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October 12, 2017

Bobby D. Cagle Director Georgia Division of Families and Children 2 Peachtree Street, Suite 19-490 Atlanta, Georgia 30303

Dear Director Cagle:

This letter acknowledges the receipt of Georgia's Child and Family Services Review (CFSR) Program Improvement Plan (PIP) first quarterly report. The state conducted the CFSR during the time period of April 1, 2016 through September 20, 2016. Following the review the CFSR Final Report, issued on January 7, 2016, identified the outcomes and systemic factors that were found to be out of substantial conformity. Per 45 CFR 1355.35(a), Georgia was required to develop a PIP to address these issues.

The state submitted a final version of the PIP on April 26, 2017, which was approved June 6, 2017. As negotiated with the state, the PIP effective date was April 1, 2017 with quarterly reporting required. The state must keep the CB informed of progress and challenges associated with the implementation and achievement of PIP strategies, key activities and improvement goals via routine calls and onsite meetings throughout the PIP implementation period. The first quarterly report of progress was submitted to the Children's Bureau (CB) on September 1, 2017, with a follow-up call to discuss the report held on September 22, 2017.

Four key activities were due for completion in quarter one (April 1, 2017 – June 30, 2017). In addition to those, the state reported in the Q1 report an additional nineteen key activities as complete. Of the 23 key activities reported by the state, the CB has determined that: work on ten key activities has been completed; work associated with seven key activities is not fully completed; and six key activities require ongoing work throughout the PIP implementation period requiring ongoing reporting.

It is clear from both the submitted documentation and subsequent discussion that Georgia is diligently working on program improvement activities. We do want to caution the state to thoughtfully set a pace of work that allows for true installation of new processes to take hold and develop work products that are meaningful in supporting the work. We also think that it will be in the state's best interest to more fully engage the Court Improvement Project (CIP) in those key activities that support permanency for children. Our thanks go to Judge Jerry Bruce for expressing his willingness to support the agency's efforts.

Page 2 – Director Cagle

Thank you for the collaborative approach you and your staff have taken in your commitment to improving Georgia's child welfare system. We especially want to commend the state on the depth of staff inclusion and outside stakeholders on the call of September 22nd. Attached is a copy of the PIP quarterly report that has been updated with CB determinations and the PIP Completion Tracking form that contains more detailed information related to key activities. If you have any questions regarding this or other related matters, please contact Shalonda Cawthon, Child Welfare Regional Program Manager, at (404) 562-2242 or by e-mail at shalonda.cawthon@acf.hhs.gov. You may also contact Tracy Fava, Child and Family Program Specialist, at (404) 562-2843 or at tracy.fava@acf.hhs.gov.

Sincerely,

Shalonda Cawthon Child Welfare Program Manager Children's Bureau

cc: Linda Mitchell, Acting Supervisory Program Specialist, CFSR Unit, CB; Washington, DC Virginia Pryor, Chief of Staff; DFCS; Atlanta, GA Steven Reed, Director of Quality Management; DFCS; Atlanta, GA Shalonda Cawthon, Child Welfare Regional Program Manager; CB, Region 4; Atlanta, GA Esther Sherrard, Child and Family Program Specialist, CFSR Unit, CB; Washington, DC Tracy Fava, Child and Family Program Specialist; CB, Region 4; Atlanta, GA

Georgia Performance Improvement Plan (PIP) Child and Family Services Review (CFSR) Round 3 1st Quarter Progress Report

State/Territory:	PIP Date(s) Submitted:	PIP Date Approved:
Georgia	April 26, 2017	June 6, 2017
PIP Effective Date:	End of PIP Implementation Period:	End of Non-Overlapping Year:
April 1, 2017	March 31, 2019	March 31, 2020
1 st Quarter Progress Report Completion Date: August 8, 2017	1st Quarter Progress Report Date(s) Submitted: September 1, 2017	1 st Quarter Progress Report Date Approved:

Reporting Schedule and Format:

Georgia will implement its action plan (PIP) statewide. Georgia will report progress and outcomes on a quarterly basis. Reports will be submitted within 60 days of the completion of a quarter and will include updates on all strategies and key activities.

Part One: Goals, Strategies/Interventions and Key Activities

Blueprint for Change

Adoption of a Practice Model that will serve as the foundation to keep children safe and strengthen families.

Goal I:

Improve the timeliness, quality, and utilization of child and family assessments throughout the child welfare continuum.

Safety Outcome Items 1, 3

Strategy I: Safety Outcome 1

Implement an Initial Safety Assessment (ISA) to ensure all children/families receive timely initial safety assessments and cases are appropriately tracked to either investigations or family support.

Progress Overall

Georgia has completed the implementation of an Initial Safety Assessment and Fidelity Reviews throughout the state.

Key Activities	Projected Completion Quarter
1. Develop and Implement training to support the ISA process by completing the following activities:	Q 4
 Develop a one-day classroom training; Develop Live Case Learning; Instruction on what/how to document (where and by whom) with an emphasis on the person detail page and reminding staff to merge and relate; 	

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- Assess participants' knowledge of Maltreatment Codes;
- Develop test items based on common errors such as using "lack of supervision" as a catch all when applying maltreatment codes;
- Create a checklist for supervisors;
- Create a checklist for case managers:
- Utilize various training delivery methods, such as classroom, WebEx, and/or a combination of methods;
- Create Transfer of Learning (TOL) activities

Key Activity 1 – Summary

Georgia's Education and Training (E & T) Unit began in March 2016 to develop its ISA oneday curriculum. The curriculum was completed and staff began training in July 2016. The objective of the course was for staff to learn, understand and demonstrate the new ISA Policy and Practice Procedures. During the training, the staff completed a Live Case Learning activity to demonstrate a transfer of learning to return to the county and apply the information to cases. The E & T Unit completed the training of Social Services staff in September 2016. The E & T Unit also offered several follow-up refresher webinars for staff. The webinars were well attended. The webinars were held on January 27, January 31, March 10, March 14, and March 20, 2017. Currently, staff have an online refresher available as needed or required by county supervisors and/or Field Practice Coach. During the training, staff are instructed on what and how to document cases with emphasis on the person detail page and staff members are reminded to merge and relate cases appropriately.

Current Status Completed September 2016

Incomplete (CB 10-17)

In May 2016, the E & T Unit developed a checklist for supervisors and case managers which was presented in each region by the Safety Practice Coaches. Appropriate staff was trained by September 2016. In May 2016, the checklist and ISA training was incorporated into the new case manager and supervisor's training.

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2. Develop and implement an ISA fidelity monitoring and review process

Key Activity 2 – Summary

The Initial Safety Assessment (ISA) provides a comprehensive method for determining the level of intervention that may be required to ensure child safety. Instead of relying solely on the information received during an intake report, the case manager and supervisor, after a thorough assessment, together assign it to either an Investigation or Family Support track. An April 2017 review was completed to provide an understanding of the implementation of this portion of Georgia's practice model.

Current Status

Completed **April 2017**

Incomplete (CB 10-17)

The review was completed in April 2017 covering ISA's initiated in February 2017. A statewide random sample of 200 cases was generated. Nine cases were excluded from the review because they were assigned as an Investigation by the CICC and were replaced by cases from an oversample.

There were six questions answered from the review of the ISA's initiated in February 2017.

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The questions were:

- 1. Was a sufficient Initial staffing held with the assigned Case Manager to include a strategy for initial assessment?
- 2. Was sufficient assessment information gathered by the Case Manager to support the safety determination and track assignment?
- 3. Is there evidence that the Supervisor provided sufficient summary as to why the Case Managers justification summary supports/does not support the safety determination within 72 hours of the expiration assigned response time? (Is complete and thorough information provided to support the most appropriate track assignment decision)?
- 4. Was the Safety Assessment completed by the Case Manager within 72 hours of the assigned response time?
- 5. Is there evidence that the assigned FSS or Investigator continued the comprehensive assessment of child safety and family functioning, building upon information gathered in Intake and Initial Safety Assessment (ISA) by initiating the assessment within a timely manner?
- 6. If the Case Manager who conducted the ISA is not completing the FSS/Investigation, is there evidence that the case transfer staffing information is sufficient to provide a clear understanding of the assessment findings?

The outcome of the review showed the following:

Practice Strengths:

- A documentation tool used by two different counties (Gwinnett & Walton)
 appeared to offer guidance for the completion and documentation of ISA's; and
- Improved practice and attention was given to timely completion of ISA's.

Practice Concerns:

Several of the below practice issues have the potential to undermine safety and the appropriateness of track assignments.

- Documentation of purposeful contacts should meet basic requirements as outlined in policy to provide a basis for safety and the subsequent track assignment;
- At times, track assignments are being made prior to the conclusion of assessments;
- The lack of documentation of history during the initial supervisory staffing leads to incomplete assessments with possible unaddressed safety concerns;
- Several examples were found where the explanation by an adult for an injury was chosen over that of a child without any further assessment completed; and
- Consistent misunderstanding of impending danger, and family functioning.

