address caregiver characteristics or child behavior to ensure child safety and reduce the risk of child removal from the home and placement in foster care.

Crisis Intervention

Short-term, in-home services (therapeutic and non-therapeutic) available 24/7 to support families in crisis where children are at risk for removal or placement disruption or are transitioning to a new placement after a disruption.

Relative Caregiver/Kinship Family:

Services for grandparents and relative caregivers who are primary caregivers of children other than their own to address caregiver capacity, family functioning, child well-being and placement stability.

Residential/Post-Placement Aftercare

Therapeutic services to support the reintegration of children into their homes and communities and/or to sustain treatment outcomes to prevent placement disruption. Available 2-3 months pre-discharge and 6-9 months post-discharge.

Substance Abuse Treatment & Recovery Support

Services to prevent abandonment, maltreatment or child removal due to caregiver substance abuse, and/or to support reunification and prevent relapse. For FFY2019, the substance abuse recovery model was more family-focused.

Key Accomplishments:

PSSF added Children In Need of Services (CHINS) as a priority target population for Crisis Intervention Services. It developed, in collaboration with network providers, a service model to address the needs of families affected by the substance use by one or both of the caregivers that focused on the needs of those family members (children and extended family).

Family Support

PSSF Family Support services are designed to prevent child abuse and neglect among at-risk families, are community-based prevention and early intervention services 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.

Population Served

PSSF Family Support services are provided to families in Georgia who are at risk for CPS involvement to reduce risk and prevent child maltreatment. This includes families:

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

Family support services will be available throughout the State of Georgia. It is estimated that 3150 families and 6390 children will be served in FFY2020 amounting to approximately 24% of

the total PSSF budget. The rationale for 24% is based on annual community needs assessments and departmental priorities.

Services Provided:

Prevention and Early Intervention

Voluntary, in-home or center-based supports and services to help families identify and address family issues that threaten child safety, strengthen family protective capacity, reducing the risk of CPS intervention.

Home Visiting

Voluntary, evidenced-based, in-home services to support positive parent-child relationships, child health and development, parental self-sufficiency, and safe home environments to prevent child abuse and neglect.

Healthy Relationship and Co-Parenting

Services are designed to build and maintain healthy partnerships, identify and manage stress that threatens relationships, and promote and support life-long parental or co-parenting relationships.

Supports and Services for Homeless Youth & Families

Services to help unaccompanied homeless youth or victims of sexual exploitation transition to independent living, and Homeless Families become self-sufficient through community involvement and relationships, education, employment, health and safety.

Key Accomplishments:

PSSF expanded a service model in FSS to include homeless families and strengthened the Prevention Early Intervention (PEI) service model to require life skills in addition to parenting for all programs to address the need identified by our community-based providers.

Family Reunification

Once a youth or child has been removed from the care of their parents, safe and timely family reunification is the preferred permanency option. It is the most common goal for children and youth in out-of-home care as well as the most common outcome. While reunification is generally thought of as reuniting the children and youth in foster care with their families and reinstating custody to their parents or guardians, a broader definition that includes living with other relatives is sometimes used.

The physical return of the child or youth to parents or caretakers may occur before the return of legal custody, as when the child welfare agency continues to supervise the family for some period of time. Reunification is considered achieved when both care and custody are returned to parents or guardians, and the child or youth is discharged from the child welfare system. The

challenge for child welfare agencies is to achieve reunifications that are both timely and do not result in re-entry.

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.

Population Served:

PSSF Reunification services are provided to families whose children have a plan of reunification or an alternative concurrent permanency option. This includes:

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

Time-limited Reunification services will be available throughout the State of Georgia. It is estimated that 4105 families and 6840 children will be served in FFY2020 amounting to approximately 24% of the total PSSF budget. The rationale for 24% is based on annual community needs assessments and departmental priorities.

Services Provided:

Supervised Family Visitation

Services to increase the frequency, quality and consistency of the interactions of children in foster care with their parents, their siblings in different placements, or to visit with extended family members or other significant adults in less restrictive but secure, non-threatening environments.

Child and Family Advocacy

Services and supports for children involved in dependency proceedings to advocate for timely permanency decisions that are in the best interest of the child. Services ensure that the needs of children are met, and families receive needed supports so that children who must be removed from their home maintain connections to their families and communities.

Key Accomplishments:

Increased emphasis on pre- and/or post-parent coaching component of supervised visitation services (using evidence-based parenting models) to improve parental engagement and increase opportunities for parents to participate in the assessment of visits and visitation planning and goal setting.

Adoption Promotion and Support

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. For example, pre-post adoptive services, activities to expedite adoption process, activities to support adoptive families. All of the above services are available in all counties and in all jurisdictions.

Population Served:

Adoption Promotion and Permanency Support services will be available throughout the State of Georgia. PSSF Adoption Promotion and Permanency Support services are provided to:

- Foster/adoptive children and youth, particularly those with special needs
- Foster, pre-adoptive and adoptive parents
- Relative caregivers

It is estimated that 225 families and 280 children will be served within the PSSF network and another 2400 families and 650 children with state contracts in FFY2020 amounting to approximately 23% of the total PSSF budget. The rationale for 23% is based on annual community needs assessments and departmental priorities.

Services Provided:

Adoption Promotion

Services to encourage and support adoption or relative guardianship and/or to prevent disruption/dissolution of adoptions.

Transition and Emancipation

Services to help youth transitioning, or who have transitioned, out of foster care develop skills for independent living and establish meaningful adult connections.

Key Accomplishments:

There have been continuous efforts to increase custody, guardianship and adoption of children by grandparents. In addition to key accomplishments noted in each service category above, the following accomplishments apply to all service categories:

- Three in five families met all or most of their case plan goals

- Three in four families were able to meet their children’s health and developmental needs
- 80% of families accessed other community-based services or supports
- 9% fewer families exiting services had children in foster care at the end of services
- 11% fewer families had an open CPS case at the end of services
- Increased the emphasis and supported the need to provide community-based services “in-the-home” to reduce barriers and improve family engagement
- Increased our emphasis and provided additional technical assistance to increase fidelity to and effectiveness of evidence-based models
- Provided regional network training opportunities on increasing father engagement, the benefits of home-based services and collaboration with the child welfare agency, and communication strategies to respond to and diffuse conflict
- Provided opportunities for community-based providers to obtain Motivational Interviewing certification

PSSF is a federal- and community-funded network of community agencies meeting the needs of families in crisis or at risk for child welfare intervention. PSSF community partners are regularly engaged throughout the year and therefore, strongly supports the overarching CFSP goal to engage a diverse community that serves to promote partnership and holistically support families. The Georgia PSSF network profile (infographic) below provides more information about the Georgia PSSF community network.

What we are

A federal- and community-funded network of community agencies meeting the needs of families in crisis or at risk for child welfare intervention

What we do

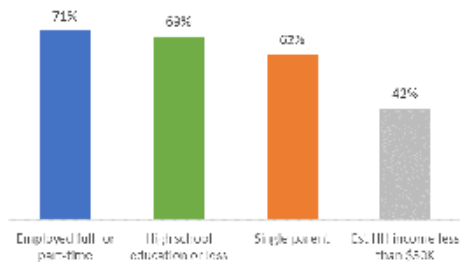
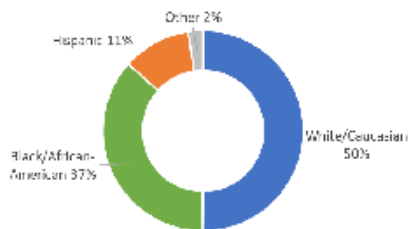
Provide services designed to support, preserve and reunify families and promote/support adoption and permanency for children and families



141 programs in 105 agencies served
11,113 families with
19,594 dependents

Our families

Primary caregiver characteristics (excluding foster caregivers):

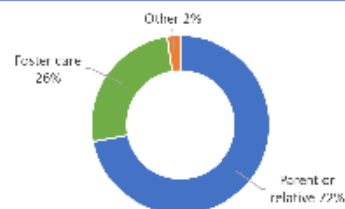


At start of services: **4 in 10** families had no current child welfare involvement
6 in 10 families had an open CPS or foster care case

Their children

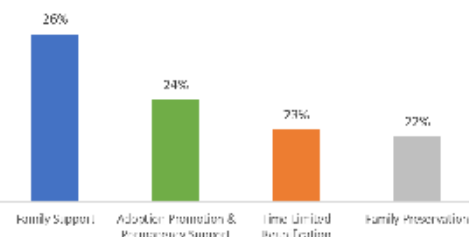
75% under age 13
39% under age 6

Children's primary caregivers:



Our funding

Georgia PSSF Funding
FFY 2019



\$12.0 million federal grant
\$4.0 million community and state match

e. Tracking and Preventing Child Maltreatment Deaths

Child fatalities reported to the Division are tracked annually by an internal review team within DFCS. Information on these fatalities is gathered via collaboration with the following: State Child Fatality Review Team under the Georgia Bureau of Investigations, state medical examiners offices, coroners, medical facilities, local law enforcement agencies, Department of Public Health and the local Child Fatality Review Committees throughout the state. Information is collected and analyzed for accuracy with local county DFCS offices to ensure all maltreatment related fatalities are identified and captured for NCANDS reporting purposes. Fatalities reported to the Division are tracked through a uniformed and centralized reporting system whereby local county DFCS staff complete a fatality report which contains all known information about the circumstances surrounding the fatality. This notification form is submitted to members of the internal review team, the Office of the Child Advocate and the State Child Fatality Review Team so data can be cross referenced. Additionally, reported fatalities are internally cross referenced with the state Data Unit to ensure deaths of children known to DFCS are included and reviewed.

The Division is part of a Nationwide Partnership for Child Safety Collaborative (NPCS). This national quality improvement collaborative includes 15 jurisdictions throughout the country with an aim to prevent maltreatment related critical incidents and improve child safety outcomes by using safety science principles. Casey Family Programs and the University of Kentucky supports this effort and provides critical technical assistance and guidance around data gathering elements and analysis of findings. Members of this collaborative will be sharing aggregate data by using a standardized critical incident review model. This process promotes safety culture and enables sensitive case reviews to be completed in a supportive and non-judgmental environment that enables learning and supports staff as improvement opportunities are identified. Founded on three critical elements; it promotes psychological safety, encourages mindful organizing and addresses burnout. Part of this process includes involving community partners in a multi-disciplinary review of both case specific data and system level influences in order to identify improved community responses to families and to prevent future incidents of maltreatment. Georgia has begun this effort by involving the Georgia Bureau of Investigations, the Child Fatality State Review Team and the Office of the Child Advocate. As data sharing agreements are worked out, additional in-kind agencies will join in this collaboration. The Division works in partnership with CAPTA Panelists, Children's Health Care of Atlanta and Georgia State University to support this endeavor. As aggregate data is collected and analyzed key areas will be addressed to highlight prevention strategies and improved practice through a quality improvement approach.

As of 2020, CICC maintains data on each Child Death, Near fatality, Serious Injury (CDNFSI) intake received. The data is specific to the age of the victim child, the type of injury and if the injury was maltreatment or non-maltreatment based on the information provided in the intake report. In addition to the data being captured on CDNFSI intakes, the CICC staff are receiving

feedback through intake reviews to promote a general understanding of types of injuries to include highly specific abusive injuries as well as medical terms to ensure that the cases are coded in the shines system and assigned correctly for assessment to county partners.

This year, a proposal request was made to the GBI to partner on providing resources to parents to prevent drownings. The COVID-19 pandemic has exponentially increased home swimming pool sales. Parents are working from home and supervising their children. The proposal request is to share information jointly and widely to parents on resources to promote awareness of children accessing home swimming pools. As well, CICC continues to partner with ProSolutions to provide free, web-based mandated reporter training to all mandated reporters.