Recommendations:

Set meeting between Field Operations, Knowledge Management and Practice and Program Guidance and Kenny A. to comprehensively review findings from fidelity reviews and to collaboratively establish strategies to improve practice. Since the review and recommendations were received by leadership, a meeting was held on June 29, 2017 and a decision was made to bridge the gaps between the outcome of the review and the practice by the counties. Actions were taken by E & T Unit to develop and train staff on completing the Impending Danger document, and support is being provided to county supervisors in several regions by the Fidelity Review Team and the Field Program Specialists. Reviews will continue to occur and support will be provided based on the outcomes. Strategy II: Safety Outcome 2 Implement monitoring activities to ensure the appropriate use of safety resources. **Progress Overall** Georgia has implemented monitoring activities of safety resources. **Projected Completion Key Activities** Quarter 1. Field operations staff will conduct frequent (no less than monthly) cadences of cases with Q 1 children in Safety Resources over 45 days and ensure Safety Resources meets the approval standards outlined in agency policy by reviewing cases prior to cadences. Court-related barriers will be reported to Regional CQI teams to address with court partners as needed and to the Court Improvement Project (CIP) for review and determination of their involvement in removing the barriers. Key Activity 1 – Summary **Current Status** Children in Safety Resources over 45 days' data is shared each week as a part of the Implemented/ Completed weekly conference call email which contains the slides and data for discussion on each **April 2017** week's call. Every DFCS Regional Director must join these weekly calls to complete follow Incomplete: Quarterly up. The following information was sent to counties in an email directive – reporting expected Attention should continue to be given to tracking children in safety resources (CB 10-17) placements 45+ days. It's essential that County Directors continue to review the list of children in SR placements 45+ days and verify that court action has been initiated. This activity is included on our Federal Performance Improvement Plan (PIP) as discussed, this week at the statewide PIP training. For historical reference and comparison, the State had 485 children in Safety Resources as of 3/26/15. Over the last 24 months there has been a 71.5% decrease in the total number of children in Safety Resource Placements over 45 days. There were 152 children as of 1/4/17.

As of 4/14/17 the State had 138 children in Safety Resource placements over 45 days in

duration. However, due to a backlog of recent court petitions, as of June 30, 2017, Georgia has 259 children in Safety Resource placements over 45 days. County management is working with the local courts to improve the court actions being completed. No cases with court-related barriers have been reported to Regional CQI teams to address with court partners or to the Court Improvement Project (CIP) for review and determination of their involvement in removing the barriers.	0.2
2. Update the GA SHINES Safety Resource Report to include the option of pulling by supervisor and include the assigned worker. Supervisors and County Directors will use the report to monitor, identify and remove barriers, and to reduce the number of cases over 45 days.	Q 3
Key Activity 2 – Summary	Current Status
Georgia staff met on November 30, 2016 to begin addressing this key activity. The GA SHINES requirements were outlined during the meeting, and a timeline of March/April release was identified for the needed enhancements. The GA SHINES system has been updated with the option of reports to be pulled by supervisor and include the assigned case manager. Supervisors and County Directors are using the report to identify, monitor and remove barriers, reducing the number of children in care over 45 days. Training was held in May 2017 for the C3 Coordinators, Field Program Specialist, CQI Specialist and CQI Facilitators on how to pull the report from GA SHINES and use the information for monitoring. The individuals trained returned to the Regions and County and shared how to use the report with the staff. The County Directors' reviews and State Cadences are allowing staff the opportunity to identify any needed assistance, which has led to a reduction of the number of children in care over 45 days.	Completed May 2017 Incomplete (CB 10-17)
3. Develop a Safety Resource Approval Checklist for Supervisors to be used to ensure all elements are included in the Safety Resource Assessment for approval.	Q 3
Key Activity 3 – Summary	Current Status
The Safety Resource Approval Checklist was developed with input from Regional and County staff. Training was held in May 2017 for the C3 Coordinators, Field Program Specialist, CQI Specialist and CQI Facilitators on how to use the checklist to ensure that all elements needed for the Safety Resource Assessment are obtained prior to approval. The individuals trained returned to the Regions and County and shared how to use the checklist with the staff. The Safety Field Program Specialists are monitoring to ensure that supervisors are using the checklist prior to approval and they are ensuring the all needed information for approval is collected.	Completed May 2017 Incomplete (CB 10-17)
4. Identify and remove barriers to the Relative Care Assessment (RCA) and Safety Resource assessment and approval process.	Q 3

Key Activity 4 – Summary Initial planning is just beginning for this key activity; therefore, no update is available at	Current Status On Schedule	
this time.		
5. Update GA SHINES to produce a report to track the completion of the RCA/Safety Resource assessment and other requirements. Supervisors and County Directors will use the report to monitor, identify and remove barriers, and to improve the timely completion of RCA/Safety Resource assessment.	Q 3	
Key Activity 5 – Summary	Current Status	
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule	
Goal II: Meet the assessment and individualized needs of children, youth, and families through an enhanced and broadened array of services.		
Safety Outcome Items 2, 3/ Well-Being Outcome Items 12, 16, 17, 18/ Systemic Factors 29, 30		
Strategy I: Systemic Factor — Service Array Implement targeted communication and collaboration activities to improve access to, and utilization of, the state's service array.		

Progress Overall

Georgia has begun implementation of targeted communication and collaboration activities to improve access to, and utilization of, the state's service array, which will improve meeting the assessment and individualized needs of children, youth, and families through an enhanced and broadened array of services.

 Key Activities 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. 	Projected Completion Quarter Q 2
Key Activity 1 – Summary	Current Status
The State has identified the C3 Coordinators as the point person for establishing quarterly meetings in each Region with Agency staff to address service needs and availability of services. Some of the services needs identified were the need to develop additional mental health services for children and families; develop community response to the current drug epidemic and its community wide aspect and ownership; lack of providers for families; lack	On Schedule

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of foster parents and increasing foster care needs; increasing graduation rates; address school truancy; mentoring; and lack of transportation for families. In addition, Region 11 identified that their region is working on developing and maintaining improved communication between agencies and planning to complete cross trainings/meetings between DFCS and DJJ staff. A cross training/meeting has been scheduled for August for DFCS CMs and DJJ probation officers in Region 11. The state will be providing additional updates as the Regions and Counties continue their meetings with pertinent stakeholders and service providers to include: identifying needed services, determining and implementing methods to develop or access identified services, monitoring to ensure that implemented services are effective.	
2. Develop and distribute a statewide service directory that provides a listing of available contracted providers and identifies what behavioral-specific changes they target (including any safety threats they directly mitigate via service delivery).	Q 2
Key Activity 2 – Summary	Current Status
Georgia's Safety Unit is working with the C3 Coordinators to collect Agencies name, contact information and services provided to develop and distribute a statewide service directory. The directory will be available online for all counties to use. The directory will be released in Quarter 2.	On Schedule
3. Partner with Courts and Substance Abuse Providers to develop a protocol for working effectively with caregivers with substance abuse issues who are involved with DFCS to increase parental capacity and improve safety outcomes.	Q 2
Key Activity 3 – Summary	Current Status
Georgia's Safety Unit has met with Courts and Substance Abuse Providers and developed a protocol for working effectively with caregivers with substance abuse issues who are involved with DFCS to increase parental capacity and improve safety outcomes. The protocol was sent to counties and regional staff via the C3 Coordinators for feedback. The protocol was also released to the CASA Director for feedback. The feedback has been collected and is being incorporated. The final protocol will be released in Quarter 2.	On Schedule

Strategy II: Well-Being Outcome 2

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.

Progress Overall

The Educational Programming, Assessment and Consultation (EPAC) team is ahead of schedule with the Education Academies and have conducted some web-based and onsite trainings that provided information to staff and external partners (stakeholders and caregivers) regarding educational entitlements, local educational processes, and advocacy. Additionally, Education Academies have begun providing 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.

Key Activities	Projected Completion Quarter
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:	Q 8
 Large number of children/youth 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 1 – Summary	Current Status
EPAC implemented two web-based Education Academies in Region 3. These online academies were designed to enhance the knowledge case managers, supervisors, and other direct service child welfare staff had regarding EPAC and Student Discipline. Region 3 was selected due to low EPAC Referral rates and high percentages of suspensions/expulsions. Other Regions and Counties will be trained as identified.	Completed May 2017 Incomplete: Quarterly reporting required (CB 10-17)
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.	Q 8
Key Activity 2 – Summary	Current Status
EPAC implemented several onsite Education Academies during the past quarter throughout the State of Georgia. These onsite academies were designed to increase the knowledge and skill sets of case managers, supervisors, and other direct service child welfare staff members.	Completed May 2017 Incomplete: Quarterly reporting required (CB 10-17)

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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.	Q 8
Key Activity 3 – Summary EPAC implemented three 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 in the past quarter.	Current Status Completed May 2017 Incomplete: Quarterly reporting required
Strategy III: Well-Being Outcome 2	(CB 10-17)

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, Education Support Monitor (ESM), appropriate school system personnel and other key student support team members.

Progress Overall

Georgia has not begun to monitor the Individualized Education Plans (IEP) for children/youth who have been referred to EPAC and ensuring that the IEPs are current and are monitored due to school not beginning until August 2017.

 Key Activities 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. 	Projected Completion Quarter Q 8
Key Activity 1 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule
2. In partnership with Georgia Court Appointed Special Advocate (CASA), EPAC Education Specialists, and the youth's case manager, EPAC will monitor educational assessment recommendations to ensure that they are addressed and implemented timely according the DFCS Social Services Policy (five business days). EPAC will monitor to ensure that the assessment recommendations include the documentation need to support youth who are in need of additional credit recovery.	Q 8
Key Activity 2 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule

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Strategy IV: Well-Being Outcome 3

Implement training and monitoring activities to ensure children and youth receive appropriate physical and mental health assessments, services, and medication monitoring.

Progress Overall

Georgia is on schedule with the implementation of training and monitoring activities to ensure children and youth receive appropriate physical and mental health assessments, services, and medication monitoring.

Key Activities	Projected Completion Quarter
1. The Wellness Programming, Assessment, and Consultation (WPAC) Unit 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.	Q 8
Key Activity 1 – Summary	Current Status
Web-Based Academies will consist of the WPAC Director and/or unit staff members and Amerigroup training on DFCS policy regarding initial EPSDT and Dental exams being completed within 10 days of entering care; and the Developmental and Trauma Assessments being completed within 30 days of entering into care. Training will cover Bright Futures guidelines on periodical health exams, and how to appropriately document outcomes of medical and dental visits; as well as, how to follow-up on doctors' recommendations. WPAC Director and Amerigroup Training Coordinator will be responsible for developing the four quarterly, web-based academies annually. The academies will be offered quarterly starting October 2017.	On Schedule
DFCS staff and external partners will be able to register online through www.iotis.org . DFCS staff and external partners will be expected to attend and attendance will be monitored or tracked by the C3 Coordinators in each Region. DFCS WPAC Director will monitor who has registered and completed the web-based academies and provide this information to the C3 Coordinators to compare with a list of employees from each region to ensure that all staff attend timely. Each training will be recorded as well as a sign in sheet/log (through the online process) will be provided to the WPAC Director and made available if needed.	
2. The WPAC Unit will implement four quarterly, mandatory regional and/or county intensive onsite coaching sessions annually for supervisors, administrator, and quality assurance staff to guide and support best practices related to ensure child and youth appropriate access to and monitoring of physical and behavioral health assessments and services. DFCS counties and regions will be determined by:	Q 8
 Population of children and youth boarding Number of over follow up visits "coming due" 	

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 Number of cases "overdue" Number in incomplete Medicaid application Identified gaps of services providers 	
Key Activity 2 – Summary	Current Status
The mandatory regional/county onsite coaching sessions will consist of the WPAC Wellness Specialist providing onsite training addressing E-Form Completion, Georgia Health Information Network (GHIN) Portal, appropriately completing the Health tab in SHINES, Children's 1st/Babies Can't Wait training, as well as training on how to appropriately complete the Medicaid application tab in SHINES. These sessions will be provided quarterly to DFCS Case Managers, Supervisors, Administrators, and any staff responsible for ensuring physical and behavioral health needs are met. The academies will be offered quarterly starting October 2017.	On Schedule
These sessions will not consist of an on-line registration, as they are face to face and managed by the Wellness Specialist assigned to each region. The Wellness Specialist will set up pre-approved dates with the regions and counties for the trainings. Trainings will take place at the local DFCS office for DFCS Case Managers, Supervisors, Administrators, and any staff responsible for ensuring physical and behavioral health needs are met. Wellness Specialist will keep a log/signature sheet of all the attendees. The information will be given to the C3 Coordinator to track the training and ensure that it is documented. The information will be shared with the training unit as needed.	
 3. Work with Amerigroup (CMO) to create a monthly report of children and youth in foster care of children with "significant" health conditions (we will define "significant"). Medical diagnosis Date of birth Assigned Primary Care Physician County of custody 	Q 3
Key Activity 3 – Summary	Current Status
The WPAC Director, Department of Community Health (DCH), Policy Unit Manager or staff members and the AMG Director will determine the definition for children with significant health conditions. The definition will be shared with Regional and County staff for feedback. Once finalized the definition will be released as the policy. The C3 Coordinators are currently working with the County staff to ensure that the health detail page is correctly filled out as well as health information is uploaded to external documents. This will be monitored by the Wellness Specialist pulling the overdue health data monthly. The Wellness Specialist will monitor the case watch page to ensure errors have been addressed in SHINES. If the information is not current in SHINES the Wellness Specialist will inform the Case Manager, Supervisor, County Director, Regional Director and	On Schedule

the C3 Coordinator about having corrections completed.	
The WPAC unit will continue to collaborate with Amerigroup (CMO), policy, SHINES to ensure county staff are identifying and accurately documenting significant health conditions in SHINES so data can be collected. Reports will be issued monthly. Information will be shared with Case Manager, Supervisor, County Director, Regional Director and the C3 Coordinator to ensure they are addressing the children's/youths' significant health conditions in a timely manner.	
4. Distribute "Significant Health Condition Report" to regional directors, county directors, supervisors, C3 coordinators for staffing and assurance that appropriate services are accessed for children and youth. Bi-monthly follow up will occur on statewide Well-Being Services Cadence Calls.	Q 8
Key Activity 4 – Summary	Current Status
The WPAC, Amerigroup, the Policy unit, and GA SHINES will meet to determine what is considered or identified as significant health conditions through Department of Public Health (DPH) and Amerigroup standards. The monthly report will be developed by the WPAC unit. The data which identifies children/youth with significant health conditions will be pulled through SHINES. On the 5th of each month, the WPCA unit will distribute the "significant health condition report" for staffing in each month beginning January 2018. The Supervisors and Field Program Specialists will meet to ensure the supervisors are having individual conferences with their Case managers and identifying and addressing the mentioned health related items. The Field Program Specialists will complete spot checks for their assigned counties to ensure information is updated in SHINES.	On Schedule
The Regional Directors, County Directors, Supervisors and C3 coordinators will ensure that the staffing to assure appropriate services are accessible for children and youth are completed monthly. The supervisors and Field Program Specialist will ensure that the staffing information is documented in GA SHINES. The supervisors and Field Program Specialist will ensure that all health information for each children/youth is current in GA SHINES. Supervisors, Field Program Specialists, C3 coordinators and case managers, if necessary, will participate in the bi -monthly follow up Statewide Well-being Services Cadence calls to review the status and health of the children/youth beginning the First Quarter in 2018. The Wellness Programming Assessment and Consultation (WPAC) Wellness Specialist will provide monthly reports which will contain all data that identifies any overdue health information as well as identify the number of youth/child per region with significant health conditions. This information will be shared with the Regional Directors for follow-up if needed.	
5. Distribute "Psychotropic Medications Report" to regional directors, county directors, supervisors, C3 coordinators for staffing and to assure appropriate services are accessed for children and youth. Bi-monthly follow up will occur on statewide Well-Being Services Cadence	Q 8

Calls.	
Key Activity 5 – Summary	Current Status
Georgia plans to begin in September 2017 to have the C3 Coordinators work with county staff to ensure that all children in care have their health information current in GA SHINES. The WPAC unit will work with Amerigroup (CMO); the Policy and GA SHINES units, regional and county staff to develop a monthly report of children and youth in foster care taking "psychotropic medications". The WPAC unit will distribute the "psychotropic medications report" for staffing purposes by the 5th of each month. Supervisors and Permanency Field Program Specialists will ensure that monthly staffings to assure appropriate monitoring is being completed for children and youth taking the medication. The Regional Directors, County Directors, Supervisors, and Permanency Field Program Specialists will ensure that the information is documented in GA SHINES. County Directors, Supervisors, Permanency Field Program Specialists, and case managers, if needed, will participate in the bi -monthly follow up Statewide Well-being Services Cadence calls to review the status and health/medication of the children/youth.	On Schedule
6. The Well-Being Director, Wellness Director, DHS Medical Director, and CMO Representative will meet quarterly to evaluate findings, monitor and review the County Director Review (which should contain elements related to children and youth in their county/region prescribed psychotropic medications) for fidelity to the established protocol and determine methods and strategies to support best practice for case managers and supervisors.	Q 8
Key Activity 6 – Summary	Current Status
By March 2018, the Well-Being Director, WPAC Director, PRO Director, DCH Representative, and CMO Representative will meet to establish the method to evaluate findings, monitor and review the County Director Reviews for the fidelity of the State Psychotropic Medication Protocol/Policy. The team will develop a method for sharing the evaluation information with the counties/regions, including strategies to support best practice. Training will be provided to the Social Services staff and monitoring will be completed by the WPAC unit bi-monthly. The participants have been changed in Key Activity 6 due to DHS/DFCS no longer having a DHS Medical Director.	On Schedule

Goal III:

In support of the Practice Model, establish a value-based case practice which supports safety, permanency, family and youth engagement, and community connections.

Safety Outcome Item 3/Permanency Outcome Items 4, 5, 6, 7, 8, 9, 10, 11/Well-Being Outcome Items 12, 13, 14, 15/Systemic Factors 19, 20, 21, 22, 23, 24, 36

Strategy I: Permanency Outcome 2

Build and execute a robust, sustainable system for the achievement of timely permanency. The strategy includes practice model case consultation methods, mentoring of field staff, ongoing tracking of outcomes and full Permanency Roundtables for cases without viable permanency options.