The State's Kenny A. team works to mitigate maltreatment in care for Region 14. Kenny A. outcome 4, maltreatment in care, mandates that of all children in foster care during the reporting period, the rate of victimization shall be no more than 8.50 victims per 100,000 days. To meet the requirements of this outcome an allocated Kenny A. staff member is assigned to review all maltreatment in care investigations and provide feedback. This staff member has many years of experience in child welfare and when gaps are identified she provides guidance and coaching in the assessment of safety in these investigations, as well as ensuring all Kenny A. requirements are met.

f. Populations at Greatest Risk of Maltreatment

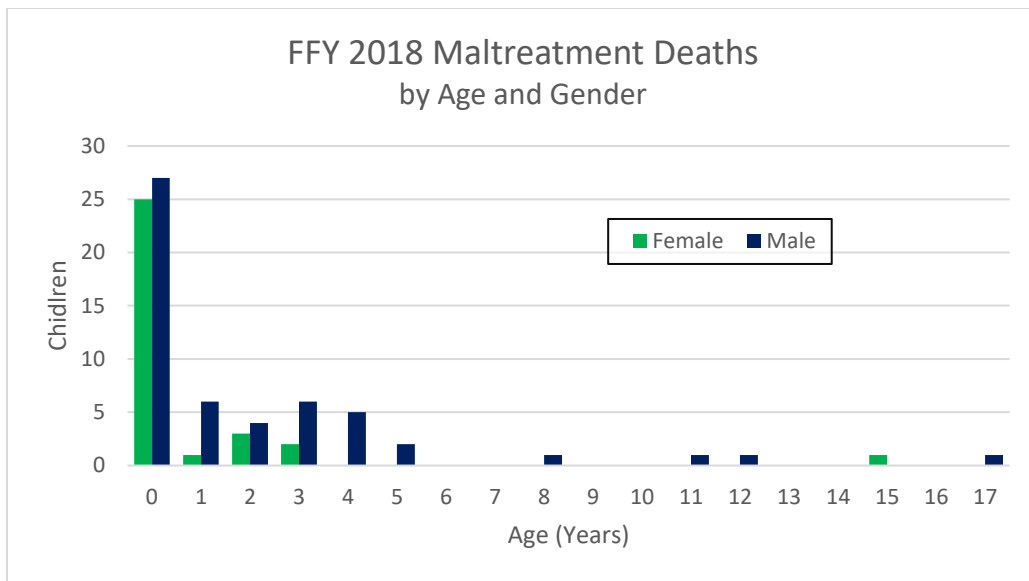
In Georgia, children ages 0 to 5 are at greatest risk of maltreatment, and infants from birth to 3 are the most vulnerable. This has been the case for at least the last eight years. According to the State's data, there is a clear distinction in that half of the child fatalities due to maltreatment in FFY 2019 were of infants less than one year old (over 60% in FFY 2018). Three-fourths of the deaths were babies two years old or younger. Eighty-five percent were six years old or younger. In FFY 2018, 94% were age five or younger.

Male infant deaths were higher than females. Prenatal exposure to substance use and co-sleeping continue to be areas of concern. The shelter-in-place mandates related to the COVID-19 pandemic heightens these concerns.

On a positive note, the count of maltreatment deaths dropped significantly between 2018 and 2019 for children age four and under; from 86 to 68 (26%). The decrease appears to be slightly greater for boys, 48 to 30 (38%), than girls, 31 to 24 (23%). This is particularly notable because males are consistently more likely to die due to child maltreatment than females. However, it is too early to tell whether this is an emerging trend or simply a better year than before.

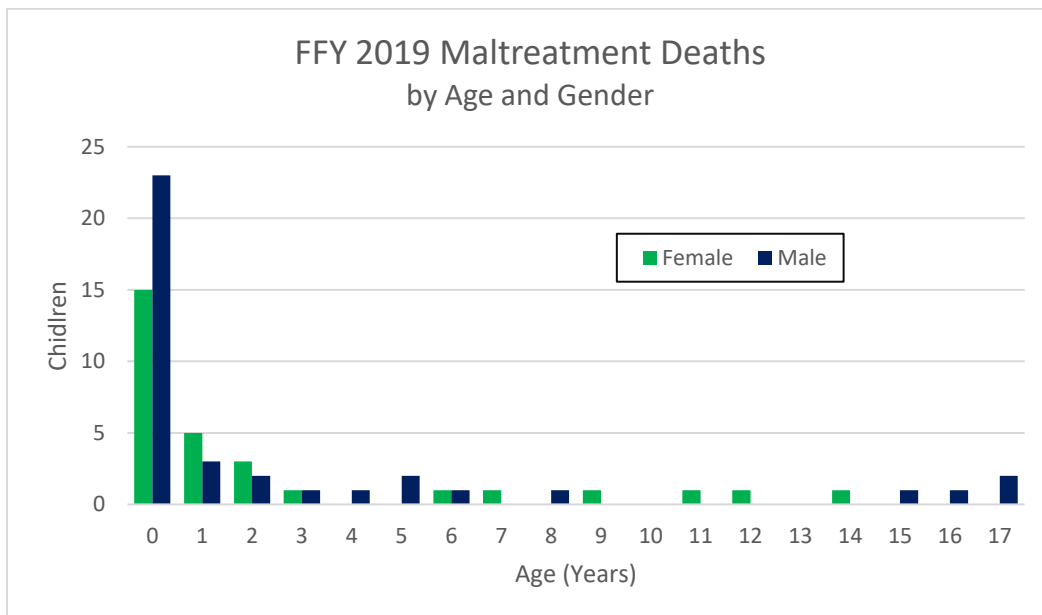
The data charts below offer comparisons between FFY 2018 and FFY 2019 data.

Figure 20 Maltreatment Deaths (FFY 2018)



Data Source: Georgia Data Unit and SHINES

Figure 21 Maltreatment Deaths (FFY 2019)



Data Source: Georgia Data Unit and SHINES

Figure 22 Maltreatment Deaths - By Age (FFY 2018)

Maltreatment Deaths FFY 2018			
Age at Death	Number of Infants/Children/Youth	Percent	Cumulative Percent
0	52	60.47%	60.47%

1	7	8.14%	68.60%
2	7	8.14%	76.74%
3	8	9.30%	86.05%
4	5	5.81%	91.86%
5	2	2.33%	94.19%
8	1	1.16%	95.35%
11	1	1.16%	96.51%
12	1	1.16%	97.67%
15	1	1.16%	98.84%
17	1	1.16%	100.00%
Grand Total	86	100.00%	

Data Source: Georgia Data Unit and SHINES

Figure 23 Maltreatment Deaths - By Age (FFY 2019)

Maltreatment Deaths FFY 2019			
Age at Death	Number of Infants/Children/Y outh	Percent	Cumulative Percent
0	38	55.88%	55.88%
1	8	11.76%	67.65%
2	5	7.35%	75.00%
3	2	2.94%	77.94%
4	1	1.47%	79.41%
5	2	2.94%	82.35%
6	2	2.94%	85.29%
7	1	1.47%	86.76%
8	1	1.47%	88.24%

9	1	1.47%	89.71%
11	1	1.47%	91.18%
12	1	1.47%	92.65%
14	1	1.47%	94.12%
15	1	1.47%	95.59%
16	1	1.47%	97.06%
17	2	2.94%	100.00%
Grand Total	68	100.00%	

Data
Source:

Georgia Data Unit and SHINES

g. Kinship Navigator Funding

In FFY 2019 kinship navigator funds were used to support legal services to 345 families, to host Georgia's first Kinship Caregiver Summit, increase coordination and communication, and enhance data collection and evaluation methods. Legal services included regional trainings for private attorneys in south Georgia to increase the availability of low-cost legal services to kinship caregivers seeking guardianship or adoption outside of metro Atlanta. Legal fees associated with kinship guardianship and adoptions were paid to increase stability and safety, as well as the ability to maintain family connections and cultural traditions.

As part of the effort to promote partnerships between public and private agencies and increase their knowledge of the needs of kinship caregivers. The one-day Kinship Caregiver Symposium for caregivers was held September 2019 with over 200 adults and 125 children. The symposium aided caregivers to discover services and supports, and for various stakeholders to identify opportunities to tailor their service array to this unique and growing population. Kinship caregivers were identified for membership on the Division's Parent Advisory Committee to inform and influence policy change.

Other supports include strategic coordination and communication between child welfare and legal aid to maximize timely legal services for kinship caregivers. The funding enhanced outreach to kinship care families, including updating a kinship care website and other relevant guides and education materials. A collaborative team of kinship caregivers, relevant government agencies and community stakeholders redesigned Georgia's Kinship Care Portal <https://dhs.georgia.gov/kinship-care-portal>. User friendly content that incorporates caregiver testimonials and experiences was developed.

Training, data collection methods, agency forms, procedures and policies were created to support utilization of the Kinship Navigator Program. Data collection procedures were enhanced for better documentation and tracking in Georgia SHINES for evidence-based

programming. New reporting perimeters include the number of referrals by county, the type of services requested, caregiver status (informal, CPS, Foster Care), and timeliness of service.

Developed a system for data collection and program evaluation to support on-going monitoring of program deliverables and outcomes. A method was established to assess whether the program model was implemented as planned, whether the intended target population was reached, and the major challenges and successful strategies associated with program implementation. An outcome evaluation was also established to determine the extent to which expected changes in child or youth outcomes occur and whether these changes can be attributed to the program or program activities.

J. Monthly Caseworker Visit Formula Grants/Every Child Every Month (ECEM)

States are provided a Monthly Caseworker Visit Grant 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). Pursuant to federal program instructions issued October 6, 2011 (ACYF-CB-IM-11-06) and January 6, 2012 (ACYF-CB-PI-12-01), states must submit a yearly report indicating the statewide percentage of children who were visited each month and the percent who were visited in the home. All children who were 17 or younger and were in care for at least one full day are reflected in this Every Child Every Month (ECEM) report. Only those children, 17 or younger, who were in care for at least one full calendar month are included in the aggregate number of children served in foster care. Children on runaway status, in a boarding county, away at college, or who have gone home for a trial visit are also included in this aggregate number.

a. Uses of the Monthly Caseworker Visit Grant Funds

Over the last federal fiscal year, monthly caseworker visit funds have been used to pay for the following expenses.

Figure 24 ECEM Expenditures

ECEM Expenditures from October 1, 2017 to September 30, 2019			
Expense	Federal	State	Total
Field Telecommunication Re-rate	644,846.00	290,935.00	935,781.00
Teens R for Me Conference	109,500.00	36,500.00	146,000.00
TOTAL	754,346.00	327,435.00	1,081,781.00

b. Standards for Content and Frequency of Caseworker Visits

Since FY 2015 states have been required to ensure the total number of monthly caseworker visits made is not less than 95 percent of the total visits that would be made if each child were visited once per month. This is up from the 90 percent that was required between 2011 and 2014. In addition, at least 50 percent of the total number of monthly visits made by caseworkers to children in foster care must occur in the child's residence (section 424(f) of the Act).

Visitation Frequency

Georgia has achieved required targets since inception of the state's initial plan to go from 51% to 90% by 2011, and to achieve the required 95% every year after FFY 2014. Frequency of visits, for the purposes of ECEM reporting, is tracked and measured using state Every Child Every Month (ECEM) LENSES reports and Georgia SHINES reports; and SHINES Case Watch Page, Case Contact Standards Page, and Case Summary page.

In Georgia, there has been little variance in visit frequency in recent years. In five of the last six years, the state achieved 97% or better in making required visits to children in care. This positive trend has been sustained in 2019. Of the 18,414 children in care, 96.76% were visited according to the required level of frequency.

Visitation Content

The visitation quality objective is to ensure the content of caseworker visits are well-planned and focused on issues pertinent to case planning and service delivery to ensure the safety, permanency and well-being of youth; and to ensure that, while making visits, case managers are:

- Adequately assessing risk of harm to children
- Identifying needs and provision of services for children, parents, and foster parents
- Effectively involving children and parents in their case planning

Quality is tracked and measured via quality assurance case reviews completed by the quality assurance team. The state "ECEM quality" target is based on the national standard for CFSR Outcome 14 – caseworker visits with child. The state "Every Parent Every Month (EPEM) quality" objective is the national standard for CFSR Outcome 15 – caseworker visits with parents. The purpose of EPEM is to ensure every parent or caregiver of a child in Georgia's care receives a quality visit every month the child is in foster care. Additionally, every case plan includes contact standards for the child, the parent/caregiver and siblings to ensure family connections are preserved.

Figure 25 Caseworker Visits - CFSR Outcome Items 14 and 15

Table: Caseworker Visitation Items					
CFSR Item	PIP Baseline	PIP Goal	Actual March 2018	Actual March 2019	Actual March 2020
Item 14 Caseworker visits with child	59.3%	64.5%	55%	51%	45%
Item 15 Caseworker visits with parents	31.1%	36.2%	24%	24%	15%

Data Source: Georgia Quality Assurance Review Team

c. Actions Taken to Ensure Performance Standards

As previously reported, Georgia has successfully created a culture of understanding that a child's safety is paramount, and that one of the most important steps the DFCS agency and private providers can take to ensure child safety is to visit children frequently. While many cases will require multiple visits within a month, it is universally understood that, at a minimum, each child must be seen at least once a month. That is evident in that the state continues to meet the required ECEM minimum standard and had not seen a significant dip in visit frequency since 2013. However, there has been some decline in visit frequency over the last fiscal year.

Although no region performed better in FFY 2019 than it had in FFY 2018, ECEM performance was very consistent for regions where staffing levels have been leveling out, becoming more stabilized. Quality of visits has been the area where Georgia has struggled the most, and the state has seen a decrease each year over the last three years. Quality assurance review results regarding CFSR items 14 (caseworker visits with child) and 15 (caseworker visits with parents) reveal significant shortfalls, percentages far below ECEM. Not only has the State not met PIP goals in these areas, it is currently ranking lower than CFSR baseline measures. In 2020, prior to the start of the pandemic, contacts were beginning to trend back upward, but the increase has not been sustained.