Progress Overall	
Georgia is on schedule with executing a robust, sustainable system for the achievement of timely permanency	
 Key Activities 1. Assess and realign human resources in each Region for the purpose of designating positions to provide mentoring, monitoring, coaching, reporting and reviews of permanency cases to support timely achievement of permanency for all children in care. 	Projected Completion Quarter
Key Activity 1 – Summary	Current Status
In July of 2016, positions were assigned to each Region for the purpose of providing mentoring, monitoring, coaching, reporting and reviews of permanency cases to support timely achievement of permanency for all children in care. The Permanency FPS are hired because of their subject matter expertise in a program, they are equipped from their years of experience as case managers and supervisors. However, State Office will have quarterly meetings to continue to provide training and information on how to monitor and improve outcomes. The meetings will also discuss any policy changes and new information on best practices. Additionally, the meetings will address barriers and barrier busters for improving permanency outcomes.	Completed July 2016 Complete (CB 10-17)
2. Implement a structured tool for utilization in supervisor case staffings to ensure that key practice activities are occurring (including practices outlined in Permanency Outcomes 1 and Permanency Outcome 2) to determine barriers to achieving permanency and identify needed action prior to permanency hearings. Court related barriers will be reported to Regional CQI teams to address with court partners as needed.	Q 3
Key Activity 2 – Summary	Current Status
The Permanency Unit has developed a structured tool for supervisor case staffings. The tool was sent to counties and regional staff via the C3 Coordinators for feedback. The feedback has been collected and is being incorporated. The final tool will be released in	Ahead of Schedule

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Quarter 2.	
3. Develop a permanency case consultation action plan template for use in cases where the children have reached the 13th month in care. The action plan and case consultation will incorporate Solution Based Casework and Permanency Roundtable principles.	Q 1
Key Activity 3 – Summary	Current Status
Georgia elected to use the SBC case consultation action plan template for permanency cases where the children have reached the 13 th month in care. The case consultation requires that the supervisor work along with the case manager develop an action plan for the children and family.	Completed May 2017 Incomplete: (CB 10-17)
4. The Placement & Permanency section in conjunction with Solution Based Casework staff will train Permanency Field Program Specialists, Mentor FPS, Well Being FPS, Regional Adoption Coordinators, Well Being Specialists, CQI Specialists and Solution Based Casework (SBC) Coaches to conduct and track Permanency Case Consultations.	Q 2
Key Activity 4 – Summary	Current Status
The Placement & Permanency section in conjunction with Solution Based Casework staff will train Permanency Field Program Specialists, and other staff on how to conduct and track Permanency Case Consultations. The training is schedule for August 2017. Updates on the training will be reported in Quarter 2.	On Schedule
5. Permanency Field Program Specialists (FPS) will identify cases where children have reached 13 months in care and lead permanency case consultations.	Q 4
Key Activity 5 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule
6. Continuous Quality Improvement (CQI) Teams will analyze tracking data and outcomes on an ongoing basis to assess effectiveness of the Permanency Case Consultation strategy.	Q 5
Key Activity 6 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule
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.	Q 7
Key Activity 7 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule

8. A minimum of two (2) consultation staff per region will be trained in the full Permanency Roundtable model.	Q 8
Key Activity 8 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule
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.	Q 8
Key Activity 9 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule
10. Develop and implement a permanency timeline for utilization by field staff outlining state and federal requirements and best practices that are aligned with the Solution Based Casework (SBC) model.	Q 2
Key Activity 10 – Summary	Current Status
The Permanency Unit developed and implemented a permanency timeline. The tool was sent to counties and regional staff via the C3 Coordinators for feedback. The feedback has been collected and incorporated. The final tool has been released as policy.	Completed May 2017 Incomplete: (CB 10-17)
11. Conduct quarterly statewide meetings to provide ongoing support to increase the capacity of identified permanency specialists and to provide updates of policies, laws, and implementation of best practices. Permanency outcome data will be reviewed to assess improvements. Invite CIP staff to attend quarterly meetings or provide a report to CIP to ensure their awareness of updates of policies, laws, and implementation of best practices related to permanency.	Q 5
Key Activity 11 – Summary	Current Status
Initial planning is just beginning for this key activity; therefore, no update is available at this time.	On Schedule

Strategy II: Systemic Factor – Information System

Implement monitoring processes to improve the documentation of child/youth information in GA SHINES.

Progress Overall

Georgia has completed the implementation of a monitoring processes to improve the documentation of child/youth information in GA SHINES.

Key Activities	Projected Completion Quarter
1. Data Integrity Specialists (DIS) case review quarterly trend reports will be shared and reviewed by the following staff to ensure improvements in data quality:	Q 8
 C3 Coordinators; Field Program Specialists; Regional Directors 	
The trend reports will include identified areas needing improvement as it relates to data reviews.	
Key Activity 1 – Summary	Current Status
The Data Integrity Specialists (DIS) case review quarterly trend reports are being shared and reviewed by C3 Coordinators, Field Program Specialists and Regional Directors to ensure improvements in data quality. The report was sent on July 17, 2017 for Quarter 1 of 2017 (January 2017 – March 2017).	Completed July 2017 Incomplete: Quarterly reporting required (CB 10-17)
2. Demonstrate improvement (by end of year 1 and year 2 of PIP) in timely and accurate documentation of data in the areas of:	Q 8
 Demographic; Person Characteristics; Legal Status; Placements 	
Key Activity 2 – Summary	Current Status
Georgia continues to work on improvement in timely and accurate documentation of data in the areas of demographic; person characteristics; legal status; and placements entered. During the Statewide Assessment, Georgia reported as of December 2014, the state was at 70%-demographic; 62%-person characteristics; 71%-legal status; and 88%-placements entered. The DIS Unit reported on July 17, 2017 for Quarter 1 of 2017 (January 2017 – March 2017), Georgia is now at 79%-demographic; 71%-person characteristics; 87%-legal status; and 97%-placements entered, which is an improvement in all areas. Georgia continue to work on documentation.	Completed July 2017 Incomplete: Quarterly reporting required (CB 10-17)

NOTE: Georgia DIS Unit also captures demographic and person characteristic data for both family preservation and foster care cases during their reviews, but for the PIP, the family preservation reviews have been removed; therefore, the trend information is only for foster care statewide.	
Strategy III: Well-Being Outcome 1 Implement Solution Based Casework Practice Model Statewide.	
Progress Overall Georgia is ahead of schedule with the implementation of the rollout of Solution Based Casew Statewide and completing SBC Fidelity reviews.	ork (SBC) Practice Model
Key Activities	Projected Completion Quarter
1. Complete roll out in Regions 1, 3, 13 and 14 by the end of 2016.	Q 1
Key Activity 1 – Summary	Current Status
Georgia completed the roll out of the Solution Based Casework Practice Model in Regions 1, 3, 13 and 14 in December 2016.	Completed December 2016 Complete (CB 10-17)
2. Fidelity reviews completed in Regions 1, 3, 13 and 14 to assess effectiveness of implementation.	Q 8
Key Activity 2 – Summary	Current Status
The fidelity reviews for Regions 1, 3, 13 and 14 is being completed in August 2017. The review also includes Regions 2 and 5. The review is currently in process; therefore, outcomes cannot be reported at this time. Outcomes of the review will be updated during the next quarter.	Ahead of Schedule
3. Complete roll out in Regions 2, 4, 5, 6, 7, 8, 9, 10, 11, and 12 by the end of 2017.	Q 5
Key Activity 3 – Summary	Current Status
Georgia has completed the roll out of the Solution Based Casework Practice Model in Regions 2 and 5 since 2017. The remaining Regions 4, 6, 7, 8, 9, 10, 11, and 12 trainings have been scheduled and will be completed by the end of Quarter 5 (June 30, 2018).	Ahead of Schedule
4. Fidelity reviews completed in Regions 2, 4, 5, 6, 7, 8, 9, 10, 11, and 12 to assess effectiveness of implementation.	Q 8

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The fidelity reviews for Regions 1, 3, 13 and 14 is being completed in August 2017. The

review also includes Regions 2 and 5. The review is currently in process; therefore,

Key Activity 4 – Summary

Current Status

Ahead of Schedule

outcomes cannot be reported at this time. Outcomes of the review will be updated during the next quarter. The review of other Regions 4, 6, 7, 8, 9, 10, 11, and 12 will be completed following training being completed.

Blueprint for Change

Robust Workforce Development – To adopt a process for mentoring Supervisors and Case Managers.

Goal IV:

Establish a robust workforce.

Systemic Factors 26, 27

Strategy I: Systemic Factor – Staff and Provider Training

Develop and implement a competency-based child welfare learning academy that includes initial and ongoing training activities, mentoring, and monitoring processes.

Progress Overall

Georgia is on schedule with the implementation of a competency-based child welfare learning academy that includes initial and ongoing training activities, mentoring, and monitoring processes.

initial and ongoing training activities, mentoring, and monitoring processes.	
Key Activities	Projected Completion Quarter
1. Redesign the new worker training curricula and certification process so that it is consistent with Georgia's Practice Model.	Q 2
Key Activity 1 – Summary	Current Status
Education and Training has initiated the pilot of the new Ga Child Welfare Training Academy for new case managers, inclusive of tenets of Georgia's Practice Model. The pilot began in June 2017 and will run through September 2017. During the pilot, the content is under evaluation for revisions to testing, course material and field practice modifications. The purpose of the new curriculum is to move towards a more competency based training model, inclusive of a live simulation training, to improve on practice skills for new staff.	On Schedule
2. Each region will monitor public staff to ensure completion of new worker training and certification within 120 days and the Office of Provider Management will monitor to ensure private staff completion of new worker training and certification within six months of employees' hire date.	Q 7
Key Activity 2 – Summary	Current Status
Education and Training continued to provide Keys and Track training to newly hired child welfare staff under the current training and certification requirements. While most are able to get into new worker training within a reasonable time frame, staff having caseloads assigned to them during the reporting period continued to impact timely certification. In an effort to improve on this, regional leadership has been responsive to requests to	On Schedule

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reassign cases when concerns were brought to the attention of Education and Training staff. To improve on this issue of timely training and to improve on identified training needs, the curriculum and training requirements for new child welfare case managers are actively being revised. New requirements will not allow for staff to have caseloads while they are in training, require staff to be cross trained and provide controls around certification timeliness. The new curriculum has also been improved in the areas of Substance Abuse, CSEC, Domestic Violence, Interviewing, Documentation and the assessment of safety.	
3. Actively recruit and train additional field practice coaches.	Q 7
Key Activity 3 – Summary	Current Status
Revisions to the Field Practice Coach program guidelines are underway.	On Schedule
4. Strategically utilize current field practice coaches (determine gaps and share resources) in the field to provide mentoring throughout the certification process.	Q 7
Key Activity 4 – Summary	Current Status
Revisions to the Field Practice Coach program are currently underway as revisions are made to the new worker training curriculum. Turnover of veteran staff continues to be a barrier to increasing the number of Field Practice Coaches in the field. For staff who do not leave, many of them are moving into supervisor level roles. The agency recently took efforts to increase the salary for front line staff in hopes to improve on attracting more qualified child welfare staff and to retain current staff. As the workforce stabilizes, the pool of qualified staff for the Field Practice Program will increase.	On Schedule
5. DFCS Education and Training will explicitly post annual training hour requirements for Social Services Staff and communicate the plan for monitoring requirements.	Q 8
Key Activity 5 – Summary	Current Status
This task has been completed. Requirements are posted on the home page of www.gadfcs.org .	Completed May 2017 Complete: (CB 10-17)
6. Regional C3 Coordinators will be responsible for monitoring and tracking the completion of annual training requirements for staff in the field. Data will also be reported to Education and Training staff for state oversight.	Q 8
Key Activity 6 – Summary	Current Status
This key activity is underway. A training is being scheduled to teach the C3 Coordinators how to access the system to run reports and add training hours for staff. Ongoing training for public child welfare staff during this period of review has been primarily focused on prerequisite work and implementation of Georgia's Comprehensive Practice Model. In addition to the required classroom training for Solution Based Casework, there has also been an increased focus on Substance Abuse and Intimate Partner Violence training. While the state	On Schedule

is in transition into a new practice model, this training targets our work with families regarding safety and wellbeing issues. And while ongoing training has primarily focused on areas related to the practice model, other course offerings continued to be provided for staff. Additional support in this effort is provided by the partnership between the Division and the GA State University Professional Excellence Program. Counties determine ongoing training needs for their staff and can make on-demand request for training delivery around a variety of topics.	0.7
7. Increase the number of ongoing Staff Development offerings and participation in the following areas:	Q.7
Well-Being;Substance Abuse;	
Interviewing;	
Safety Assessment; and	
Permanency.	
Key Activity 7 – Summary	Current Status
Trainings are currently being identified for development. Currently, in addition to the	On Schedule
practice model, Georgia is requiring staff to complete a 2-day course on secondary trauma.	
This course is being provided through our partnership with the Professional Excellence Program at Georgia State University. Additionally, a new interviewing module has been	
added to the Georgia Child Welfare Training academy along with simulation training to	
assist with the assessment of safety and use of the Family Functioning Assessment.	
Blueprint for Change	
To build consensus and collaboration among partners, staff and stakeholders.	
Goal V:	
Increase and strengthen foster and adoptive resources.	
Permanency Outcome Item 4/ Well-Being Outcome Item 12/ Systemic Factors 28, 33	, 35
Strategy I: Systemic Factor – Foster/Adoptive Parent Licensing, Recruitment and Rete	
Enhance the skills of DFCS and Child Placing Agency (CPA) resource development staff by increasing their partnering efforts in the area of diligent recruitment.	ing their Job Knowledge and
Progress Overall	
Georgia is ahead of schedule with the development of training for enhancing the skills of DFO Agency (CPA) resource development staff by increasing their job knowledge and their partner	
diligent recruitment.	any chorts in the area of
	Projected Completion
Key Activities	Projected Completion Quarter
Develop a curriculum to train Resource Development DFCS and CPA case managers.	Quarter Q3
<u> </u>	

Key Activity 1 – Summary	Current Status
The development of the new worker curriculum has begun. Staff from Education and Training, Resource Development Case Managers, Social Services Case Managers, Contract Curriculum Writers, Permanency/Adoptions Director, Policy Unit, Caregiver Recruitment and Retention Unit, Provider Management Unit, Child Welfare Quality Assurance Unit, and the Office of the Child Advocate have teamed up to develop the curriculum.	On Schedule
The Resource Development Track Training Sequence is as follows:	
RECRUIT 2 Modules – (both piloted and now ready for roll out)	
 Introduction to Resource Development; and Ready, Set, Recruit - is all about recruiting new Foster and Adoptive parents. Resource Developers must be able to speak confidently in public when representing the agency during recruiting activities. Participants will learn the basics of public speaking and presenting to different audiences by delivering their own short speech. Other skills needed for recruiting include teamwork and collaboration; networking. 	
 PREPARE IMPACT-FCP Pre-Service Training: Revision pending IMPACT FCP is a pre-service training program used to prepare prospective foster and adoptive families for their role and to expose them to the basic skills and competencies needed to begin providing foster and adoptive care. IMPACT FCP involves an instructive approach to preparing families. The curriculum includes an assortment of visual aids, audio-visuals, role-play, and vignettes to support the acquisition of skills and competencies. Woven throughout the training will be applicable references to cultural and disciplinary issues related to caring for children in placement. Upon completion, participants must demonstrate at least minimal mastery and internalization of the skills and competencies presented; and Family Evaluation Simulation /SHINES workshop. 	
RETAIN – (1 pilot completed beginning of February 2017– second pilot end of April) - 2 Modules	
 Retain - Why do Foster Parents/Caregivers Quit? - Learning Objectives Identify critical internal/external factors that contribute to Foster Parent attrition Employ retention/ support strategies and identify agencies/services within respective communities that provide support services to Foster 	

o Distinguish the differences between a professional supportive relationship and a personal supportive relationship between the foster parent and the

Parents/Caregivers; and

DFCS staff. (Ethics and Enmeshment)

 Beyond the Basics Differentiate between positive and negative retention; and Recognize the importance of assessing motivation to foster. Feedback was received by Education and Training directly from course participants during the piloted sessions of each of the training modules. Feedback obtained from those pilot sessions was then incorporated into the training course revisions. Roll-out training to resource development case managers through ETS (DFCS) and Office of Provider Management (CPAs). 	Q 7
Key Activity 2 – Summary	Current Status
Education and Training will conduct all training. All course schedules will be announced on the Education and Training Website, and also through e-blasts from the Office of Communications to DFCS staff, and from the Office of Provider Management to all CPA providers. Course schedules for CPA provider registrations will be placed on GA+SCORE. For all new CPA Resource Development staff – all information will have to be entered into GA+SCORE and reminders will be sent for the staff to attend the training within four months of hire. For DFCS Resource Development (RD) new worker staff training sequence will commence upon completion of the Child Welfare Academy (formerly known as KEYS) and the Foster Care Training Track. The DFCS RD staff shall reach certification within six (6) months of hire. It will not be required that new foster care case managers complete the training. It is expected that the Education and Training Section Unit will report course attendance, preand post-assessment score trends, updates and changes of curriculum due to policy revisions.	On Schedule
Assess and revise the resource developer's job description and implement new performance management expectations.	Q 4
Key Activity 3 – Summary	Current Status
The Resource Development Case Managers job descriptions were developed by the Caregiver Recruitment and Retention Unit in coordination with the Project Management Unit. The job descriptions will be shared with DFCS field leadership (County and Regional Directors) as well as Resource Development Team Leads by May 31, 2017 via email for feedback via a survey. Recommendations from feedback will be considered before final implementation of job descriptions and performance expectations. These base level job descriptions will be shared with Child Placing Agency (CPA) providers by the Office of Provider Management for feedback via GA+SCORE. CPA providers will be asked to complete a similar survey regarding the job descriptions for feedback. The survey questions and responses will be provided as evidence of this solicitation. The job title for the RD case manager will be changed to "Caregiver Recruitment and Retention Specialist".	Ahead of Schedule