Over the years, the State has adopted numerous strategies for improvement including:

- Cadences – frequent, regular and brief conference calls

- Case record reviews
- Case staffings
- Pacing and scheduling
- Monitoring and tracking of data (as well as ensuring fidelity of data)
- Putting emphasis on children who are placed outside of their home county
- Reducing the risk of runaway (including ensuring quality visits to older youth)
- Reducing travel constraints
- Increase the use of technology (smart phones, voice dictation software, video streaming, etc.)
- Cross training and realignment of staff
- Enhanced supervisory oversight
- Clear and consistent messaging
- Incentives and recognitions of successes

Many of the old strategies are still in place, but regions have added additional activities to ramp up improvements. While all are still hosting summits, cluster meetings, targeted trainings and cadences, there has been a revamping of the structure of these meetings. For example, in one region, the supervisors no longer lead the cadence discussion around contacts made. These are led by the county directors. Contact guides for the field have been updated and some regions also distribute flip booklets and the Center for Disease Control Developmental Milestone Guide.

Several regions have been leaning on their CQI teams to come up with applicable interventions. Strategic CFSR Impact Plans, and new case record review and standard practice tools have been born out of these initiatives. The majority of the regions are decreasing in both frequency and quality of visits to parents, even those regions that were previously making strides in this area. One of the steps they are taking to get back on track is increasing the required regional standard above the usual minimum standards. Region 2 requires all new family preservation cases to have two contacts per month for the first 90 days. Region 6 requires all contacts for both parents and children to be made inside the home regardless of placement site (home, treatment facility, CCI, etc.).

While contact frequency was still fairly stable, most regions began placing a heightened emphasis on ensuring quality; traditionally that is the most significant gap. To address this area, some regions have been sending supervisors, mentors and coaches out with case managers in the field. Most regions have reported this to be a positive learning experience, but one region

noted that it was not as successful of an endeavor for them because the higher-ranking staff that were being sent had limited field experience themselves. The workforce in that region are mostly newcomers. Having more seasoned staff able to conduct trainings and mentoring is a plus. Region 9 reported enhanced quality of documentation after the regional director conducted a “data walk” at a summit meeting.

The “field trips” with frontline staff decreased after the onset of COVID-19, but the staff continue making contacts primarily through virtual contacts and case record reviews have increased at all levels. Technology such as What’s App, Zoom, Microsoft Teams and FaceTime have been an asset for staying in contact with families. However, not every family has internet or telephone access. Several regions have provided trainings to their staff on how to conduct a quality virtual visit. This training includes discussion regarding social distancing and what to do if a face-to-face visit is necessary. There have been pros and cons reported regarding virtual contacts. As one would expect, regions where turnover and vacancies are highest, there has been fewer contacts, and there has been a decrease in documentation regarding observations made of the home environment. However, a few regions reported that the virtual visits have made coordination of contacts easier and require less travel time and less reliance on service providers. Some families have stated that the ability to do virtual visits has improved partnerships between birth and foster parents because the technology has prompted them to communicate more frequently, thereby creating more stability in the placements.

K. 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 \$1,167,000.00 in October 2019. The grant was received based on the achievement of finalized adoptions and permanent guardianships for children exiting DFCS care. The Preventing Sex Trafficking and Strengthening Families Act: P.L. -- 113-183 extends the length of time states must spend earned incentive payments from 24 months to 36 months. Considering the new legislation, states are given approximately 36 months to utilize the funds. The extended time frame will allow Georgia to strategically utilize the remaining incentive funding as needs arise in future fiscal years. In previous years when Georgia earned incentive funds the additional funding was used to augment pre/post adoption services contracts serving adoptive children and parents across Georgia. In FFY20 the incentive payments allowed Georgia to increase the Bethany Child Life History contract by 500k to provide an additional 625 Child Life Histories. Given the high number of children moving to adoptive status, it is anticipated the remaining funds will be used during the next contract cycle to augment contracts as needed.

Georgia expects to continue with its tradition of using adoption incentive funds to augment Adoption contracts to provide services to children and families. As noted above, a portion of funds were used to supplement Adoption services contracts. The Bethany Christian services

child life history contract was augmented by 500k. In addition, in 2019 Georgia used approximately 300k of the incentive funds to provide training for Kinship services and improve outcomes and goals such as CFSP Goal B. Strategic Focus A. Objective III.

L. Adoption Savings Expenditures

On May 22, 2015, the Children’s Bureau issued Program Instruction ACYF-CB-PI-15-06 providing guidance on the calculation of Adoption Savings. That issuance required title IV-E agencies to submit an annual notification of its decision on the method to be utilized to calculate its Adoption Savings for the current fiscal year. Georgia will continue to use the same methodology (CB Method) that was submitted via the CB 496 during last reporting period.

Adoption savings funds are reinvested back into Georgia’s Adoption budget, providing Pre and Post adoption services for Georgia families. If future Adoption Incentive funds are earned, Georgia anticipate using these funds.

Considering the Preventing Sex Trafficking and Strengthening Families Act: P.L. -- 113-183 extends the length of time states have to expend the funds from 24 months to 36 months, there are no anticipated challenges in accessing and spending these payments. Georgia expends Adoption incentive grants in the order they are received to ensure timely expenditure prior to the grant’s expiration date.

M. John H. Chafee Foster Care Program for Successful Transition to Adulthood (the Chafee Program)

Services Provided

The Georgia Division of Family and Children Services administers the John H. Chafee Foster Care Independence Program within the state of Georgia. The program is supported within the Well-Being Services Section within the Division.

In the fall of 2019, the Chafee Program developed and initiated a set of standard operating procedures to streamline the service delivery for youth in foster care and establish expectations for regional Independent Living Specialists. The purpose of the GARYSE Chafee Program Standard Operating Procedures (SOP) is to optimize programmatic operations through the establishment of uniform role functions, processes, and expectations related to waiver and payment processing, NYTD, and case staffing and review escalation. It was also designed to increase the knowledge base of GARYSE Chafee personnel, establish expectations for technical assistance provision to stakeholders, and improve timeliness of service provision to youth in foster care. It also outlined expectations for the execution of randomized periodic reviews of written transitional living plans for quality assurance and improvement.

The GARYSE Chafee Independent Living Program (ILP) Supervisors, Specialists, Business Operations Analyst, and other supportive staff will have the overall responsibility for implementation and use of this SOP. Specifically, the ILP Supervisors are responsible for ensuring the SOP is followed as written. All personnel utilizing the SOP should have working knowledge of Fiscal and Child Welfare policies related to the John H. Chafee Independent Living Program. Deviations to the SOP will be addressed as necessary for quality control purposes.

In addition to the development of the Chafee Program SOP, the program also developed an internal strategic plan in January 2020 to improve the supports provided to youth as they journey through foster care. It will also be used as a guide to forge collaboration with youth, internal and external agency partners and other community stakeholders. The plan was developed during the GARYSE Chafee sections first annual strategic planning meeting. The GARYSE Chafee team collectively developed the plan during the meeting and identified key performance indicators necessary to gauge success. To support the planning efforts, the team utilized the Start, Stop, Continue (Keep) retrospective to develop practical objectives for programmatic improvement. The team also conducted a SWOT analysis to identify the strengths of the program, opportunities for enhancements, areas needing improvement, and potential threats that could thwart idealized efforts.

The team reviewed the following data provided by the Division's Data Unit to support the Strategic Plan development:

- Gender, race, and age demographics of ILP eligible youth
- Youth in care by placement type
- Proximity of placement from removal county
- Average length of time in care
- Timeliness of Written Transitional Living Plan completion
- Number of expectant and/or parenting youth
- Youth who are involved with the Juvenile Justice System
- Number of youth in extended foster care, and rate of entry

Implementation of the plan would begin March 2020, and the objectives correlated to the federal requirements to improve NYTD outcomes, to enhance the quality and frequency of case planning for youth ages 14+, to increase the interaction with youth via conferences, meetings, and other youth centered events, and including youth voice in practice decision making, and finally to increase overall awareness of Chafee supports with child welfare staff, judicial stakeholders, caregivers, placement and community service providers.

The strategies identified in the strategic plan are:

Strategy 1: To offer interactive hands-on kinesthetic learning life skills learning opportunities for ILP eligible youth (14+) in each region. Each Regional Independent Living Specialist (ILS) will host one (1) Interactive Life Skills Training per quarter, and a total of four (4) per year. The strategy will support the agency's alignment with Social Security Act Section 477(b)(3)(H) and (j). The life skills trainings will focus on the following areas:

- Health Education and Risk Prevention
- Career Readiness and Job skills
- Housing Education and Home Management Training
- Culinary and Nutrition Education

Strategy 2: To improve the timeliness and frequency of Written Transition Living Plans for youth ages 18+ population by 20%. The strategy includes the development of internal tracking tools, development of infographics and other marketing tools regarding the requirements for written transition plan development. This strategy will align with Social Security Act Section 477(b)(3)(H) and (j).

Strategy 3: To Improve the timeliness of Transitional Meetings for youth ages 16 -17 by 20%. Resulting outcome should improve timely development and update of Written Transitional Living Plans. This strategy also includes the development of internal tracking tools, development of infographics and other marketing tools regarding the requirements for written transition plan development.

Collection of High-Quality Data

The Division plans to develop a process to improve the qualitative collection of NYTD data through random quality assurance reviews over the next two years. In December 2019, the Division began disseminating NYTDA data to youth, caregivers, placement providers, judicial partners and other stakeholders during its annual Teens R 4 Me Conference. The data was provided through an infographic that was developed to share the outcomes of the youth cohort that was followed from FFY2014 through FFY2018. During the event Teens R 4 Me December 2019, the youth participated in an interactive "Reality Fair" financial literacy simulation activity. A Reality Fair (or "Financial Reality Fair") is an interactive financial literacy tool for high school students. The Reality Fair concept is a unique opportunity for youth to experience some of the financial challenges they will face when they start life on their own. It is a hands-on experience in which the youth were randomly assigned a career with corresponding starting salaries with deductions. They were also assigned a family relationship scenario that included the addition of spouses and/or children. The youth then complete a budget sheet requiring them to live within their monthly salary while paying for basics such as housing, utilities, transportation,

clothing, childcare and food. Additional expenditures such as entertainment and travel are factored in as well. Throughout the fair, they were exposed to many temptations for additional spending, and were challenged to learn how to balance their wants and needs to live on their own. After the youth have visited each of the various booths covering components of independent living, they were required to balance their budget and then sit down with a staff volunteer counselor for review. Throughout the fair, the NYTD statistics provided in the infographic were also randomly posted next to specific stations.

The Division's Data Unit also provides NYTD outcomes data in various reports developed and shared publicly with internal and external stakeholders. The Division also shares NYTD data collection outcomes statewide weekly during each of the reporting periods. The information is shared with county and regional leadership to inform the level of current practice and awareness of services provided per the information inputted into the SHINES system by case management staff. To improve the rate of information entered detailing services provided to youth during the review periods, a pacing plan was implemented establishing goal expectations for data entry. Areas not meeting the pacing requirements must participate in a cadence of accountability call with the Chafee Program Director for technical assistance and support. Since implementation of the pacing plan, most areas exceed the NYTD entry expectation by the 4th month of the review period.

During the PUR, the Division partnered with youth leaders who were foster alumni to assess current programmatic policies and to provide feedback on areas needing improvement based on their lived experience. The youth leaders were members of MAAC's Policy Council who routinely review the state's policy and advocate for enhancements of service provision and delivery. The Division also met with the MAAC youth leaders to provide updates on the development of policies to support the execution of the extension of foster care legislation known as Connected by 21 or CB21.

Coordination of Services with Federal and State Programs

Enhancement of Scattered Site Housing Placements Program

During the PUR the Division initiated a workgroup to restructure the transitional living scattered site placement program. The workgroup included representatives from the Department of Juvenile Justice, current transitional living placement providers, and former foster youth who had experienced scattered site placements. There were also representatives from the Division's policy unit, Office of Provider Management that oversees private agency placements, as well as the Chafee Program. The restructure will include creating a uniform and equitable process for the assessment of youth readiness and appropriateness for such placements. It will also focus on the development of a multi-level system model that will identify what milestones youth must achieve at specific timeframes during their placement at this setting type. The group will also identify the key performance indicators which will be used to gauge the effectiveness of the program model.

Youth Employment Opportunities Partnership with United Way Greater Atlanta

In the May 2019, the Division began a partnership with United Way Greater Atlanta (UWGA) to increase the employment rate of older youth in foster care ages 16+. United Way of Greater Atlanta's (UWGA) Metro Atlanta Opportunity Youth Initiative (MAOYI) aims to re-engage disconnected and vulnerable youth in metro Atlanta to academic and career programming that will lead them to become productive and civically engaged adults. The UWGA program supports an overlapping populace of general population youth through their Opportunity Youth Initiative and felt it was prudent to service the youth in or exiting from foster care.

Partner Engagement for Youth Events

The Division hosts two annual events for youth that provides both opportunities to learn through workshops and interaction with partnering agencies. The Division partnered with post-secondary, employment and job readiness, armed forces, financial institutions, and many others to provide youth with information and resources.

Partnership with Faith-Based Organizations

Connecting Homes is a faith-based nonprofit organization dedicated to connecting young adults to mentoring families who will walk with them in life and guide them to a successful future. Connecting Homes recruits mentoring family volunteers through various faith-based institutions in the North Georgia and metro Atlanta areas. The Division has initiated an informal partnership with the Connecting Homes program to increase the number of youth that are connected with a mentoring family. As youth are connected the Connecting Homes organization provides support to the family as they support the youth.

Another faith-based entity, Promise 686, has also partnered with the Connections Homes program to recruit families from faith-based institutions to serve as mentoring families. Promise 686 recruits families within the faith community to serve as foster or adoptive parents. They also recruit volunteers who do not wish to serve as a caregiver but are willing to serve as support network for those who do. Through their internal partnership, Connections Homes and Promise 686 will recruit mentoring families for older youth in care.

As a result of the Foster Youth to Independence (FYI) initiative which provided Tenant Protection Vouchers for youth exiting or aging out of the foster care system, the Division is working in partnership with the Department of Community Affairs to support their request for funding to extend additional housing opportunities for youth in Georgia via the local housing authorities under their purview.

The Georgia Department of Community Affairs (DCA) partners with communities to create a climate of success for Georgia's families and businesses through community and economic development, local government assistance, and safe and affordable housing. DCA also helps

qualified low- and moderate-income Georgians buy homes, rent housing, and prevent foreclosure and homelessness. DCA currently receives federal funds from the U.S. Department of Housing and Urban Development (HUD) to administer the voucher program in 152 of Georgia's 159 counties.

Public and Private Sector Involvement

MAAC - Youth Townhall Series and Policy Listening Sessions

Georgia has a long-standing partnership with the Multi-Agency Alliance for Children (MAAC) to include facilitating ILP workshops, facilitating IDA workshops, monitoring, and tracking youth participation and managing the Education Service Delivery Model. During 2019, DFCS and MAAC continued hosting a series of youth townhalls and listening sessions across the state. Youth Townhall meetings provide updates and suggestions related to systemic concerns of youth in foster care. In 2019 town halls were held for DFCS Regions 2, 10, and Region 13 (hosted in Fulton County due to centralization of venue between counties that comprise the Region). Over 40 youth participated in MAAC-supported Youth Town Halls throughout 2019 which covered topics such as education, permanency, housing, normalcy, mental and physical health, employment, and staff experience and engagement.

Due to the historical success of this initiative, the Youth Townhall structure was utilized to host three policy listening sessions to garner youth input for the development of the Connections Extension of Foster Care program policies. The Division coordinated this effort with MAAC and the University of Georgia's J.W. Fanning Institute. There were three (3) policy listening sessions held during the summer of 2019, one in each of the Division's Child Welfare Districts. A total of 118 youth attended the events statewide. The listening sessions afforded youth currently in the foster care system to provide feedback on the primary components of the extended foster care program, such as program eligibility, participation requirements, housing, and supports. The Division therefore utilized the overall youth feedback to inform the prospective policies for the Connections Extensions of Foster Program. The Division marketed the listening sessions through the coordinated efforts of its internal Office of Communications and MAAC. The effort was also broadcasted to placement resource providers by eblast via the GA+ Score provider listserv, and directly to foster parent and kinship caregivers via the FosterGeorgia caregiver listserv.

The DFCS staff from the Well-Being Unit meet quarterly with MAAC to assess the effectiveness of the town halls and policy listening sessions provided to the youth. As a result of these evaluation sessions in concert with Division leadership, the overall consensus is that the Townhall Meetings are productive in that they allow collaboration between youth and the Division's county, regional and state level leadership. However, it has also been determined that more work can be done to increase communication with DFCS staff and fostering connections with family members and adult supporters.

UGA and ILP Partnership

The Independent Living Program works closely with the J.W. Fanning Institute for Leadership Development, University of Georgia. This cooperative work has been the impetus for various initiatives in the past such as Education Training Voucher (ETV), Embark Conferences, College Bound, and Leadership Academy. During this reporting period, the Division collaborated with the Institute to strategize the development of on-campus supports throughout various college and university campuses.

In 2019, the State Independent Living Program has begun to tailor efforts around enrollment and retention through increased knowledge around ETV by way of webinars, in-person training sessions and college connections workshops. In partnership w/ ILP, UGA Fanning hosts information sessions to caregivers, providers and secondary education institutions. The Independent Living Program and MAAC host statewide workshops specifically for youth who need post-secondary education support.

Additionally, efforts are underway in partnership with Fanning, UGA to provide workshops tailored to prospective and current post-secondary students around academic support and resources available to promote college preparation and success during their academic career.

Orange Duffel Bag and ILP Partnership

Orange Duffel Bag (ODB) continues to provide at risk high school and college students evidence-based coaching programs and ongoing advocacy to improve their education outcomes. ODB also provides support to the students' guardians and caring adults. These services are provided to the community in a spirit of offering hope. ODB's trauma-informed services are a human investment in the lives of students who are homeless, in foster care of experiencing high poverty, and at risk of not achieving their education. ODB's nondirective counseling curriculum, coaching, advocacy and collaboration for collective impact support community practice and youth reconciling loss, rebuilding the relationship with themselves and others, and establishing goals, connections and plans toward establishing healthy lifestyles through informed choices and self-advocacy.

Through this partnership we support ODB with two cohorts per FY. One cohort supports 25-30 high school students in foster care for 12 weeks. Upon program completion, youth receive a laptop and present their plan of action for education achievement. Based on our existing relationship, approximately 86% of youth successfully completed the program.

This collaboration meets periodically and the ODBI administrators provide detail reports on the following: Student academic data to include but not limited to GPA, HS graduation, assessments and the amount and quality of project services provided to Priority Students. District and school level student outcome data collected will include average daily attendance rates, disciplinary data including in school/out of school suspensions, attendance and involvement in remedial services, advanced academics, and college prep.

nsoro Foundation Partnership

The nsoro Foundation is a private philanthropic organization that provides funding to former foster youth to support their post-secondary education pursuits. nsoro supports youth who aged out of the foster care system at age 18, those who were adopted or entered permanent guardianship after age 16, or those who were orphaned for at least one year at the time of their 18th birthday. This partnership allows the Division to offer eligible youth additional supports necessary to offset the cost of attendance and improve the rate of post-secondary certification or degree attainment. For the FY20 academic school year, the GARYSE Chafee program coordinated a series of statewide post-secondary preparation workshops for prospective high school seniors and GED recipients. The workshops were scheduled to be held at local offices and on college campuses. The nsoro Foundation representatives and current scholarship recipients will accompany GARYSE Chafee Program staff and the J.W. Fanning Institute at the meetings to increase youth awareness of the funding supports they provide and scholarship enrollment. They will also support youth with college application and transcript fees while onsite. The effort began in January 2020 and meetings were planned to continue through April 2020.

Education and Training Vouchers

The Division has partnered with the J. W. Fanning Institute for Leadership Development at the University of Georgia (Fanning) since July 2015 as the third-party provider of the Education and Training Voucher (ETV) program on behalf of the state. Federal FY 2019 represents the fourth full fiscal year that Fanning maintained responsibility for making payments in support of a postsecondary education on behalf of students who have experienced foster care in Georgia. The primary goal of the collaboration is to ensure that payments are made on behalf of students in a timely and expeditious manner. A secondary goal is to utilize the data gathered to understand where opportunities exist to improve the likelihood that young people who have experienced foster care may further their education. Fanning is a natural collaborative partner on the delivery of ETV in Georgia. Fanning has strong and existing relationships with institutions in the University System of Georgia as well as the Technical College System of Georgia. Fanning has led the development of the Embark Georgia network, which supports efforts to increase the educational attainment of young people who have experienced foster care and homelessness. Fanning also has strong partnerships with community organizations through which information about the ETV program are shared.

The total award for FY19 totaled \$2,138,905 and was awarded in an initial contract with a value of \$1,659,905 and a subsequent amendment with a value of \$479,000. An overarching fiscal goal of the project is that administrative expenses remain lean; as such, a primary target is that 90% of contract funds are passed through and used to pay for educational expenses on behalf of ETV recipient students. The primary contract allocates funds for program delivery and program administration.

Chafee Training

Training Needs

Currently, the Division has identified that front line case management staff, supervisors, and other county/regional leadership need the following trainings provided to support the improvement of case planning and service provision on behalf of older youth in foster care.

Knowledge of Adolescent Development (Understanding the Impact of Trauma on Brain Development) – front line staff and leaders, foster caregivers, and placement providers often demonstrate a limited awareness of how systemic and chronic trauma impacts brain development in youth, and how such cognitive impairments manifest through behaviors. It is believed that this type of training would also help them understand and recognize the difference between chronological and developmental age – and exercise patience with youth who require additional supports to grasp new skills and adjust to new surroundings.

Cognitive and Social-Emotional Competence: staff, caregivers, and providers need additional training in recognizing how a youth's traumatic experiences can impact executive functioning skills and that behaviors youth exhibit are often emotionally fueled. It is believed that with additional training to that regard, that patience will be extended to youth when attempting to teach them necessary skills to support their self-sufficiency.

Trainings Provided

The Division provided training opportunities for staff, caregivers, placement providers, and other stakeholders throughout the year to support understanding of the purpose of Chafee program and the services provided to support youth transition to adulthood.

Training for CASA Representatives – in August 2019, the Chafee Director provided an overview of Chafee supports, and areas for advocacy at the 2019 annual statewide CASA Conference. The training included an overview of youth transition plan development, transitional living placement options, skill enhancement learning opportunities, and post-foster care supports provided to youth. Emphasis was placed on topic areas wherein court-appointed advocates could advocate for increase service access and provision in their respective areas.

Training for Independent Living Placement Providers – the Division provided training to Independent Living scattered site placement providers and Life Coaches. Life Coaches are employed by ILP placement providers and act as human service professionals for youth placed in their programs. The trainings provide an overview of the RBWO minimum standards, Chafee's services and supports, education supports and advocacy

Consultation with Tribes (See Section XIV of this report)

N. Consultation and Coordination Between States and Tribes

A designated member of the Policy and Regulations Unit serves as the DFCS State Office liaison to ICWA and the Georgia Tribes. The liaison regularly meets with the leadership of the state recognized Georgia Tribes during the bi-monthly meetings of the Governor's Council on American Indian Concerns. Following the council meetings, the liaison meets with the leaders from each Georgia tribe (Marian McCormick of the Lower Muscogee Creek, Frances Crews of the Cherokee of Georgia Tribal Council, and JB Jones of the Georgia Tribe of Eastern Cherokee) to discuss any recent concerns involving their tribal members and agency policies. When issues are raised regarding a child or family from the tribe, the liaison identifies the appropriate county staff to review the case and provide assistance, if necessary.

The council meetings also provide a forum for the agency to inform the tribe on available DFCS programs and services. During the reporting period, DFCS staff presented information on the kinship continuum, State of Hope initiatives, Chafee, education and training vouchers (ETV), caregiver recruitment, and well-being services. These presentations were well received by the tribal leaders. DFCS staff encouraged the tribes to recruit their tribal families as volunteers for the programs that provide services for children. Contact information for all DFCS programs was provided. This engagement effort is ongoing.

Tribal leaders are given opportunities to review DFCS policies as they are being developed or revised. Policy drafts are sent to external partners, including tribal leaders, to request their review and feedback. When policies are completed, the liaison presents the policies to the Council to describe the impact on communities and families. This engagement ensures tribes are informed of current agency policy and practice and improves tribal understanding of agency responsibilities to ensure the safety, permanency, and well-being of children served. This work is ongoing.

Special assistant attorney generals (SAAGs) ask about tribal membership (or eligibility for membership) at each preliminary protective hearing after children enter care. If the child's membership is identified, the SAAG initiates contact with the tribe. Staff have reached out to several tribes to confirm membership of a child, including the Lumbee of North Carolina, White Earth Chippewa, the Coosa Nation, Oglala Sioux, and the Choctaw tribe. Tribal resources are identified, when available, for support services. Tribal families are encouraged to partner with agency staff to provide supports for children.

Regional field program specialists (FPS) monitor child welfare cases that involve tribal children to ensure ICWA protocols are being followed consistently and accurately. The liaison helps the FPS as necessary to ensure ICWA compliance. Several FPSs also maintain a copy of the ICWA Judicial Bench Book as a resource. Ongoing efforts are being made to recruit tribal families at community events (Indian Mounds celebration, pow-wows, etc.) and as part of generalized recruitment efforts for foster and adoption placements from the various tribes, and to

participate in DFCS Advisory Boards, when available. The number of tribal foster homes has not yet significantly increase, but there are other intangible benefits that have come from DFCS' intentional and targeted recruitment efforts of tribal members. There is increased awareness of the need for tribal foster homes among the leaders of the three state recognized tribes. This building of awareness along with the tribes' appreciation of DFCS' recognition of their cultural heritage has garnered the tribal support as a community partner committed to continuing recruitment efforts.

Ongoing Coordination and Collaboration

To ensure ongoing coordination and collaboration with tribes and the implementation of the CFSP, the ICWA liaison will continue to engage the Georgia tribal leadership on programs, services, and resources available through the agency at Council meetings and other scheduled activities. The ICWA liaison will ensure the tribal leaders are engaged in APSR Joint Collaboration meetings, encouraged to provide feedback on goals and strategies, and invited to participate in agency planning activities, as scheduled. The liaison will provide ICWA training and compliance case reviews to the Regional FPS to ensure the county staff are familiar with the laws and requirements of ICWA and tribal engagement; and respond to any ICWA related concerns that arise.