Caregiver Recruitment and Retention Unit Resource Development Staff will train the Resource Development case managers, supervisors and administrators on the job descriptions and performance expectations during a regularly scheduled Quarterly Meeting. The Office of Provider Management will train CPA providers at a Technical Assistance Meeting. The direct supervisors of the resource development staff will be responsible for monitoring their performance. There were changes to the RD Administrator job descriptions and performance expectations documents, and those have been included. Their title is proposed to be changed to Caregiver Recruitment and Retention Consultants.	
Facilitate at least two joint meetings a year for DFCS and CPAs to review, plan and strategize execution of the Diligent Recruitment Plan.	Q 8
Key Activity 4 – Summary	Current Status
Invitations will be sent to the 131 RBWO provider leadership and/or upper management staff (this includes CPA's and CCI's) and to the 14 Resource Development Team Leads representing each of the DFCS Regions. The meetings will be held in Macon, GA since it is a central location and will generally require only one-day travel for participants. The meetings will typically be held during the 2nd and 4th quarters of the year.	On Schedule
A joint meeting between DFCS and CPA providers to review, plan, and strategize execution of the Diligent Recruitment Plan was July 14, 2016. It was held at the Methodist Home in Macon, GA from 10:00AM – 4:00PM. The first joint meeting for 2017 was held on April 13, 2017 at Hephzibah Children's Home in Macon, GA from 9:30A-3:00 PM. A second meeting will be completed before the end of 2017.	
During the meetings, the participants had table discussion to identify ways in which they could collaborate to execute components of the Diligent Recruitment Plan, and how they could give additional support to birth families to support reunification. The teams discussed the establishment of a Memorandum of Understanding for their Regional Placement Resource Engagement Meetings, and how this could provide structure to their partnership.	

Strategy II: Systemic Factor – Foster/Adoptive Parent Licensing, Recruitment and Retention

Strengthen the caregiver approval process by reducing the paperwork burdens experienced by prospective caregivers and increasing the support they receive during the approval process.

Progress Overall

Georgia is ahead of schedule with revision of the caregivers' paperwork and increasing the support they receive during the approval process.

during the approval process.	
Key Activities	Projected Completion Quarter
Redesign the approval paperwork packet to include PDF fillable options and eliminate redundancies in forms to be completed.	Q.7
Key Activity 1 – Summary	Current Status
A workgroup was convened on December 13, 2016 to review and revise the onboarding paperwork packet. A workgroup consisted of Caregiver Recruitment and Retention Unit Staff, Inquiry Response Case Managers, Resource Development Team Leads, and Caregiver Navigators (who also happen to be foster parents). Recommendations were made that reduced redundancies, and eliminated elements deemed unnecessary or inapplicable. The revisions were submitted to the Office of Communications Media and Graphics Design for aesthetic development and implementation of electronically fillable features.	Ahead of Schedule
An initial iteration was developed and submitted to the CRRU Director for review, wherein additional revisions were made and a decision was made to create two packets, one for application, and one during the onboarding and assessment phase. The second iteration was returned to The Office of Communications on March 23, 2017 for a second revision. This iteration was returned on April 4, 2017, and shared on that same day with the Regional Resource Development Teams and the Permanency Unit for review and feedback. It was also sent to the Office of Provider Management to be shared with RBWO providers for feedback. It was shared with the providers on that day via an Eblast on GA Score. The RBWO providers were provided a Survey Monkey link to provide feedback on the packet for inclusion in the next iteration.	
The packet was reduced to two versions, an application packet, and an onboarding packet. The application packet will include an introduction to the caregiver, a diagram of the onboarding process, and gather information necessary to begin the required preliminary safety screenings of the primary caregivers and other household members. The onboarding packet will contain assessments for both the primary and secondary caregiver (if applicable) and children who reside in the home. It will also include a couple's questionnaire and an ongoing training plan that will be completed in concert with the	

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assessor conducting the family evaluation. Redundancies were removed from the packet that requested similar information from the applicant on several different forms. The recommendations from these internal and external stakeholders will be utilized to amend the packet to further reduce the burden to caregivers. The final packet will be returned to all parties for review after the final revisions are received from the Office of Communications. Full implementation is expected to occur by September 30, 2017. New foster care case managers will not be required to complete any training on the packet, nor is this recommended. Periodic quality assurance reviews completed by the resource development team leads will be utilized to assess adherence to the use of the packet.	
2. Establish the Caregiver Navigator "warm-line" program which will be manned by foster and adoptive parents; they will answer in-bound calls from veteran and prospective caregivers as well as proactively support caregivers going through the caregiver approval process.	Q 7
Key Activity 2 – Summary	Current Status
An instrumental recruitment strategy that the Division has sustained for several years is the Homes for Georgia's Kids (HGK) foster and adoptive parent inquiry line (877-210-KIDS). It is the first point of contact to obtain information about becoming a foster or adoptive parent. Georgia currently outsources the inquiry line with Bethany Christian Services for continued management of the toll-free line until state acquisition is secured. A Request for Proposal (RFP) was submitted to the Office of Procurement and Contracts (OPC) for the solicitation of potential vendors for the development of the Hosted Contact Center which would support the inbounding calls platform for the inquiry line. The RFP was submitted to OPC on March 27, 2016 and was published on April 14, 2016. A review of the proposals was conducted and a vendor (Platform 28) was selected in August 2016. The contract was developed by OPC in December 2016 and was fully executed in March 2017. The kickoff meeting for the development of the Scope of Work for the project was held with the vendor on April 12, 2017.	Completed June 2017 Incomplete CB(10-17)
3. Cease contracting out the management of the caregiver inquiry line; establish a state office team to answer the inquiry line.	Q 7
Key Activity 3 – Summary	Current Status

Due to the delays of receiving the contract with the new vendor, and the work that has to be completed to begin the services, the contract with Bethany will expire at the end of the contract date which is June 30, 2017.

The state managed Foster Georgia Inquiry Line is going to be answered by a team of five Inquiry Response Case Managers (IRCM) and five part-time Caregiver Navigators. In FFY16, the team was hired and were placed under the supervision of the Caregiver Ombudsman within the Caregiver Recruitment and Retention Unit. The Inquiry Response Case Managers will respond to prospective applicants who desire to become caregivers. The Caregiver Navigators will provide support to current caregivers who need light mentoring and direction; as well as to prospective caregivers who are journeying through the onboarding process. A Program Manager will be hired in May 2017 to oversee the daily functioning of the Foster Georgia Inquiry Line and the five (5) Inquiry Response Case Managers. The Program Manager will oversee the daily processes of the Foster Georgia Inquiry Line to ensure that prospective applicants are transitioned through the onboarding process efficiently. The Program Manager will:

- Manage the inquiry line and provides technical support to Inquiry Response Case Managers;
- Monitor call responsiveness to reduce abandonment;
- Ensure information packets and other information materials are sent to applicants within 2 business days;
- Monitor Inquiry Response Case Manager's transition of prospective applicants to their respective region to complete the onboarding process;
- Ensure that prospective applicants are entered into GA SHINES within 48 hours;
- Monitor case documentation in GA SHINES for timeliness, accuracy, and quality assurance;
- Ensure case managers provide assistance to prospective caregivers through the application process;
- Provides reports of Foster Georgia Inquiry line to Caregiver Recruitment and Retention Unit Manager; and
- Provides technical support to Inquiry Response Case Managers Ensure inquiries received via website are responded to within 48 hours.

The Caregiver Ombudsman will continue to provide supervision to the five (5) Caregiver Navigators.

The Foster Georgia Inquiry Line will be staffed by five (5) Caregiver Navigators. They are part-time staff who are also current foster and adoptive caregivers with the Division. The Caregiver Navigators provide light mentoring, guidance, and support to both prospective applicants and fully approved caregivers alike. They maintain contact with prospective applicants who have applied through the web-based inquiry form. Regional Resource Development staff also have the option to refer families to the Caregiver Navigator for follow up and support. The Navigator maintains contact with the family via telephone or

email, until the point of approval. The www.fostergeorgia.com website also has a chat feature used to engage visitors. This feature is also manned by the Caregiver Navigators. This is a customer service feature that aims to provide real-time engagement with site visitors to ease their navigation. It also allows the navigators to provide short social interaction with visitors who may have reached the site in error in search of other service related programs offered by the Division.	
4. Offer information sessions via webinars on an at least weekly basis by the state office Caregiver Recruitment and Retention Unit.	Q 7
Key Activity 4 – Summary	Current Status
On May 19, 2016, Georgia launched its website www.fostergeorgia.com which serves as a public medium whereby information can be provided to both prospective and existing caregivers. Prospective applicants learn the various caregiver types, the onboarding process, gain access to representatives from their respective region, as well as the information session and IMPACT FCP Pre-Service training schedules. In June 2016, a webbased inquiry form was added onto the site allowing prospective caregivers to submit an inquiry directly from the site to the Division. The Inquiry Response Case Managers (IRCM) respond to all web-based inquiries within 24 hours, obtain additional information, and invite them to an Information Session. The IRCM then send all web-based inquiries to identified staff in their respective counties/regions to continue through the onboarding process. Upon establishment of the Foster Georgia Inquiry Line – the IRCM will be responsible for the following:	Completed September 2016 Complete (CB 10-17)
 Answer the Caregiver Inquiry Line; Document Inquiries in Georgia SHINES; Work with Caregiver Navigators in assisting Prospective Caregivers through the Approval Process; and Facilitate weekly webinar Information Sessions. 	
Georgia requires that all prospective caregivers attend an "Information Session" as part of the approval process. The Information Session provides a basic introduction of applicable DFCS policy to assist interested parties in making an initial decision about becoming a foster or adoptive parent. Subsequently, they can determine whether to continue the process. In September 2016, Georgia began offering webinar information sessions to prospective applicants who completed inquiries through the website. If applicants accept the invitation, the IRCM sends them a link to register for the upcoming session of their choice. The webinar information sessions are offered three times per week, twice on Tuesday (10AM and 6PM) and once on Saturday (10AM). The IRCM's host the two-hour long webinar information sessions, and has experienced an 86% attendance rate of prospective applicants. The use of this medium was expanded to include families referred to attend the sessions by the regional teams. Those families are also sent a link to register	

for the webinar session. Upon conclusion of the session, the IRCM notifies the regional designee of the family's attendance via email.