The liaison will also monitor Georgia's ICWA compliance by reviewing ICWA activity reports from the regions on their engagement with tribes and tribal families; providing case consultation, training and technical assistance when needed to improve awareness and understanding of ICWA for federal and state recognized tribes; and selecting random cases for review (e.g. identification, notice to tribes, transfer of jurisdiction, etc.). These case reviews will support reconciliation of data to ensure appropriate actions are taken for Native American children.

The liaison will also maintain membership in the national ICWA Managers workgroup to monitor ICWA activities, best practice, and policy in other States, and relevant Court decisions that could impact Georgia.

Jurisdiction

Georgia Tribes do not provide child welfare services. DFCS is responsible for child welfare services for children in Georgia.

ICWA Compliance

Georgia monitors ICWA compliance by having a dedicated staff member within the Policy and Regulations Unit to serve as the ICWA liaison, manage issues involving the implementation of ICWA, collaborate with the Training and Professional Development Unit on development of ICWA training materials, and provide related technical assistance. The ICWA liaison manages the reporting process from regional staff on their interactions with children and families from

federally recognized and Georgia Tribes. Staff are instructed to report on the number of notifications to Indian tribes and the Bureau of Indian Affairs (BIA), the number and types of placements made, whether active efforts have been made to prevent the breakup of the Indian family, and if the tribe has been advised of the case and its right to intervene.

LEGISLATION

The Georgia Legislature codified the federal Indian Child Welfare Act during the 2019 legislative session in O.C.G.A. §15-11-100.1 and O.C.G.A. §15-11-260.1. These statutes help guide the agency in adhering to the ICWA provisions. The ICWA policy was updated in July 2019 to include the new code sections.

TRAINING

DFCS continues to seek opportunities to increase staff awareness and engage with tribal members. All staff receive annual training on the provisions of ICWA. Training is provided through the Multi-Disciplinary Child Abuse and Neglect Institute (MD-CANI) for those who are court-involved, including case managers, and SAAGs. The MD-CANI curriculum includes federal laws and ICWA provisions. The SAAGs typically ask about tribal membership at each Preliminary Protective Hearing after children enter care. If it is determined throughout the life of a case that there is tribal membership, either the SAAG or the supervisor will reach out to engage the tribe. County leadership provides legal training yearly to frontline workers and supervisors. ICWA is included in the training, so staff are informed of the procedures to alert supervisors and SAAGs if they encounter families who claim Indian heritage.

PLACEMENT

The ICWA; liaison reviews data from Georgia's CCWIS system (Georgia SHINES) to assess documentation of ICWA activities. Data from the reporting period show that membership (or eligibility for membership) in a federally recognized tribe was confirmed for 12 children (including the Lumbee of North Carolina, White Earth Chippewa, the Coosa Nation, Oglala Sioux, and the Choctaw tribe). The majority of Native American children were not brought into care; they were provided with family support services or referred to their tribe for services. Pursuant to ICWA provisions, staff send notification to the tribes and/or the BIA when a child is coming into care. Region 13 and Region 5 brought 6 children into care during the reporting period. Notification was sent to the children's tribes, and the cases were transferred to the tribal courts.

During SFY 2020, 16 family preservation cases opened where a principal household member in the case is a tribal member. During SFY 2020, 19 family support cases opened where a principal household member in the case is a tribal member

RECRUITMENT

Ongoing recruitment efforts that mirror the needs of this population is a priority for several regions. The recruiters strategically utilize a portion of their funding and resources to locate, assess and certify foster homes that serve the needs of the Native American demographic. This effort is ongoing. As the end of May 2020, there were 13 foster parents who self-identify as “American Indian/Alaska Native.” There were four foster homes open where the foster parent claims tribal membership.

CFSP/APSR Exchange

Tribes are invited and encouraged to participate in the development of the CFSP and APSR each year. This includes participation in joint planning activities which gives them the opportunity to have input and provide feedback on agency services and development of goals and strategies. In addition, the ICWA liaison provides information to tribes on how to access both the CFSP and the APSR and presents a summary of those reports to the Council. Tribes are advised of the availability of the documents housed at <https://dfcs.georgia.gov/federal-reviews-and-plans> and encouraged to review them for discussion.

Chafee Consultation with Tribes

Georgia Tribes do not provide Chafee/ETV services. DFCS is responsible for child welfare services for children in Georgia. Continuing in 2021, tribes will have the opportunity to meet with Chafee program staff at the Council meetings and have robust discussion on specific programs that impact Native children and families. This engagement effort is ongoing. All Chafee-eligible youth receive services through the program.

O. Child Abuse Prevention and Treatment Act (CAPTA) State Plan

The State of Georgia has developed a new CAPTA Plan and is in the process of submitting this plan for approval. Below are the areas of focus and currently identified objectives in the proposed CAPTA Plan along with ongoing work.

To approach the drafting of a new plan with measurable outcomes, the CAPTA Panel Coordinator, Safety Services Director and Division’s Federal Plans Manager reviewed CAPTA Panel recommendations from recent years, the requirements for state child protection systems in §106(b)(2)(B), the areas for improvement in §106(a), and worked with the CAPTA Panels to identify priority areas of focus.

These reviews and discussions resulted in five substantive areas of focus. Four have been long standing areas of interest for the panels and Plans of Safe Care are an emerging priority since

CAPTA was amended by the Comprehensive Addiction and Recovery Act of 2016. The areas directly pertain to CAPTA mandates in §106(b)(2)(B) and are:

- Mandated reporting
- Child representation
- Workforce development and worker safety
- Prevention and reporting of maltreatment related child fatalities
- Plans of safe care and services to mothers with substance use disorders and infants affected by prenatal exposure to substances

Mandated Reporting

Relevant CAPTA Priority Areas in §106(a): 1, 8, 10

Goal: Improve quality and consistency of reports of child abuse and neglect made to the Child Protective Services Intake Communications Center (CICC).

Mandated reporting is a priority of the Children's Justice Act Task Force and the Mandated Reporter subcommittee consistently works on issues pertaining to mandated reporter training requirements and the availability of quality mandated reporter training with the belief that standardized, quality training will help improve reports received by the agency, thus allowing for better decision making at intake.

This work supports the agency's compliance with the mandate in §106(b)(2)(B)(i) requiring the state to have *provisions or procedures for an individual to report known and suspected instances of child abuse and neglect, including a state law for mandatory reporting by individuals required to report such instances.*

Objectives:

- Develop training requirements for mandated reporters
- Develop mechanism for authorizing and approving mandated reporter training
- Provide mandated reporters with consistent, up-to-date training
 - Promote the available authorized/approved trainings currently available
- Facilitate agreements between child serving state agencies to adhere to established mandated reporter training requirements
- Develop procedures for regularly communicating updates to mandated reporting law and/or policy, and relevant system trends (i.e. drug abuse) to mandated reporters

- Assess the quality of reports received by mandated reporters and the agency's response to inform training needs both for the Division and mandated reporters

Consistent and complete reports to CICC should support quality intake decision-making by the Division. Training that includes additional information regarding the roles and responsibilities of the child protection system is also an opportunity for broader education on how to access community resources and connect families to supports when there is not an allegation of child abuse and neglect that needs to be brought to the attention of the Division.

Child Representation

Relevant CATPA Priority Areas in §106(a): 2, 5

Goal: Ensure that all children have access to and are appointed qualified individuals to represent their interests in dependency proceedings.

Quality legal representation for children has been a priority of the Children's Justice Act Task Force since it completed its 2009 assessment. The Task Force worked closely with the Division on a PIP in 2009 that resulted in updates to policy and the SHINES system to facilitate the collection of information on the appointment of attorneys and/or guardians ad litem (GALs). With the recent decision to allow Title IV-E reimbursement for administrative costs related to parent and child representation, the Task Force has reestablished its Child Representation Committee, with a focus on training of GALs and ensuring quality representation for children throughout the State.

This work supports the agency's compliance with the mandate in §106(b)(2)(B)(xiii) requiring the state to have *provisions and procedures requiring that in every case involving a victim of child abuse or neglect which results in a judicial proceeding, a guardian ad litem who has received training appropriate to the role, including training in early childhood, child, and adolescent development, and who may be an attorney or a court appointed special advocate who has received training appropriate to that role (or both), shall be appointed to represent the child in such proceedings—*

- I. *To obtain first-hand, a clear understanding of the situation and the needs of the child; and*
- II. *to make recommendations to the court concerning the best interests of the child.*

Objectives:

- Support research and implementation planning to facilitate adoption of best practices for child representation at the individual attorney level and structural system-level.
- Facilitate implementation of claiming of IV-E for child representation, including supporting pilot projects, monitoring and evaluation.

- Support the completion of basic prerequisite training for attorneys, GAL and judges.
- Utilize observation and peer review to reinforce and strengthen local practice and implementation. Incorporate on-site, real-time feedback in addition to a trend report.
- Support the regular occurrence of court stakeholder meetings and trainings to address and improve practice.
- Expand the participation of GALs (CASA and attorneys) in the twice per year Court Improvement Initiative site meetings.
- Enhance CPRS to incorporate/prioritize best interest factors by providing a standardized reporting templates for GALs.
- Extend opportunities for GAL participation in multi-disciplinary trainings (i.e. Summit).
- Support efforts to clarify language specific to GAL training requirements, dual appointments, and specific duties/reporting in state law.
- Increase GAL participation in cross-judicial circuit MD-CANIs.
- Support local training offerings that reach GALs in all counties.
- Enhance data sharing and coordination between court systems and Division to ensure legal representation is accurately captured.

Previous work on child representation allows the Division to track compliance with the appointment of attorneys/GALs. Focusing on establishing best practice standards and training for child attorney/GALs furthers compliance with the CAPTA mandate and allows the agency and judicial partners to focus on quality representation for children.

Plans of Safe Care

CAPTA Priority Areas in §106(a): 7, 10, 13

Goals:

- Increase utilization of Plans of Safe Care as a tool to promote safety and well-being of infants born affected by prenatal exposure to substances
- Promote consistent screenings of and referrals to appropriate services for:
 - pregnant women for substance use disorders
 - infants and children for effects of prenatal exposure to substances

The Division has worked diligently to comply with the amendments to CAPTA by the Comprehensive Addiction Recovery Act of 2016 and, in doing so, has recognized the need for a systemic response to prenatal exposure to substances in the state. The state participated in a prenatal exposure study at the request of the Children's Bureau during the fall of 2019 and will

use the findings of the assessment and results from the QIC-CCCT grant in Douglas County to inform work in this area.

This work supports the agency's compliance with the mandate in §106(b)(2)(B)(ii),(iii) requiring the state to:

- I. *Have policies and procedures (including appropriate referrals to child protection service systems and for other appropriate services) to address the needs of infants born with and identified as being affected by substance abuse or withdrawal symptoms resulting from prenatal drug exposure, or a Fetal Alcohol Spectrum Disorder, including a requirement that health care providers involved in the delivery or care of such infants notify the child protective services system of the occurrence of such condition of such infants, except that such notification shall not be construed to—*
 - a. *establish a definition under Federal law of what constitutes child abuse or neglect; or*
 - b. *require prosecution for any illegal action.*
- II. *Develop a plan of safe care for the infant born and identified as being affected by substance abuse or withdrawal symptoms or Fetal Alcohol Spectrum Disorder to ensure the safety and well-being of such infant following release from the care of healthcare providers, including through—*
 - a. *addressing the health and substance use disorder treatment needs of the infant and affected family or caregiver; and*
 - b. *the development and implementation by the State of monitoring systems regarding the implementation of such plans to determine whether and in what manner local entities are providing, in accordance with State requirements, referrals to and delivery of appropriate services for the infant and affected family or caregiver*

Objectives:

- Utilize findings of prenatal exposure study to identify internal and system gaps in policies, procedures, and services, and create a strategic plan to address gaps and engage in system response to infants and families affected by prenatal exposure to substances
- Increase availability of specialized trainings on substance use and child welfare, and plans of safe care for agency staff and external partners
- Promote interdisciplinary collaboration with obstetric gynecologists, birthing hospitals, Department of Public Health and Department of Behavioral Health and Developmental Disabilities for early identification and treatment of maternal substance use.

- Identify appropriate services for infants and families affected by prenatal exposure to substances and build capacity for services statewide

The Division is committed to ongoing training and development of staff to promote understanding of and appropriate response to maternal substance use and infants and children affected by prenatal exposure. Additionally, the Division is committed to continuing with external stakeholders to develop a system response that promotes early, consistent identification of maternal substance use and facilitates access to treatment is a clear priority for use of CAPTA funding.

Workforce Development

CAPTA Priority Areas in §106(a): 6, 7

Goal: Increase retention of skilled staff resources by recognizing their value to the agency by:

- Providing opportunities to develop expertise based on individual professional development goals
- Ensuring their safety in the workplace
- Providing clear pathways for professional growth based on individual potential and preferences
- Engaging staff from the field as stakeholders to define and develop opportunities on the above

The CAPTA Panels, specifically the Child Protective Services Advisory Committee (CPSAC), has a longstanding interest in workforce development. The CPSAC subcommittee continues to focus on worker safety to support the physical safety and well-being of frontline staff. The Division has also prioritized workforce development in its CFSP and by participating in a National Child Welfare Workforce Institute grant project. Objectives below reflect recommendations from the CPSAC as well as on going priorities related to retention of a skilled workforce. Priority objectives are ones that overlap areas identified in the CFSP and CAPTA Panel recommendations.

This work supports the agency's compliance with the mandate in §106(b)(2)(B)(xx) requiring the state to have *provisions and procedures for improving the training, retention and supervision of caseworkers*.

Objectives:

- Develop and improve specialized skills and expertise in the workforce in response to new trends in child welfare, legislative priorities or deficiencies and inconsistencies identified in evaluation of practice

- Encourage and improve multidisciplinary practice/cross training opportunities for Division staff
- Increase caseworker personal safety
- Reduce the negative impact of secondary trauma on the workforce by increasing awareness of secondary trauma, its impact on the workforce, and resources available, including:
 - increasing awareness of secondary trauma and its affects
 - recognizing the signs of secondary trauma (in self and colleagues)
 - identifying and utilizing EAP resources
 - reducing the stigma in using EAP
- To increase opportunities to identify leadership roles and develop potential through:
 - Clearly identified career paths
 - Clearly identified standards and requirements for promotion
 - Opportunities to remain in preferred position with defined roles and expectations as an expert resource

Prevention and Reporting of Maltreatment Related Child Fatalities

CAPTA Priority Areas in §106(a): 2, 7

Goal: Promote accurate reporting of maltreatment related fatalities and use information from fatality reviews to create and implement prevention strategies.

The Maltreatment Committee of the State Child Fatality Review and the Child Fatality Investigations subcommittee of the Children's Justice Act Task Force have longstanding interest in consistent identification, investigation and reporting of maltreatment related fatalities. Consistency in these areas allows for data and practice evaluation to inform strategies for preventing future fatalities

This work supports the agency's compliance with the mandate in §106(b)(2)(B)(x) requiring the state to have *provisions which allow for public disclosure of the findings or information about the case of child abuse or neglect which has resulted in a child fatality or near fatality*; and in §106(c)(4)(A)(iii)(II) authorizing CAPTA Panels to review child fatalities and near fatalities to determine the extent to which State and local child protection service agencies are effectively discharging their responsibilities.

Objectives:

- Support multi-disciplinary reviews of child fatalities as part of Nationwide Partnership for Child Safety Collaborative
- Provide multi-disciplinary trainings to help improve investigation and consistent identification of maltreatment related fatalities
- Develop statewide child fatality investigation protocol for inclusion in the state model child abuse protocol
- Improve coordination between the Division and Child Fatality Review to identify effective prevention opportunities based on evaluation of policy, practice and procedures
- Support ongoing development of state plan to prevent maltreatment-related fatalities
- Support data sharing to facilitate analysis and evaluation of CFR, Division and Public Health data to identify trends and opportunities for prevention of child fatalities

Use of CAPTA Funds

Figure 26 CAPTA Funds Expenditures

ACTIVITY	CAPTA Priority	FUNDS
2019 Child Welfare Summit	CAPTA Priority 6,7, 13	\$85,301.40
CHOA - Love 146 Train the Trainer Prevent Child Abuse Georgia -	CAPTA Priority 7, 13	\$10,000.00
Mandated Reporter Train the Trainer	CAPTA Priority 1,8,10	\$47,396.00
Child Welfare Training Collaborative	CAPTA Priority 6,7,13	\$150,000
CAR Updates (legislative mandate)		\$241,592.50
Care Solutions		\$89,760.00

CAPTA funds were utilized for Child Protective Services Staff to attend the third annual Child Welfare Summit sponsored by the Office of the Child Advocate. This is a multidisciplinary conference funded in part by the Children's Justice Act grant. The conference offered sessions on a wide range of topics, including the judicial handling of child abuse and neglect cases.

CAPTA funds were also utilized to support Love 146 Train the Trainer. This training was for school personnel to become certified facilitators in the Not A #Number curriculum. The Not A #Number curriculum was chosen as one of the programs included in the Technical Assistance Resource Guide (TARG) by the Georgia Statewide Human Trafficking Task Force. The TARG identified programs utilizing best practices to train students on the prevention of abuse. This training provides insight into human trafficking for school professionals, particularly those working with students daily. The training itself will provide information on human trafficking and how to respond to suspected disclosures.

Georgia continued to partner with Care Solutions, Inc. to coordinate the state's three CAPTA panels. These expenditures included administrative support to the panels, coordinating communication between the Division and the Panels, the annual CAPTA Panel Retreat and travel for the CJA Task Force co-chair to attend the annual grantee meeting in Washington, D.C. and to attend the National Citizen Review Panel Conference where they each presented.

CAPTA funds paid for travel for the federal plans manager and state liaison officer to attend meetings and conferences related to substance affected infants, including ones where they presented to a statewide child welfare audience on Plans of Safe Care.

a. Substance Affected Newborns

During the reporting period, the Division has continued to emphasize the importance of improving practices related to substance affected infants and plans of safe care and has made improvements in the number of plans completed and staff awareness and education about prenatal exposure and plans of safe care. The Division released updated Plan of Safe Care (POSC) policy in May of 2019. This policy release included a definition of "affected infant" that went into effect in April 2018; incorporated feedback from Women's Treatment Recovery Services (WTRS) and frontline staff around substance abuse assessments to make assessments completed per policy more accessible; and integrated Plan of Safe Care policies into broader substance abuse case management policies.

The Safety Section has continued to work closely with a group of staff, primarily field program specialists, who act as regional "Plan of Safe Care Champions" and provide training and technical assistance to both Division staff and community partners. Each region has at least one identified Plan of Safe Care Champion. The Safety Section holds formal annual meetings with POSC Champions, communicates at least quarterly regarding reviews and cases with each region, and provides technical assistance and consultation on a regular basis to clarify policy and practice questions. The Safety Section, the Division's Data Unit, and POSC Champions work together to execute the monthly Plan of Safe Care Review, the state's mechanism to monitor implementation of plans and service referral and delivery. In the review process, a statistically

significant sample of cases are reviewed by POSC Champions and Safety Section monthly and Safety Section sends a list of cases requiring Plans of Safe Care to each region for follow up. Safety and POSC Champions continue to work together to modify the review tool as needed to ensure the fidelity in the review process, and to better inform and enhance understanding of the status of practice statewide and to provide more specific, consistent feedback to frontline staff.

The Division has also worked diligently to educate partner agencies and contracted providers about Plans of Safe Care and needs of substance affected infants. The agency has a strong working relationship with Women's Treatment Recovery Services (WTRS), a program of the Department of Behavioral Health and Developmental Disabilities and communicates with the program director on a regular basis. The Safety Section, Policy Unit and WTRS have worked together to ensure that agencies' policies regarding Plans of Safe Care are in alignment and the WTRS program director and/or federal plans manager have facilitated multiple meetings between local WTRS providers and frontline Division staff to address barriers to timely access to services. The federal plans manager and safety services director presented at several conferences on best practices for working with this population.

The Division hosted meetings between multiple program areas within the Department of Public Health, Maternal and Child Health, including Children's First/Babies Can't Wait and WIC and programs within the Department of Behavioral Health and Developmental Disabilities including an opioid treatment coordinator and WTRS to discuss Plan of Safe Care requirements and agency roles. Participants from this meeting have continued to work together on the Department of Public Health's Maternal Substance Use Workgroup. This workgroup contributed a section to Georgia's Statewide Opioid Strategic Plan completed in August of 2018 that included a goal around educating on and implementing plans of safe care as a practice in the system beyond the Division. The federal plans manager serves on the Education subcommittee of this workgroup. The Safety Section and the Data Team have also established a relationship with DPH's Maternal and Child Health Epidemiology team to compare how data regarding substance affected infants is captured in each agency and to look for opportunities to use shared data to inform efforts.

The Douglas County Juvenile Court is the recipient of a QIC-CCCT grant to improve systemic responses to substance affected infants. PPG and Douglas County DFCS have been closely involved in the development of goals and action plans for the grant and have participated in site visits and calls from the Technical Assistance (TA) team. The Douglas County demonstration site has been very successful in engaging all parties, including birthing hospitals, public health, treatment providers and early intervention services to create a system of care for pregnant women using substances and increase the likelihood of intervention prior to birth. The Division plans to use aspects of the model created and lessons learned to replicate efforts in other areas of the state.

The Children's Bureau, in partnership with the Centers for Disease Control and Prevention, engaged James Bell Associates and ICF to conduct a study on prenatal alcohol and other drug

exposures in child welfare populations. The State of Georgia agreed to participate in this multi-site descriptive study that explored the knowledge, procedures, and attitudes about identification, documentation, and treatment of children with prenatal substance exposures (PSE) and Fetal Alcohol Spectrum Disorders (FASDs).

The study included on-sight interviews including case managers, supervisors, providers, and caregivers along with a review of 212 cases. GA was provided with written findings from interviews and surveys of local staff conducted in four local agencies across this state along with considerations for the state regarding the potential implications of the findings and select suggested resources. This information was shared with senior leadership as well as Plan of Safe Care Champions.

The Division has recently partnered with Emory Neurodevelopment Clinic. The Division provided a letter of support and has agreed to partner with them as they are working on a longitudinal study of the impact of prenatal exposure to drugs on child development. While the Division has had success in increasing awareness about Prenatal substance abuse and Plans of Safe Care among partners, there is an identified need statewide for a system response to address the issue of maternal substance use and prenatal exposure to substances. It is the desire of the Division to identify a partner to engage in completing Plans of Safe Care in cases where there is no allegation of maltreatment. The Division is using its new CAPTA Plan to outline ways to support the needed collaboration in this program area with the CAPTA money allocated for Plans of Safe Care and services to substance exposed infants

b. Annual Citizen Review Panel Reports

A copy of the report is attached.

c. State CAPTA Coordinator

The State's Liaison Officer/State CAPTA Coordinator is Arleymah Gray, Director of Federal Plans. Her contact information is 2 Peachtree Street NW, Atlanta, GA 30303; Arleymah.Gray@dhs.ga.gov.

P. Updates to Targeted Plans

a. Foster and Adoptive Parent Diligent Recruitment Plan

A copy of the State's Foster and Adoptive Parent Diligent Recruitment Plan is attached to this report. Updates have been made to the plan to reflect 2019 data. The Division has entered into several partnerships with private providers who will assist with the recruitment and approval of relative and foster caregivers. A state level position has been assigned to serve as the state recruitment manager.

b. Health Care Oversight and Coordination Plan

Comprehensive Assessments

A Comprehensive Child and Family Assessment (CCFA) will be completed on each child entering care. A referral for CCFA to an approved provider will be completed by DFCS case manager within 24 hours of the 72-hour court hearing. Amerigroup will continue to assist DFCS CM in coordinating the health components of the CCFA which include Early and Periodic Screening and Diagnostic and Treatment (EPSDT), dental, vision, and trauma assessment for all children enrolled in Georgia Families 360 Program.

Progress is managed by the In-Home and Support Services Unit. In partnership with the DFCS Contracts Administration Unit, more training has been provided to providers who conduct CCFAs on behalf of the Division. Additionally, the In-Home and Support Services team does quality reviews on completed CCFAs and provides feedback to providers to ensure they are completing the CCFAs correctly. The CCFA document is in the process of being updated to improve CCFA quality for families.

If there is a need for a behavioral health assessment the DFCS case manager will collaborate with Amerigroup CCT to refer a child to licensed behavior health provider for a behavioral health assessment (DFCS Policy Manual, Foster Care Services, Section 10.12).

Psychological Evaluations

Psychological evaluations are not required for every child who enters care. Based on the comprehensive assessment, trauma assessment, behavioral or cognitive concerns identified by DFCS case manager, placement provider, teachers, other caregivers, Amerigroup or a child may be referred for a psychological evaluation at any point during his or her time in care.

The State continues to work with case managers and judicial partners to ensure they know that a psychological assessment does not have to be provided to every child. In case staffings additional information and options are provided for case managers and additional staff to utilize that provide a more comprehensive view of what the child may be experiencing.

Psychotropic Medications

Authorizations from the county director and/or regional director are obtained prior to administering psychotropic medications to children in foster care except in emergency situations. Authorization shall be provided to the prescribing physician within two business days of request.

An escalated psychotropic medication consent protocol was created January 2018 in response to a need for timely psychotropic medication consent for children newly admitted into CSUs and PRTFs and to ensure stabilization of the newly admitted children. The medication consent box is monitored 24 hours a day, days per week by assigned DFCS staff.

The medication consent process has improved the medication oversight of youth in care. Due to the implementation of the protocol, the Agency is no longer on a Program Improvement Plan (PIP). At this time, additional training continues to be provided to case managers and stakeholders to ensure that the medication consent process continues to be implemented in areas that have implemented well and areas that still have challenges, can receive the support and technical assistance they need to increase their medication consent practice.