Strategy III: Permanency Outcome 1

Strengthen the public and private agency placement operations system which includes the recruitment and retention of foster and group homes and utilization of those resources.

Progress Overall

Georgia is on schedule with having Chapin Hall conduct a placement operations study of the state's public and private agency system to obtain recommendations that will be used to strengthen the public and private agency placement operations system which includes the recruitment and retention of foster and group homes and utilization of those resources.

Key Activities	Projected Completion Quarter
1. Execute a contract with Chapin Hall to conduct the placement operations study of the state's public and private agency system. The study will focus on the following three areas:	Q 2
 A well-defined approach to contracting with private foster care service providers (CPAs and CCIs) including developing and maintaining a network of the appropriate scope and size to meet the current systems needs as well as developing an approach for matching children/youth to the appropriate placement. 	
 Improving outcomes for all children in foster and group care, particularly through placement with relatives, achieving permanency for young children, maintaining placement stability, and understanding the opportunity for improved outcomes in the context of the current performance based system. 	
 Developing an optimized approach to identifying child needs and matching them to appropriate services in the private array given the impact of the unbundling of placement and therapeutic services. 	
Key Activity 1 – Summary	Current Status
Georgia has executed a contract with Chapin Hall to conduct the placement operations study.	Completed June 2017 Complete (CB 10- 17)
2. Receive final report from Chapin Hall.	Q 3
Key Activity 2 – Summary	Current Status
Georgia is expected to receive the Chapin Hall study in Quarter 3.	On Schedule
3. Based on acceptance of recommendations, initiate implementation of recommendations.	Q 7

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Key Activity 3 – Summary	Current Status
The final report has not been received; therefore, no update on this key activity is available at this time.	On Schedule
4. Utilize the Practice Matters, Provider Leadership, and other partnership meeting venues to share information and discuss study results.	Q 8
Key Activity 4 – Summary	Current Status
The final report has not been received; therefore, no update on this key activity is available at this time.	On Schedule
Strategy IV: Permanency Outcome 1 Develop a universal application for Room, Board, and Watchful Oversight (RBWO) provider placements obtaining timely and appropriate placements for children.	ents to improve efficiency in
Progress Overall Georgia has completed the development and implementation of the universal application for Watchful Oversight (RBWO) provider placements.	Room, Board, and
Key Activities	Projected Completion Quarter
Gather input from RBWO providers, Department of Juvenile Justice (DJJ) and Residential Child Care Licensing (RCCL) to determine what should be included in the universal applications based on program designation.	Q 4
Key Activity 1 – Summary	Current Status
On February 20, 2017, the division deployed the Universal Application and Placement Referral Form. The revised tool was updated in a collaborative effort between the	Completed May 2017
Placement and Permanency Section of the Division of Family and Children Services, Field Operations and RBWO Contracted Providers. The implementation of the Universal Application was developed as the singular document for review of RBWO Program Designations, Specialized Foster Care Per diems for DFCS Foster Homes and Placement referrals. Currently the Universal Application is being built out in the Division's SHINES system according to specified requirements determined by the design workgroup. Full integration of the Universal Application in SHINES was completed on May 13, 2017.	Complete (CB 10-17)
Feedback was received from: • Field Program Specialist Leads; • A select group of RBWO Providers; • PRO Team, OPM, CRRU; and • SHINES Unit	

SHINES Unit.

The feedback was incorporated into the application and sent for another round of feedback. The additional feedback was incorporated, final form was developed.	
 Training was conducted: In the Field via Technical Assistance Dates scheduled throughout this year with Counties/Regions; FAQ posted on SCORE; Cadence Call; and Webinar trainings. 	
Monitoring of the Universal Application is completed through GA+SCORE. All applications are uploaded into SCORE when submitting a request or referral to PRO Team. The PRO Specialists review applications and provide feedback on completing the application and sections not completed. The PRO Specialists captures the application decision in the Status/Disposition field.	
Develop first draft of the application.	Q 5
Key Activity 2 – Summary	Current Status
See response above.	Completed May 2017 Complete (CB 10-17)
3. Develop second draft of the application.	Q 6
Key Activity 3 – Summary	Current Status
See response above.	Completed May 2017 Complete (CB 10-17)
4. Publish the final application and implement use of the application.	Q 8
Key Activity 4 – Summary	Current Status
See response above.	Completed May 2017 Complete (CB 10-17)

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PIP Completion Tracking Quarter 1 04/01/17 - 06/30/17

PIP Goal	Quarter Due	State Reports as Complete	CB Concurrence	CB Comments				
Goal I: Improve the timeliness, quality, and u	itilization of c	hild and family	y assessments throughou	t the child welfare continuum.				
Strategy I: Safety Outcome 1	Strategy I: Safety Outcome 1							
	to ensure all	children/famil	ies receive timely initial s	safety assessments and cases are appropriately tracked				
to either investigations or family support.		l						
 I.I.1 Develop and Implement training to support the ISA process by completing the following activities: Develop a one day classroom training; Develop Live Case Learning; Instruction on what/how to document (where and by whom) with an emphasis on the person detail page and reminding staff to merge and relate; Assess participants' knowledge of Maltreatment Codes; Develop test items based on common errors such as using "lack of supervision" as a catch all when applying maltreatment codes; Create a checklist for supervisors; Create a checklist for case managers; Utilize various training delivery methods, such as classroom, WebEx, and/or a combination of methods; 	Quarter 4	Quarter 1	Incomplete	Based on review findings, enhancement to training may be needed. Technical requirements of the activity have been completed, but it doesn't seem effective yet. We encourage the state to further develop transfer of learning activities that can be provided to staff outside of the classroom training. The CB will wait to call this key activity complete until there is more evidence regarding the effectiveness of the training.				

CB Comments

10-4-17

Create Transfer of Learning (TOL) activities				
I.I.2 Develop and Implement an ISA fidelity monitoring and review process	Quarter 4	Quarter 1	Incomplete: Quarterly reporting expected	The expectation was that this would be an ongoing review process. The CB would like to see a written outline of the process (who, what, when, how) and an aggregate report of findings from the 200 case review? In the Q2 report please address what follow-up is required of the worker/supervisor to address the findings where deficits were identified.
Strategy II: Safety Outcome 2 Implement monitoring activities to ensure the a	appropriate us	se of safety res	sources.	
I.II.1. Field Operations staff will conduct frequent (no less than monthly) cadences of cases with children in Safety Resources over 45 days and ensure Safety Resources meets the approval standards outlined in agency policy by reviewing cases prior to cadences. Court-related barriers will be reported to Regional CQI teams to address with court partners as needed and to the Court Improvement Project (CIP) for review and determination of their involvement in removing barriers	Quarter 1	Quarter 1	Incomplete: Quarterly reporting expected	We encourage the state to review for and collect data about the extent to which SR cases are following GA DFCS policy guidelines and then identify barriers to the appropriate application of current policy. We would also like to see collaboration between the courts and CIP with the agency in the identification and problem-solving regarding court-related barriers. The CB appreciates the offer of Judge Bruce to help DFCS on sorting out issues in the identified jurisdictions with the most significant number of SR cases lasting more than 45 days.
I.II.2. Update the GA SHINES Safety Resource Report to include the option of pulling by supervisor and include the assigned worker. Supervisors and County Directors will use the report to monitor,	Quarter 3	Quarter 1	Incomplete	Although the practice has been implemented, this strategy is a key component of the PIP. It's a way to strengthen practice and it needs to be monitored. We need to see the report. From information provided in the report and the