Ensuring the Appropriateness of Diagnoses and Additional Oversight of Psychotropic Medication and Significant Medical Conditions

The Division of Family and Children Services works to ensure children and youth in foster care are in the most appropriate and least restrictive placements. Behavioral health and significant physical health conditions substantially influence the placement process and potentially the placement setting. Psychotropic Medication reports are distributed on a bi-monthly basis to the Regional Directors, County Directors, Lead Field Program Specialists, Treatment Field Program Specialists, and C3 Coordinators. The psychotropic medication report will be generated by Amerigroup. The report includes: (1) children enrolled in GF360, (2) a list of psychotropic medications that were filled for each child during the month, (3) the dosage amount, (4) date the prescription was filled, (5) legal county, (6) name of prescriber, and a (7) series of questions (see attachment, Monitoring Reports).

Medical Consultations

Dr. Priyanka Patel, DHS medical director, provides medical consultations. Case consultation allow staff (CM, SSS, SSA, county and regional directors) to request various types of consultation with Dr. Patel which include review of psychotropic medications, peer to peer reviews with treating physician, consultation regarding medical procedures, mental health treatment planning, and adding new psychotropic medications to a child's regimen.

Dr. Patel continues to provide medical consultations and her services have been utilized more due to the increased need of support of our youth with high end medical needs. The trainings provided have also increased Dr. Patel's exposure to the staff and they are contacting her often to request her medical advisement and expertise.

System of Care (SOC)

SOC is an organizational framework for how behavioral health services and supports delivery systems can work together to fit the needs of a community, county, region, or state. The SOC framework is based on their core values: child-family, and person-centeredness; being community-based, cultural competency. From 1984 to the present, Georgia has made investments to develop its SOC. It is crucial, with such a large amount of activity and investment in children's behavioral health, to create new SOC to help support successful outcomes for Georgia's children.

The IDT serves as the multiagency leadership collaborative that strives for an integrated and coordinated approach to serving children in the community. Not only is coordination between child-serving agencies conducive to an effective and efficient system, coordinated and communication systems between local, county, regional, and state bodies is a vital feedback loop that ensures that local and regional needs and resources are understood, and state and county-level policy objectives are being achieved. This area of focus was chosen as an integral part of a coordinated network that serves children and families (Georgia System of Care State Plan 2017).

Local Interagency Planning Teams (LIPTs), required by Georgia Code § 49-5-220-227, were established at the local level to improve and coordinate services for children and youth with SEDs. LIPTs often exist at the county or multicounty level, and some are more active than others. Their main charge is to ensure that children and youth receive necessary and coordinated services in the community (Georgia System of Care State Plan 2017).

The Well-Being Services Section director and WPAC director continue to participate in the IDT meetings facilitated by DBHDD. Additionally, DFCS is responsible for referring each child being considered for treatment at a Psychiatric Residential Treatment Facility (PRTF) to the LIPT and serves as a permanent team member of each LIPT. The Agency has a local representative present at each meeting (DFCS Policy Manual, Foster Services Section 10.12).

LIPT trainings have been initiated to provide information to case managers and other stakeholders about the importance of LIPTs and how they can be utilized. The latest training was in May 2020.

c. Disaster Plan

Beginning in 2008 the Department of Human Services, Division of Family and Children Services (DHS/DFCS) published the Continuity of Operations Plans (COOP) and a statewide COOP template. This template and statewide disaster plan are reviewed and updated annually. Georgia is unique in that it has 159 counties and is a home rule state, meaning local government entities may self-govern and establish their own emergency management policies/plans. Each county office is required to complete and annually update a COOP which is similarly formatted to the state COOP. Each state agency COOP is a separate annex to the Georgia Emergency Management Agency/Office of Homeland Security, Emergency Operations Plan (GEOP).

The COOP is based on the authority of Official Code of Georgia, Title 38, Section 3, Articles 1 through 3, known as the Georgia Emergency Management Act of 1981, and is compliant with the National Incident Management System and supports the National Response Framework. It is promulgated by State Executive Order and supports the Georgia Emergency Operations Command.

The Plan establishes policy and guidance to ensure the execution of the Division's mission essential functions in various emergency situations, to include all hazards approach that covers man-made and natural disasters, accidents, technological emergencies, civil unrest and terrorist related incidents. The COOP integrates the various programs under the Division.

The State's Disaster Plan PIP was completed and approved in FFY 2016 which required the state to describe the protocol for determining if a shelter should be opened. Georgia Emergency Management Agency (GEMA) and American Red Cross (ARC) both discuss the shelter plan, status, scenarios and work on making those decisions jointly along with the Local Emergency Management Agency. The ARC then advises DFCS should the need arise for DFCS assistance and support. The coordination of DFCS staff's involvement of shelter operations will come directly from the State Emergency Management Coordinator (SEMC). These updates are highlighted on the attached plan.

Emergency Response System Updates

Red Cross Shelter Training

DFCS made some significant improvements statewide with regards to training and preparation of staff, in order to be able to assist the Red Cross more adequately in shelter operations. DFCS conducted 25 in-person trainings where 636 staff were trained. Currently there are 2,330 DFCS staff who have taken the in-person shelter training statewide over the past 5 years (40% of all staff). DFCS disaster response representatives completed a train-the-trainer class with the Red Cross, whereas 25 staff members throughout the state are now trained to train their own staff in the regions where they work. Prior to this, there were only 8 staff able to teach the shelter training class. Currently, there are 33. DFCS developed a "just-in-time" shelter training module which can provide staff the basic instructions needed to work in a shelter. The agency has developed a system to more closely monitor drills that are conducted quarterly in each of the 159 county offices. The State has also created a ten-county pilot program that addresses safety concerns in the office. These counties meet once a month to discuss incidents of safety (both office and personnel/field) that occur and discuss mitigation possibilities.

Major Weather Events

Shelters were opened and there was DFCS involvement as a consequence of Hurricane Dorian. Seventeen shelters were opened, with a total population of 2,535 Georgia residents who went into the shelter to spend the night. DFCS staff participated in this operation and were active in shelter staffing, coordinating the DFCS response as well as supporting at the local Emergency Operations Centers (EOCs), and at the State Operations Centers (SOC). The process in which decisions were made with regards to shelter operations, how staffing was determined and communicated with, and the actual response of our staff in the shelters, was the most successful operation to date. There were compliments shared to DFCS by the DHS Commissioner and GEMA Director with regards to the overall sheltering response. There were

no concerns with DFCS operations and no improvements necessary as a result of Dorian. The SOC activation was from August 29th to September 6th in the following counties: Laurens, Bibb, Coffee, Richmond, Muscogee, Columbia, Ware and McDuffie.

COVID-19

March 14, 2020, Georgia Governor Brian Kemp declared a public health state of emergency due to the COVID-19 pandemic. The state child welfare agency was provided new guidance from the Federal Emergency Management Agency (FEMA) regarding new temporary building evacuation protocols in response to the pandemic. In light of these directives, and due to the health safety of staff and clients, all of the DFCS lobbies were closed to the public on March 30th. As of May 2020, a limited number of staff remain in the county offices to retrieve the mail as well as retrieve FS/MA paper applications from the DFCS mailbox. DFCS worked diligently with the Georgia Emergency Management Agency and the Department of Public Health to secure PPE for front-line staff and group homes. PPE was secured, however more was requested. What was secured and delivered to GEMA on April 3rd is the following:

- 1,920 face shields
- 2,825 gowns
- 10,000 gloves
- 1,040 N95 masks

More PPE was requested at the time of this report, because the above was not sufficient:

- 2,500 N95 masks
- 5,000 gloves

DHS and DFCS both provided a FAQ sheet to answer questions with regards to the agency response to COVID-19 as well as set up a separate phone number for questions that arise. Telework was implemented for all staff that were able to. DFCS Emergency Management has often been in touch with other states to inquire of their processes and statuses and forwarding those along to leadership to consider. There were no requests for sheltering during the reporting time with regards to COVID-19. However, discussions occurred with regards to the agency's response should sheltering be needed during this time.

In the upcoming year, the state will consider whether to permanently incorporate these changes into the overarching disaster plan.

In the reporting period (up through March 31, 2020) there are 15 DFCS staff who have contracted COVID-19. Depending on when the staff member was in the building previous, determined if the office needed to be completely closed and cleaned. Nine DFCS offices were

completely closed and cleaned at this reporting time, due to staff members' positive COVID-19 cases.

On March 23, 2020, all DFCS lobbies were closed to the public with a sign posted on the door for instructions on how the customers could conduct their business. Staff that could telework were rotated out to do so, leaving a skeleton crew to conduct necessary office business. There were no complete office closures where operations were not able to be completed following social distancing guidelines.

COVID-19 Standard Operating Procedures provided staff with clear guidance on service provision, universal precautions, DHS/DFCS Essential Personnel Designation Form, proper utilization of telework forms, required cyber training for staff and appropriate platforms and best practices for teleworking and providing effective and efficient service delivery during this pandemic.

OFI continued to work seamlessly without interruptions and had started the process early to acquire equipment to allow staff to telework. Customers continued to apply/recertify for benefits through various platforms, with the added option of on-line applications, the option of using a drop-box, mailing information directly to the county and making appointments to meet in person if needed.

Social Services work was not interrupted but transitioned into modifications of policy sent from the state office making allowances for screening questions and use of virtual resources such as Skype and WhatsApp. In cases where safety could not be assessed virtually, in-person contacts were made while still adhering to social distancing guidelines. Staff were also provided with N95 masks to help protect them in these circumstances.

Staff communicated with supervisors and co-workers through various platforms, the most common being Microsoft Teams and Skype. Safety was a primary concern and intake and virtual visits were discussed by staff, supervisor and county directors to ensure COVID-19 procedures did not impact safety. Regional Leadership Teams met often via Microsoft Teams video conference.

Mandatory reporters were sent resources to assist them in spotting certain concerns while they conducted virtual teaching or counseling and websites were shared to assist with safety assessments. Many providers worked to provide services via video/tele-health options, so that services were continued. However, drug screens, DNA testing and live scan fingerprinting were discontinued.

On April 8, the governor renewed the public health state of emergency until May 13. He again, on April 30 renewed the state of emergency to June 12. On May 12, the governor announced that the state would begin a phased-in reopening of the state with limited in-person services. The executive order required citizens, between May 14 and May 31, to continue social

distancing and refrain from gatherings over ten people. It encouraged the wearing of face coverings while outside the home or place of residence.

d. Training Plan

A copy of the State's Training Plan (checklist) is attached along with a copy of a training plan supplement guide.

Q. Statistical and Supporting Information

CAPTA Annual State Data Report

a. Child Protective Service Workforce

Education, Qualifications and Training

This section of the report provides data on the education, qualifications and training of child protective service personnel responsible for intake, screening, assessment and investigation of child abuse and neglect reports in the state. The following table presents demographic data on the State's Social Services case management staff hierarchy (e.g., associate, case manager, supervisor).

The minimum qualification of a child protection services worker for Georgia DFCS is at least a bachelor's degree. The preferred qualifications include a behavioral science degree and at least one year of experience or a bachelor's or master's degree in social work.

The employee's academic credentials determine their job title and pay level. For example, an employee with a bachelor's degree and no case management experience would be considered a Social Services Specialist 1. Training requirements are included in the Training Plan.

Figure 27 Social Services Job Qualification and Salary Ranges

Table . Social Services Job Qualification and Salary Ranges					
Job Code	Official Job Title - Working Title(s)	PG	Salary Range		Entry Qualifications
SSM014	Dir, Social Svcs - Regional Director	P	Minimum	\$66,821.60	Master's degree in a related area from an accredited college or university AND Three years of management of subordinate managers/supervisors in a human service delivery program OR Bachelor's degree in a
			Market Average	\$95,459.43	

	- Section Director		Maximum	\$116,937.80	related area from an accredited college or university AND Six years of experience, including Four years of management of subordinate managers/supervisors in a human service delivery program OR related certification AND Three years of management of subordinate managers/supervisors in a human service delivery program OR Five years of experience required at the lower level Sr Mgr, Social Svcs (SSM013) or position equivalent.
SSM013	Sr Mgr, Social Svcs - County Director 5	O	Minimum	\$59,134.16	Master's degree in a related area from an accredited college or university AND Two years of management of subordinate managers/supervisors in a human service delivery program OR Bachelor's degree in a related area from an accredited college or university AND Five years of experience, including three years of management of subordinate managers/supervisors in a human service delivery program OR related certification AND Two years of management of subordinate managers/supervisors in a human service delivery program OR Three years of experience required at the lower level Mgr 3, Social Svcs (SSM012) or position equivalent.
			Market Average	\$84,477.37	
			Maximum	\$103,484.78	
SSM012	Mgr 3, Social Svcs - County Director 4	N	Minimum	\$52,331.12	Master's degree in a related area from an accredited college or university AND Two years of management of subordinate managers/supervisors in a human service delivery program OR Bachelor's degree in a related area from an accredited college or university AND Five years of experience, including three years of management of subordinate managers/supervisors in a human service delivery program OR Related certification AND Two years of management of subordinate managers/supervisors in a human service delivery program OR Three years of experience at the lower level Mgr 2, Social Svcs (SSM011) or position equivalent.
			Market Average	\$74,758.74	
			Maximum	\$91,579.45	
SSM011	Mgr 2, Social Svcs - Social Svcs Program Director - County Director 3 - Deputy County Director 5	M	Minimum	\$46,310.72	Master's degree in a related area from an accredited college or university AND One year of management of subordinate supervisors in a human service delivery program OR Bachelor's degree in a related area from an accredited college or university AND Two years of management of subordinate supervisors in a human service delivery program OR Related certification AND One year of management of subordinate supervisors in a human service delivery program OR Two years of experience at the lower level Mgr 1, Social Svcs (SSM010) or position equivalent.
			Market Average	\$66,158.17	
			Maximum	\$81,043.76	

SSM010	Mgr, Social Svcs - County Director 1 - County Director 2 - Deputy County Director 4 - Unit Manager - Social Services Administrator	L	Minimum	\$40,982.94	Master's degree in a related area from an accredited college or university AND One year of supervisory experience in a human service delivery program OR Bachelor's degree in a related area from an accredited college or university AND Two years of supervisory experience in a human service delivery program OR Related certification AND One year of supervisory experience in a human service delivery program OR Two years of experience at the lower level Social Svcs Prgm Mgr Spv (SSP023) or position equivalent.
			Market Average	\$58,547.06	
			Maximum	\$71,720.15	
SSP042	Social Svcs Prgm Consultant 3 - Field Program Specialist	K	Minimum	\$36,268.09	Master's degree in a related field from an accredited college or university AND Two years of related experience, One year of which as a supervisor or lead worker OR Bachelor's degree in a related field from an accredited college or university AND Four years of related experience OR Two years of experience at the lower level Social Svcs Prgm Consultant 2 (SSP041) or position equivalent.
			Market Average	\$51,811.56	
			Maximum	\$63,469.15	
SSP073	Social Svcs Spec Spv	J	Minimum	\$32,970.99	Master's degree in Social Work from an accredited college or university AND One year of experience in a lead/supervisory capacity OR Master's degree in any behavioral science from an accredited college or university AND two (2) years case management experience OR Bachelor of Social Work degree from an accredited college or university AND two (2) years case management experience OR Bachelor's degree in any behavioral science AND three (3) years case management experience OR One year of experience at lower level Social Svcs Spec 3 (SSP072) or position equivalent <i>Note: Behavioral Science degrees include but are not limited to the following: social science, psychology, sociology, child development, family studies, criminal justice, education, public health, public administration, nursing.</i>
			Market Average	\$47,101.41	
			Maximum	\$57,699.23	
SSP072	Social Svcs Spec 3	I	Minimum	\$29,973.63	Master's degree in Social Work from an accredited college or university OR Master's degree in any behavioral science from an accredited college or university AND one (1) year case management experience OR Bachelor of Social Work degree from an

			Market Average	\$42,819.47	accredited college or university AND one (1) year case management experience OR Bachelor's degree in any behavioral science AND two (2) years case management experience OR One year of experience at lower level Social Svcs Spec 2 (SSP071) or position equivalent Note: Behavioral Science degrees include but are not limited to the following: social science, psychology, sociology, child development, family studies, criminal justice, education, public health, public administration, nursing.
			Maximum	\$52,453.85	
SSP071	Social Svcs Spec 2	H	Minimum	\$27,248.75	Master's degree in any behavioral science from an accredited college or university OR Bachelor of Social Work degree from an accredited college or university OR Bachelor's degree in any behavioral science AND one (1) year case management experience OR One year of experience at lower level Social Svcs Spec 1 (SSP070) or position equivalent Note: Behavioral Science degrees include but are not limited to the following: social science, psychology, sociology, child development, family studies, criminal justice, education, public health, public administration, nursing.
			Market Average	\$38,926.79	
			Maximum	\$47,685.32	
SSP070	Social Svcs Spec 1	G	Minimum	\$24,771.59	Bachelor's degree from an accredited college or university.
			Market Average	\$35,387.99	
			Maximum	\$43,350.29	

Data Source: Georgia DHS Office of Human Resource Management

The following table presents demographic data on the State's Social Services case management staff hierarchy (e.g., associate, case manager, supervisor).

Figure 28 Demographics on Social Services Case Management

Staff Characteristic		*May 2020	Total	Percent
Gender	Female		1135	90.58%
	Male		118	9.42%
	Unknown		0	0%
Race/Ethnicity	Am. Indian		1	0.08%
	Asian		1	0.08%
	Black		803	64.09%
	Hawaii/Pac		0	0
	Hispanic		27	2.15%
	Multirace		0	0%
	White		392	31.28%

Staff Characteristic		*May 2020	Total	Percent
	UNKNOWN		29	1.15%
Age Group	<26		95	7.58%
	26-30		245	19.55%
	31-35		203	16.20%
	36-40		225	17.96%
	41-45		179	14.29%
	46-50		140	11.17%
	51-55		92	7.34%
	56-60		48	3.83%
	61+		26	2.08%
A	Not Indicated		162	12.93%
B	Less Than HS Graduate		0	0%
C	HS Graduate or Equivalent		79	6.3%
D	Some College		8	0.64%
E	Technical School		2	0.16%
F	2-Year College Degree		10	0.80%
G	Bachelor's Level Degree		740	59.06%
H	Some Graduate School		3	0.24%
I	Master's Level Degree		248	19.79%
J	Doctorate (Academic)		0	0%
K	Doctorate (Professional)		1	0.08%
Pay Grade	G		160	12.77%
	H		596	47.57%
	I		150	11.97%
	J		263	20.99%
	L		66	5.27%
	M		18	1.44%

SOURCE: Georgia DHS Office of Human Resource Management

There were a total of 1,253 Intake and CPS workers who had at least one active case as of 09/30/2019. 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 SSP070, SSP071, SSP072, SSP073, SSM011, SSM010.

The report listed all workers who were assigned as principal case manager for at least one CPS case – this would be a case in an intake, investigation, family support, or family preservation stage. We are not counting caseworkers who were assigned foster, adoptive, post-adoptive, or post-foster stages. The count for these employees was 1,253. This is reflective in above table.

Turnover and Vacancy Rates by Job Class

Figure 29 Turnover and Vacancy Rates by Job Class

Job Class`1	Filled as of 07/01/2019	Turnover 7/01/2019-03/30/2020	Annualized Turnover Rate
SSP070	311	97	41.59%
SSP071	1279	299	31.17%
SSP072	290	81	37.24%
SSP073	472	57	16.10%
SSM010	98	12	16.33%
SSM011	14	5	47.62%
Total	2464	551	29.82%

SOURCE: Georgia DHS Office of Human Resource Management

Job Class	Vacant	Total Position Count	Vacancy Rate
SSP070	250	561	44.56%
SSP071	552	1831	30.15%
SSP072	156	446	34.98%
SSP073	173	645	26.82%
SSM010	44	142	30.99%
SSM011	12	26	46.15%
Total	1187	3651	32.51%

SOURCE: Georgia DHS Office of Human Resource Management

Caseload/Workload Requirements for Personnel

The state works to ensure caseloads are manageable and are at or below the recommended caseworker to child ratio. The Child Welfare League of America recommends caseloads of between 12 and 15 children per worker. The Council on Accreditation recommends that caseloads not exceed 18 per worker.

<https://www.socialworkers.org/LinkClick.aspx?fileticket=Mr2sd4diMUA%3D&portalid=0>

Georgia does not have a set state-level caseload standard for CPS workers, but the governor allocated funding for additional staff each year from 2014 – 2018 with the goal of achieving 1:15 caseload ratios. As reported in the DHS SFY 2019 Annual Report, the median caseload

number for a CPS worker manager was 12 in FFY 2018 and 22 in FFY 2019. While the average caseloads are represented in the tables below as well as the median load, the median is a better representation of the fluctuations seen in caseloads.

During the report period, April 1, 2019 – March 31, 2020, the average number of cases for a Georgia region was 1,772. This number, however, considers not just Family Preservation, Family Support and Investigations cases, but Foster Care cases as well. When the data is “weighted” to adjust for the highly populated Region 14, the median number of cases per caseworker ranges from 20 – 28.

Figure 30 Georgia Caseloads FFY 2018

FFY 2018* Georgia Caseloads			
REGION	CPS CASEWORKERS	AVERAGE LOAD	MEDIAN LOAD
1	108	13	12
2	109	14	13
3	97	21	19
4	174	12	11
5	129	11	10
6	89	12	2
7	64	18	17
8	67	12	11
9	50	11	10
10	64	15	15
11	80	15	4
12	95	15	15
13	161	15	13
14	232	12	11
Out of State Placement	1	5	5
TOTAL	1489	14	12

Data source: Georgia Data Unit and SHINES

*Child Welfare caseload is calculated based on every caseworker carrying at least 5 cases (at any point in time), whereas in previous years the calculation was based on every caseworker carrying at least 3 cases.

Figure 31 Georgia Caseloads FFY 2019

FFY 2019* Georgia Caseloads			
REGION	CPS CASEWORKERS	AVERAGE LOAD	MEDIAN LOAD
1	102	26	26
2	94	27	27
3	83	26	24
4	98	18	16
5	101	25	24
6	57	23	22
7	60	30	28
8	55	26	28
9	36	26	25
10	47	25	24
11	73	30	29
12	75	26	27
13	108	21	20
14	174	18	17
TOTAL	1151	24	22

SOURCE: Georgia Data Unit and SHINES

*Child Welfare caseload is calculated based on every caseworker carrying at least 5 cases (at any point in time), whereas in previous years the calculation was based on every caseworker carrying at least 3 cases.

b. Juvenile Justice Transfers

According to data on discharges from Georgia SHINES in FFY 2019, four youth who were under 18 on the date of transfer had a custody status change to “committed to DJJ,” (transferred to the Department of Juvenile Justice). The children were identified by a simple query to the SHINES data system that extracted all changes in legal status from DFCS to DJJ during FFY 2019 where the child was under the age of 18 on the day of the transfer. There were no children who transferred from temporary or permanent custody to joint custody in FFY 2019, but this is not the same as a transfer of custody to DJJ.

The term “joint custody” or “joint commitment” refers to when a child has both been committed to DJJ for committing a delinquent act and placed in the legal custody of DFCS because the child was also found dependent. Commitment to DJJ is one possible outcome for a youth found guilty of committing a delinquent act. The court may commit a child to DJJ if it is best suited to the child's treatment, rehabilitation and welfare. The child may also be placed in the custody of DFCS only if the child is found dependent.

The responsibilities of each agency in a “joint custody” case vary based on the court jurisdiction and/or the collaboration between the local DJJ office and the local DFCS office. Both agencies have case management responsibilities, to include contact standards, case planning (DFCS)/treatment planning (DJJ), etc. If a child is committed to restrictive custody in a youth detention center (YDC), then DJJ would have physical placement of the child. If not, the agencies should work collaboratively to secure a placement for the child.

In FFY 2020, from October 1, 2019 – March 31, 2020, there have been two children transferred from DFCS to DJJ, and no children changed from DFCS to joint commitment with DJJ.

c. Education and Training Vouchers

Listed below (and on Attachment D) is the number of youth who received Education and Training Vouchers during the most recent school year and the year prior. The values for the 2020 school year are up through May 2020.

Final Number: 2018-2019 School Year

(July 1, 2018 to June 30, 2019)

Total = 1241

New = 327

2019-2020 School Year

(July 1, 2019 to June 30, 2020)

Total = 1391

New = 346

d. Inter-Country Adoptions

The state did not have any children who were adopted from other countries and who entered into state custody in FY 2019 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.)

R. Monthly Caseworker Visit Data

Georgia will report data on monthly caseworker visits with children in foster care by required submission date December 15, 2020.

S. Financial Information

a. Payment Limitations IV-B, subpart 1

- FY 2005 Title IV-B, subpart 1 funds that the state expended for childcare, foster care maintenance, and adoption assistance payments
 - FFY 2005 \$1,486,000
 - FFY 2020 \$1,486,000
- Non-federal funds that were expended by the state for foster care maintenance payments and used as part of the title IV-B, subpart 1 state match for FY 2005
 - FFY 2005 \$5,955,414
 - FFY 2018 \$4,296,145
- FY 2005 Title IV-B, subpart 1 estimated expenditures for administrative costs are documented on CFS-101, Parts 1 and II
- Actual expenditures for the most recently completed grant year are documented on the CFS-101, Part III.

b. Payment Limitations IV-B, subpart 2

- IV-B, subpart 2 (PSSF grant): The percentage of expenditures for this grant, broken down by service categories:
 - Family preservation – 24%
 - Community-based family support – 25%
 - Time-limited family reunification – 22%
 - Adoption promotion and support services – 22%
- As required, all service categories are funded by approximately 20% of the grant, and less than 10 percent of the total grant is spent on administrative costs. Estimated expenditures for the service categories are documented on the CFS-101, parts 1 and 2

- IV-B, subpart 2 (PSSF grant) FY 2018 state and local share expenditure amounts (for comparison with the state's 1992 base year amount, as required to meet the non-supplantation requirements in section 432(a)(7)(A) of the Act):
 - FFY 2018 \$3,990,250.
- c. FY 2021 Budget Request – CFS-101, Parts I and II (see attached)
- d. FY 2018 Title IV-B Expenditure Report – CFS-101, Part III (see attached)
- e. Standard Form 425 (SF-425) Federal Financial Report (submitted via the Payment Management System)