identify and remove barriers, and to reduce the number of cases over 45 days.				subsequent call of 9-22-17, the CB is not getting a clear picture of how the supervisor's and county directors are using the report - there was more information provided about who monitors use of the report. The CB needs more information about how the report is being used by county directors/supervisors and would like to see an example report. It may be helpful to have another call with the people who use the report.
I.II.3 Develop a Safety Resource Approval Checklist for Supervisors to be used to ensure all elements are included in the Safety Resource Assessment for approval.	Quarter 3	Quarter 1	Incomplete	Before marking this key activity as complete, we would like to ensure a deeper installation of the process. We would also like to talk with people actually using the checklist for SR approval. The checklist lacks key pieces of information in order to make its use meaningful in the supervisor being fully informed to approve SR placements. Information such as CPS history, degree of substance abuse, etc. are components that should go into the decision as stated in policy.
Goal II: Meet the assessment and individualized need	ds of children	vouth, and fa	milies through an enhar	nced and broadened array of services
Strategy I: Systemic Factor – Service Array	as or crimaren,	, yourn, and re	The second secon	isca and productica analy or services.
Implement targeted communication and coll	aboration act	ivities to impr	ove access to, and utiliza	ation of, the state's service array.
II.I.1 Establish quarterly meetings in each Region with Agency Staff (County and	Quarter 2	NA	NA	Would be good to think about identifying key data points and tracking mechanism for this piece –
Regional), pertinent stakeholders and				assessing waitlists for key services, reviewing
service providers, to address service needs				utilization of community services, etc. The CB can
and availability of services to include:				discuss in more detail with the state as they
identifying needed services, determining				continues with this
and implementing method to develop or access identified services, monitoring to				
access identified services, monitoring to				

ensure that implemented services are				
effective.				
Strategy II: Well-Being Outcome 2				
	onsultation (EPAC) team wi	II conduct quarterly Educ	cation Academies that provide information to staff and
				ional processes, and advocacy. Additionally, Education
Academies will provide information and best	practices for	case manager	s and supervisors as they	engage with the local school system and academic
centers for youth on their caseload.				
II.II.1 EPAC will implement one web-based	Quarter 8	Quarter 1	Incomplete: Quarterly	
Education Academy each quarter designed			reporting expected	
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/youth 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.				
II.II.2 EPAC will implement two onsite	Quarter 8	Quarter 1	Incomplete: Quarterly	The Children's Bureau looks forward to attending an
Education Academies per quarter designed			reporting expected	onsite Education Academy in the near future.
to support and enhance the case manager,				
supervisor, and other direct service child				In future reports, the state will specify
welfare staff's understanding of				dates/locations of the academies held during the
educational support to youth in foster care.	0			reporting period.
II.II.3 EPAC will implement three annual	Quarter 8	Quarter 1	Incomplete: Quarterly	The Children's Bureau looks forward to attending an
onsite Education Academies specifically for			reporting expected	onsite Education Academy designed for foster
foster parents and caregivers to provide				parents/caretakers in the near future.

additional guidance, clarification and best				
practices in supporting the academic needs				The state will specify dates/locations of the
of youth in their care.				academies held during the reporting period.
Goal III:				
In support of the Practice Model, establish a	value-based o	ase practice w	hich supports safety, pe	ermanency, family and youth engagement, and
community connections.				
Strategy I: Permanency Outcome 2				
Build and execute a robust, sustainable syste	m for the ach	ievement of ti	mely permanency. The	strategy includes practice model case consultation
methods, mentoring of field staff, ongoing tra	acking of outo	comes and full	Permanency Roundtabl	les for cases without viable permanency options.
III.I.1 Assess and realign human resources in	Quarter 1	Quarter 1	Complete	The state reports that approximately 85% of the
each Region for the purpose of designating			·	positions have been filled.
positions to provide mentoring, monitoring,				
coaching, reporting and reviews of				
permanency cases to support timely				
achievement of permanency for all children				
Quarter 1in care.				
III.I.2 Implement a structured tool for	Quarter 3	NA	NA	We would like to see a copy of the tool.
utilization in permanency case staffings to				
ensure that key practice activities are				
occurring (including practices outlined in				
Permanency Outcomes 1 and Permanency				
Outcome 2) to determine barriers to				
achieving permanency and identify needed				
action prior to permanency hearings. Court				
related barriers will be reported to Regional				
CQI teams to address with court partners as				
needed.				
III.I.3 Develop a permanency case	Quarter 1	Quarter 1	Incomplete	We will need to see a copy of the "SBC case
consultation action plan template for use in				consultation action plan template" before we can
cases where the children have reached the				concur that this key activity is complete.
13th month in care. The action plan and				
case consultation will incorporate Solution				
Based Casework and Permanency				
Roundtables principles.				

CB Comments

10-4-17

III.I.10 Develop and implement a permanency timeline for utilization by field staff outlining state and federal requirements and best practices that are aligned with the Solution Based Casework (SBC) model.	Quarter 2	Quarter 1	Incomplete	The permanency timeline submitted by the state as several errors regarding the requirements for children having judicial reviews and permanency hearings. This needs to be corrected before we can concur that the key activity is complete. We also have concerns regarding how meaningful this tool as developed is for the purpose for which it was intended. Merely providing dates without the inclusion of key activities that are to occur as a part of the events is not helpful.		
Strategy II: Systemic Factor – Information Sys Implement monitoring processes to improve			1/th info	A CHINEC		
III.II.1. Data Integrity Specialists (DIS) case review quarterly trend reports will be shared and reviewed by the following staff to ensure improvements in data quality: • C3 Coordinators; • Field Program Specialists; • Regional Directors III.II.2. Demonstrate improvement (by end of year 1 and year 2 of PIP) in timely and accurate documentation of data in the areas of: • Demographic; • Person Characteristics;	Quarter 8 Quarter 8	Quarter 1 Quarter 1	Incomplete: Quarterly reporting expected Incomplete: Quarterly reporting expected	We would like to see a copy of this report.		
Legal Status;Placements						
Strategy III: Well-Being Outcome 1 Implement Solution Based Casework Practice III.III.1 Complete roll out in Regions 1, 3, 13 and 14 by the end of 2016.	Model State Quarter 1	wide. Quarter 1	Complete			
Goal IV: Establish a robust workforce.						
Strategy I: Systemic Factor – Staff and Provide	CR Comments					

CB Comments

10-4-17

Develop and implement a competency-based child welfare learning academy that includes initial and ongoing training activities, mentoring, and								
monitoring processes.	T	T	1					
IV.I.5 DFCS Education and Training will	Quarter 8	Quarter 1	Complete					
explicitly post annual training hour								
requirements for Social Services Staff and								
communicate the plan for monitoring								
requirements.								
Goal V:								
Increase and strengthen foster and adoptive resources.								
Strategy II: Systemic Factor – Foster/Adoptive Parent Licensing, Recruitment and Retention								
Strengthen the caregiver approval process by reducing the paperwork burdens experienced by prospective caregivers and increasing the support they								
receive during the approval process.								
V.II.2 Establish the Caregiver Navigator	Quarter 7	Quarter 1	Incomplete; More	We need more information regarding the vendor.				
"warm-line" program which will be manned			information is needed	What role will they play? Is the platform fully				
by foster and adoptive parents; they will				operational?				
answer in-bound calls from veteran and								
prospective caregivers as well as								
proactively support caregivers going								
through the caregiver approval process.								
V.II.3 Cease contracting out the	Quarter 7	Quarter 1	Complete					
management of the caregiver inquiry line;								
establish a state office team to answer the								
inquiry line.								
V.II.4 Offer information sessions via	Quarter 7	Quarter 1	Complete					
webinars on an at least weekly basis by the			·					
state office Caregiver Recruitment and								
Retention Unit.								
Strategy III: Permanency Outcome 1	1							
	cement opera	ations system	which includes the recrui	tment and retention of foster and group homes and				
utilization of those resources.				ů ,				
V.III.1 Execute a contract with Chapin Hall	Quarter 2	Quarter 1	Complete					
to conduct the placement operations study			·					
of the state's public and private agency								
system. The study will focus on the								

following three areas:				
 A well-defined approach to contracting 				
with private foster care service providers				
(CPAs and CCIs) including developing and				
maintaining a network of the appropriate				
scope and size to meet the current systems				
needs as well as developing an approach				
for matching children/youth to the				
appropriate placement.				
 Improving outcomes for all children in 				
foster and group care, particularly through				
placement with relatives, achieving				
permanency for young children,				
maintaining placement stability, and				
understanding the opportunity for				
improved outcomes in the context of the				
current performance based system.				
 Developing an optimized approach to 				
identifying child needs and matching them				
to appropriate services in the private array				
given the impact of the unbundling of				
placement and therapeutic services.				
Strategy IV: Permanency Outcome 1				
	ard, and Wat	chful Oversigh	nt (RBWO) provider place	ements to improve efficiency in obtaining timely and
appropriate placements for children.	1			
V.IV.1 Gather input from RBWO providers,	Quarter 4	Quarter 1	Complete	
Department of Juvenile Justice (DJJ) and				
Residential Child Care Licensing (RCCL) to				
determine what should be included in the				
universal applications based on program				
designation.				
V.IV.2 Develop first draft of the application.	Quarter 5	Quarter 1	Complete	
V.IV.3 Develop second draft of the	Quarter 6	Quarter 1	Complete	
application.				

V.IV.4 Publish the final application and	Quarter 8	Quarter 1	Complete	
implement use of the application.				

Color Key:.

- Green: Key activity is complete; additional reporting not required
- Red: Key activity not complete; further information and reporting required
- Blue: Quarterly reporting required
- Black: CB comments for an activity due in a subsequent quarter